



Save the Children
Action Network™

Our Youngest, Our Future, Our Priority

*A Prospectus for 2016 Democratic
Presidential Candidates*





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Presidential Prospectus

Executive Summary

Imagine it's 2020. The 45th President of the United States is nearing the end of her or his first term in office and is about to deliver the following news to the American public: "Today, we have cut in half both the percentage of children without access to early learning in the United States¹ and the number of preventable deaths of children and their mothers around the world." These dramatic achievements for children domestically and abroad are lauded by Americans of all political persuasions and credited to the President's innovative "High 5 for Kids" agenda which provided the economic and political vision for making these achievements a reality.

Save the Children Action Network (SCAN) believes the next President of the United States must lead the nation and international community to achieve these goals. Every day, children in the United States and in countries around the world wake up without the basic resources they need to grow and succeed. For some, that means not having access to lifesaving healthcare. For others, it means starting off below their peers on the very first day of kindergarten because they did not have access to quality early education. Fortunately, evidence-based solutions to these problems exist. We must bring these known solutions to scale to have the maximum impact so every child has a strong start. The next President of the United States has the power to do this and create real change for kids everywhere by the end of his or her first term.

Who We Are

SCAN, a 501(c)(4) organization, was created in 2014 as the transformative advocacy arm of Save the Children (the already existing 501(c)(3) organization) with a focus on achieving two goals at the heart of Save the Children's mission: ensuring access to and funding for high-quality early learning experiences for every child in the United States and helping mothers and young children survive around the world by ending preventable deaths.

Over the past year, SCAN has been actively engaged on the federal, state and local levels on these issues. From working with members of Congress to craft game-changing legislation, to engaging with state and local policymakers to build support for bills and ballot measures, to elevating SCAN and its supporters in both traditional and new media, to activating citizens across the country who are passionate about and engaged on these issues—**SCAN's work is targeted, data-driven and designed to create and build political will.**

SCAN has recruited a team of top-notch, bipartisan political professionals with expertise in government relations, political action, mobilization and communications. Together, they provide the foundation necessary to achieve these strategic goals. Our goals for the 2016 election cycle, summarized below, are highly focused on the Presidential election.

Early Childhood Education

EXPANDING ACCESS FOR CHILDREN FROM BIRTH TO FIVE YEARS

WITH INNOVATIVE FINANCING

By age 5, a child's brain is already 90 percent developed, yet two out of five American children are not enrolled in preschool. **Without access to high-quality early learning programs, children fall behind. Many never catch up.** Four-year-olds from low-income families are often 18 months behind other four-year-olds developmentally.²

¹ "Percentage of Children, Ages 3 to 6, in Center-Based Care: Selected Years, 1995-2012," Child Trends Data Bank, (2014), http://www.childtrends.org/wp-content/uploads/2012/11/08_appendix1.pdf.

² "Early Childhood Education in the U.S.," Save the Children USA, (2015), Print.

Our 2014 Results

In 2014, Save the Children worked in 120 countries, including the United States, and helped more than 166 million children – including more than 55 million children directly. Together with the tremendous support of our donors and partners, we transformed children's lives and the future we share. Thank you!

Last year,
Save the Children
worked in
120
countries
and
helped **166**

million
children.



2 Early education – starting at birth and continuing until a child's first day at school – is a critical window for ensuring future academic achievement, but that window closes fast. Kids who enter kindergarten unprepared are more likely to experience serious negative social impacts. Disadvantaged children who do not participate in high-quality early education programs are:

- >> 50 percent more likely to be placed in special education;
- >> 25 percent more likely to drop out of school;
- >> 60 percent more likely to never attend college;
- >> 70 percent more likely to be arrested for a violent crime; and
- >> 40 percent more likely to become a teen parent.³

In contrast, there are strong social and economic benefits to high-quality early childhood education (ECE) programs. For example, The Perry Preschool Program in the Ypsilanti, Michigan school district demonstrated a social rate of return between 7 and 10 percent. Participants were tracked through a longitudinal study that spanned 40 years.⁴ More recently, preschool programs in Tulsa and Boston have shown significant gains ranging from a half to full year of added learning in literacy, language and math.⁵

Voters connect with early childhood education on a personal level. According to a national poll of likely voters in battleground states conducted by SCAN in July 2015, 90 percent of respondents think early childhood education is critical to children's success. In addition, 63 percent of respondents answered that public education should start with preschool and be offered to all 4-year-olds. That figure represents a majority of Republicans, of independents, and of Democrats; it also represents a majority in each of the five states surveyed.⁶

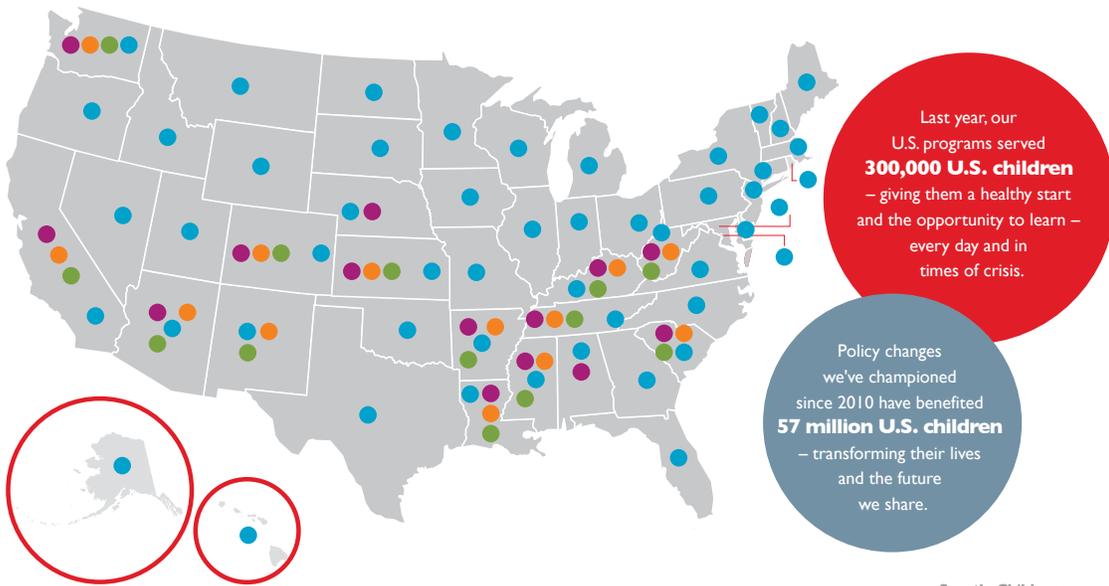
Programs such as Save the Children's Early Steps to School Success, Early Head Start and Head Start and Maternal, Infant, and Early Childhood Home Visiting (MIECHV) have results that show they are helping give more kids a strong start to life across the United States:

- >> In 2014, thousands of children and their families across 14 states and the District of Columbia participated in Save the Children's Early Steps to School Success program. The vast majority of these children are growing up in poverty, facing many hurdles to success. Despite the challenges they must overcome, more than 80 percent of the children in the



Where We Work

Save the Children has worked for more than 80 years through our pioneering programs and advocacy efforts to realize results for children in need throughout the United States.



SaveTheChildren.org

 <p>Early Childhood Development Early Steps to School Success, Early Head Start, Head Start</p>	 <p>Education Literacy Program</p>	 <p>Health Healthy Choices</p>	 <p>Policy & Advocacy Early Childhood Education</p>
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program score at or above the normal range for vocabulary acquisition and enter kindergarten on par with their middle income peers, ready to succeed in school and in life.

>> Kids who participate in Head Start have higher high school graduation rates and a lower likelihood of being charged with a crime than similar children who do not participate in Head Start.⁷ Furthermore, participation in Head Start has been shown to close more than one-third of the gap in test scores between children who participate in Head Start and their more advantaged peers.⁸ Three-year-olds who participated in Early Head Start performed significantly better on cognitive, language and social-emotional measures than their peers.⁹

>> A recent review of programs operated under MIECHV found various positive outcome measures.¹⁰ Research further shows that some high-quality, rigorous home visiting programs result in improved child development and school readiness as well as improved family economic self-sufficiency.¹¹ A leading model shows significant outcomes in reducing rates of state-verified reports of child abuse and neglect.¹²

3 Ibid.

4 James Heckman, Seong Hyeok Moon, Rodrigo Pinto, Peter Savelyev, and Adam Yavitz, "A New Cost-Benefit and Rate of Return Analysis for the Perry Preschool Program: A Summary," NBER Working Paper Series, (2010), http://jenni.uchicago.edu/papers/Heckman_Moon_et_al_2010_NBER_wp16180.pdf.

5 *Investing in Our Future: The Evidence Base on Preschool Education*, Foundation for Child Development & Society for Research in Child Development, (Oct. 2013), <http://fcd-us.org/sites/default/files/Evidence%20Base%20on%20Preschool%20Education%20FINAL.pdf>.

6 TargetPoint & Greenberg Quinlan Rosner Research, SCAN polling, (3-8 Aug. 2014).

7 Eliana Garces, Duncan Thomas, and Janet Currie, "Longer-Term Effects of Head Start," *The American Economic Review*, 92.4, (Sept. 2002), http://www.jstor.org/stable/3083291?seq=1#page_scan_tab_contents.

8 Janet Currie and Duncan Thomas, "Does Head Start Make a Difference?" *The American Economic Review*, (1995): 359, <http://www.econ.ucla.edu/people/papers/Currie/Currie14.pdf>.

9 *Early Head Start Benefits Children and Families*, Early Head Start National Resource Center, An Office of the Administration for Children and Families, (June 2015), <http://www.acf.hhs.gov/2Fhslc%2Fftta-system%2Fehsnrc%2Fabout-ehs%23benefits>.

10 Sarah Avellar, Diane Paulsell, Emily Sama-Miller, Patricia Del Grosso, Lauren Akers, and Rebecca Kleinman, "Home Visiting Evidence of Effectiveness Review: Executive Summary," *Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services*, (2014): 9, http://homvee.acf.hhs.gov/HomVEE_Executive_Summary_2014-59.pdf.

11 Kimberly Boller, Deborah Daro, Patricia Del Grosso, Russell Cole, Diane Paulsell, Bonnie Hart, Brandon Coffee-Borden, Debra Strong, Heather Zaveri, and Margaret Hargreaves, *Making Replication Work: Building Infrastructure to Implement, Scale-up, and Sustain Evidence-Based Early Childhood Home Visiting Programs with Fidelity* (Princeton, NJ: Mathematica Policy Research, 15 June 2014), <http://www.mathematica-mpr.com/our-publications-and-findings/publications/making-replication-work-building-infrastructure-to-implement-scaleup-and-sustain-evidence>.

12 "Evidentiary Foundations of Nurse-Family Partnership," Nurse Family Partnership, (2011), http://www.nursefamilypartnership.org/assets/PDF/Policy/NFP_Evidentiary_Foundations.aspx.

Given these results, SCAN believes that the question is not how to create more evidence-based programs, but rather how to scale what we already know is working. **Our policy recommendations are therefore focused on an innovative toolbox of financing solutions to expand access to early childhood education. By finding “pay-fors” for interventions with proven results, the number of kids receiving a quality start to life across the country can grow.** These tools range from new models (pay-for-success) to expanding existing ideas (creating higher education-early education parity), to dedicating new sources of revenue (taxes or savings).

Early childhood education is not just about education or health. At its root, ECE is fundamentally an economic issue on which our nation’s future depends. As such, SCAN’s toolbox is an economic approach – it is about development and it is about scale. SCAN believes the federal government should catalyze what is most effective and politically viable for local and state partners. This is not a top-down approach, but rather a partnership modeled on the way America has built and sustained a strong economy over the years – through federal, state and local collaboration.

The next President of the United States has an opportunity to recognize the power of these tools and support the federal government catalyzing new financing mechanisms.

SCAN asks candidates to commit to increasing enrollment in high-quality early childhood education programs by 20 percent in their first term, by signing legislation that uses at least one of the financing mechanisms in SCAN’s innovative toolbox.

Ending Maternal, Newborn & Child Deaths around the World by 2030

Maternal, newborn and child survival (MNCS) is an issue Americans feel a moral obligation to support, but they are often uninformed about what the U.S. is doing to solve the problem.¹³ **Most are unaware that the reduction in preventable deaths of moms and children around the globe is one of the greatest successes in international development in the last 25 years.** Since 1990, the world has reduced mortality rates for children under age 5 by more than half and for mothers by 40 percent.

Despite this, every day kids and moms around the world continue to die from preventable and treatable causes. Each year 5.9 million children under the age of five – roughly half are newborns – and nearly 300,000 women die from complications during pregnancy and childbirth. Those at greatest risk come from marginalized groups such as girls, and people living in poverty, in more remote rural areas or in urban slums. **The next President has the unique opportunity to help end these preventable deaths and ensure a fair chance at a healthy start for all children and moms within a generation.**

The United States has led the way in improving the lives of women and children and building the capacity of countries to care for them and ensure they reach their full potential. Building on this progress, the U.S. has declared ending preventable maternal, newborn and child deaths within a generation a national priority. In 2014, USAID released *Acting on the Call: Ending Preventable Child and Maternal Deaths*, a roadmap to saving more women’s and children’s lives. In it, USAID laid out eight categories of technical approaches with proven interventions, which are critical to achieving the goal of ending preventable maternal and child deaths by 2030, including:

- >> Newborn health
- >> Immunization
- >> Prevention and treatment of childhood illnesses
- >> Nutrition
- >> Maternal health
- >> Family planning
- >> Ensuring healthy behaviors
- >> Water supply, sanitation and hygiene (WASH)

SCAN has been working to enshrine into law the plan set out in *Acting on the Call* through bipartisan legislation that is ambitious but achievable with the goal of dramatically reducing preventable maternal, newborn and child deaths and ending them entirely by 2030. The **Reach Every Mother and Child Act of 2015 (S.1911)** introduced by Senators Susan Collins (R-ME) and Chris Coons (D-DE), and the bipartisan companion bill underway in the House of Representatives, would enable the U.S. to help meet the goal of ending preventable child and maternal deaths.

The legislation would create new, innovative public-private financing mechanisms to complement robust bilateral U.S. investments, including innovative models like Development Impact Bonds (DIBs). Additionally, the bill permanently establishes a high-level coordinator for maternal and child survival to ensure the U.S. vision for ending preventable maternal, child and newborn deaths is realized; calls for a multi-year strategy to detail a roadmap for achieving the U.S. vision; and scales up solutions that are already working.

The next President of the United States must support the federal government catalyzing new financing solutions for ending preventable deaths of mothers and children. Just as the United States led the way for transformative action on AIDS with the President's Emergency Plan for AIDS Relief (PEPFAR)

and the Global Fund, there is once again an opportunity to save lives around the world on a large scale with the Collins-Coons legislation and a commitment to ending maternal, newborn and child deaths around the world. The power lies in the hands of the next President to end preventable maternal, newborn and child deaths by 2030.

SCAN asks candidates to commit to reducing the number of global preventable deaths of mothers and children under age 5 by 50 percent by signing legislation and supporting increased funding through a comprehensive package of financing solutions in their first term.

Voter Values—

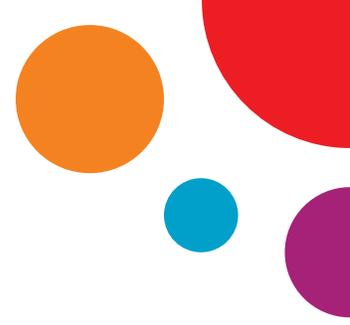
HOW AMERICANS PRIORITIZE EARLY CHILDHOOD EDUCATION & MATERNAL, NEWBORN AND CHILD SURVIVAL

SCAN has found that voters of every persuasion – Republicans, Democrats and Independents alike – care about whether children in their communities are getting a strong start in life and feel a moral obligation to help end the suffering of children around the world. SCAN's 2014 qualitative and quantitative research conducted by the bipartisan team of TargetPoint Consulting and Greenberg Quinlan Rosner Research revealed important learnings on messaging these issues and targeting voters for future electoral programs. Post-program polling showed statistically significant evidence that it is possible to boost support for a candidate, diminish support for an opponent and move voters in regard to ballot measure language.

SCAN found that ECE resonates with voters' personal experiences. SCAN's national survey showed that 95 percent of likely voters think early childhood education is critical to children's success, with 70 percent of respondents saying they support government-funded education programs.

14 TargetPoint & Greenberg Quinlan Rosner Research, SCAN battleground polling, (20-25 July 2015).

13 TargetPoint & Greenberg Quinlan Rosner Research, SCAN polling, (3-8 Aug. 2014).



Voters questioned the moral integrity of hypothetical candidates who wanted to cut MNCS programming, but messages need to show clear-cut connections between a candidate's policy stance and MNCS outcomes. Religious voters – particularly women – are supportive of efforts to end maternal, newborn and child deaths.

