Terefa* was 13 when her labor pains started. Poor and living in a rural African village, she had no access to medical care. When the contractions became more violent and painful, her mother, mother-in-law and traditional birth attendant were called.

Slipping in and out of consciousness, the girl was exhausted from labor. Her pelvis was too small to handle the delivery and the baby could not come out. The village elders finally decided that Terefa needed to get to a hospital. But that was miles away and she had no money.

Collecting whatever cash they could, the villagers found a cart to carry Terefa to the road and then pay a driver to take her to the hospital. But she had waited too long. Her baby was dead. She needed a Caesarean section to remove her dead child.

After that operation, Terefa returned to her village devastated at the loss of her child. But her nightmare was just beginning. Urine and feces were dripping down her legs. At first she thought the leaking would go away. But it didn’t. Her eyes downcast, she was ashamed that she constantly smelled. Not able to withstand the stench, her husband eventually took another wife. Her village shunned her.

Today, Terefa is 14. She and her mother live in a hut with a dirt floor at the edge of the village. The two women beg for food to survive. Each day Terefa’s health becomes less certain and no one knows how much longer she will live.
As little as six years ago, the world would not have known about Terefa or even heard about obstetric fistula. The condition occurs as a result of several days of obstructed labor without timely medical intervention, usually a Caesarean section. The constant pressure of the baby's head in the birth canal causes a fistula (hole) to form between the bladder and the vagina, and/or between the rectum and the vagina. The baby usually dies, and the mother is left with urine and waste leaking from her body. She soaks clothes and mattresses, burns incense to hide the smell and is often divorced, isolated and abandoned.

Unless a woman has access to a hospital to receive fistula repair surgery—which in the Western world is a paltry sum of $300-$450 but is a lifetime of savings to an impoverished woman—she lives with the injury until she dies.

“Most of us take for granted that we will have a doctor or midwife by our side if something goes wrong during childbirth,” says Kate Ramsey, technical specialist with the Global Campaign to End Fistula <www.endfistula.org> of the New York City-based United Nations Population Fund (UNFPA). “We don't realize there are so many women who don't have this access to care. If you're in a remote village you don't have money to call a taxi and may have a man carrying you on a stretcher for two days to get to a hospital. It's a real tragedy that a woman has to give her own life in the process of trying to give new life.”

The stories are heart-wrenching. One African woman pushed out only her baby's head before collapsing from exhaustion in her hut. Her brother balanced her on a donkey to a nearby road, where a bus driver demanded 10 times the usual fare to get to the hospital. Her dead baby's head hung between her legs, as the woman half-sat, half-stood through the trip, her urethra ripped open.

Hidden women, hidden suffering

Until the beginning of this century many women around the world had obstetric fistula. The first fistula hospital built especially for women with this injury was in New York City, where thousands of women were cured in the late 1800s. As medical advances improved, obstetric fistula disappeared from wealthier nations.

Today, obstetric fistula affects an estimated two million women, primarily in South Asia and sub-Saharan Africa, with 50,000 to 100,000 new women suffering with the injury each year. But no one really knows the numbers. Most women never get to clinics and the last study conducted by the World Health Organization (WHO) was 16 years ago. Figures could be as high as 800,000 in Nigeria alone, and more than 70,000 in Bangladesh.

Obstetric fistula has remained hidden, the experts say, because women and girls in developing nations are hidden, the poorest of the poor, and without a voice. “Their experiences of life are hidden from view overall and then once they have fistula, they are even more isolated,” says Maggie Bangser, director of The Women’s Dignity Project (WDP) of Tanzania, working to prevent and manage obstetric fistula <www.womensdignity.org>.

The root causes for the condition are interlinked, says Bangser and other advocates. Poverty, malnutrition, poor health services, early marriage and gender discrimination all contribute to women suffering with obstetric fistula. Poverty reduces a woman's chances of receiving timely obstetric care and her low status in communities denies her the power of when to start bearing children. Many marry young, when their pelvises are too small, which contributes to obstructed labor.

A Brighter Future continued on page 14

What Governments Are Doing

In 2003 the UNFPA (the United Nations Population Fund) based in New York City launched its global Campaign to End Fistula <www.endfistula.org> with only 12 countries. Today, the campaign is working with almost 40 countries, receiving funding from government donors such as Sweden, Finland, Australia and Luxembourg, among other nations.

To date, the campaign has raised $15 million from a variety of public and private donors. “What's really amazing for us is that we've received more than $1 million from individuals all over the world. That's really remarkable for us as a UN agency, because individuals haven't been a major part of our donor base,” says Kate Ramsey, technical specialist with the campaign.

Throughout the Bush Administration, however, $34 million in funding has been withheld annually from the UNFPA based on allegations that the fund supports coerced abortions in China. Several fact-finding teams, including one sent by the U.S. State Department, could find no evidence to back up these claims.

“The UNFPA is saddened by this decision and hopes the U.S. will one day rejoin the community of nations that support UNFPA's work of saving women's lives around the world,” Ramsey says. “I'm happy to say we receive contributions from as many as 172 countries, including every nation in sub-Saharan Africa.”

U.S. Rep. Carolyn Maloney (NY-14) has been leading a Congressional effort to resume UNFPA contributions, specifically to the campaign. But as of September 2006, money appropriated by the Congress was withheld for the fifth consecutive year. —M.Z.
A Brighter Life continued from page 13

Clara, California, the funding source for the Addis Ababa Fistula Hospital in Ethiopia. “The stories are horrendous. Women spend years trying to get to the capital city, begging from bus stop to bus stop,” she says.

