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## Family Care International (Part 1)

By: [Kathleen J. King \(View Profile\)](#)

*I recently had a conversation with Jill Sheffield, the President of [Family Care International](#) (FCI), a non-profit that is committed to improving maternal health, including adolescent sexual and reproductive health, safe motherhood, and HIV/AIDS. Within these focus groups, they also confront unsafe abortion, gender-based violence, and unmet needs for family planning. Most of their work is in Africa, Latin America, and the Caribbean. This is Part 1 of a two-part interview with Jill Sheffield of Family Care International.*

### **Tell me about your work at FCI.**

Part of our work is global. We do a lot of advocacy work. We really care that policies that govern women in general, and their sexual and reproductive health and rights in particular are, I want to say, progressive... We spend a lot of time at events at the UN because 192 governments look at that... if there is a global institution that helps them get their bearings on issues, it's the UN... Right now is the *Commission on the Status of Women*...

### **Tell me about the International Conference on Population and Development (ICPD).**

We started getting really active in about 1991-92 when there were preparatory meetings for the Cairo Conference [ICPD]... In fact, FCI organized 117 countries to work together. Some were government representatives and most were civil society—organizations who cared about the language of the document. They were working toward an outcome document that would set the parameters, the framework, for work on sexual and reproductive health and population issues in general. And those were the days of fax machines! We did not yet have the miracle of e-mail. I can't begin to imagine what our telephone bill was. We would send paragraphs and suggest changed language... and then from eighty-two countries would come comments—all by fax—and then we'd put them together and negotiate a peaceful outcome.

It really worked. Cairo [ICPD] was a two-week meeting. By the time it was over, virtually 80 percent of the language the coalition wanted in the document was there. It was a real lesson that people everywhere really want to make contributions... and they care a lot.

## **Explain the work you do at the UN.**

Working at the UN really gives us a global view... because the other thing we do is work technically [and] principally in sub-Saharan Africa, Latin America, and the Caribbean. So when you want to work on some of the issues, like maternal mortality reduction, and you arrive in a country and you know they've signed the documents at the UN, you say, the government truly, seriously, deeply is supportive of these issues... so, let's just get active... and save some women's lives.

## **What is the role of FCI?**

We do the global advocacy, the technical work locally, and supporting that is a whole range of good looking, seriously wonderful materials that support both the global work and the technical work in countries...

## **Tell me about your educational materials in relation to the UN's Millennium Development Goals (MDGs). Did the MDGs fully encompass reproductive health?**

No. The fact is the US government did not want sexual and reproductive health and rights to be in the MDGs, so they're not there. So we said, look, you can't get to your other goals if you don't work on this issue as well... so we put together briefing cards. These are cliff notes for the UN. We organized these forty-four organizations to work with us—all these are global groups. So we said, we'll visit all the missions at the UN if you take copies of these to capital cities. So, we'll cover the headquarters (and all the 192 missions) at the UN if you get them into the hands of the people who are going to come.

[She shows me the briefing cards.] ... Our materials are viewed as attractive, which we try to make them, because we deal with difficult issues—so they might as well look good! The other thing is, people know that they're honest and you can totally rely [on the cards]... we give you footnotes and figures, we tell you where they're from... it's important to have credibility... especially given how difficult the topics are... So when all the countries came to the special session, the outcome was that enough governments had sent the message: you need sexual and reproductive health. We wanted one target to the fifth goal [5th MDG] and we got it! It was that sexual and reproductive health services be available to all by the year 2015... It's not *an* MDG, but it's a target. And it's now there.

## **What other global meetings can you talk about?**

When Cairo was ten, there was a government who said to the UN that if you have that meeting, we're going to come and withdraw our commitment to it that we'd made in 1994. So the UN said, right, I don't think we'll have that global meeting... So, the NGO community, FCI, International Planned Parenthood Federation, and PAI said "Well, we will. We'll organize it..." We organized a meeting in London looking at Cairo at ten. We knew the world needed to know... like Mayor Koch used to say, "How are we doin'?" We needed to know how we were doing... This was in 2004.

We had a big meeting with 1,000 people. We did a centerfold!—a report card on where it is unsafe to be a woman and a mother... PAI did most of the work. This is the global report card... it showed what are the countries of highest risk [for being a mother].

This is data that's been collected from around the world. We raised money to do this [the report card]. Then we realized we needed information to go around the report card because not everyone who uses the report card will understand the issues. So the idea was to put together a magazine... this is a big step for a nonprofit. [She shows me the magazine, *Countdown 2015: Sexual & Reproductive Health & Rights for All*]

It was in three languages. The best and the brightest wrote the articles... but more importantly, we also hired a retired *Washington Post* correspondent to rewrite every article so that anybody can read it. It's totally

accessible to anyone who reads it... it has a huge circulation... We wanted it to have a shelf life of five years... it has articles, cartoons... [She shows me a cartoon]. There's a cartoon about a woman telling her daughter, who is holding a baby, "I don't want you or her [baby] to have sexual education." It is stuff like that that helps get our message across...

**Explain about what readers can expect.**

We tried to make it attractive and readable... we try to draw people in. This is an example of the different audiences and different styles of publications we do for our global and local audiences... We did one that defined sexual and reproductive health. It had nine pages, one subject to a page, like adolescent pregnancy, unsafe abortion, maternal mortality, and population growth rates—key issues. We defined them in the world's shortest way—to-the-point definitions. We did facts, references, and what people can do about the issue... and they're general enough so that whether you live in Afghanistan or Argentina, you can use it! People depend on these... tens of thousands.

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