SCAN conducted an updated poll in 2015 on these issues, surveying voters in **Florida, Wisconsin, Virginia, Colorado and Ohio**. Initial results revealed the following:¹⁴

- >> 90 percent of likely voters believe early childhood education is important.
- >> 63 percent of likely voters think that public education should start with preschool and be offered to all 4-year-olds.
- >> 59 percent would be more likely to support a candidate for President who is in favor of increasing ECE spending. This number jumps to 83 percent for Democratic presidential election voters (52 percent for swing voters).
- >> 28 percent of likely voters would actively campaign for a candidate because they support providing more access to and improving the quality of early childhood education programs.
- >> 53 percent would be more likely to support a candidate for President who committed America to cutting in half the number of preventable childhood deaths by the end of his or her first term.

Strategic Plan—

ACTION ACROSS THE NATION

Although SCAN's campaign is nationwide, it will focus first on three competitive primary states: Iowa, New Hampshire and South Carolina. SCAN's skilled team and their assets will be active in these states pushing for legislative action,

communicating with voters through the press, mobilizing citizens to support SCAN's platform and ultimately turning out voters on Election Day for candidates that prioritize these issues. In New Hampshire, SCAN is already sponsoring the influential WMUR-TV "Conversation with the Candidate" series to talk with candidates on the record about ECE. At the time of publishing, SCAN had sponsored discussions with 20 of the 2016 presidential candidates. Additionally, SCAN has launched broadcast television advertising in Des Moines, Sioux City and Cedar Rapids to support its ECE work in Iowa and in Charleston, Columbia and Greenville to push its MNCS agenda in South Carolina.

On the campaign trail, SCAN will be engaging candidates and voters around early childhood education and maternal, newborn and childhood survival through TV and radio interviews, direct mail campaigns, social media and debates. Supporters wearing red "High 5 for Kids" hands will be waiting to greet candidates at stops along the campaign trail in key states and looking to hear the next President's thoughts on these critical issues.

The following briefing book proposes a variety of policies, data and principles that SCAN hopes will help the next President develop his or her platform on these issues.

If implemented, these ideas will make a transformative impact in the lives of our nation's youngest citizens, as well as women and their children around the world.

The next President of the United States has the unique opportunity to create real change in the lives of children at home and abroad, and Save the Children Action Network stands ready to work in partnership to achieve these goals.





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WHO WE ARE:

Save the Children Action Network

Save the Children

Save the Children is the nation's preeminent child-serving organization investing in childhood at home in the United States and around the world. Save the Children is a nonpartisan organization that is respected by Americans of all political persuasions for its work to give children a healthy start, the opportunity to learn and protection from harm. Save the Children believes that by transforming children's lives now, we can change the course of their future and ours.

Since 1919, Save the Children (a 501(c)(3) organization) has been working in communities in the United States and around the world to ensure that children are healthy, nourished, protected and learning. To date, it has reached more than 143 million children in 120 countries, including the United States. By translating decades of practical experience into lasting change for generations of children to come, Save the Children has given millions of kids the best chance for success, creating a brighter future for everyone.

Save the Children's operating budget in 2014 was \$688.9 million, 89 percent of which was used for program services.

Save the Children Action Network

In 2014, Save the Children created a new 501(c)(4) organization called Save the Children Action Network (SCAN) to add critically needed advocacy capacity to its mission-driven goals. Simply put, the time had come to give voice to two significant groups of people who are unable to advocate for themselves: infants and children. **SCAN chose two priorities for its initial work: 1) ensuring access to and funding for high-quality early learning experiences for every child in the United States, and 2) helping mothers and children survive around the world by ending preventable deaths.**

SCAN understands that without access to high-quality early learning programs between the ages of zero to five, children start to fall behind. Many never catch up. While Save the Children delivers programs and services every day in communities across America and sees results, SCAN relies on that experience and those results to advocate for a prioritized federal policy that will create new financial models. SCAN understands that without a "pay for," there is no path forward for expanding access to early childhood development and early education for all American children under the age of 5. This is SCAN's focus and mission-driven goal in the United States.

At the global level, SCAN has seen the great progress made by the international community in reducing preventable maternal and child deaths by half since 1990. SCAN knows that by continuing to invest in women's and children's health, we can reduce poverty, stimulate economic growth and save lives around the world. Just as the United States led the way for transformative action on AIDS with the President's Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund, there is once again an opportunity to save lives around the world on a large scale. When America leads, global problems get solved.

This year, SCAN has brought together more than 30 NGOs and faith-based leaders to draft comprehensive legislation and work with federal policymakers to achieve these goals. By making smart investments in evidence-based interventions and scaling these programs in targeted countries, we can eradicate preventable maternal, child and newborn deaths around the world by 2030.

SCAN's team has four areas of expertise – government relations, electoral action, mobilization and communications – that work in unison to achieve advocacy goals. In 2014, SCAN invested more than \$1.2 million in ten federal, state and local elections across five states. The organization worked closely

with partners on the ground in **California, Illinois, Iowa and South Carolina** to identify and support candidates and ballot measures supporting investments in early education in the U.S. and maternal, newborn and child survival around the world. In **Washington**, SCAN supported Seattle's Proposition 1B, a successful ballot initiative that expands preschool for the city's four-year-olds. SCAN's 2014 experience provides ample data and experience to drive our strategies forward and focus on these issues during the 2016 election cycle – with a particular emphasis on the campaign for President of the United States. SCAN's projected budget for the 2015-2016 cycle is \$6.1 million.

Today, SCAN is actively engaged on the federal, state and local levels to achieve broad expansion of early childhood education and end preventable maternal, newborn and child deaths once and for all. SCAN's work is targeted, data-driven and already building political will for these issues with voters across the political spectrum.

SCAN believes that the next President of the United States can lead the nation on a path to achieve these goals. During the 2016 presidential election, SCAN will continue its work to ensure that the issues critical to children's lives and futures are given top priority by our elected and future elected leaders. SCAN has an active base of voters supporting our platform positions and will continue to hold leaders accountable to them.



Photography Credits: Susan Warner: 2014.





EXPANDING ACCESS TO EARLY CHILDHOOD EDUCATION IN THE UNITED STATES & FINDING INNOVATIVE FINANCING SOLUTIONS

In SCAN's latest battleground polls, 83 percent of Democratic Presidential voters said they would be more likely to support a candidate who is in favor of increasing early childhood education (ECE) spending.¹⁵ Ensuring every child has access to best-in-practice ECE is critical to building a brighter future for our nation. Policymakers understand this, but the financial hurdles to achieving this goal are daunting. Elected officials that offer innovative financing solutions alongside evidence-based ECE programs are the ones that will have the greatest impact on children's lives, while finding broad support among a wide variety of voters. Already, SCAN has demonstrated through voter contact programs and post-program polling that voters can be moved to support or oppose a candidate based on his or her position on ECE.

Early Childhood Education for Children From Birth to Five Years— PROGRAMS THAT WORK

By age 5, a child's brain is already 90 percent developed, yet two out of five American children are not enrolled in preschool. Without access to high-quality early learning programs, children fall behind. Many never catch up. Children who have low math scores in the fall of their kindergarten year, for example, will typically continue to lag behind their stronger scoring peers through the eighth grade.¹⁶ Children

can fall behind even earlier in life. Infants and toddlers from families with low income, less education and few social supports are more likely to experience developmental challenges by the age of two.¹⁷ In fact, evidence shows that very young children of parents in poverty are exposed to significantly less words, translating into lower performance in vocabulary, language development and reading comprehension many years later.¹⁸

Early education – starting with mothers and fathers during pregnancy and following children from their first steps to their first day at school – is a critical window to academic achievement, but that window closes fast. In order to give the nearly one in five children in America living in poverty a chance to succeed, we have to give them a fair chance to learn, and learn early.

Disadvantaged children who do not participate in high-quality early education programs are 50 percent more likely to be placed in special education, 25 percent more likely to drop out of school, 60 percent more likely to never attend college, 70 percent more likely to be arrested for a violent crime and 40 percent more likely to become a teen parent.¹⁹

Research is clear that the most important elements of high-quality programming in preschool include a focus on improving interactions between teachers and children, using curricula effectively and providing positive, enabling environments.²⁰ When these key elements are present, ECE programs are highly successful at bolstering outcomes for children.

The good news is that there are proven programs and interventions that give kids the strong start they need to succeed. Home visiting programs and quality early learning programs make a difference for young children and their families, especially when they focus on bolstering family engagement in children's learning, introducing early math skills and supporting dual language learners.

15 TargetPoint Consulting & Greenberg Quinlan Rosner Research, SCAN battleground polling, (20-25 July 2015).

16 Alan H. Schoenfeld and Deborah Stipek, Math Matters: Children's Mathematical Journeys Start Early, (Report of a Conference Held 7-8 November 2011), http://earlymath.org/earlymath/wp-content/uploads/2014/09/Math-Matters-Report_2ndEd1.pdf.

17 *Closing the Opportunity Gap for Babies and Families*, ZERO TO THREE Policy Center, (2015), http://www.zerotothree.org/policy/2015-policy-agenda/2015-policy-agenda_final.pdf.

18 Betty Hart and Todd R. Risley, "The Early Catastrophe: The 30 Million Word Gap by Age 3," *American Educator*, Spring (2003), <http://www.aft.org/sites/default/files/periodicals/TheEarlyCatastrophe.pdf>.

19 *Early Childhood Education in the U.S.*, Save the Children USA, (2015), Print.

20 *Investing in Our Future: The Evidence Base on Preschool Education*, Foundation for Child Development & Society for Research in Child Development, (Oct. 2013), <http://fcd-us.org/sites/default/files/Evidence%20Base%20on%20Preschool%20Education%20FINAL.pdf>; Jim Minervino, *Lessons from Research and the Classroom: Implementing High-Quality Pre-K That Makes a Difference for Young Children*, Bill & Melinda Gates Foundation, (Sept. 2014), https://docs.gatesfoundation.org/documents/Lessons%20from%20Research%20and%20the%20Classroom_September%202014.pdf.

SCAN supports the following evidence-based programs for early childhood education in the United States.

Early Steps to School Success (ESSS) Program (Save the Children)

Save the Children introduced its Early Steps to School Success (ESSS) program in 2006. Built on public-private partnerships with local schools and states, Early Steps delivers high-quality, early childhood development services to children ages zero to five and their families in 14 states. Early Steps is a low-cost, targeted approach to enhancing school readiness for children in some of America's poorest communities. Key components include:

- >> **Home visits conducted by early childhood coordinators.** For ages zero to three, coordinators provide parents with age-appropriate activities for their children, help monitor developmental progress and offer suggestions on how to interact with young children to promote early literacy.
- >> **Helping parents develop skills and strategies that support child development.** Coordinators advise parents on topics including establishing healthy sleeping routines, interpreting and responding to babies' efforts to communicate and helping toddlers develop self-control and problem-solving skills.
- >> **Book exchange program.** Coordinators continue to foster a love of learning in children ages three to five with a book exchange program, supplying families with children's books that encourage reading frequency, comprehension and parent-child interaction.
- >> **Fostering a positive connection between families and schools.** To support a positive parent-school relationship for children prior to entering school, parent education groups meet at local schools to discuss early development

topics. Toddler storybook hours and play groups are also available at Early Steps school sites.

- >> **"Transition to School" activities.** Coordinators help children and families connect with teachers and faculty before the first day of preschool or kindergarten.

Early Steps Results

At age three, Early Steps participants' language development is assessed using The Peabody Picture Vocabulary Test (PPVT). This evaluation indicates the program is as effective, and often more so, than other early learning programs:

- >> In 2014, thousands of children and their families across 14 states and the District of Columbia participated in the program:

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Louisiana |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Mississippi |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Nebraska |
| <input type="checkbox"/> California | <input type="checkbox"/> South Carolina |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Kansas | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Kentucky | <input type="checkbox"/> West Virginia |

- >> Despite the challenges they must overcome, 84 percent of the children in Early Steps score at or above the normal range for vocabulary acquisition and enter kindergarten on par with their middle income peers, ready to succeed in school and in life.
- >> Children who had been enrolled in Early Steps for at least one year scored an average of 94.5, well within the national mean range of 85-115.
- >> Early Steps also conducts after-school literacy programs for nearly 20,000 impoverished and struggling readers across the country. Of the regular participants, 72 percent

achieved significant reading improvement, equivalent to receiving almost five additional months of school instruction.

For more information about how Early Steps to School Success is impacting families across the United States, see “Spotlight on Early Childhood Education.”

Early Head Start and Head Start (Save the Children & Others)

Early Head Start serves infants and toddlers under the age of three and pregnant women. Early Head Start aims to prepare young children for preschool and continued education. Head Start mainly serves preschool students ages 3 and 4, providing them with individualized learning experiences through planned and spontaneous instruction to help children grow in language and literacy, early math and science concepts and social and emotional development. Head Start is a vital program for providing early education to children in poor and rural areas. Appropriators on both sides of the Hill recently recognized the benefit of Head Start when they significantly increased its level of funding in their FY16 Labor, Health and Human Services and Education appropriations bills.

Save the Children operates five Head Start programs in 15 counties across Arkansas, Louisiana and Mississippi, serving more than 2,700 children. Aimed at promoting school readiness and social and emotional development for children from low-income families, Head Start is one

of the most important federal programs for early childhood development. Services include a mix of high-quality classroom programs and home visiting for children from birth to age 5, as well as comprehensive family services.

Early Head Start and Head Start Results

Extensive peer-reviewed research has been conducted on Head Start, and we know it works.²¹ Findings of these studies include:

- >> **Better test scores and a smaller achievement gap.** An increase in PPVT scores for Head Start participants shows that the program closes over one-third of the gap between children in Head Start and their more advantaged peers.²²
- >> **Higher high school graduation rates and lower likelihood of being charged with a crime.** Kids who participated in a Head Start program compared to their siblings who did not were found to be more likely to graduate from high school and less likely to be booked for or charged with a crime.²³

A national evaluation of the Early Head Start program found that three-year-olds enrolled in the program performed significantly better than a randomly assigned control group on a number of measures, including cognitive, language and social-emotional development. Findings also demonstrated that parents of this group scored significantly higher on elements of their home environment and parenting behavior.²⁴

Maternal, Infant, and Early Childhood Home Visiting (MIECHV)

The Maternal, Infant, and Early Childhood Home Visiting program provides support for at-risk families, expectant fathers and pregnant women to help them raise healthy children. The Health Resources and Services Administration

21 Diane Whitmore Schanzenbach, “The Case for Saving Head Start,” Time, (5 Mar. 2013), <http://ideas.time.com/2013/03/05/the-case-for-saving-head-start/>.

22 Janet Currie and Duncan Thomas, “Does Head Start Make a Difference?” *The American Economic Review*, (1995): 359, <http://www.econ.ucla.edu/people/papers/Currie/Currie14.pdf>.

23 Eliana Garces, Duncan Thomas, and Janet Currie, “Longer-Term Effects of Head Start,” *The American Economic Review*, 92.4, (Sept. 2002), http://www.jstor.org/stable/3083291?seq=1#page_scan_tab_contents.

24 *Early Head Start Benefits Children and Families*, Early Head Start National Resource Center; Office of the Administration for Children and Families, (June 2015), http://www.acf.hhs.gov/sites/default/files/opre/research_brief_overall.pdf.

(HRSA) works with the Administration for Children and Families (ACF) to fund states, territories and tribal entities to develop and maintain voluntary home visiting programs using evidence-based models that are proven to help children and families alike. The programs assist in improving maternal and child health, reducing and preventing child abuse, neglect and violence and promoting school readiness and child development. Families that are involved in this program have regular, planned visits where they receive guidance, advice and general help from health, social services and child development professionals. The program helps women at all stages of pregnancy and provides support for the child from birth up to kindergarten. The home visitor teaches families about how to improve family health, assess child development and milestones, use positive parenting techniques and goal-set for the future.

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HRSA-supported State Home Visiting Programs have conducted over 1.4 million home visits since 2012 and in FY2014 the programs assisted roughly 115,500 parents and children in 787 counties in all 50 states, D.C. and five territories.²⁵

MIECHV Results

In the fall of 2009, the Home Visiting Evidence of Effectiveness (HomVEE) review was launched. Out of the 17 programs reviewed that met the Department of Health and Human Services (HHS) criteria for an evidence-based early childhood home visiting service delivery model, the review found that the majority of models had “multiple favorable effects,” including favorable impacts on primary and secondary measures and evidence of sustainability at least one year after enrollment in the program.²⁶

One of the most important services MIECHV provides is early identification for developmental or behavioral disabilities—such as autism, attention deficit/hyperactivity disorder, or delays in language. Less than 50 percent of young children who have these disabilities are identified

before they enter school. Early identification has been shown to improve the development and future success of kids with these kinds of developmental disabilities or delays. In 2014, 14 MIECHV grantees (AL, AZ, CA, CO, CT, ID, IL, KS, LA, MS, ND, NE, NM, TN) reported screening rates of at least 75 percent, which is more than twice the national average of 31 percent in 2011-2012.²⁷

Various home visiting models such as the Nurse Family Partnership, Parents as Teachers, Healthy Families America and Home Instruction for Parents as Preschool Youngsters, demonstrate quality impacts and breadth of findings.

>> **Nurse Family Partnership** is a community health program that helps transform the lives of low-income, first-time mothers and their children by providing home visits from registered nurses to provide support for healthy pregnancies and responsible and competent care for their children.²⁸ The program annually serves more than 30,000 families in 43 states.