Other women save money for years so they can pay for transport and medical treatment for fistula repair. “I’m in awe of the resilience of these women,” says Ramsey. “Even after all the suffering they’ve been through they will do anything to get treatment. A woman I met sold her only pair of earrings, her only asset, to pay for the bus to go for treatment.”

Bangser agrees. While the shame and stigma for these women can be powerful, so is their strength. “Despite the tremendous stigma, these women continue to work and care for their families and themselves. They manage the significant responsibilities that poor women typically shoulder, such as finding water, hauling firewood, cooking and caring for children,” she says.

The sad reality is that too many women live too long with fistula before they are ever able to access care, Bangser adds. “I believe that if advocacy on fistula is done and expectations for repair are inevitably raised, then there is a moral imperative to ensure that treatment is available regardless of a woman’s ability to pay.”

I inadequate healthcare

When women can get to a health-care facility, they face even more obstacles. In 2003, EngenderHealth, a reproductive health group working in more than 80 countries, partnered with the UNFPA to conduct a needs assessment in nine African countries. That study found hospitals poorly equipped and lacking trained physicians in fistula surgery. In Uganda, one visiting doctor worked day and night, but could only operate on 20 of the 200 women who came for treatment.

“When a woman with fistula finally gets to a hospital, the equipment is not there or the providers have not been trained to look after the woman for fistula surgery,” says Dr. Joseph Ruminjo, senior clinical manager with EngenderHealth <www.engender-health.org>, based in New York City. The Kenyan surgeon has witnessed situations where needed supplies were not available.

“A woman may come in labor, but you don’t have the materials, some of the things we take for granted in the U.S. and other countries,” he says. “Sometimes you don’t even have suture materials.”

For those fortunate women who do have fistula surgery, the success rate is 90 percent, says Dr. Ruminjo. “It’s one of the few procedures that can really turn a woman’s life completely around. These women with fistula are strong. They don’t look at themselves as victims. They’re survivors, even though they’ve been ostracized and discriminated against because they smell and are constantly leaking. But once the fistula is repaired, especially if repaired early, they regain self-esteem and self-worth.”

Global partnerships to end fistula

In an effort to prevent and treat the condition worldwide, the UNFPA and partners launched the global Campaign to End Fistula in 2003 with the goal of making obstetric fistula as rare in developing countries as it is in the industrialized world. The target date for fistula elimination is 2015, in line with the Millennium Development Goals target to improve maternal health.

Working in almost 40 countries in Africa, Asia and the Arab region, the campaign focuses on prevention, treatment and rehabilitation. Its partners include governments, health-care providers and organizations, such as EngenderHealth, One by One and the Women’s Dignity Project, among others.

In the last three years the campaign

During prolonged labor, the soft tissues of the pelvis are compressed between the descending baby’s head and the mother’s pelvic bone, as shown in this diagram. The lack of blood flow causes tissue to die, creating a hole between the mother’s vagina and bladder (known as a vesicovaginal fistula), or between the vagina and rectum (causing a rectovaginal fistula) or both. The result is a leaking of urine or feces or both. Source: UNFPA
A hospital ahead of its time

Before fistula became a concern on the international scene, Dr. Catherine Hamlin, now in her 80s, and her late husband, both Australian gynecologists, were treating women with fistula at the Addis Ababa Fistula Hospital in Ethiopia, which they founded in 1974. Since then, 25,000 women have had fistula repair, with the hospital treating 1,200 women each year—free of charge.

Dr. Hamlin, who was nominated for a Nobel Peace Prize, appeared on the Oprah Winfrey Show in January 2004, bringing more global attention to fistula. Providing fistula repair, prevention and education for women, the main hospital is also a training ground for surgeons. In addition, five mini-clinics in remote areas of Ethiopia are being built so women don’t have to travel days to receive care.

After fistula surgery, women also need psychosocial support. About 90 percent of the women who arrive at Addis Ababa Hospital are clinically depressed, says Grant of the Fistula Foundation. “A woman who has been ostracized starts to see herself as a modern-day leper and is going to have emotional and psychological needs that must be met as well.”

"Fistula is so preventable. I just hate to think what these women's lives would be like without this surgery," says Dr. Gloria Esegbuna, seen here on the grounds of the Babbar Ruga Fistula Hospital in Nigeria. Esegbuna, a British national of Nigerian descent, served as a volunteer doctor during the "Fistula Fortnight," a two-week pilot initiative spearheaded by UNFPA in collaboration with the government of Nigeria.

Credit: Richard Stanley/On behalf of UNFPA

Taking Action: How Clubs Can Help

• Obstetric fistula affects more than two million women and girls each year. Lacking the education, healthcare and financial resources to obtain the care they need to repair this condition, sufferers are condemned to lives filled with shame and stigma. Clubs can help by raising awareness about fistula, and how easily and inexpensively it can be cured.

• Clubs can also join the fight to end fistula by supporting the following organizations:

  • United Nations Population Fund (UNFPA) <www.endfistula.org>, an international development agency that promotes the right of every woman, man and child to enjoy life, health and equal opportunity, started the global Campaign to End Fistula with the goal of making obstetric fistula as rare in developing countries as it is in the industrialized world.

