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Transforming Children's Lives: Carolyn Miles and 'Save the Children'

Mark Masseli:

This is Conversations on Healthcare. I'm Mark Masseli.

Margaret Flinter:

And I'm Margaret Flinter.

Mark Masseli:

Well, Margaret, the federal insurance exchange healthcare.gov is getting a new leader. Kevin Counihan, CEO of Access Health Connecticut, Connecticut's successful health exchange, and a recent guest on this show, is going to be running the federal exchange which was fraught with so many problems during its opening run and caused the administration no small amount of headache and sleepless nights.

Margaret Flinter:

Well, Kevin did a terrific job of rolling out the exchange here in our home state, Mark, and he's had significant experience in the exchange arena before coming to Connecticut. He helped Massachusetts when that state opted for universal coverage...really brings a breadth of experience to the federal post and a proven record of being able to work well with people across all sorts of interests, so I think healthcare.gov is in very capable hands and congratulations to Kevin.

Mark Masseli:

Absolutely. Kevin's a great communicator and the administration needs that because it wants to make certain that it doesn't repeat the problem plagued initial rollout and with one of the top executives from the insurance industry also in the mix, I think we'll see a system that works more smoothly and efficiently once open enrollment begins on November fifteenth, just two months away.

Margaret Flinter:

You know, Mark, we're also seeing maybe a new tune from the insurance side of things. United Healthcare, which only participated in the exchange in four states this year, is expanding to 24 states next year. The market does seem to be responding to this new online insurance marketplace.

Mark Masseli:

And this is no surprise. More states are finding creative ways to expand coverage for low income residence. The state of Pennsylvania, which had held out on implementing the Affordable Care Act, is using federal funds to help some half a million residents purchase private insurance, so it is a different approach to the expansion of Medicaid and the Department of Health and Human Services approved their approach to expand this coverage.

Margaret Flinter:

While a number of the nation's republican governors categorically refused to expand Medicaid on principal, Pennsylvania's Tom Corbett has become the ninth GOP state leader to buck that trend, perhaps seeing the wisdom of utilizing federal dollars to help more of the state's low income residents gain access to coverage and healthcare which also supports his healthcare institutions in that state.

Mark Masseli:

We also have a significant milestone to note, Margaret...the nation's second largest pharmacy chain is no longer in the business of peddling tobacco.

Margaret Flinter:

CVS has kicked the habit and is no longer selling cigarette products, the single leading cause of preventable death in this country with roughly half a million tobacco related deaths every year.

Mark Masseli:

CVS is rebranding itself as CVS Health. It's a major step in the right direction.

Margaret Flinter:

I agree, Mark, and speaking of preventable deaths, the international organization Save the Children is tasked with the mission of helping to ensure the safety of the world's children. CEO Carolyn Miles is joining us today to speak about some of the latest challenges they're facing with children suffering so greatly in war zones and refugee crisis all around the world...a very daunting task.

Mark Masseli:

Lori Robertson stops by to uncover another false claim about health policy spoken in the public arena.

Margaret Flinter:

But no matter what the topic, you can hear all of our shows by going to [chcradio.com](http://chcradio.com).

Mark Masseli:

And as always, if you have comments, please e-mail us at [chcradio.com](mailto:chcradio.com) or find us on Facebook or Twitter. We'd love hearing from you.

Margaret Flinter:

We'll get to our interview with Carolyn Miles of Save the Children in just a moment.

Mark Masseli:

But first, here's our producer, Marianne O'Hare, with this week's headline news.

Marianne O'Hare:

I'm Marianne O'Hare with these healthcare headlines. There's a dramatic shift underway in the pharmacy world. CVS Caremark, the nation's second largest pharmacy chain, is officially out of the business of selling cigarettes to customers.

In place now at the 77 hundred CVS locations where cigarettes used to be stored, signs urging customers to quit smoking. CVS, which is increasingly going to be a consumer hub for healthcare customers, is rebranding its name to CVS Health and will promote smoking cessation programs to its customers. Smoking remains the leading cause of preventable deaths, killing roughly half a million people in this country every year.

And e-cigarettes have found a niche market which has the World Health Organization concerned. The WHO issued strict guideline recommendations governing the sale and use of e-cigarettes which has quickly become a three billion dollar a year, largely unregulated, industry. Contrary to industry advertising, a new report by the WHO finds that electronic cigarettes and other electronic nicotine delivery systems pose significant public health hazards because of toxins emitted from the devices. The agency recommends countries adopt e-cigarette rules to prevent misleading marketing of the products and to educate the public about the potential health risks involved.

World Health Organization is also sounding the alarm on Ebola, the deadly infectious disease rapidly spreading through certain communities and countries in West Africa, warning the crisis is worsening and will require more global participation in providing medical support to contain the outbreak...no end in sight. A federal judge in Austin, Texas has blocked a stringent new rule that would have forced more than half of the state's remaining abortion clinics to close, the latest in a string of court decisions that have, at least temporarily, kept abortion clinics across the south from being shuttered. The Texas rule requiring all abortion clinics to meet the building, equipment and staffing standards of hospital style surgery centers had been set to take effect in recent days.