Randomized control trials over the past three decades spanning three diverse populations found conclusive evidence that the Nurse Family Partnership program has accomplished:²⁹ improved prenatal health; fewer childhood injuries, resulting in 48 percent reduction in state-verified reports of child abuse and neglect; fewer subsequent pregnancies; increased intervals between births; increased maternal employment and reduction in the use of AFDC-TANF and Food Stamps. Significantly, the model touts improved school readiness statistics, including:

- 50 percent reduction in language delays by child age 21 months;
- Five point increase in language scores on a test with a mean of 100 and standard deviation of 15 among four-year-old children born to mothers with low psychological resources;

- 67 percent reduction in behavioral and emotional problems at children age six; and
- Nine percentile increase in math and reading achievement test scores in grades one through three among children born to mothers with low psychological resources.³⁰

>> **Parents as Teachers** is an international, comprehensive system of home visiting services designed to support parents during their children's early years. The system combines the implementation of personal visits, group connections, child screening and a vast resource network.³¹ Parents as Teachers annually serves more than 130,000 families in the United States, United Kingdom and Canada.

Four independent, randomized, controlled trials have been conducted and seven peer-reviewed outcome studies have been published that outline significant, positive outcomes, including parents that: increase involvement in their child's schooling, enhance their child's verbal and reading skills and improve their childrearing knowledge and skills. Detection occurred early for children who experience developmental delays and participation in the program was related to 50 percent fewer cases of suspected child maltreatment. Children also entered kindergarten ready to learn and achieved school success in the early grades:

- Teachers rated children that participated in Parents as Teachers significantly higher on several developmental indicators of school readiness, including emotional health, expressive and receptive language and social aptitude;
- Over 75 percent of the low-income children who participated in Parents as Teachers and preschool were assessed by their teachers as ready for kindergarten; and

- Children attained higher scores on standardized reading, math and language tests school. In fact, by third grade, children needed half the rate of remedial and special education services.³²

>> **Healthy Families America** is a home visiting program that provides services to families that have experienced trauma, intimate partner violence, mental health issues, or substance abuse problems. The program annually serves pregnant mothers and children from their birth to ages three to five from more than 85,000 families in 39 states and the District of Columbia.³³

More than 40 evaluation studies, including 12 publications of multiple randomized control trials, have found that Healthy Families America successfully enhanced parent involvement in child care and learning; decreased the prevalence of child abuse and neglect; increased access and usage of medical services, including prenatal care and immunizations; and reduced reliance on welfare and social services.³⁴

25 Maternal, Infant, and Early Childhood Home Visiting, Health Resources and Services Administration, <http://mchb.hrsa.gov/programs/homevisiting/>.

26 Sarah Avellar, Diane Paulsell, Emily Sama-Miller, Patricia Del Grosso, Lauren Akers, and Rebecca Kleinman, "Home Visiting Evidence of Effectiveness Review: Executive Summary," Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, (2014): 9, http://homvee.acf.hhs.gov/HomVEE_Executive_Summary_2014-59.pdf.

27 "The Maternal, Infant, and Early Childhood Home Visiting Program: Partnering with Parents to Help Children Succeed," Health Resources and Services Administration, Administration for Children and Families, (2014), <http://mchb.hrsa.gov/programs/homevisiting/programbrief.pdf>.

28 "About," Nurse-Family Partnership, <http://www.nursefamilypartnership.org/about>.

29 "Proven Results," Nurse-Family Partnership, <http://www.nursefamilypartnership.org/proven-results>.

30 "Evidentiary Foundations of Nurse-Family Partnership," Nurse-Family Partnership, http://www.nursefamilypartnership.org/assets/PDF/Policy/INFP_Evidentiary_Foundations.aspx.

31 "What We Do," Parents as Teachers, <http://www.parentsasteachers.org/about/what-we-do/visionmission-history>.

32 "An evidence-based home visiting model," Parents as Teachers, (2015), http://www.parentsasteachers.org/images/stories/PAT_EBHVMModel_2015_sm.pdf.

33 "2014 Annual Report," Healthy Families America, (2014), http://www.healthyfamiliesamerica.org/downloads/hfa_annual_report_2014.pdf.

34 "About Us," Healthy Families America, http://www.healthyfamiliesamerica.org/about_us/index.shtml.

>> **Home Instruction for Parents of Preschool Youngsters (HIPPY)** is a home visiting program focused on parent-involved learning for preschool age children. The program provides a comprehensive curriculum to parents with children ages 3 to 5 that includes weekly learning activities that increase phonological and phonemic awareness, letter recognition, book knowledge and early writing experience.³⁵ HIPPY serves more than 15,000 families in 21 states and the District of Columbia.³⁶

HIPPY participants outperformed their peers on reading and math skills tests in kindergarten, first and second grade. The program has been found to increase the number of minutes a child reads per day as well as the number of available books in their environment. Furthermore, parents and caregivers have been found to be more involved and invested in their children's learning by incorporating enrichment activities into their reading routines, praising their children on their progress and much more.³⁷

Early Childhood Education— IMPACTFUL GRANT PROGRAMS

PRESCHOOL DEVELOPMENT GRANTS

The Pre-School Development Grants (PDG) Program is a competitive grant program at the U.S. Department of Education that awards money to aid state and local efforts to develop and expand high-quality preschool programs. In particular, the program focuses on children from low- and moderate-income families to prepare them for kindergarten and help them succeed in school. The PDG Program offers two types of grants: the PDG-Development grant and the PDG-Expansion grant. The PDG-Development grant assists states that either have small or no state preschool programs to improve and cultivate the state preschool program infrastructure. The Development grant also helps states reach more eligible children in one or more high-need communities. The PDG-Expansion grant

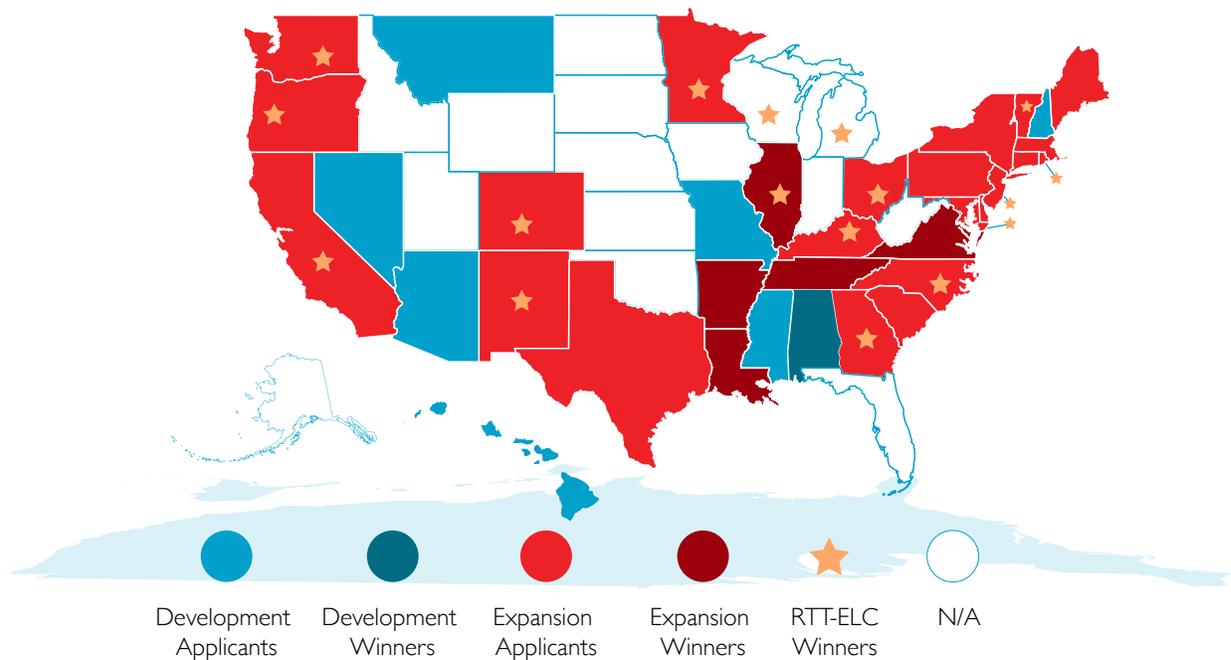
supports states that already have strong state preschool programs by helping them develop their infrastructure. The Expansion grant aims to serve eligible children in two or more high-need communities.

In 2014 total grant money was expected to reach 200 high-need communities, giving 33,000 additional children access to preschool programs that meet high-quality standards. Grant funding has been recently appropriated, and there is great promise for what PDGs will accomplish.

CHILD CARE AND DEVELOPMENT BLOCK GRANTS

The Child Care and Development Block Grant (CCDBG), also known as the Child Care and Development Fund (CCDF), is a program created in 1990 and administered by the U.S. Department of Health and Human Services. The CCDBG aims to support access to child care for the growing number of working mothers with children who require child care and after-school care, as well as low-income families, families receiving public assistance and families transitioning from public assistance. Child care is expensive and often makes up a substantial amount of a family's budget: in the United States, full-day child care can cost between \$4,000 and \$10,000 per year (or more). According to the Department of Health and Human Services, at the current funding level the program can only help one out of every ten eligible children, as the availability of subsidies is insufficient to make certain that low-income and working families have access to high-quality child care. Subsidies can be used for school-aged children as well

35 "The HIPPY Curriculum," Home Instruction for Parents of Preschool Youngsters (HIPPY), http://www.hippyusa.org/the_hippy_model_curriculum.php.
36 "About Us," Home Instruction for Parents of Preschool Youngsters (HIPPY), http://www.hippyusa.org/about_us.php.
37 "2014 Annual Report," Home Instruction for Parents of Preschool Youngsters (HIPPY), <http://www.hippyusa.org/memanager/pdf/2014%20Annual%20Report.pdf>.
38 "Preschool Development Grant Applicants and Winners," *New America: EdCentral*, (2014), <https://dev-edcentral.pantheon.io/wp-content/uploads/2014/12/PDG-Map-.jpg>.



Source: U.S. Department of Education; Map by New America
 Note: This map does not picture Puerto Rico, which submitted a Development Grant application but was not selected.

as younger children, and parents have the ability to select any legally operating child care provider that meets the standards set by the state.

Early Childhood Education –
 EXPANSION THROUGH LEGISLATION

STRONG START FOR AMERICA’S CHILDREN ACT
 (H.R.2411 & S.1380)

The Strong Start for America’s Children Act aims to create a ten-year federal-state partnership that would allocate funding to states to improve opportunities for kids ages zero to five. The legislation has been re-introduced in the 114th Congress by Senator Patty Murray (D-WA) in the Senate, and Congressman Bobby Scott (D-VA) and Congressman Richard Hanna (R-NY) in the House of Representatives. Under this legislation, funding would be distributed to districts in need, as well as Head Start programs and licensed child care providers that meet established standards. Grants would be used to expand existing programs, as well as increase program quality (including professional development). Funding would also be designed to increase the quality of infant and child care

and the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program, and would specifically target expanding high-quality pre-kindergarten for four-year-olds from low-and moderate-income families, those living at or below 200 percent of the poverty line.

ELEMENTARY AND SECONDARY EDUCATION ACT
 (REAUTHORIZATION)

At the time of publishing, a reauthorization of the Elementary and Secondary Education Act (ESEA) is in progress in Congress. The House of Representatives and the Senate each have passed their own versions of the bill – the Student Success Act and Every Child Achieves Act, respectively. The Every Child Achieves Act includes a bipartisan amendment offered by Senator Patty Murray (D-WA) and Senator Johnny Isakson (R-GA) to improve and expand early learning programs. These early learning programs would ideally include the four pillars of early math skills, family engagement, kindergarten readiness and dual language learning.

Early Childhood Education – AN INNOVATIVE FINANCING TOOLBOX

While there are excellent programs and policy proposals to improve early childhood education across the country, policymakers at all levels of government continue to struggle when it comes to finding the dollars to fund these programs. Investing in ECE is the most effective way to break the cycle of poverty. These investments lay the foundation for success later in school, career and life. The type of environment and the quality of interaction to which children are exposed in the first five years of life greatly influence the outcomes of their adult lives.

For this reason, SCAN has developed a toolbox of innovative financing mechanisms to expand access to quality ECE across the country. This toolbox aims to bridge the gap between lawmakers' desire to expand access to early education and the political realities of a tight fiscal environment.

SCAN proposes options to create a new continuum of programs allowing for the unique needs and priorities of states and localities. These tools range from new models (pay-for-success), to expanding existing ideas (creating higher education-early education parity), to dedicating new sources of revenue (taxes). SCAN believes the federal government should catalyze what is most effective and politically viable for local and state partners. **This is not a top-down approach, but rather a partnership modeled on the way America has built and sustained a strong economy over the years – through federal, state and local collaboration.**

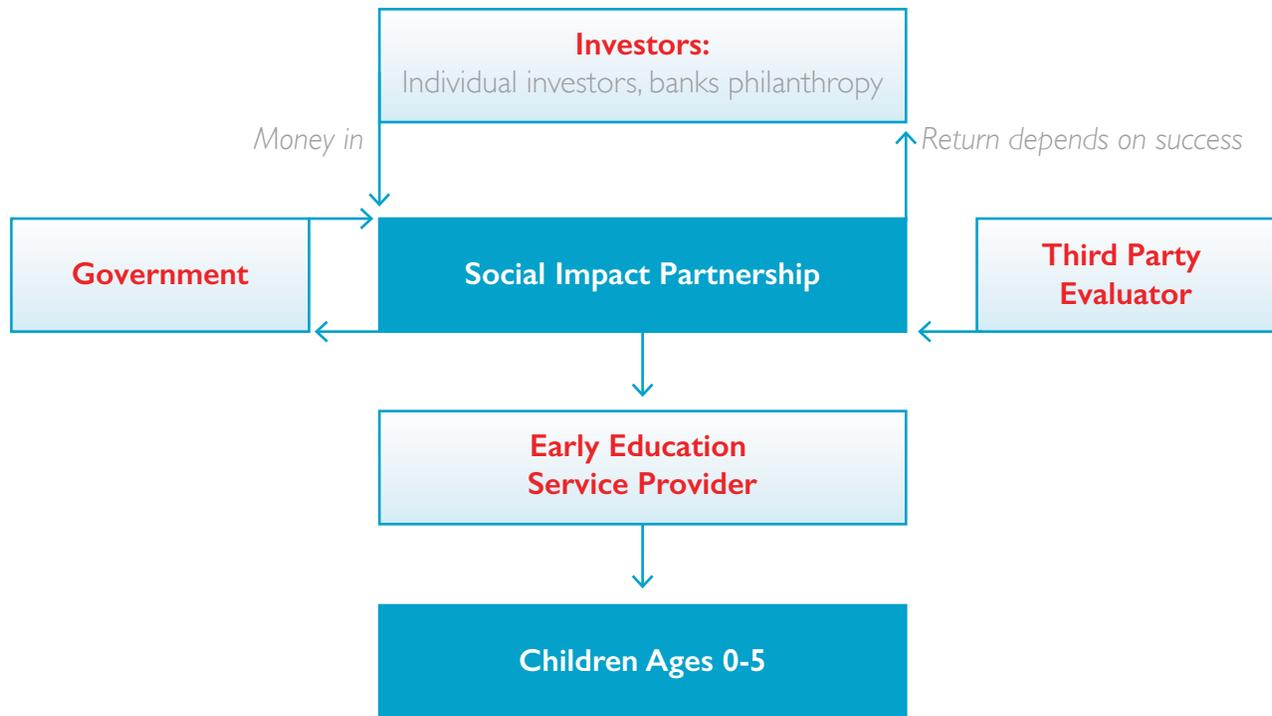
Early Childhood Education is not just about education or health. At its root, ECE is fundamentally an economic issue on which our nation's future depends. As such, SCAN's toolbox is an economic approach – it is about development, and it is about scale.

SCAN believes financing is the key to stronger ECE, and has made this its priority and focus. SCAN is actively engaged at the local, state and federal levels to build support for innovative financing ideas offering unique ways for communities to broaden services for children ages zero to five. SCAN's ideas are not limited to a traditional federal appropriations model, but rather see government as the catalyst for funding through creative partnerships, including with the private sector.

The following concepts represent ideas from across the political spectrum, and bring “unusual suspects” to the table on ECE. Already, business leaders are calling for a transformative policy around ECE as they need an educated workforce to compete in the global economy. By bringing financing mechanisms for ECE into the tax debate space – an area where ECE supporters have not yet weighed in – we are making sure ECE has a seat at the table. Negotiating tax policy is competitive, but finding common ground on ECE may yield policy, financial and political benefits.

ECE Financing Toolbox SOCIAL IMPACT FINANCING (PAY-FOR-SUCCESS)

Through social impact financing, or pay-for-success, the federal government can help states and communities fund innovative public-private partnerships to address societal needs. These partnerships begin with the state or local government setting a specific target for solving an identified societal problem – such as improving third grade reading proficiency by increasing access to evidence-based early childhood education and development programs. Private sector investors pay the upfront costs to expand the social service, in this case the number of children enrolled in ECE programs. A third-party evaluator determines if the goal defined by the government has been met. If the goal has been achieved, the government repays the investors with a return on their investment, based on the amount of money they will have saved from fixing the social problem, in this case, having more children achieve



success in third grade and not need remedial reading services.