  • The Women's Dignity Project (WDP) <www.womensdignity.org>, based in Dar es Salaam, Tanzania, works to stop and control obstetric fistula, improve the dignity and rights of women living with the condition, and promote gender and health equity.

  • The Fistula Foundation <www.fistulafoundation.org>, founded in 1974 by Australian obstetrician-gynecologist, Dr. Catherine Hamlin, and her late husband, is dedicated to the treatment and prevention of obstetric fistula through support of the Hamlin Fistula Hospital in Ethiopia.

  • Engender Health <www.engenderhealth.org>, an international nonprofit organization, provides health care services for women worldwide. For over 60 years, Engender Health has helped women in countries across Asia, Africa, and the Americas.

  • One by One <www.fightfistula.org>, an organization that works to contribute to the elimination of obstetric fistula worldwide by engaging the public and providing financial support to those who treat and prevent fistula in the developing world. ©
Offering this support, the hospital also provides literacy training to the women, most of whom can’t read or write. As they are recuperating from surgery, they are provided with portable audio players. “This gives them instruction on safe motherhood and what they need to do to be ambassadors for safe motherhood in their villages,” Grant states. “We try to use each of these women as a locus of information when they go back.”

Helping women one by one
Heidi Breeze-Harris was three months pregnant and at home sick one day when she happened to catch Dr. Catherine Hamlin on the Oprah Winfrey Show. Like most viewers, she had not heard of this childbearing injury, and was profoundly moved. “I thought, ‘This is crazy to have a woman walking around with no life and to have a surgery be that inexpensive, relatively speaking.’ It woke something up in me that enough is enough,” she said. “Women and girls are getting the short end of the stick and I’m either going to complain and drive people crazy or get into action.”

Get into action she did, and with Katya Matanovic, she founded One by One <www.fight-fistula.org> based in Seattle, Washington, “harnessing the ‘smaller’ and otherwise disparate energies of those who want to help but don’t know how.”

Ironically, Breeze-Harris herself had an obstructed labor with her son, a dramatic delivery resulting in a C-section and a second surgery for massive internal bleeding. Both mother and child are well now, but that experience helped her better understand the anguish of women with obstetric fistula and made the cause even closer to her heart.

“I can’t imagine, number one, if I had lost the baby. Second, I can’t imagine everyone telling you it’s your fault and all the other shameful things that go along with this,” says Breeze-Harris. “And then, to have this injury, this fistula, which is so debilitating, you’re not able to work and to have people push you aside. And to think that women are in labor like this in rural places with little assistance and even if they can get help, it’s two days away. I couldn’t imagine the physical and psychological pain they were in.”

Too many dying in childbirth
While organizations are doing what they can to help, many advocates see fistula as a barometer for maternal health worldwide. Sadly, there has been no change in maternal mortality ratios in 19 years, says Ramsey. Each year, 529,000 women still die in childbirth, according to WHO. “We

Sabeth Nthenya, 53, developed fistula during her sixth pregnancy, more than 25 years ago. Separated from her husband, she had no money to pay for treatment. Years later, a neighbor informed her of free treatment at Kenya’s Machakos District Hospital, where she received help. With UNFPA support, Kenya’s Ministry of Health is working to integrate obstetric fistula into ongoing safe motherhood programs. Credit: © Sven Torfinn/ Panos Pictures/ On behalf of UNFPA
see fistula as important in its own right, but people need to understand there are so many women suffering because they don’t get good maternal health care,” she says.

Dr. Ruminjo agrees. It’s important, he says, to see how fistula fits into other issues of safe motherhood. “The end point is to have a woman in good mental, physical and emotional health and her baby in good health,” he says.

While many groups are working toward that end, more needs to happen say advocates, not only fundraising for fistula repairs, but understanding how fistula’s roots lie in basic political, economic and social inequities.

There also needs to be more awareness and information about reproductive health and obstetric fistula, the experts say, as well as organizing better transportation to health-care sites, providing hospital equipment and training surgeons, and offering support services to fistula survivors who have intense feelings of self-loathing and depression.

Meanwhile, millions of women like Terefa, are suffering and dying. Others are still waiting, like one Ethiopian woman who heard she could be treated free of charge at the Addis Ababa Hospital. She never knew her fistula could be repaired. Learning she could be mended, she cried, tears trickling down her cheeks. “I would be so happy to be with people again,” she said.

* Terefa’s story was condensed from a 2006 World Health Organization publication.

** Rehema’s story was condensed from Faces of Dignity, a publication of The Women’s Dignity Project.

Marielena Zuniga is an award-winning freelance writer based in Langhorne, Pennsylvania. She is a frequent contributor to Best for Women magazine.

In the next issue: Sexual violence against young women. Please email Editor Jessica Levinson <jessica@soroptimist.org> with relevant information.

Letter to the Editor

SI A received the following letter in response to “A Sick and Twisted Web,” the feature article on eating disorders that ran in the December/January/February 2007 magazine. Send letters to Editor Jessica Levinson at <jessica@soroptimist.org> or 1709 Spruce St., Philadelphia, PA 19103.

To the Editor:

As a Soroptimist and mother of an anorexic/bulimic/manic depressive daughter, I want to make a couple of observations.

While a mother’s obsession with weight can impact a child’s attitude, eating disorders are about control that is manifested in the one thing they can control—weight and body image. This is not about food specifically, but control in an otherwise unpredictable life or world for these children, primarily girls. The father’s need for control of a household and its members, as well as dysfunctional behavior and comments are equally destructive. Obsession and control, as a family culture, are destructive to all and particularly to a person with the traits that leave them vulnerable to disorders such as anorexia/bulimia.

Family therapy is part of healing that is essential to the improved health of an anorexic young person. The family members are often distraught (who wouldn’t be!), without understanding, and without real guidance or a handbook on how to create a healthier family for the ill person to return to after hospitalization or a residential treatment stay. If there are family dynamics that drive or worsen the disease, the family must seek care and understanding for themselves and each other.

While anorexia often affects girls of average or higher income families, it is an equal opportunity disease that damages all those around it. I hope fighting it and recognizing the beast that is an eating disorder, becomes a call to action for Soroptimist.

As a mom with the past experience, it is a crazy disease that is incomprehensible. Most of us fight to stay alive and not get hurt—these children live right on the edge of life and death, often adding cutting to the mix.

[My daughter] is doing quite well, but there is a demon that speaks to her in situations that are stress filled. We constantly dialogue about the disorder.

Thank you for printing the article and I hope to see more written and openly discussed about the disorder.

Sincerely,

Frances Frederick Cropp
SI/Healdsburg, California
Fundraising

The Value of Charitable Giving

This past December, the New York Times Magazine featured an article by noted philosopher and Princeton University professor Peter Singer. Singer is an expert on the moral issues surrounding charity and giving, and argues that people around the world are not giving enough to charitable causes. In order to illustrate his point, Singer examines the United Nations’ Millennium Development Goals (MDG), a 10-year plan for reducing poverty and mortality rates among women and children, and halting the HIV/AIDS epidemic. Currently, the MDGs are not being met, in large part due to lack of economic resources. The cost of meeting those goals in 2006 was $121 billion; the cost of meeting the goals in 2015, accounting for inflation, will be $189 billion.

Singer argues that if only the richest 10 percent of Americans donated one-third to one-tenth of their incomes, an overabundance of funds would be available—$404 billion a year. If the richest 10 percent of the world’s citizens contributed, Singer says, it would yield around $808 billion annually for development aid and charitable causes.

The reality, however, is that not all individuals value giving. While billionaires like Warren Buffet and Bill Gates have lead the way in philanthropic endeavors—Gates has given more than $30 billion and Buffet more than $36 billion—there are many more who do not believe that extreme wealth carries with it an imperative to support charitable organizations. In fact according to a 2002 article in American Demographics magazine, people who make the least amount of money contribute the greatest percentage of their incomes to charitable organizations. The article reported that Americans who made $25,000 or less donated on average 4.2 percent of their incomes, while those who made $100,000 or more gave an average of 2.7 percent of their earnings.

So why is it that many people with the least amount of money give the most? And why is it that people often repeatedly give to charities—that giving once is simply not enough? For some it’s a sense of moral obligation, and for others giving makes good business sense. But for many, charitable giving simply feels good.

In the past year, you’ve probably received dozens of appeals from charities. If you’re like most of us, you hold on to and respond to appeals that have missions you care about and toss the rest. You’ve probably received several fundraising appeals, feeling that they have given enough, and question why Soroptimist is asking—yet again—for financial support.

The answer is simple. We continue to ask because we believe strongly in the power of individuals and communities coming together to help women and girls build better lives.

We continue to ask because we believe strongly in the power of individuals and communities coming together to help women and girls build better lives. And we continue to ask because we know our programs and projects make a difference for women and girls—locally and throughout the world. Last year, nearly $2 million was awarded to club projects and individual women through Soroptimist programs. More than 5,300 women and girls were helped through our Soroptimist Club Grants for Women and Girls projects. More than 1,000 women have a chance for a better life thanks to Women’s Opportunity Awards. And thousands of women benefited from our disaster relief initiatives and recognition programs.

We appreciate your generous contributions, and call on you to raise the giving bar in your club and your community. By financially supporting Soroptimist programs you make a concrete investment in a better future for women and girls.

We cannot wait for the richest among us to financially support the meaningful work we do. We must—as women and Soroptimists—contribute what we can to make the world a better place for women and girls. The work you do in your club and the money you raise on behalf of Soroptimist programs are critical to improving the lives of women and girls. And we make to you this promise: When there are no more women who need help from Soroptimist, we will stop asking.

By Nancy Fusco, Senior Director of Development
Best Practices

Need ideas on how to increase awareness of Soroptimist in your community? Read what these clubs have done:

**S/Lodi Sunrise, California** (Sierra Pacific Region), received publicity on both its local radio and television stations. KWIN, a popular radio station in Stockton, California, played the club’s Women’s Opportunity Awards public service announcement five times a day during the first week of December 2006. The local cable television station also posted information about the Women’s Opportunity Awards program on its community bulletin board. As a result, the club received six requests for Women’s Opportunity Awards applications.

**S/Kasuga and S/Fukuoka, Japan** (Minami Region), collaborated on a project to increase awareness of sexual trafficking and victim support. The clubs printed and distributed 6,000 brochures and 1,000 posters in eight languages and held an international symposium and lecture in Fukuoka, which was replicated in other cities. The increased attention in the media and the creation of awareness in Japanese society were substantial. The clubs are also working with another NGO to promote shelters for trafficked victims.