Importantly, the government only pays for programs that deliver on their intended results. Paying for early childhood education with Social Impact Bonds (SIBs) is a situation in which everyone wins: government, investors and, most importantly, kids across the country.

Senator Orrin Hatch (R-UT), the Chairman of the Finance Committee, Senator Michael Bennet (D-CO), a member of the Finance Committee, Congressman Todd Young (R-IN), a member of the Ways & Means Committee, and Congressman John Delaney (D-MD), a member of the Financial Services Committee, have introduced bipartisan, bicameral pay-for-success legislation, the Social Impact Partnership Act (H.R. 1336 and S. 1089). This legislation has the potential to support early intervention services for kids across the country, in addition to other projects that produce measurable, clearly defined outcomes.^{6.3}

During the ESEA debate in the House and the Senate, SCAN worked with members from both sides of the aisle to pass amendments to both bills that would allow for

pay-for-success models to be utilized under the legislation – 21
 specifically for early childhood programs in the Senate version. SCAN has recently engaged with State Senator David Watters in New Hampshire to help move forward pay-for-success legislation to finance early childhood programs during the 2016 legislative session. In partnership with Senator Watters and the Institute for Child Success, SCAN will be hosting a statewide working group to explore pay-for-success financing with the goal of generating ideas to support a strong statewide initiative and building a foundation to introduce strong legislation next session. This working group, which met for the first time on August 12, includes legislators, nonprofit organizations and business leaders from all around the state.

At the local level, both Salt Lake City, Utah and Chicago, Illinois have already launched pay-for-success initiatives to fund the expansion of early childhood education. For more information on the Salt Lake City initiative, see “Spotlight on Early Childhood Education.”

**INCENTIVIZING PRIVATE DOLLARS
 (EXPANDING BOND PROGRAMS)**

Expanding the use of federally tax-exempt municipal bonds

is another avenue for driving more private dollars to early childhood education programs across the country. For favorable treatment, tax regulations governing municipal bonds generally require all money raised in a bond sale to be spent on one-time capital projects within three to five years of issuance. This traditional use of a municipal bond could finance the construction of a public preschool, for example. Incentivizing states to utilize qualified municipal bonds to fund more early childhood education facilities could help drive more private investment into ECE while simultaneously freeing up state funding for early childhood education programming:

- >> **Bank Qualified Bonds.** Must come from a municipality issuing no more than \$10 million in bonds in a calendar year. By lifting the \$10 million limit, qualifying school districts could direct more funding toward early childhood education program launch expenses and facilities.
- >> **Nonprofit Bonds.** Municipalities are permitted to issue bonds and loan the proceeds to a 501(c)(3) organization at a reduced rate compared to traditional bank loans. These bonds are often used to finance facilities used for the operation of a nonprofit organization and could be directed to finance the construction of early childhood education facilities and potentially fund start-up and launch expenses for an ECE program.
- >> **Private Activity Bonds (PABs).** Limited amount issued to finance specific projects, which can include qualified public educational facilities that are part of public elementary or secondary schools. Technical changes could be made to expand the use of PABs to include qualifying preschools, childcare facilities and other ECE centers.

to pay for higher education through tax benefits and traditional student aid, like loans and grants. Despite the rising cost of preschool programs, the federal government does not offer similar benefits for the families of pre-K age children. Creating parity between higher education benefits and early child education could be accomplished in three ways:

- >> **Tax Credits.** Extend any of the 14 higher education tax benefits so that they apply to early education in addition to higher education. For example, restructure the Hope Tax Credit, which helps families afford postsecondary tuition, fees, books and supplies, to operate in conjunction with the Child and Dependent Care Tax Credit, allowing parents to also afford a quality early education program.
- >> **Scholarships, Fellowships and Tuition Exclusions.** Although these are available to families facing higher education expenses, if a low-income family receives tuition assistance for their child to attend preschool, the value of that assistance is generally considered taxable income. The exclusion from income could be expanded to include tuition reductions or financial assistance for preschool and early childhood care.
- >> **Preferential Savings Vehicles.** Accounts help families pay for K-12 and higher education, but they do not apply to pre-K education. Coverdell education savings accounts, for example, allow families to invest up to \$2,000 per year per beneficiary to grow tax-free until distributed. If Coverdell accounts could be set up in advance of a beneficiary's birth, it would significantly increase the value of this savings vehicle for pre-K education. This same model of expansion could also be applied to Section 529 Plans, as well as the cancellation of the early IRA withdrawal penalty for qualifying education expenses.

families – particularly those that are low-income – afford quality early education programs for their children:

>> **Child and Dependent Care Tax Credit (CDCTC).**

A nonrefundable tax benefit, the CDCTC provides a 20 to 35 percent credit of the first \$3,000 spent on care for one child and the first \$6,000 on care for two or more children. Since the credit is nonrefundable and the maximum benefit is only 35 percent, low-income families have historically seen less of a benefit from this credit than wealthier families. By making the credit either fully or partially refundable and/or raising the ceiling on eligible expenses to more accurately reflect the cost of quality child care, families could see greater benefit from this credit, especially those that are lower income.

>> **Employer-Provided Child Care Exclusion.** Allows employees to pay for up to \$5,000 in child care with pre-tax dollars through an arrangement with their employer. Currently, the exclusion is only offered to individuals whose employer offers the benefit. Incentivizing more employers to offer this benefit and increasing the maximum allowable exclusion to better reflect the actual cost of child care would allow more families to afford quality early education.

EXCISE TAX PARITY

There is a good case for taxing different categories of like products in a similar manner. Traditional cigarettes and “e-cigarettes,” as well as brick-and-mortar gambling and Internet gambling, could be taxed and the new revenue generated be directed toward early childhood education:

>> **Federal E-Cigarette Tax.** As the FDA moves forward with its effort to regulate e-cigarettes, policymakers at the federal level have the opportunity to call for a federal excise tax on these new tobacco products. Two states – Minnesota and North Carolina – have

already passed legislation that taxes e-cigarettes. The revenue from a federal excise tax on e-cigarettes could be targeted to early childhood education at the state level, much like the State Children’s Health Insurance Program (SCHIP) directed funds from an increased cigarette tax to pay for children’s health care.

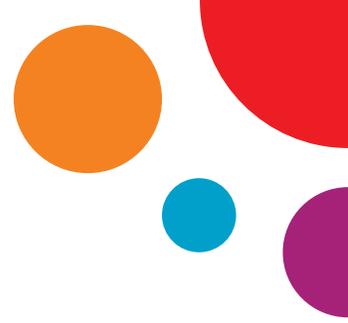
>> **Gambling Taxes & Lottery Revenues.** The federal .25 percent wage excise tax currently only applies to traditional in-person gambling, though there has been discussion at the federal level and action at the state level about regulating Internet gambling in a similar manner. A portion of new Internet gambling tax revenue could be directed to early childhood education.

NEW REVENUE MECHANISMS

Although these much sought-after pots of revenue are guarded closely by legislators on the tax writing committees, there is precedent for earmarking part or all of new revenues from either a one-time corporate repatriation tax holiday or closing the carried interest tax loophole for specific uses:

>> **Revenue from Repatriation.** By offering a temporary, significantly lower tax rate on returned overseas profits for U.S. multinational corporations, revenue could be generated that would otherwise remain unseen. The last repatriation tax holiday in 2004 prompted 843 corporations to bring \$312 billion back to the United States. These funds could be directed toward early childhood education.

>> **Revenue from Carried Interest.** By changing the treatment of carried interest from a capital gain to ordinary income, the tax rate on carried interest would increase. The new revenue generated by this change could be allocated to early childhood education.



Call to Action

The statistics are staggering: children in poverty without adequate educational supports early in life are less likely to succeed in school and more likely to struggle economically as adults. Even more compelling, as adults these individuals are more likely to commit crimes and be a cost to society. The good news is that we know that early childhood education provides one of the best educational interventions to curb negative outcomes and increase opportunity. Better still, we have proven, evidence-based interventions that provide a pathway to scale and provide access to millions more children in the United States.

24 The next President has the opportunity to drive a national dialogue and policy changes on early childhood education that have the potential to alter the course of history and increase access to opportunity for disadvantaged children. Yet, finding a way to finance ECE has been a major stumbling block for what Americans recognize as an important policy change. In this prospectus, SCAN provides candidates with a host of solutions to tackle the challenge and urges candidates to support robust ECE funding in policy and messaging.

The next President of the United States has an opportunity to recognize the power of these tools and support the federal government catalyzing new financing mechanisms.

SCAN asks candidates to commit to increasing enrollment in high-quality early childhood education programs by 20 percent in their first term, by signing legislation that uses at least one of the financing mechanisms in SCAN's innovative toolbox.







EARLY CHILDHOOD EDUCATION VALIDATORS



Senator Patty Murray

(D-WA) has been a staunch advocate for early childhood education in her role as Ranking Member of the Senate Health, Education, Labor and Pensions (HELP) Committee.

A former preschool teacher,

Murray helped design the improved Head Start legislation that passed in 2007. More recently, Senator Murray cosponsored a bipartisan amendment to the Senate's ESEA reauthorization legislation to improve and expand access to early learning programs.

“As a former preschool teacher, I’ve seen firsthand the kind of transformation that early learning can inspire in a child. It gives kids a strong foundation – not just to start kindergarten ready to learn, but also to succeed later in life. And the long-term benefits of early learning makes preschool programs some of the smartest investments we can make.”³⁹



Senator Bob Casey (D-PA) is

the Ranking Member of the HELP Subcommittee on Children and Families and has advocated for early learning throughout his career. He has introduced a universal pre-K bill every year since 2008, the Strong Start for

America’s Children Act, along with

Senator Murray. Most recently he attempted to insert the Strong Start Act into the Senate’s ESEA reauthorization legislation and suggested paying for it by closing a corporate tax loophole.

“One of the best steps we can take in the long run to boost wages is to invest in early learning so that every child has a fair shot to achieve his or her dreams. The research into the benefits of early learning is overwhelming. If children learn more early in life they earn more later in life.”⁴⁰

27



Senator Michael Bennet

(D-CO) is a member of both the

Finance and HELP Committees.

Bennet reintroduced pay-for-performance legislation with

Senate Finance Committee

Chairman Orrin Hatch (R-UT)

this Congress. Together, Bennet and

Hatch offered an amendment during

consideration of the Every Child Achieves Act, the Senate’s ESEA reauthorization legislation, to allow pay-for-success financing for early learning programs, which was accepted by voice vote.

³⁹ Murray Amendment to Improve and Expand Early Learning Passes HELP Committee,” *Office of U.S. Senator Patty Murray*, (15 Apr. 2015), <http://www.murray.senate.gov/public/index.cfm/2015/4/murray-amendment-to-improve-and-expand-early-learning-passes-help-committee>.

⁴⁰ “Casey Introduces Amendment to Fund Universal Pre-K By Ending Corporate Inversions Tax Loophole,” *Office of U.S. Senator Bob Casey*, (7 July 2015), <http://www.casey.senate.gov/newsroom/releases/casey-introduces-amendment-to-fund-universal-pre-k-by-ending-corporate-inversions-tax-loophole>.

“Social impact partnerships empower Colorado and other state and local governments to find innovative and more accountable ways to deliver crucial services and save taxpayer dollars. These public-private partnerships represent a shift to a model of government where results matter and where we pay for competence. Supporting targeted early interventions will help improve outcomes in health care, education, job training, child care, homelessness and a range of other government services.”⁴¹



Senator Barbara Mikulski (D-MD), Ranking Member of the Senate Appropriations Committee, has made early learning a legislative priority and fights to protect funding for it each fiscal year. She has voted against a \$1 billion cut to Head Start and prevented Head Start from being changed to a block grant program.

“As a social worker, I’ve seen firsthand how quality, reliable care and early childhood education makes a difference in a child’s life. I will keep fighting so that America’s children, regardless of the zip code they live in, have access to quality child care and education they can count on from preschool through higher education.”⁴²



Representative Rosa DeLauro (D-CT), Ranking Member on the House, Labor, Health and Human Services and Education (LHHSE) Appropriations Subcommittee, has been a longtime champion for early learning and helped establish the bipartisan Congressional Baby Caucus

to prioritize public policy on the healthy development of America’s children. She is a vocal advocate on the Appropriations Committee for funding for early learning.

“That is why [Head Start] is so close to my heart. From watching, playing with and reading to my own grandchildren, I know how formative the earliest of experiences can be. There is no better way to spend our education dollars than to fund early childhood development.”⁴³

41 “Bennet, Hatch Introduce Social Impact Partnership Bill,” *Office of U.S. Senator Michael Bennet*, (28 Apr. 2015), <http://www.bennet.senate.gov/?p=release&id=3323>.

42 “Mikulski Receives Congressional Champion Award from Save the Children for Her Continued Support of Early Childhood Education,” *Office of U.S. Senator Barbara Mikulski*, (22 Apr. 2015), <http://www.mikulski.senate.gov/newsroom/press-releases/mikulski-receives-congressional-champion-award-from-save-the-children-for-her-continued-support-of-early-childhood-education>.

43 “DeLauro Celebrates The Fiftieth Anniversary Of The Launch Of Head Start,” *U.S. Representative Rosa DeLauro (D-CT)*, (2015), http://delaura.house.gov/index.php?option=com_content&view=article&id=1929:de-lauro-celebrates-the-fiftieth-anniversary-of-the-launch-of-head-start&catid=2&Itemid=21.

44 “Rep. Scott: Greater Access to Quality Child Care and Early Ed Critical for Country’s Future,” *Office of U.S. Representative Bobby Scott*, (22 Jan. 2015), <http://democrats.edworkforce.house.gov/press-release/rep-scott-greater-access-quality-child-care-and-early-ed-critical-country%E2%80%99s-future>.

45 “Mayor Emanuel Announces Expansion of Pre-K to More Than 2,600 Chicago Public School Children,” *City of Chicago*, (7 Oct. 2014), http://www.cityofchicago.org/city/en/depts/mayor/press_room/press_releases/2014/oct/mayor-emanuel-announces-expansion-of-pre-k-to-more-than-2-600-ch.html.

46 “Mayor Murray Introduces Early Learning Nation Resolution to U.S. Conference of Mayors,” *Office of the Mayor*, (23 May 2014), <http://murray.seattle.gov/mayor-murray-introduces-early-learning-nation-resolution-to-u-s-conference-of-mayors/#sthash.Xvn6tXsm.GPbF5i35.dpbs>.



Representative Bobby Scott

(D-VA) is the Ranking Member of the House Committee on Education and the Workforce and has fought to expand early learning programs. Scott opposed the Budget Control Act of 2011 because of its cuts to

Head Start. He is also the Democratic

lead sponsor of the Strong Start Act in the House of Representatives.

“Scientific research confirms the short and long-term benefits of quality child care programs. Children who participate in high-quality care programs are healthier and do better in school—while their parents have an easier time holding down a job. These children also have better high school graduation and college attendance rates, higher earnings, reduced rates of incarceration and better lifelong health.”⁴⁴



Mayor Rahm Emanuel

(D-Chicago) is an early implementer of Social Impact Bonds to finance early learning initiatives in the Chicago public school system. The program, launched in 2014, is projected to save the city \$300 million if the preschool programs are effective.

“There is nothing that’s more important than our kids. Giving them a quality education from day one and helping provide their parents with the tools to be consistent and active partners in their children’s education is the best investment any of us can make.”⁴⁵



Mayor Ed Murray (D-Seattle)

has prioritized early learning for children in Seattle since he took office in January 2014. With the Seattle City Council, Mayor Murray developed a ballot initiative known as Proposition 1B that called for a four-year early learning pilot

program in the city. Voters passed the

initiative and the Seattle Preschool Program plans to serve almost 300 students in its first year. Mayor Murray also introduced a resolution to the U.S. Conference of Mayors in May 2014 that called for an Early Learning Nation, successfully acquiring the pledges of 15 other mayors to focus on early childhood education in the next decade.

“Cities throughout the nation are investing in their youth through early learning programs. I saw this commitment through preschool visits in Boston and Jersey City earlier this year. In addition to seeing the value in person, I’ve read countless studies that show an early investment in our residents benefits every aspect of our community. I’m proud to have sponsored an early education funding plan in Seattle and look forward to working with mayors throughout the nation on this critical priority.”⁴⁶



30 **QUOTATIONS FROM THE 2016 CANDIDATES**

SCAN is sponsoring New Hampshire's WMUR "Conversation with the Candidate" series and is asking presidential hopefuls about their views on early childhood education and maternal, newborn and childhood survival.

Hillary Clinton, Former Secretary of State and Democratic Presidential Candidate (July 31, 2015)

"Evidence is overwhelming [for the effectiveness of ECE]. If we want a competitive economy, our kids need to be prepared for kindergarten...Every dollar spent on ECE has a \$7 payoff; the kids are more likely to do better in school and more likely to do better in kindergarten."