**S/TriCities, British Columbia** (Western Canada Region), has had much publicity success. The club developed a strong relationship with TriCity News, a local newspaper with a circulation of more than 55,000, which provides the club with 2/3 of a page each month to share club news and events. The club also received approximately $7,000 in free advertising from the same paper for its annual Tuning Into Our Teens conference. In addition, after the club’s signature awards luncheon, an article ran in several papers, including the Vancouver Sun (with a daily readership of nearly 500,000), The TriCity News and The TriCity Now.

**S/Hanford, California** (Sierra Pacific Region), has undertaken several good strategies to generate coverage. The club always sends good pictures with its news releases; purchases ad space for special announcements; submits letters to the editor on various topics pertaining to women and girls; and invites newspaper staff to attend club events. As a result, the club has had numerous articles printed in its local newspaper including: the installation of officers in June 2006; news about a club project in August 2006; an announcement and search for Women’s Opportunity, Violet Richardson and Making a Difference for Women award candidates in November 2006; and news about the club’s annual fundraiser in December 2006.

A 12-page insert dedicated to Soroptimist ran in *The World*, a newspaper in the community serving **S/Coos Bay Area, Oregon** (Northwestern Region). The insert, which celebrated the club’s 65 years of service, highlighted several club projects, members and photos. It also provided background information about the organization, including the mission statement, the organizational profile and what the word “Soroptimist” means. In addition, numerous local businesses contributed congratulatory ads to the club for its many years of service to the community.

Along with other local organizations, **S/Fort Bragg, California** (Founder Region), co-hosted a public forum in the community called “Youth Website Exploration, Internet Predators and Human Trafficking.” The purpose of the forum was to educate young people and their parents on the risks of Internet use. Topics included sexual trafficking of women, and a case where a 13-year-old girl posted her picture on the Internet and began talking to an older man about sex. The presentation aired on NBC’s “Dateline,” a national news program. The Fort Bragg Soroptimists also provide DVDs of the forum to help increase awareness of this issue.

In honor of Breast Cancer Awareness month last October, **S/Dasmarinas-Salcedo** (Philippines), in cooperation with ETC and ETC Second Avenue (two Philippine cable television stations), launched two 30-second public service announcements about breast cancer, as well as another spot that featured Dr. Diana Cua, a breast surgeon at Makati Medical Center. The spots, which highlighted Soroptimist’s new logo and mission statement, aired during various programs of both television stations.

**S/Kent County, Maryland** (South Atlantic Region), received coverage in the Kent County News for its efforts to help a young girl recovering from a heart transplant. Club members participated in an “Evening of Serving for Sarah,” where they worked as volunteer waitresses at a local restaurant called the Sportsman’s Inn. The club donated all its tips to the 8-year-old girl, which will help pay for her medicine and travel for monthly hospital visits.

By Kamali Brooks
Public Relations Specialist

Email: kamali@soroptimist.org
PRofile: Developing a Club PR Plan

The best starting point for public relations planning is to review SIA’s mission statement and public awareness goals. The mission statement states who we are and what we do—business and professional women who improve the lives of women and girls. Our goals (from the Renaissance Campaign) show what we hope to accomplish, which primarily is to publicize the activities, programs and members of Soroptimist:

- **Goal 1:** Name recognition will increase 5%
- **Goal 2:** More than 50% of non-members who know the name will associate it with the mission
- **Goal 3:** More than 50% of clubs will give three or more presentations to outside groups annually
- **Goal 4:** More than 50% of clubs will place five or more press releases, ads or public service announcements locally each year

Since these goals were adopted, SIA has launched the Live Your Dream campaign, with the express outcome of increasing public awareness. Therefore, it is hoped that 100 percent of clubs will participate in the Live Your Dream campaign.

Both the mission statement and public awareness goals should provide the focus for each project clubs undertake throughout the year. If all clubs work toward the same goals, our mission will be successful.

SIA headquarters provides resources to help clubs plan their public awareness efforts for the year, as well as meet the public awareness goals of the Renaissance Campaign. Club public awareness chairs and committees should follow a timeline of planned publicity efforts so that opportunities for creating awareness do not slip away. A guide is available in the Library of the members-only site: Library>Public Awareness>Public Awareness Tools>2006-2007 Publicity Timeline.

**September**

Once clubs order and receive Women’s Opportunity and Violet Richardson applications from headquarters, as well as print Making a Difference for Women applications from the Library of the members-only site, they should get a jump on publicizing programs.

Publicize availability of Women's Opportunity Awards applications to local media, local colleges, domestic abuse shelters, vocational schools and organizations serving women. Clubs can also send a public service announcement about the Women's Opportunity Awards to their local radio and/or television stations. SIA’s new DVD also contains these PSAs.

Publicize Violet Richardson Award applications to local media, nearby schools and community organizations; and Making a Difference for Women Award applications to the local media. Clubs can also place a Making a Difference for Women ad in local newspapers to solicit applicants. The Library of the members-only site has sample materials to help clubs with each of these activities. See the sidebar on page 19 to learn where to find these resources.

**November**

Because the deadline to receive nominations is approaching in December, clubs should send news releases reminding women to submit applications for the Women's Opportunity, Violet Richardson and Making a Difference for Women awards.

In honor of the International Day to Eliminate Violence Against Women, clubs that participated in the Soroptimist Workplace Campaign should also send a news release (using the sample publicity materials in the Library) that promotes the Workplace Campaign and tells how the club participated.