Martin O'Malley, Former Governor of Maryland and Democratic Presidential Candidate (July 10, 2015)

“I would like to see our federal government take on greater ability to go into full-day pre-K. When we went to full-day kindergarten in our state, we saw first and second graders—I was Mayor at the time in Baltimore City—I saw first and second graders for the first time ever score above the national average in reading and math. I believe pre-K is an area we need to move to as well. The key word here, though, is collaboration. Respect for the teaching profession. We cannot improve outcomes for kids unless we listen to our teachers and collaborate.”



Bernie Sanders, Senator (I-VT) and Democratic Presidential Candidate (March 20, 2015)

“I think we need to invest very significantly in early childhood education because, you know what psychologists tell us? They tell us the most important years of our lives are zero to four. If kids don't have the intellectual or emotional nourishment that they need, they often get off to a bad start in life.”



32 Baylee (middle) with her brothers near Lake Quinalt, Washington.

SPOTLIGHT ON EARLY CHILDHOOD EDUCATION: Meet Baylee

Early Steps to School Success (ESSS)

Year: 2014

Location: Washington State (Lake Quinalt Elementary)

Six-month-old Baylee's parents first joined Save the Children's Early Steps to School Success (ESSS) program in the Quinalt School District in Washington when they found out they were expecting. When she was just two months old, Baylee scored well below age level in gross motor, fine motor, problem solving and personal social skills. At four months old, Baylee continued to show signs of developmental delay. With support from the ESSS Early Childhood Coordinator, and friends and family, Baylee's parents began devoting their time, energy and love into her development by implementing new reading techniques recommended by ESSS. It wasn't long before they began seeing a difference.

"Early Steps to School Success taught us some of the things we should be doing with Baylee every day so she can learn and have a head start and not fall behind. We read differently – it's more fun, and I am not as scared to read out loud anymore. We sing every day now, too. We play together and enjoy watching her do new things. She loves when we get excited! Reading is something we do every day now at home. My boys are reading books to her, too, and that is really neat to watch," said Dawna, Baylee's mother.

At the age of five months, a developmental screening was completed on Baylee and it was determined that she "did not qualify for services." The parents and the Early Childhood Coordinator agree that this would never have been possible without the collaborative effort of all parties involved with her success. At Baylee's six-month screening, every developmental category was above the cutoff and her development is now on schedule.

“We are learning what we can do to support Baylee every day through Early Steps so that she can be successful in school. She will be there before we know it, and she will be ready! She is one smart kid!” said Dawna.

Early Steps to School Success Results

Kids like Baylee around the country benefit from early learning programs like Save the Children’s Early Steps, a low-cost, targeted approach to enhancing school readiness for children in some of America’s poorest communities.

At age three, Early Steps participants’ language development is assessed using The Peabody Picture Vocabulary Test (PPVT). This evaluation has indicated that the program is as effective, and often more so, than other early learning programs.

>> In 2014, thousands of children and their families across 14 states and the District of Columbia participated in the program:

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Louisiana |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Mississippi |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Nebraska |
| <input type="checkbox"/> California | <input type="checkbox"/> South Carolina |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Kansas | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Kentucky | <input type="checkbox"/> West Virginia |

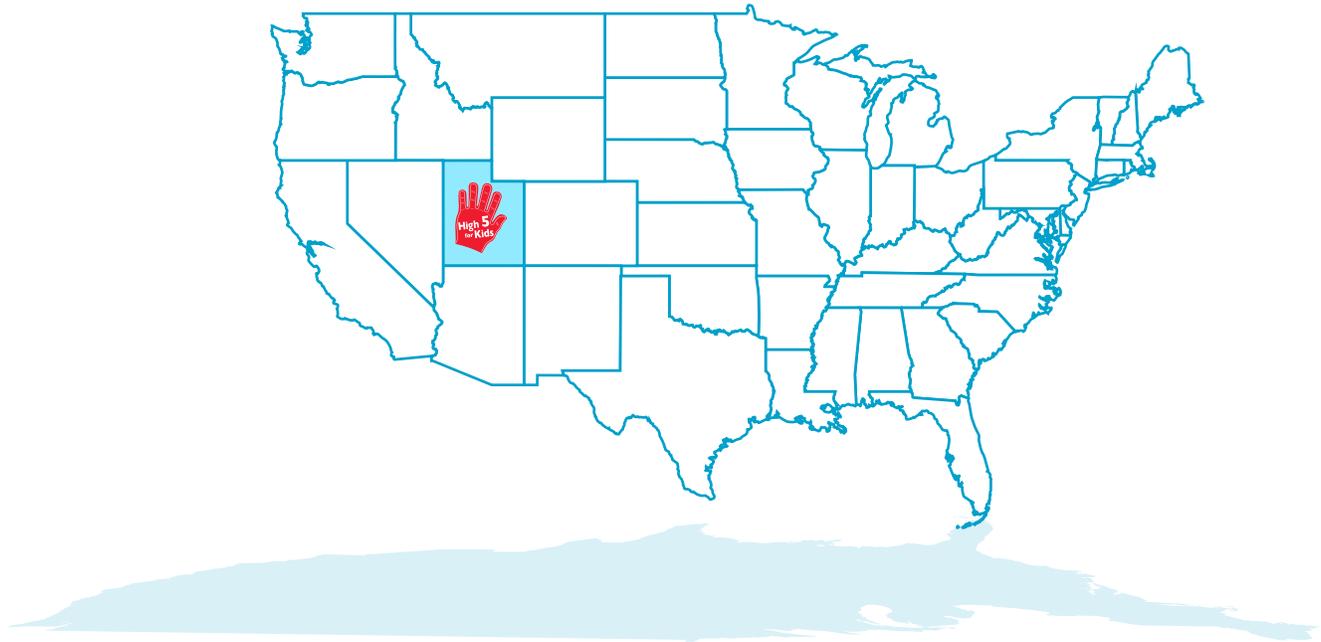
>> Despite the challenges they must overcome, 84 percent of the children in Early Steps score at or above the normal range for vocabulary acquisition and enter kindergarten on par with their middle income peers, ready to succeed in school and in life.

>> Children who have been enrolled in Early Steps for at least one year score an average of 94.5, well within the national mean range of 85-115.

>> Early Steps also conducts after-school literacy programs for nearly 20,000 impoverished and struggling readers across the country. Of the regular participants, 72 percent achieved significant reading improvement, equivalent to receiving almost five additional months of school instruction.



SPOTLIGHT ON EARLY CHILDHOOD EDUCATION: *Innovative Financing for Early Childhood Education in Salt Lake City, Utah*



The Utah High Quality Preschool Program

In 2013, Salt Lake City County launched the first pay-for-success effort to finance high-quality early childhood education. Delivering a high-impact and targeted curriculum to increase school readiness and academic performance among three- and four-year-olds, the Utah High Quality Preschool Program aims to reduce the number of children accessing special education and remedial services in kindergarten through 12th grade, which would result in cost savings for school districts, the State of Utah and other government entities.

Innovative Financing

Using the pay-for-success financing model, Salt Lake City County and the State of Utah partnered with local early education providers, Voices for Utah's Children, the United Way of Salt Lake and others to expand access to high quality programs for four cohorts of three- and four-year-olds who are eligible for free lunch (2,600 children in total). The expanded access to high quality pre-K is funded by Goldman Sachs, which has agreed to loan \$4.6 million to the United Way to finance the new students. J.B. Pritzker has provided a

subordinate loan of \$2.4 million to the United Way to reduce the risk to Goldman Sachs if the program does not end up being effective.

Goldman Sachs and J.B. Pritzker will only see a return on their investment if the expanded pre-K is successful, meaning it reduces costs to the Salt Lake City County and the State of Utah. The metrics used to determine these savings to the government will be a reduction in the number of kids entering special education and remedial services in grades K-12 whose test scores indicate they would otherwise have been likely to access special education.

To determine this, children participating in the high-quality preschool program are given the Peabody Picture Vocabulary Test (PPVT), a predictive evaluation that serves as an indicator of their likely use of resource special education and remedial services. Students that test two standard deviations below the mean are likely to use special education services and are tracked as they progress through sixth grade. These students form the "payment group." Every

year that a child within the payment group does not use special education or remedial services generates a pay-for-success payment.

This payment will be calculated in reference to the fixed \$2,600 per annum school districts currently receive per student to provide special education and remedial services. The amount of each pay-for-success payment will be based on the actual avoided costs realized by the State of Utah. Initially, pay-for-success payments will be made equal to 95 percent of the avoided costs or \$2,470 per child for every year, kindergarten through sixth grade, to repay the senior and subordinate debt, plus a base interest rate of 5 percent. Thereafter, success payments will equal 40 percent of the savings, or \$1,040 per child per year of special education services avoided, to be paid as “success fees” to Goldman Sachs and Pritzker.⁴⁷

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Results

While the outcome remains to be seen, the first one million dollar investment in this program enabled 450 to 600 children to attend preschool in the fall of 2013. Pay-for-success models like the one being used in Utah offer tremendous promise for expanding access to high-quality early childhood education programs in tight fiscal environments.



Photography Credits: Susan Warner: 2012.

47 “FACT SHEET: The Utah High Quality Preschool Program,” Goldman Sachs, J.B. & M.K. Pritzker Family Foundation, United Way of Salt Lake, <http://www.goldmansachs.com/what-we-do/investing-and-lending/impact-investing/case-studies/impact-bond-slc-multimedia/fact-sheet-pdf.pdf>.

Polling: Where Americans Stand on Early Childhood Education & Maternal, Newborn and Child Survival

Maternal and newborn child survival is an issue Americans feel a moral obligation to support, but they are often uninformed about what the U.S. is doing to solve the problem.⁴⁸ Most are unaware that the reduction in preventable deaths of moms and children around the globe is one of the greatest successes in international development in the last 25 years. Since 1990, the world has reduced mortality rates for children under five by more than half and for mothers by 40 percent. Candidates need to show voters the United States' legacy of leadership on maternal, newborn and child health and the progress that has been made by giving communities and countries the tools to care for their women and children.

Building on the momentum of the last quarter century, the U.S. has declared ending preventable maternal, newborn and child deaths a national priority. In 2014, the U.S. laid out a roadmap to 2020 and committed to helping save 15 million children's lives and 600,000 women's lives in *Acting on the Call: Ending Preventable Child and Maternal Deaths*, a report published by USAID. By understanding the challenge, implementing evidence-based policies and transforming USAID's approach to the structure and funding of maternal, newborn and child health programs, we can accelerate the end of preventable maternal, newborn and child deaths – ending them entirely by 2030.

The Challenge–

WHERE MOMS & BABIES STAND TODAY

Despite much progress, each year 5.9 million children under the age of five still die from preventable or treatable causes, and nearly 300,000 women die every year from complications of pregnancy and childbirth:

- >> 16,000 children die each day from preventable and treatable causes such as pneumonia, diarrhea and malaria.
- >> Two million women report that when they last gave birth they were completely alone.
- >> Malnutrition is an underlying cause for 45 percent of deaths among children under the age of five; this equals three million children's lives lost each year.
- >> Nearly half of all under-five deaths occur during the first month of life. The number of deaths in this newborn period is four times higher in Africa.
- >> Approximately one million newborns die on their very first day of life, from causes that are almost entirely preventable.⁴⁹

Key causes of first-day death rates in sub-Saharan Africa and south Asia include high numbers of preterm births and low birthweight babies, poor maternal health and nutrition, girls and young women having children at a young age, low contraception use and the lack of healthcare for mothers. Only half of all women in sub-Saharan Africa report having a trained birth attendant present during birth.

Systemic change is needed from elected officials, governments, donors and health professionals to put these interventions into place and on the path to ending maternal, newborn and child deaths.

Evidence-Based Policies–

SCALING WHAT WORKS

The global community knows how to end preventable maternal, newborn and child deaths and new high-impact, cost-effective solutions are coming to fruition to even further accelerate progress. Through a wide range of programs, including Saving Newborn Lives, Save the Children has

48 "TargetPoint & Greenberg Quinlan Rosner Research, SCAN polling, (3-8 Aug. 2014).

49 *Acting on the Call: Ending Preventable Child and Maternal Deaths Report*, USAID, (June 2014), <https://www.usaid.gov/what-we-do/global-health/acting-call-ending-preventable-child-and-maternal-deaths-report>

demonstrated the effectiveness of interventions and approaches in reducing newborn and child deaths, such as community case management of neonatal infections and “Kangaroo Mother Care” (mother and child skin-to-skin contact). The U.S. government needs to continue to lead the world in innovative initiatives to scale up evidence-based, proven and cost-effective interventions. With particular focus on the countries that are most in need, the time has come to double-down on our investment so that we can accelerate progress on ending these preventable deaths. We also need to build upon these proven approaches with new 21st century financing mechanisms that can leverage existing multilateral and bilateral programs and create effective public/private partnerships in this space.

38 U.S. leadership has played a catalytic role in increasing countries’ own responses to addressing maternal, newborn and child health and nutrition. Today, over 20 countries including Ethiopia, Bangladesh, Kenya, Tanzania and Nigeria have developed and secured funding for their own national plans to reduce maternal, newborn and child deaths. In short, the strategies needed to scale and sustain this initiative are largely known and proven – what is required now is sustained leadership. U.S. leadership has been catalytic in galvanizing broader international action.

Acting on the Call–

TECHNICAL APPROACHES TO PROVEN INTERVENTIONS

In 2014, USAID released the *Acting on the Call: Ending Preventable Child and Maternal Deaths* report – a roadmap to saving women’s and children’s lives. In it, USAID laid out eight categories of technical approaches with proven interventions, which are critical to achieving the goal of ending preventable maternal and newborn deaths by 2030:

>> **Newborn Health.** Care around labor, birth and the first week post-birth is critical to ensuring that babies get a healthy start to life. Newborn health includes best

practices in labor monitoring, emergency obstetric care and basic newborn care, such as skin-to-skin contact, within an hour of birth. Access to quality care during labor, childbirth and immediate newborn care within the first hour of life can prevent up to 41 percent of newborn deaths.⁵⁰ Additionally, care for sick and small babies would prevent 30 percent of newborn deaths.⁵¹

In 2014, Save the Children ensured skilled birth attendants were present at more than 701,000 births, giving mothers and babies the best start.

>> **Immunization.** Providing vaccines for the most deadly childhood diseases, including the Pneumococcal Conjugate Vaccine and the Rotavirus Vaccine, saves children’s lives. Gavi (originally known as GAVI, the Global Alliance for Vaccines and Immunization), an international vaccine alliance, has transformed the timeframe in which developing countries receive these vaccines, accelerating the uptake and use of underused and new vaccines:

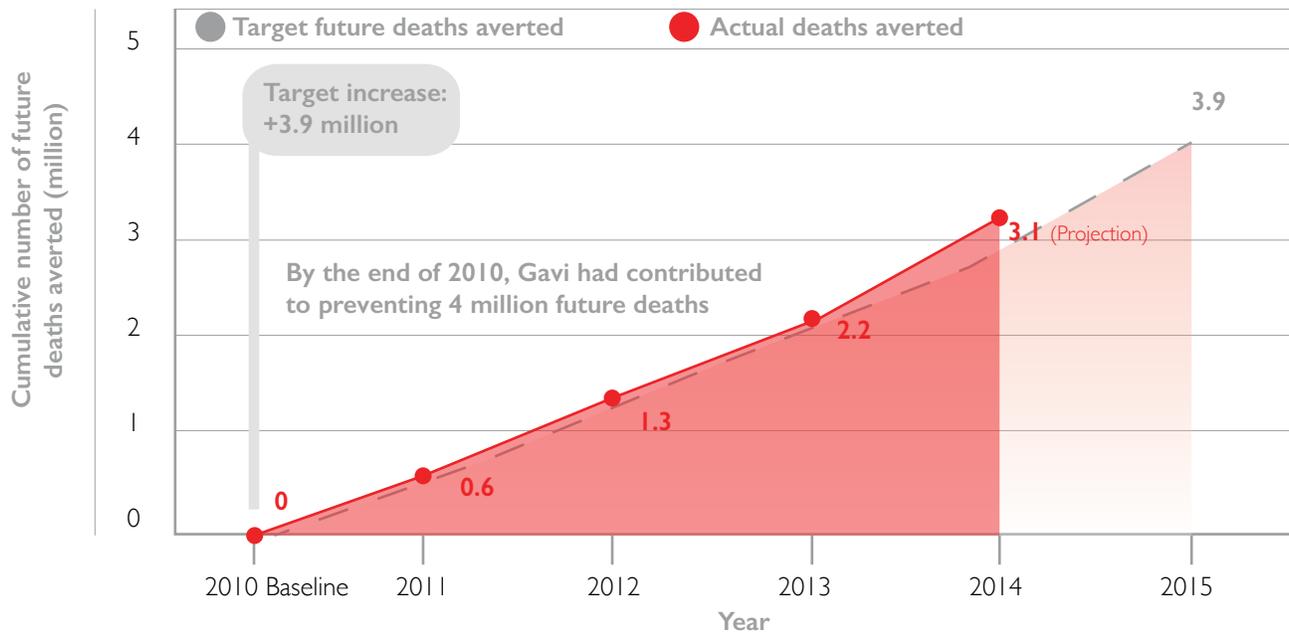
>> **Prevention and Treatment of Childhood Illness.** Together, pneumonia, diarrhea and malaria are responsible for a third of all childhood deaths in the developing world. High-impact interventions like oral rehydration solution and zinc, antibiotics and sleeping under insecticide-treated nets would allow these children to survive.