**December**

During December, clubs must select non-Soroptimists to judge their award recipient applications. Asking members of the media, school officials, dignitaries or other leaders in the community is a great way to help generate publicity for the awards.

Since clubs can no longer accept applications after the judging, now is the time to ask local media stations to stop running the PSAs.

With Live Your Dream celebrations coming up in March, clubs should double-check their Live Your Dream pin supply. While clubs should distribute pins at
In recent years, Soroptimist clubs have been successful in securing local media coverage for their announcements, programs and events. These activities are one element of the larger effort clubs are making to raise the profile of Soroptimist within their communities, as well as the profile of Soroptimist as an organization. With the help of region public awareness chairs and extensive resources developed by headquarters, clubs are executing public awareness strategies that position Soroptimist to meet the goals of the Renaissance Campaign.

Reaching the targets of the Renaissance Campaign in and of itself will be a significant accomplishment. However, it is also important to recognize the overall impact that meeting public awareness goals has on other areas of the Renaissance Campaign, specifically membership. Although the correlation between these two strategic outcomes is evident, we often lose sight of the connection and tend to compartmentalize the two activities. Because the focus of this magazine issue is public awareness, now is a good time to remind ourselves why public awareness efforts are so critical to attracting and retaining members who will ensure our clubs are thriving, dynamic, and progressive.

Increasing Prospects and Member Satisfaction
The SIA Strategic Plan states the following as the strategic outcome for public awareness: Soroptimist will be widely known for its efforts to improve the lives of women and girls. Specific objectives for accomplishing this outcome include:
- Increased name recognition
- Increased association of name with mission by nonmembers
- Increase in clubs that give presentations to outside groups
- Increase in clubs that place press releases, ads and public service announcements (PSAs)

Since these objectives were devised, the federation has created the Live Your Dream campaign, which is an essential part of accomplishing both Strategic Plan and Renaissance Campaign goals.

By developing and implementing plans to meet these objectives, not only do clubs help Soroptimist meet the goals of the Renaissance Campaign, but they are better equipped to meet the membership goals: increase membership and increase membership satisfaction.

Increase membership
When looking to increase membership numbers by recruiting new members, one of the first activities clubs take on is prospecting—the process of identifying people who would be attracted to the Soroptimist mission and who would bring ideas, enthusiasm, and needed skill sets to the organization. Well-executed public awareness activities are often the most effective prospecting tools. By increasing club name recognition by getting coverage in local media outlets and speaking at community events, a club can expand its pool of prospective members exponentially. It’s all about the numbers—the more people who know about a club, the more people who are likely to join. After all, someone cannot join a club if she does not even know it exists.

Increased name recognition affects the quantity of prospects. What about the quality? How can public awareness efforts bring in the “right” type of member? Prospects not only need to recognize the name “Soroptimist,” but they need to associate it with our mission: improving the lives of women and girls, in local communities and throughout the world. This is where the message of a public awareness campaign becomes so important. Clubs need to create and present an image in the community that attracts the members they want and need. By carefully selecting the topics and venues for media releases, speeches, and other public awareness tools, clubs not only widen their prospect pool, but they help ensure the pool includes members who can bring value to the club. For example, promoting a Live Your Dream event or highlighting a project the club has done with a local domestic violence shelter will attract prospects that believe in our mission and want to be involved in those types of projects. Announcing the new officers of a club or recognizing long-time members will likely pique the interest of candidates who are looking for professional and personal development opportunities. As with other membership prospecting activities, clubs should target their public awareness campaigns to the specific audiences they want to reach.

A public awareness campaign is not only an effective prospecting tool—it is often the most inexpensive.

Awareness efforts like preparing a press release or working with local media to air a PSA, consume human resources, but the monetary costs are negligible. With the proper training and encouragement, members can initiate efforts that get people talking about Soroptimist, and the return on investment of
word-of-mouth marketing can be substantial. How often do you purchase a product or go to a physician based on the advice of friends, colleagues and neighbors? Why would investing time and energy in a volunteer organization be any different? Public awareness gets the conversation started and provides the “third-party endorsement” that potential members are looking for before making a commitment. And, it doesn’t cost a cent.

**Increase membership satisfaction**

A comprehensive public awareness plan considers all “publics,” including the “internal” audience—current members. Having a recognizable and respected brand reinforces for members that they belong to a highly regarded international organization doing life-changing work within their own communities and throughout the world. Additionally, public awareness efforts that acknowledge and recognize the service of current members instill a sense of accomplishment and pride, making members more satisfied with their membership experience.

Engaging members in public awareness efforts is also a way of making them feel connected to the club. Properly encouraged and informed, members can be wonderful ambassadors for the club. As they serve the club by talking to prospects about the value of membership, they are reminded of what they themselves get out of their involvement with Soroptimist. The bonuses of cultivating internal “customers” include improved morale and increased productivity—both of which boost overall membership satisfaction.

**Tracking and Measuring Success**

Frequently, because the effects of public awareness activities can be seen as intangible, clubs overlook the value of dedicating resources to developing a campaign. They may think the results of a campaign, such as mentions in the press or on TV, do not have a measurable impact on the success of the club. To emphasize the impact awareness efforts have on a club’s overall health, clubs need to expand the scope of their public awareness goals to include other areas of the Renaissance Campaign. Think about what the club is really trying to achieve and accomplish by implementing a campaign: raised awareness and recognition so that more members will join and donate—and contribute to the success of Soroptimist programs to serve women and girls in need.