Acting on the Call reports that the World Health Organization (WHO) estimates approximately 3.3 million lives were saved as a result of the scale-up of malaria control interventions between 2000 and 2012. During that same time, malaria mortality rates for children in sub-Saharan Africa were decreased by approximately 54 percent.⁵³

Additionally, oral rehydration therapy is credited with cutting diarrhea related deaths in half during the last decade, preventing one million deaths each year. Vitamin A alone saved a million young lives between 1998 and 2000.⁵⁴

2. NUMBER OF FUTURE DEATHS AVERTED

Number of future deaths averted as a result of pentavalent, pneumococcal, rotavirus, yellow fever, meningitis A, Japanese encephalitis, Human Papillomavirus, typhoid and rubella vaccination in 73 Gavi eligible countries (as of 2010).



In 2014, Save the Children's work led to more than 7.5 million lifesaving health interventions for children in 34 countries.

>> **Nutrition.** Malnutrition inhibits a child's immune system from fighting disease and prevents them from developing both physically and mentally. High-impact interventions for addressing malnutrition include preventative zinc supplementation, the promotion of breastfeeding amongst new mothers and the management of severe and moderate acute malnutrition.

50 Acting on the Call: Ending Preventable Child and Maternal Deaths Report, USAID, (June 2014): 84, <https://www.usaid.gov/what-we-do/global-health/acting-call-ending-preventable-child-and-maternal-deaths-report>.

51 Ibid.

52 "Mission Indicators," Gavi, The Vaccine Alliance, <http://www.gavi.org/results/goal-level-indicators/mission-indicators/>.

53 Acting on the Call: Ending Preventable Child and Maternal Deaths Report, USAID, (June 2014): 89, <https://www.usaid.gov/what-we-do/global-health/acting-call-ending-preventable-child-and-maternal-deaths-report>.

54 "Millennium Development Goals: Benefits to Children," Save the Children, http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/MDG_4-Child_Mortality.pdf.

55 "Scientific Rationale: Benefits of Breastfeeding. 2012," UNICEF, (2012): 1, http://www.unicef.org/nutrition/files/Scientific_rationale_for_benefits_of_breastfeeding.pdf.

56 Results for Children: 2014 Annual Review, Save the Children, (2014): 10, http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/SC_2014_ANNUALREPORT.PDF.

During the first two years of life, optimal breastfeeding practices, especially exclusive breastfeeding for the first six months of life, can have the single largest impact on child survival of all preventive interventions, with the potential to stop 12-13 percent of all under-five deaths in the developing world, or the equivalent of saving 1.4 million lives, according to the 2008 Lancet Nutrition Series.⁵⁵

Save the Children's programs support efforts to ensure adequate food and nutrient intake, effective feeding and care practices and protection against infectious diseases. Specific interventions include support for exclusive breastfeeding through six months of age, timely and appropriate complementary feeding, feeding during and after bouts of illness, improved hygiene practices and timely health care-seeking. In 2014, 8.9 million children benefited from Save the Children's programs.⁵⁶

>> **Maternal Health.** Complications of pregnancy and childbirth are life-threatening for many women in the developing world. The most prominent, direct causes of maternal death include hemorrhage, hypertensive

disorders, sepsis, embolism and other causes of obstructed labor; in some African countries, HIV and malaria are also major causes. Ensuring access to family planning, high-quality antenatal labor, delivery and postpartum care, as well as treatment of significant co-morbidities like HIV, TB, malaria and malnutrition, allows more mothers to thrive.

Since 2003, starting with the leadership of President George W. Bush, the U.S. has aggressively combated HIV/AIDS globally through the President's Emergency Plan For AIDS Relief (PEPFAR), which has resulted in the treatment of 5.4 million people living with HIV and has prevented 100,000 babies from getting infected with HIV.⁵⁷

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In 2014, Save the Children reached 11.9 million children with HIV/AIDS prevention and treatment.

>> **Family Planning.** Helping women plan for pregnancies to occur at the healthiest times of their lives and avoid unintended pregnancies reduces the risks of both maternal and newborn death. Healthy timing and spacing of pregnancies allows for both moms and newborns to have safer, healthier births, as does increased knowledge of and access to contraceptives.

Preventing unintended and high-risk pregnancies will prevent an estimated 7 million children under the age of five from dying (2012–2020), a significant portion of which are newborn deaths.⁵⁸

Multiple studies cited by the WHO have found that contraceptive use saves mothers' lives. In one study, use of modern contraception was estimated to have prevented 230,000 maternal deaths in a single year.⁵⁹

>> **Water Supply, Sanitation and Hygiene (WASH).** Increased access to a clean water supply, sanitation

practices and optimal hand washing techniques are important interventions for reducing postpartum maternal and neonatal sepsis and malnutrition.

Acting on the Call reports that hand washing with soap and improved sanitation are projected to each save the lives of approximately 15,000 children under the age of five from 2012 to 2020.⁶⁰

>> **Ensuring Healthy Behaviors.** Child and maternal health outcomes are improved by social and behavioral changes, such as communication around correct techniques for handwashing and patient and provider reminders for adherence and compliance. Creating sustainable healthy behaviors means breaking down structural and financial barriers as well as understanding individual and collective motivations to provide culturally appropriate solutions. This is a key piece to achieving the great results of the other interventions discussed.

Innovative Global Financing— BUILDING MOMENTUM

A comprehensive financing package will be needed to meet the ambitious goal of cutting the number of maternal and child deaths by half. This includes robust bilateral assistance, multilateral contributions and innovative financing.

At the U.S.-Africa Leaders Summit in August 2014, SCAN worked with the White House to prioritize a commitment to accelerate ending preventable maternal and children's

57 "Global Health," *Save the Children*, Print.

58 *Acting on the Call: Ending Preventable Child and Maternal Deaths Report*, USAID, (June 2014): 85, <https://www.usaid.gov/what-we-do/global-health/acting-call-ending-preventable-child-and-maternal-deaths-report>.

59 "Family planning: a health and development issue, a key interventions for the survival of women and children," *World Health Organization*, (2010), http://apps.who.int/iris/bitstream/10665/75165/1/WHO_RHR_HRP_12.23_eng.pdf.

60 *Acting on the Call: Ending Preventable Child and Maternal Deaths Report*, USAID, (June 2014): 19, <https://www.usaid.gov/what-we-do/global-health/acting-call-ending-preventable-child-and-maternal-deaths-report>.

deaths and find innovative ways of funding to accomplish this. Following on its heels, in September 2014, the Global Financing Facility (GFF) for Every Woman Every Child was proposed during the 69th UN General Assembly in New York as a new instrument to build long-term domestic and international funding commitments for women's and children's health. The World Bank Group and the Governments of Canada, Norway and the United States announced up to \$4 billion in financial support to improve reproductive, maternal, newborn, child and adolescent health. The GFF is a new instrument to build long-term developing country and international funding commitments for women's and children's health. This model has the potential to be transformative for development and brings together resources from countries, international donors and the private sector.

In July 2015, the GFF was officially launched at the Third International Conference on Financing for Development in Addis Ababa, Ethiopia. The GFF has the potential to accelerate progress towards the goal of ending preventable maternal, newborn and child deaths and serve as a needed financial intermediary, if designed and implemented appropriately.

The world has shown its willingness to partner with the United States to achieve this important goal through the use of these new finance mechanisms. The United States must be part of the vanguard leading the way forward complemented by stronger investment in effective bilateral and multilateral programs, such as Gavi, the Vaccine Alliance, that deliver proven results.

USAID has taken an important step forward with the creation of the bilateral Financing Framework to End Preventable Child and Maternal Deaths (EPCMD). The Financing Framework is designed to outline options for financial resources and tools that can be utilized in addition

to current funds to accelerate the end of preventable child and maternal deaths. Drawing upon best practices at USAID and global partners around the world, the Financing Framework provides solutions and tools where they are most needed.

Accelerating Action–

ENDING PREVENTABLE DEATHS BY 2030 THROUGH TRANSFORMATIONAL LEGISLATION

There is tremendous momentum to improve maternal, newborn and child health worldwide, and Acting on the Call provided a roadmap forward. U.S. policymakers now need to accelerate the progress that has been made and pass game-changing legislation to end preventable maternal, newborn and child deaths once and for all.

This year, SCAN convened representatives from over 20 nonprofit and faith-based organizations to draft meaningful legislation to dramatically reduce preventable maternal, newborn and child deaths with the ultimate goal of ending them by 2030. The result is the bipartisan **Reach Every Mother and Child Act of 2015 (S.1911)** introduced by Senators Susan Collins (R-ME) and Chris Coons (D-DE). A parallel, bipartisan companion measure is in progress in the House of Representatives. This transformative legislation would accomplish the following:

- >> Create a coordinated U.S. government strategy for ending preventable maternal, newborn and child deaths and helping ensure healthy lives by 2030;
- >> Affirm the targets of saving 15 million children's lives and 600,000 women's lives by 2020;
- >> Require ambitious top-line targets to be set, tracked and annually reported on, with metrics that capture overall impact, while increasing accountability and transparency at all levels;

- >> Focus on the poorest and most vulnerable populations, recognizing the unique needs within different countries and communities;
- >> Scale up the most effective, evidence-based interventions with a focus on country ownership and aligning with existing maternal, newborn and child survival plans, specifically the eight identified above;
- >> Institutionalize the recently established position of a Child and Maternal Survival Coordinator responsible for oversight and coordination of resources directly linked to reducing maternal, newborn and child mortality;
- >> Improve interagency coordination and coordination between U.S. government agencies and relevant foreign governments and international organizations;
- >> Design, implement and evaluate programs in a way that enhances sustainability of programs and ownership of stakeholders in partner countries;
- >> Streamline existing resources and scale up targeted resources to meet country needs;
- >> Create and test new innovative public-private financing mechanisms to complement strong bilateral U.S. investments; and
- >> Accelerate partner country progress toward self-sustainability for maternal and child survival, particularly in middle-income countries.

PUBLIC-PRIVATE FINANCING FRAMEWORK

Traditional U.S. bilateral investments have a tremendous track record and are making a transformational difference in countries around the world. Growing these important investments will be critical to continuing to make progress

in ending preventable child and maternal deaths, especially for reaching the most deprived children and mothers. However, the financing for ending preventable child and maternal deaths will also require new investments from all actors – partner governments, donors and the private sector.

As some of those countries improve their economic standing and develop stronger systems of collecting and tracking data, they are in a position of being able to attract private financing. Expanded use of innovative, public-private financing mechanisms to complement strong bilateral U.S. investments are key to tapping into these other sources. These new financing ideas can only be used to expand highly evidence-based interventions; therefore it is important that existing bilateral funding be maintained and strengthened as new investors are brought to the table. Without strong evidence-based sustainable programs, expanding funding through these public-private financing mechanisms cannot be achieved.

The Reach Every Mother and Child Act of 2015 (S.1911) includes the following financial tools:

- >> **Loan Guarantee:** A loan guarantee is a promise by one party (the guarantor) to pay back the debt obligation of a borrower if that borrower defaults. A guarantee can be limited or unlimited, which means that the guarantor can be responsible for only a portion or all of the debt.

An example of a loan guarantee is USAID's Development Credit Authority (DCA). USAID uses DCAs to issue loan guarantees to private lenders, often local banks. These guarantees cover up to 50 percent of the principal in loans to development-related projects. By reducing the risk, private lenders are encouraged to make loans to social sectors (including health). As private lenders become more active in this space, they will learn that this is a potentially profitable area of business.

>> **Revolving Fund or Working Capital Fund:** A revolving fund is a fund or account that remains available to finance an agency's continuing operations without any fiscal year limitation, because the agency replenishes the fund by repaying money used from the account. A Working Capital Fund (WCF) is a type of intra-governmental revolving fund.

USAID currently manages a WCF for HIV/AIDS, which was authorized by Congress. This WCF facilitates the procurement of HIV/AIDS commodities. Funds deposited into the WCF do not have a fiscal year restriction and are co-mingled with other funds. This gives USAID the flexibility to shift funds within the WCF to respond to changes in country needs so as to ensure protection against stock outs and to meet other program needs. The working Capital Fund can accept funds from any U.S. government agency, foreign governments, multi-lateral organizations and other public or private entities.

>> **Public-Private Partnerships (PPPs):** PPPs include joint funding from public (USAID) and private sources for a common development goal. PPPs leverage the advantages of both the private and public sectors and include non-traditional development partners. In 2001, USAID introduced the Global Development Alliance (GDA), which is a type of PPP with formal requirements. Partners are required to collectively contribute resources that are at least equal to the USAID contribution. Partners can be foundations, NGOs, private businesses, universities, host country governments, etc. In addition, partners are expected to bring significant new resources, ideas, technologies and/or partners to address development problems in countries where USAID is working. This innovative approach to development assistance mobilizes ideas, efforts and resources of government, businesses and civil society to achieve development goals.

>> **Development Impact Bonds (DIBs):** DIBs, a type of pay-for-performance mechanism, create a contract between private investors and donors who have agreed upon a shared development goal. This ensures donor resources that are spent on development projects are successful. If they are not successful, then donors do not pay for the programs and private investors assume the cost. Unlike Development Credit Authority guarantees, DIBs are much newer and are in early pilot stages.

>> **Development Impact Partnership:** A financial intermediary is needed for the U.S. government to fully leverage certain financing tools, such as a Development Impact Bond. Therefore, the legislation authorizes the creation of a Development Impact Partnership. This partnership will serve as a financial intermediary and facilitate the implementation of a pay-for-performance mechanism. The partnership will be designed to allow for the incorporation of private sources and other nongovernmental sources of capital to leverage U.S. government investments.





CALL TO ACTION

45



CALL TO ACTION

We know the way forward and have a proven track record; however, with bureaucratic silos, non-leveraged commitments and existing resources, we are not on track to meet our targets. It is clear we need to do more: too many children die on the day of their birth and too many women's lives continue to be cut short every day from causes that are entirely preventable. This loss of life shatters families, burdens communities and inhibits growth and prosperity around the world. With the lessons we have learned and the evidence in hand, we can see the road ahead. Now is the time to accelerate our efforts with an initiative that will save lives.

The next president of the United States will support the federal government in catalyzing new financing solutions for ending preventable deaths of mothers and children in addition to increasing existing bilateral assistance and contributions to Gavi, the Vaccine Alliance. Just as the United States led the way for transformative action on AIDS with the President's Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund, there is once again an opportunity to save lives around the world on a large scale with the Collins-Coons legislation.

The next president has an historic opportunity to leave a lasting legacy in place with this initiative, building upon the past Administration's commitments, consolidating existing efforts and spurring innovative mechanisms to finance development priorities. There is no more important goal we can share, no more important investment in the future health and stability of the developing world, than saving the lives of women and children. We know that additional commitments and resources will save lives now and build a foundation for a better future. Our current efforts are yielding measurable results, and accelerating those efforts will accomplish even more.

With a strategy that puts children and women first, we have the chance to ensure every child, regardless of where he or she is born, has a healthy start to life. The U.S. has been a global leader in improving the lives of women and children around the world—this is the moment to accelerate our leadership and bring this bold new initiative forward. There is no more important goal we can share than saving the lives of women and children.

SCAN asks candidates to commit to reducing the number of global preventable deaths of mothers and children under age 5 by 50 percent by signing legislation and supporting increased funding through a comprehensive package of financing solutions in their first term.





MNCS CONGRESSIONAL VALIDATORS



Senator Chris Coons

(D-DE) has been a champion for investing in maternal and child health in developing countries. As the former Chair of the Senate Committee on Foreign Relations Subcommittee on African Affairs, Coons has been

a leader on issues related to the African continent. He has held a conference in Delaware, “Opportunity: Africa Conference,” annually since 2012 to connect members of Delaware communities with top experts on Africa. On September 19, 2014, Coons introduced the Accelerating Action in Maternal and Child Health Act with Senators Ben Cardin (D-MD) and Lindsey Graham (R-SC). On July 30, 2015, Coons introduced the Reach Every Mother and Child Act of 2015 with Senator Susan Collins (R-ME).

“Over the past several years, we have made great strides in saving moms, babies and kids in some of the poorest parts of the world, but it’s clear that more help – and more resources – are needed. The U.S. is a critical leader in ending preventable maternal and child deaths, and this bipartisan bill builds on those successes by utilizing innovative financing tools and new strategies. Investing in maternal and child health in developing countries is an investment in the future, and I look forward to working with my colleagues to help all mothers and children around the globe get the health care they deserve.”⁶¹



Senator Ben Cardin

(D-MD) is the Ranking Member on the Foreign Relations Committee and has been a champion for investing in maternal and child health in developing countries. In the fall of 2014, Cardin joined Senators

Lindsey Graham and Chris Coons in introducing the Accelerating Action in Maternal and Child Health Act.