It is important for clubs to realize that public awareness is a process, not an end result or “product,” and establish goals that reflect this mindset. In addition to increased name recognition and association of our name with our mission, objectives of a public awareness plan may include:

- Increased number of new members
- Increased membership retention rate
- Increased membership satisfaction
- Increased donations

These goals are numeric and are therefore easy to set and measure. The third goal can be tracked by conducting an annual club assessment (a sample assessment is in the members-only section of www.soroptimist.org) and comparing overall satisfaction rates from year to year. It is only by establishing these types of objectives at the start that clubs will be able to measure the impact of their public awareness work at the end of the club year.

How do clubs know their public awareness activities are in fact increasing interest—and membership—in the club? Simple tracking methods can link public awareness efforts to increases in inquiries about membership. Always include club contact information in all publicity materials, and make sure plenty of materials are available at exhibit booths and at events where a speech is made. Then, closely monitor the inquiries received immediately after an article is placed or an event is held, including asking prospects how they became familiar with Soroptimist. This tracking will reveal which public awareness tactics are generating interest and bringing new members to the club.

Similar to basic marketing efforts, public awareness efforts are only effective if clubs can fulfill the “promise” that is made. Few things can damage a club’s reputation quicker than presenting one image to the public and then not backing it up with activities that are true to the Soroptimist mission of improving the lives of women and girls. Great public awareness efforts for a “bad” product will get members in the door, but if they feel misled, they will not stay.

**The Bigger Picture**

The design of the Renaissance Campaign shows the close links among the four strategic outcomes and how integral all four are to meeting the promise of our mission. When looking at the larger picture, public awareness activities should be viewed not as individual projects or tasks, but as ongoing opportunities to bring in members and donations that support Soroptimist programs. Increasing name recognition and raising awareness among non-members are critical steps toward maintaining an organization of members who are dedicated to helping women and girls around the world to live their dreams.

The experienced and knowledgeable communications staff at federation headquarters has developed extensive resources for planning and implementing public awareness activities. All members, not just club leaders, are encouraged to visit the Library section of the members-only site at <www.soroptimist.org> to access these resources, which include sample publicity materials, such as news releases, pitch letters, sample speeches, fact sheets, and PSAs, and information about the PR FaxBack service. Communications and membership staff at Soroptimist headquarters are also available to answer any questions or to discuss ideas, so please do not hesitate to contact us at any time. And, do not forget to report the public awareness successes your club has experienced—and the effect they have had on membership—so they can be recognized by the federation and shared with other clubs. ©

By Wendy Metzgar
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Domestic Violence in Japan

Japan is an advanced society rich with culture and history, but until recently, the country did little to protect some of its most vulnerable citizens: domestic violence victims. It wasn’t until around 1998, in fact, that the term “domestic violence” was even used in Japanese media. Violence against women was considered a private matter, to be discussed only behind closed doors. In the last several years, however, Japan has made great strides in combating domestic violence, and Soroptimist clubs across Japan are on the frontlines of advocating for domestic violence victims, and making a difference in the lives of victims and their families.

Just how widespread is domestic violence in Japan? A United Nations survey on domestic violence reported that more than 15 percent of Japanese women have been physically assaulted by a spouse or boyfriend, and one in five Japanese women has experienced physical or emotional abuse in 2004—mandates that spousal abuse to include psychological abuse in 2004—mandates that national and local governments work to prevent domestic violence and protect victims. The law also enables courts to issue restraining orders against abusers and evict abusers from the home, and states that abusers who violate court orders can receive up to a year in jail and a fine of up to 1 million yen (around $8,000).

Conversely, anyone who makes a false report of domestic violence may be fined up to 100,000 yen (around $800).

According to a United Nations report, within the first year of its enactment, more than 50,000 women visited spousal violence counseling and support centers, and within the first two years, more than 1,500 protection orders were issued.

The law also requires that each of Japan’s 47 prefectures have a government-funded counseling center and shelter. Prior to 2001, only about 20 private domestic violence shelters existed, the majority of which were clustered in major cities such as Tokyo and Osaka. There are currently around 100 shelters and counseling centers in Japan.

Soroptimist clubs in Japan help domestic violence victims in a variety of ways—by participating in Soroptimist programs, and through innovative club projects and initiatives that address domestic violence in local communities.

One way Japanese clubs support domestic violence victims is through participation in the Women’s Opportunity Awards program. During the 2005-2006 club year, almost 30 percent of Japanese clubs participated in the program, a 3 percent increase from the previous year, and more than $47,000 was disbursed at the club level. Many Women’s Opportunity Awards recipients throughout the federation have experienced abuse at one time in their lives.

One domestic violence survivor who was helped by the program is Pachara Yamazaki, of Musashino, Japan. Pachara, originally from Thailand, moved to Japan with her husband and had three children with him. Eventually Pachara’s husband began drinking and became violent. After several years of abuse, Pachara left her husband and moved into a shelter. She could not speak the language, received no support from her husband’s family and was left to her own devises. She found a job as a waitress and was able to move out of the shelter into a home of her own, but hoped to build a better life for herself and her children.

Pachara applied for and received a 2004 Women’s Opportunity Award from S/Musashino, Japan, and J apan Higashi Region. She then went on to receive a $10,000 federation-level award. Pachara used the award to attend a Japanese language school, and is pursuing a career in nursing. In her spare time, she still regularly volunteers at HELP, the domestic violence shelter where she once lived with her children.

In addition to helping victims of domestic violence through the Women’s Opportunity Awards, Japanese clubs support shelters and advocate on behalf of domestic violence victims through local...
By Lori Blair
Program Director
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In an effort to leverage the many opportunities offered by new media technology, SIA recently launched the Live Your Dream website: www.liveyourdreamcampaign.org. This new site is not a traditional website—instead, it is a fun online community where both members and non-members can go to celebrate women and the power of their dreams.

The site is very inspirational and will help SIA connect with both internal and external audiences, so that the organization's public profile can be raised in a way that doesn't rely on traditional public relations and marketing efforts.

Liveyourdreamcampaign.org showcases fresh content and many exciting features, including fun facts about women, a blog written by a past Women's Opportunity Award recipient, and a column by a certified life coach.

We hope you will be inspired by this site and encourage you to share it with all the special women in your life.

Visit <www.liveyourdreamcampaign.org> today!
New Member Benefit!
Member-2-Member Marketplace

Interested in networking with more than 40,000 Soroptimists to develop new business relationships? The Member-2-Member Marketplace, a benefit available only to Soroptimists, helps connect members with other members, creating a virtual marketplace of what is best for women.

The Member-2-Member Marketplace provides Soroptimist members with a unique, low-cost way to create an Internet presence by giving them an entry point from the Soroptimist website to their home page or email account. The $99 fee entitles members to a 12-month listing that includes an email and/or website address and a 25-word business description. Members who choose not to post a listing can support the marketplace—and other Soroptimists—by making it a frequent stop during their Internet visits.

For complete details on posting a listing, visit the Member-2-Member Marketplace in the members-only section of <www.soroptimist.org> today. If you have questions, please contact Wendy Metzgar, membership director, at <wendy@soroptimist.org> or at 215-893-9000 ext. 139.

Whether you are looking to expand your professional network or to increase traffic to your website, you can’t afford to miss this opportunity to reach a targeted demographic of professional business women who are dedicated Soroptimists just like you!

You’re Hired! Enter to win an opportunity to be SIA’s Executive Director for a Day

The winner receives a trip to Philadelphia to shadow Executive Director Leigh for two days. Includes airfare, hotel (two nights), meals and more!

The drawing will be held during the Soroptimist Professional Development Seminar in Philadelphia on August 25, 2007 (winner need not be present). Tickets are available for a donation of $20 each. Proceeds benefit the Women’s Opportunity Awards and other Soroptimist programs.

How to obtain a ticket:
• Download a printable ticket from SIA’s members-only website.
• Contact region fundraising chairs or governors.
• Purchase tickets at the Soroptimist Professional Development Seminar in August.

For more information and official contest rules, visit SIA’s members-only website at <www.soroptimist.org>.

Register Now!

Soroptimist Professional Development Seminar
August 24-25, 2007
Philadelphia Marriott Downtown, Philadelphia, Pennsylvania

Featuring:
• Keynote speech by Alison Levine, team captain of the first American Women’s Everest Expedition
• “Results Rule® Be a Hero in a ‘Me Too’ World” presentation by Randy Pennington
• Sixteen different workshops that will help you gain the skills to become a better leader—at work, in your community, and in your club

And much more! Visit the Meetings/Convention section of the members-only website to register and obtain the latest seminar details.

See you in Philadelphia!
Magazine Matters: All magazine-related information, including editorial guidelines and submission deadlines, is available on SIA’s members-only website. Mailing address changes should be sent to <siahq@soroptimist.org>. Magazine submissions and letters to the editor should be sent to Editor Jessica Levinson at Best for Women, 1709 Spruce Street, Philadelphia, PA 19103–6103 or <jessica@soroptimist.org>. A subscription to the magazine is available for $11 a year (U.S. and Canada; $15 all other countries). Translated excerpts of the magazine—in Spanish, Portuguese, Korean and Taiwanese—are also available on the members-only website. For more information, go to: <www.soroptimist.org>.

What’s New in the Members-only Website Library <www.soroptimist.org>:
• Soroptimist Snapshot Reports—November 2006, December 2006, February 2007
• Renaissance Campaign goals
• GoodSearch information
• Recruitment manual
• Sample club assessment form
• Sample invitation and follow-up letters
• Sample prospective member form
• Sample email response to introduction form
• Membership presentation template
• Sample new member survey
• Sample resigning member survey
Soroptimist is an international volunteer organization for business and professional women who work to improve the lives of women and girls, in local communities and throughout the world. About 95,000 Soroptimists in more than 120 countries and territories contribute their time and financial support to community-based projects benefitting women and girls. Soroptimist International of the Americas, a 501(c)(3) charitable organization, is headquartered in Philadelphia, Pennsylvania. Its major project is the Women’s Opportunity Awards—cash grants for women seeking to improve their economic situations through additional education and training. Since 1972, the program has disbursed almost $20 million in cash grants to about 25,000 women.

Soroptimist International of the Americas is a recipient of the Pennsylvania Association of Nonprofit Organizations’ (PANO) Seal of Excellence in recognition of exemplary management and accountability within the nonprofit sector.

For more information on how Soroptimist improves the lives of women and girls, how to join, or to make a donation, visit <www.soroptimist.org>.

In the next issue: Sexual violence against young women.