“Substantial U.S. investment in maternal and child health — both in the U.S. and around the globe — has saved millions of lives and delivered extraordinary results. In the 24 countries where USAID focuses on maternal and child health, we have reduced the number of preventable child and maternal deaths by half. But we cannot stop now. This bill ensures that our cost-effective and life-saving interventions can continue into the future.”⁶²

Representative Barbara Lee (D-CA) sits on the House Appropriations

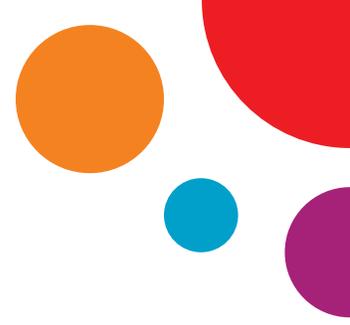


Subcommittee on State, Foreign Operations and Related Programs. Lee serves as Co-Chair of the Congressional Global Aids Emergency Task Force and has been a leader in the global battle against malaria and tuberculosis. She is

committed to working to end preventable maternal, newborn and child deaths.

61 “Senators Coons, Collins Introduce Bill to Aid Women and Children in Developing Nations,” Office of U.S. Senator Chris Coons, (30 July 2015), <http://www.coons.senate.gov/newsroom/releases/release/senators-coons-collins-introduce-bill-to-aid-women-and-children-in-developing-nations>.

62 “Senators Coons, Graham, and Cardin Introduce Bipartisan Bill to Increase Private Investment in Global Maternal and Child-Health Programs,” Office of U.S. Senator Chris Coons, (19 Sept. 2014), <http://www.coons.senate.gov/newsroom/releases/release/senators-coons-graham-and-cardin-introduce-bipartisan-bill-to-increase-private-investment-in-global-maternal-and-child-health-programs>.



“Did you know that 70 percent of poor people around the world—those living on \$1 or less per day—are women? Women are disproportionately affected by poverty, but research shows that they also have the power to improve their families’ nutrition, education and healthcare when they have the resources they need and are economically secure.”⁶³

Representative Betty McCollum (D-MN), sits



on the House Appropriations Committee and has been a leader on securing funding for the global fight against AIDS. She is dedicated to working to end preventable maternal, newborn and child deaths and co-led a bipartisan

letter to the Appropriations Committee requesting robust resources for the Maternal and Child Health (MCH) and Nutrition accounts in the State and Foreign Operations Appropriations bill for FY16.

“Making motherhood safe and keeping children alive are global health priorities for me and for USAID. We know the loss and devastation a mother’s death has on her family. We know how it impacts the health and well-being of her surviving children and the ripple effect it has on her community. Yet despite all we know, every minute of every day a mother will die because of pregnancy-related complications or child birth. What is even more tragic, many of these deaths could be prevented with small, cost-effective interventions—interventions such as multi-nutrient supplements, misoprostol to prevent postpartum hemorrhage and training skilled birth attendants. This is why we must re-commit ourselves to ensuring all girls and women, regardless of where they live, have access to quality health services, education and economic opportunities.”⁶⁴

63 “Rep. Barbara Lee, “The Power of a Mother,” The Huffington Post, (8 May 2012), http://www.huffingtonpost.com/rep-barbara-lee/global-maternal-health_b_1499516.html.

64 “Congresswoman McCollum’s Remarks at USAID’s Maternal Survival: Celebrating Progress & Accelerating Action,” *Office of U.S. Representative Betty McCollum*, (24 Apr. 2012), <http://mccollum.house.gov/congresswoman-mccollums-remarks-usaids-maternal-survival-celebrating-progress-accelerating-action>.



QUOTATIONS FROM THE 2016 CANDIDATES

SCAN is sponsoring New Hampshire's WMUR "Conversation with the Candidate" series and is asking presidential hopefuls about their views on early childhood education and maternal, newborn and childhood survival.

Hillary Clinton, Former Secretary of State and Democratic Presidential Candidate (July 31, 2015)

"[Preventing infant mortality] should be a foreign policy priority. The U.S. has been a leader in these issues and as Secretary of State, I worked hard to prioritize them."

Martin O'Malley, Former Governor of Maryland and Democratic Presidential Candidate (July 10, 2015)

"I know Save the Children has their goal, which I am committed to, of reducing extreme poverty, child and maternal mortality in this world. We can be leaders, and leaders that are respected [all over] the world over because of the deployment of our healing powers, our agricultural prowess, our technology in terms of clean water, and these are the things that of the building blocks for a rising middle class. We should not be backed into a corner where the only options seem to be military intervention, boots on the ground or not. If it has gotten to that point, we've had a failure of development and diplomacy."



52 Hirut Made (right) holds her two-day-old son, Michael Alemayehu, with her mother Asegedech Mekonnen (left).

Photography credit: Suzanna Klauke/Save the Children Date: February 20, 2015.

SPOTLIGHT ON SAVING MOMS' & BABIES' LIVES: Meet Asegedech, Hirut, Rima & Chotti

Same Hospital, New Story

Year: 2015

Location: Ethiopia, Yekatit 12 Hospital – Teaching Hospital, Addis Ababa, Ethiopia Neonatal Unit

Asegedech, a 59-year-old Ethiopian grandmother of three, has seen tremendous progress in her lifetime. She is with her daughter Hirut, who just gave birth to a healthy baby boy in a public hospital in Addis Ababa. When Asegedech was having her children in this same hospital in the 1980s, her experience was far from positive.

“When I gave birth 30 years ago, there were a lot of challenges,” said Asegedech. “We did not know about prenatal care during my time. It was very difficult to see a doctor. You might not get medical attention even if you were a bleeding mother. You would receive abusive words from the nurses when you were in labor. They would rebuke us when we asked for help.”

Today, Asegedech’s daughter Hirut says she is very happy with the services she has received. “I started prenatal care when I was eight weeks pregnant. The medical team gave me a lot of support and advice. They would regularly assess my condition and encourage me. They told me to come anytime if there is any problem. When I came here to deliver my baby, I received a warm welcome. I was worried about giving birth, but they made me feel comfortable.”

“I was telling my daughter to go to a private hospital to give birth,” said Asegedech, “but they are taking care of her very well here. It is really nice.”

Asegedech says people used to worry whenever a woman was pregnant because so many mothers and babies died. “Now things have changed and the services have been improved. Now we do not hear about maternal and newborn deaths very often.”

Services like the ones Hirut received—skilled labor, childbirth and immediate newborn care within the first hour of life can prevent up to 41 percent of newborn deaths.⁶⁵

The bipartisan, bicameral **Reach Every Mother and Child Act of 2015 (S.1911)** has been introduced by Senators Susan Collins (R-ME) and Chris Coons (D-DE). A parallel, a bipartisan companion bill is in progress in the House of Representatives. This legislation would help more women like Hirut have safe, healthy birth experiences.

Strong political leadership, proven interventions, scaling up existing efforts and adding innovative funding mechanisms would allow more women around the world to have prenatal and postnatal care for themselves and their babies and ensure high-quality care during labor and delivery.



⁶⁵ *Acting on the Call: Ending Preventable Child and Maternal Deaths Report*, US-AID, (June 2014): 84, <https://www.usaid.gov/what-we-do/global-health/acting-call-ending-preventable-child-and-maternal-deaths-report>.



54 Rima (left), a Save the Children community health volunteer, on a check-up visit with Chotti, who recently gave birth to baby Naveen.

Photography credit: CJ Clarke Date: 2015.

Learning About Motherhood in an Indian Slum

Same Hospital, New Story

Year: 2015

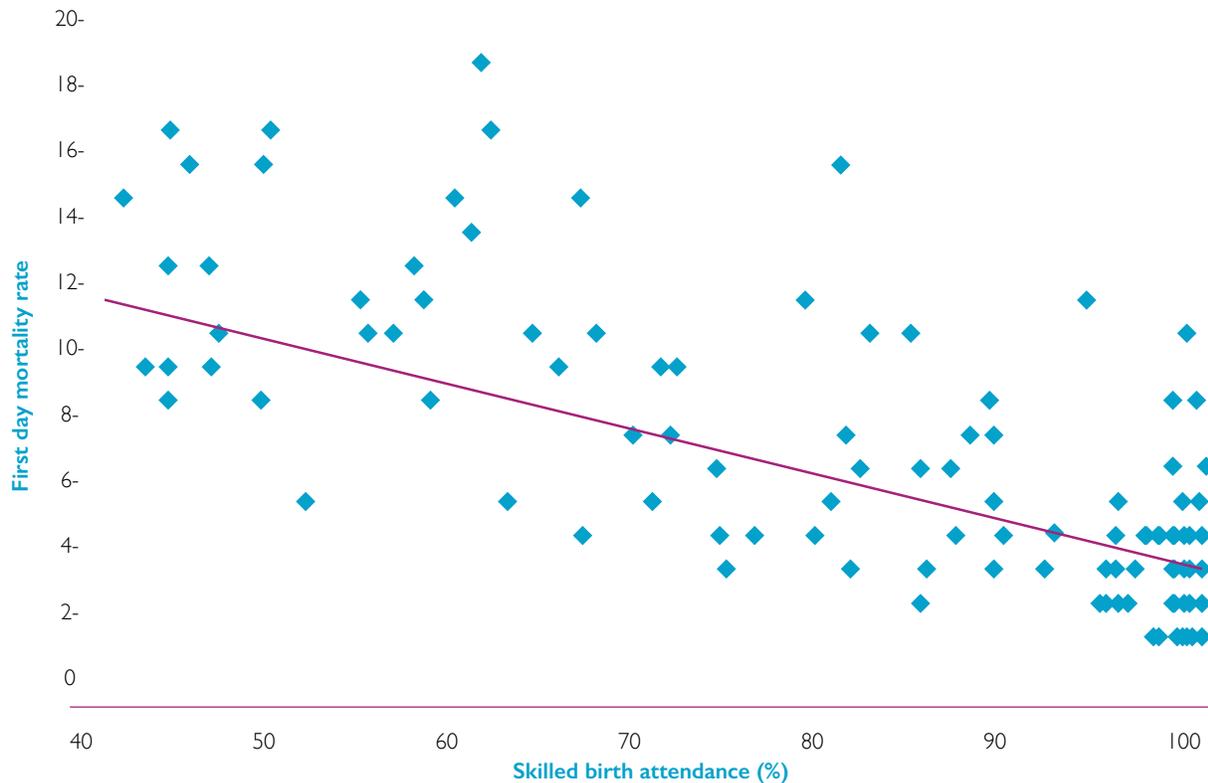
Location: India

Chotti lost three babies shortly after they were born. She didn't have prenatal care and she gave birth at home without a skilled attendant. "I didn't know... I didn't get check-ups, nothing," she said. "All three children were born and then they died."

In the slums of Delhi, India, her story is sadly commonplace. Among the poorest 20 percent of women in this city, only 27 percent receive recommended prenatal care and only 19 percent have a skilled attendant at birth. In a city where the affluent enjoy a very high standard of living, statistics like these make Delhi one of the most unequal cities in the developing world.

When Chotti became pregnant a fourth time, her neighbors told her to go see Rima, a Save the Children community health volunteer in the VP Singh Camp where both women live. Rima became like a wise older sister to Chotti, coaching her on when and where to go for prenatal check-ups, how to have better nutrition and know how to identify danger signs. Rima accompanied Chotti to the hospital and helped her register so she could have her birth there.

FIGURE 10 RELATIONSHIP BETWEEN FIRST-DAY MORTALITY AND SKILLED BIRTH ATTENDANCE BY COUNTRY



Sources: Data on first-day deaths updates from *State of the World's Mothers*, updated for 2012, from forthcoming Lancet Global Health publication; skilled birth attendance data from WHO Global Health Observatory, for 2005-2012

“In the hospital, the baby was born properly,” Chotti said. “I liked it there. The people helped me. They made me lie down and after that the baby was born and everything was fine. If I had gone to the hospital before, my other children would have survived.”

Rima visits Chotti at home now and helps her care for her new baby boy, whom she named Naveen. Rima advises Chotti about breastfeeding, cleanliness and vaccinations. Chotti has been following Rima’s advice and Naveen is doing well.

“I used to feel sad earlier,” Chotti said, “but now my baby is fine. My heart is happy.”

The more mothers who have access to a skilled community health worker like Rima, the more healthy moms and babies the world will have. Data from Save the Children’s Ending Newborn Deaths report shows a clear correlation between newborn survival and the presence of a skilled birth attendant:⁶⁶

The bipartisan **Reach Every Mother and Child Act of 2015 (S.1911)** has been introduced by Senators Susan Collins (R-ME) and Chris Coons (D-DE) in the U.S. Senate. Parallel, bipartisan companion legislation is in progress in the House of Representatives. This legislation would help more women like Chotti have safe, healthy birth experiences.

Scaling up funding for traditional partnerships and investing in innovative funding mechanisms, as called for in the legislation, would allow more women around the world to have the kinds of interventions that were critical for Chotti, including capable health professionals to counsel them through pregnancy, birth and post-delivery care.

66 *Ending Newborn Deaths*, Save the Children, (2014): 13, <http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/ENDING-NEWBORN-DEATHS.PDF>.



Polling: Where Americans Stand on Early Childhood Education & Maternal, Newborn and Child Survival

Question	Pre-Test	Post-Control	Post Treatment	Tri-Co
ILLINOIS CONGRESSIONAL DISTRICT 18				
<i>Religious markers, top 30% turnout</i>				
Voter Turnout - Yes	-	97	95	-2
Information Flow - Yes	11	18	25	7
Congressional Ballot - Schock	72	72	72	0
MNCS Effect on Candidate - Important	33	25	27	2
MNCS Investment - Support	39	42	43	1

SCAN's 2014 qualitative and quantitative research⁶⁷ revealed important guidance on message and targeting voters for future electoral programs. Post-program polling showed statistically significant evidence that voter contact programs focused on early childhood education (ECE) and maternal, newborn and child survival (MNCS) can be used effectively to boost support of a candidate, diminish support of an opponent and move voters in regard to ballot measure language.

Maternal, Newborn and Child Survival (MNCS) Messaging & Targeting

MNCS communications shaped vote choice for religious women. The focus groups exposed gaps in understanding foreign aid generally. In IL-18 and CA-07, SCAN conducted mail programs to educate voters on MNCS and highlight candidates' positions on the issue. Post-program polling showed that it is possible to educate voters and move them to support MNCS funding. In IL-18, SCAN was able to increase the information flow on MNCS 7 points overall and influence vote choice by 2 points. Religious women had the most movement. The chart below shows the movement in issue salience pre- and post-program between the

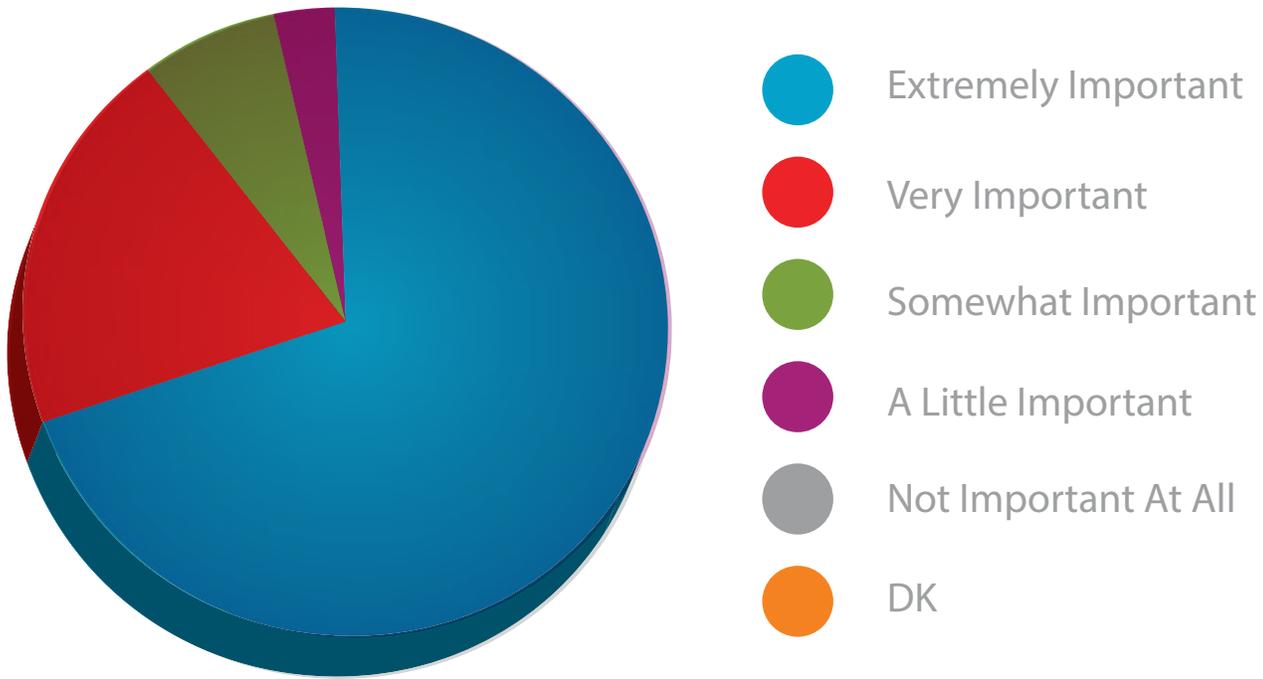
treatment and control groups. The highlighted cells show statistically significant movement: information flow and shift in candidate support are two critical measurements.

MNCS communications should focus on educating voters to create a constituency that takes MNCS into account in vote choice. The focus group data can help direct that effort.

Religious voters are the most likely to support SCAN's message on MNCS. However, they are also the least likely to support government intervention. For conservative and Evangelical voters, it is important to highlight that government-funded programs are as – or more – effective than church missions or charities.

⁶⁷The research program included: 10 focus groups across five different metropolitan areas, one national survey of 800 registered voters, pre-test surveys in each of the 10 districts, and another round of post-election surveys in the same district

How important are years 0-5 in the learning, growth and development of children?



58

Participants questioned the moral integrity of hypothetical candidates who aimed to cut MNCS programming, but messages need to show clear-cut connections between a candidate's policy stance and MNCS outcomes. Messages that play to voters' underlying moral narratives and reveal direct, immediate threats to MNCS funding are the best bets to build political momentum.

Early Childhood Education (ECE)

Messaging & Targeting

ECE resonates with voters' personal experiences. A national survey of likely voters showed 95 percent of likely voters think early childhood education is critical to children's success, with 70 percent of respondents saying they supported government-funded education programs. An astonishing 100 percent of independent voters see ECE as critical to success, with 62 percent of independents supporting increased spending for ECE.

In both candidate races and on the Seattle ballot proposition, SCAN's ECE messaging increased information flow and contributed to vote choice. ECE communications can and should continue to focus on shifting attitudes through candidate support and ballot initiatives.

Both the national survey and post-program qualitative data showed that swing voters can be persuaded to take ECE into account on Election Day. ECE resonates with personal experience – that is particularly true among swing voters who are mothers. Swing mothers show intense concern about ECE, but require focused and highly persuasive messaging to break down emotionally and experientially driven beliefs about ECE.

In candidate races, SCAN was able to increase information flow on ECE across the board between five and eight points. The chart below shows the movement on ECE pre- and post-program between a control group and the treated cohorts in local South Carolina races. The orange cells show movement that was statistically significant.

Question	Pre-Test	Post-Control	Post Treatment	
SOUTH CAROLINA SUPERINTENDENT - CD 01 & CD 05				
<i>34-50 year old Women with children OR African Americans with religious markers, top 70% turnout</i>				Tr-Co
Voter Turnout - Yes	-	80	82	2
Information Flow - Yes	23	37	45	8
Superintendent Ballot - Spearman	37	44	46	2
ECE Effect on Candidate - Important	70	54	61	7
ECE Investment - Support	66	67	66	-1

In Iowa, older women moved 5 points in ranking ECE was “extremely or very important” to them. SCAN was also able to drive down support of an oppositional candidate by 4 points overall.

Liberal geographies, women and older people had statistically significant movement on the issue. There are existing pockets of support in liberal areas and particularly among mothers. These voters are aware of the benefits of ECE but should be exposed to messaging that moves the issue to the top of mind to be considered in vote choice.

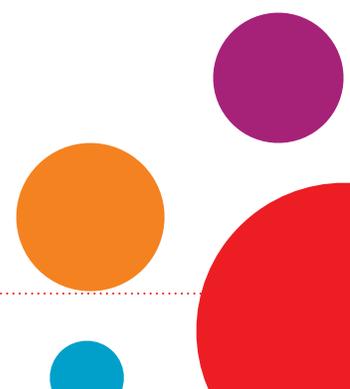
On Seattle’s Prop 1B, men moved an astounding 11 points on ECE support to “extremely important” after SCAN’s treatment. Additionally, voters who were 65+ moved 8 points in support of Proposition 1B.

In conservative areas and among men, the strongest message to move skeptical voters away from describing ECE as welfare is a science-based argument that highlights societal and economic benefits, such as, “By age 5, a child’s brain is already 90 percent developed, yet two out of five American children are not enrolled in preschool.” The issue of cost should be addressed by discussing optimizing existing resources rather than an argument for raising taxes.

Across the board, it is helpful to emphasize parental involvement and empowerment. It is unhelpful to discuss income inequality, poverty and academic achievement.



SCAN has begun battleground polling in Florida, Wisconsin, Virginia, Ohio and Colorado and the results are promising. **An astonishing 63 percent** of voters believe that public education should start at age 4 and be offered to all children, including two-thirds of voters in Florida and Wisconsin, **62 percent of voters in Virginia and 61 percent of voters in Ohio and Colorado.** There is *near unanimity that early childhood education is important: 90 percent of voters believe 0-5 years are extremely or very important.* These are initial results and SCAN will continue to provide more data over the course of the campaign.





SAVE THE CHILDREN ACTION NETWORK STRATEGIC PLAN

June 2015 – November 2016

Save the Children Action Network (SCAN) was founded in 2014 with the express goal of changing the political equation on children's issues in the United States. We have chosen two issues to focus on: early childhood development here at home and maternal newborn child survival globally. Our mission is to achieve success at the local, state and federal levels for new policy and funding solutions and to hold elected officials accountable for their support or opposition to these goals. SCAN has recruited a team of top-notch political professionals with areas of expertise in political action, mobilization, communications and government relations. Together, they provide the foundation necessary to achieve these strategic goals. Our goals for the 2016 election cycle are summarized below and are highly focused on the Presidential election of 2016. SCAN's expected budget for these activities is \$6.1 million.

Political Action

In 2014, SCAN began building its campaign expertise and capacity by experimenting with ideas and strategies to produce "proof points" of voter engagement on early childhood education (ECE) and maternal, newborn and child survival. SCAN invested more than \$1.2 million in 10 federal, state and local elections across five states in 2014. In California, Illinois, Iowa and South Carolina, SCAN worked closely with partners on the ground to identify and support candidates who have stood up for investments in ECE and MNCS. In Washington, SCAN supported Seattle's Proposition 1B, a successful ballot initiative that will expand preschool for the city's four-year-olds.

Overall, SCAN's 2014 qualitative and quantitative research⁶⁸ revealed important guidance on message and targeting voters for future electoral programs. Post-program polling showed that SCAN is capable of running effective programs that boost support of a candidate, diminish support of an opponent and move voters in regard to ballot measure language.

This data-driven experiment yielded important results that are driving the strategy for the 2016 election cycle. Focusing on early primary and battleground states – NH, IA, SC, FL, WI, VA, CO and OH – SCAN is conducting a new round of polling to help presidential candidates understand how voters in key states are engaged on ECE and MNCS this cycle, and initial results from the battleground states are promising.⁶⁹

- >> 90 percent of likely voters believe early childhood education is important;
- >> 69 percent of parents and 67 percent of those who are single believe public education should start with preschool;
- >> 59 percent would be more likely to support a candidate for President who is in favor of increasing ECE spending;
- >> 28 percent of likely voters would actively campaign for a candidate because they support providing more access to and improving the quality of early childhood education programs; and
- >> 53 percent would be more likely to support a candidate for President who committed America to cutting in half the number of preventable childhood deaths by the end of his or her first term.

In New Hampshire, SCAN is already sponsoring the influential WMUR-TV "Conversation with the Candidate" series to talk with candidates on the record about ECE. At the time of publishing, SCAN had sponsored discussions with 19 of the 2016 presidential candidates.

⁶⁸ The research program included: 10 focus groups across five different metropolitan areas, one national survey of 800 registered voters, pre-test surveys in each of the 10 districts, and another round of post-election surveys in the same district.

⁶⁹ TargetPoint & Greenberg Quinlan Rosner Research, SCAN battleground polling, (20-25 July 2015).

SCAN is also engaging with candidates directly along the campaign trail and will be present and visible in both primary and battleground states, using a variety of strategic initiatives including media, polling, visibility and voter persuasion throughout the cycle. Additionally, SCAN will be working with party platform committees to incorporate both early childhood education and maternal, newborn and child survival into the party platforms.

To raise the profile of these critical issues, SCAN is launching a **High 5 for Kids** campaign in Iowa, New Hampshire and South Carolina. We are asking all presidential candidates what they would do if they were elected to expand access to early childhood education in the United States and to help end preventable maternal and child deaths around the world. The campaign is a sophisticated, multi-faceted endeavor, with broadcast, cable, radio and digital advertising being supplemented by targeted direct mail in all three states.

We are raising our hands for kids by having our supporters ask tough questions of the candidates. We want to ensure that the issues critical to children's lives and futures are given top priority by our elected leaders and that those leaders are held accountable. Through the "High 5 for Kids" campaign, SCAN will ensure that promises made are promises kept.

Mobilization

Through the "High 5 for Kids" campaign, SCAN will work to mobilize voters and continue to build and grow a robust, online network of engaged activists around the country. The campaign will kick off with outreach to supporters through all digital channels, asking them to submit and vote on questions to ask presidential candidates about ECE and MNCS.

Under the "High 5 for Kids" umbrella, SCAN will continue to develop engaged leaders across the country, with a specific focus in Iowa, New Hampshire and South Carolina.

Over the course of the presidential election, SCAN aims to engage over 5,000 new supporters, 400 new activists and 175 new leaders in Iowa and New Hampshire. In South Carolina, SCAN will continue to engage members of the faith communities on MNCS through one-on-one meetings with activists and leaders, petitions and house parties.

National lead activist calls each month will allow activists to hear from national leaders about the issues and the campaigns, but also learn from each other and strategize about expanding the visibility for the "High 5 for Kids" campaign.

As activist leads continue to develop, SCAN is implementing a training program to support their growth and connect lead activists nationally as part of a unified movement.

This fall, SCAN will launch a youth engagement program for high school and college students that are located within SCAN states, select several legislative target states and additional states that will be added on a strategic basis. The Student Ambassador Program will enable SCAN to train and mobilize articulate and passionate youth on the issues of MNCS and ECE. There will be an over-arching, national strategy that will allow students to feel connected to a broader movement while also supporting SCAN's local efforts through providing students with a specific menu of activities and events they can participate/lead in their individual states.

SCAN's 2016 Advocacy Summit will also have a training component to prepare our student ambassadors and community leaders to help be our boots on the ground through the general election in November. In addition, we will hold on-the-ground trainings in two battleground states to expand our footprint on reaching voters and engaging candidates on the importance of expanding access to high-quality early education.

SCAN also plans to engage voters, media and candidates through visibility at the general election Presidential debates in 2016. This may include watch parties followed by letters to the editor and online engagement with the candidates around our two issues.

At both of the Democratic and Republican nominating conventions, SCAN will host an interactive installation that will provide an opportunity for delegates, media, elected officials and other attendees to learn hands-on about the importance of early education and the lifesaving interventions for saving lives of moms and babies. This installation will serve as headquarters for our operation at both conventions, where we will reach state delegations during their breakfast briefings; hold meet and greets at the installation with our artist ambassadors, who will be able to discuss these issues firsthand; and engage attendees through visibility throughout the convention.

Communications

SCAN's communications team is working at the national and state levels to raise voter awareness about ECE and MNCS through both traditional and new media channels. SCAN is building relationships with print, TV and radio reporters in primary and battleground states and is working with influential opinion leaders – from columnists to bloggers – to help shape the conversation around ECE and MNCS. Grassroots activists are also preparing robust letter to the editor campaigns in Iowa, New Hampshire and South Carolina.

In addition to sponsoring WMUR-TV's "Conversation with the Candidate" series in New Hampshire, SCAN is looking to buy additional TV ads in target states. SCAN will also press all media outlets hosting candidate debates to make sure candidates are asked questions on both ECE and MNCS.

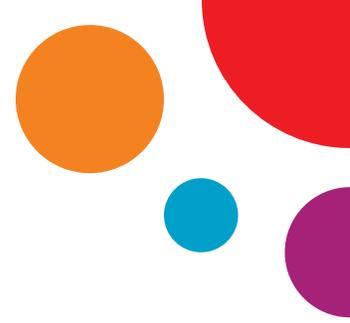
SCAN has been successful with an aggressive op-ed strategy, drafting columns for local leaders, supporters and

volunteers to place in newspapers in our target states. SCAN has already started the conversation about ECE and MNCS online and is engaging with voters on a variety of social media platforms, including Facebook (SaveTheChildrenActionNetwork), Twitter (@SCActionNetwork) and Instagram (@savethechildrenactionnetwork), using the hashtags #InvestInKids and #SaveMomsandKids. SCAN has grown its Twitter following by 70 percent since January 1, 2015, and likes on Facebook increased by 15 percent. SCAN has had success with recent Twitter storms and with intense tweeting about one topic with others engaged in that topic. Recently, SCAN engaged in a Twitter storm during an event in Iowa with noted Harvard Professor Robert Putnam, which generated numerous new followers.

Through op-eds, editorial boards, letters to the editor and social media campaigns, SCAN is helping voters connect on a personal level with federal initiatives such as the Reach Act and engage on more complicated issues of tax reform and social impact bonds that would allow for expanded ECE access.

Government Relations

At the federal level, SCAN is focused on working with policymakers on Capitol Hill to find innovative ways to fund early childhood programs using the tools presented in its **Innovative Financing for Early Childhood Education white paper**. From working with lawmakers to include early childhood education and pay-for-success provisions in the House and the Senate versions of the Elementary and Secondary Education Act (ESEA) reauthorization legislation, to meeting with Democrats and Republicans on the Finance and Ways and Means Committees to encourage them to introduce the different pieces of the toolbox as part of the next round of the tax reform debate, SCAN is committed to partnering with members of Congress to expand access to early childhood education.



SCAN is also working with policymakers to introduce transformative legislation to accelerate action to end preventable maternal, newborn and children's deaths by 2030. This year, SCAN convened representatives from over 20 nonprofit and faith-based organizations to draft bold legislation to dramatically reduce preventable maternal, newborn and child deaths with the ultimate goal of ending them by 2030. The result is the bipartisan **Reach Every Mother and Child Act of 2015 (S. 1911)** introduced by Senators Susan Collins (R-ME) and Chris Coons (D-DE).

Additionally, SCAN is working with the relevant agencies in the U.S. government to achieve important targets for maternal, newborn and children's health, including support for USAID's public launch of its bilateral Financing Framework to End Preventable Child and Maternal Deaths (EPCMD), which includes innovative financing mechanisms.

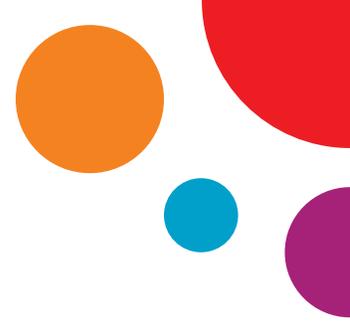
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At the state level, SCAN is working with legislators to introduce legislation on innovative financing tools to fund early childhood education programs, including pay-for-success financing bills for early childhood education in Iowa, New Hampshire and South Carolina and a ballot measure to expand access to early education programming in King County, Washington State.



ACTION ACROSS THE NATION

	IA	NH	SC	IL	WA
Support for state legislation on ECE financing and program expansion					
Grassroots action on ECE in ESEA (nationally)					
Grassroots action on the Social Partnership Act (nationally)					
Grassroots action on MNCS legislation					
Radio interviews highlighting ECE & MNCS					
Placing questions to the candidates at public forums					
Paid media and direct mail campaign that raises the issues of ECE & MNCS					
Op-eds in key newspapers on ECE & MNCS					



	IA	NH	SC	IL	WA
Activists at campaign events with “High 5 for Kids” hands					
Media engagement on ECE during primary					
Activist engagement with caucus-goers and primary voters on ECE					
Paid canvassers					
Letters to the editor					
Key blogger engagement					



	CO	FL	OH	VA	WI
Battleground polling					
Letters to the editor					
Op-eds					





APPENDIX
Candidate Engagement

1. Provide Advice on Policy

SCAN is available to consult with the campaign on specific policy recommendations as well as how best to incorporate ECE and/or MNCS into their platform and priorities.

2. Draft Position Papers

SCAN will work with the campaign to create original documents that reflect the candidate's personal message on ECE and/or MNCS.

3. Draft Speeches

70 Original talking points and speech materials on ECE and/or MNCS will be provided by SCAN to the campaign upon request.

4. Draft Language for Party Platform

SCAN will provide language for incorporating ECE and/or MNCS into the party platform.

5. Hold Briefings for Party Platform Committees

SCAN is available to deliver briefings to the appropriate members of the party platform committees on ECE and/or MNCS.

6. Recommend Voter Engagement Events/Sites

SCAN will provide the tools for creating an event around ECE or MNCS and also assist in evaluating events and sites where the candidate's words on ECE and/or MNCS would be most impactful.

7. Provide Opportunities to Meet SCAN Celebrities and Grasstops Supporters

Candidates will have the opportunity to meet with high-profile Save the Children leaders and supporters, boosting their visibility among voters who are engaged on the issues of ECE and/or MNCS.

8. Support through Traditional Media

SCAN is available to provide prep materials and talking points for traditional media interviews and engagements as well as sample press releases.

9. Support through Social Media

SCAN will provide tweets and posts on these issues and can also assist in coordinating a Twitter Town Hall or Google Hang Out to connect the campaign with voters who care about ECE and/or MNCS in real time.







2000 L Street NW, Suite 500
Washington, DC 20036 | 202.640.6600
SavetheChildrenActionNetwork.org