A federal judge temporarily blocked a Louisiana law that would've required abortion providers to secure admitting privileges at a local hospital. The law signed by Governor Bobby Jindal in June would have gone into effect this week. And Music and the Mind, a recent Northwestern University study, showed at risk children exposed to free music lessons for at least a two year period of time actually saw improvement to the parts of their brains dealing with language comprehension and learning. The first study to show the biological impact on the brain of music training in early learners, the study showed a link between the exposure to that early training over a protracted period of time and improved academic performance abilities, as well. I'm Marianne O'Hare with these healthcare headlines.

Mark Masseli:

We're speaking today with Carolyn Miles, President and Chief Executive Officer of Save the Children, an independent nonprofit international organization dedicated to meeting the needs of over 143 million children in 120 countries including the US. Ms. Miles first joined Save the Children in 1998 serving as Chief Operating Officer before becoming CEO. Prior to that, Ms. Miles worked as an

entrepreneur and liaison for the American Express in Asia where she first developed an interest in addressing the welfare of the world's underserved children. She serves on numerous international boards and the University of Virginia's Darden School of Business, where she also earned her MBA. Carolyn, welcome back to Conversation in Healthcare.

Carolyn Miles:  
Thank you, Mark.

Mark Masseli:  
You were on the show a couple of years ago and speaking to some of the more pressing issues undermining the quality of life for children around the globe and your mission has only grown in scope over the past couple of years. As an organization that serves the needs of close to 150 million children around the globe, where do you see the biggest threats to childhood wellbeing in 2014 and how does your mission at Save the Children seek to address these challenges?

Carolyn Miles:  
Well, the world hasn't gotten any easier for kids since we last spoke, Mark, but Save the Children really works on making sure that every child has a healthy start, that they have an opportunity to learn and that they're protected from harm. So, right now, there are a lot of difficult things going on, whether you're talking about the Ebola virus in West Africa or kids that are displaced by war in places like Syria and Iraq or kids right here in the US on our borders that are fleeing violence from Central America. We're working on all of those areas and in addition to emergencies, we also spend a lot of our time, as you might expect as an organization called Save the Children, making sure that no child dies from something that's preventable, so we also spend a lot of our time with moms and newborns to make sure that they particularly survive that really difficult first couple of days or first months. So those are some of the things that we're up to and some of the things that we focus on, but it has been a really tough summer, I have to say, in terms of kids.

Margaret Flinter:  
I think we share that sentiment completely and I'd like to, if we could, you referenced the humanitarian crisis that has impacted us right here at home, the recent arrival on our borders of thousands of children fleeing strife and violence in Central America, and it seems the crisis did a lot to stir the immigration debate, but didn't negate the harsh realities these children were facing at home or what needed to be done for them as they arrived in this country. I understand you recently spent some time at the border assisting in the assessment and placement of these children, some of whom I think were sent back to their home country, many of whom have found placement here while they await immigration hearings. Could you give us a bit of an update on this crisis? Tell us about the condition of the children and maybe a little more, for our listeners, a little more specifics about what your organization is going in this crisis.

Carolyn Miles:  
Sure. I was down in Texas and was looking at the programs that Save the Children already had up and running in Texas and I think there's a couple things in this crisis that I would focus on. The first one is that the vast majority of these kids are fleeing some really horrible circumstances in their home country of Honduras, El Salvador, Guatemala, and I sat with one little boy who was 12 and told me about getting beaten up on a very regular basis every couple of weeks from older boys who wanted him to join a gang, the extortion of his family to pay money to these gangs. The drug trafficking in these countries...we've done a great job as a country to help in placed like Columbia...really shut down the drug trade, but it's shifted to many of these Central American countries and the violence that's happening, that these kids are fleeing, is really, really horrendous.

Many of these kids are coming on their own and are being sent by their parents because the conditions in their countries are so bad and frankly, I don't think as a country we are doing enough to take care of these children once they do come to our borders. We have been able to visit the detention centers in Texas and New Mexico and frankly, the conditions there for children are not what we all would like to see. Granted, the numbers are very, very large and our Customs and Border Patrol folks are not...it is not their job to take care of thousands of children, but we have been trying to do more in the detention centers and have not been able to and that's been really frustrating. But the work that we are doing in these transition centers where kids go after they've been through the detention process continues to go on in Texas and providing kids there with making sure that they're getting...a lot of these kids left without anything...so they're getting clothing, they're getting food, they're getting some hygiene supplies and those kinds of things, able to take a hot shower...those are really important, but we have to do a better job at the border and we also have to make sure that these children get due process because they are, in many, many circumstances, they're fleeing really horrendous conditions in their country and their stories need to be heard.

Mark Masseli:  
Well, that's a heartfelt story and as a father of a 12 year old, even more so, and we know that as parents, we would go to no end to make sure our children are out of harm's way and I think that's probably the attitude that the parents who are sending their kids north have in mind.

Carolyn Miles:  
Absolutely.

Mark Masseli:

As you said, there's no shortage of woes in the world that are impacting children and certainly none less than the war that's been going on between Hamas and Israel and Gaza. You recently warned that unless there's a massive intervention or rebuilding the destroyed infrastructure in Gaza, including hospitals and schools and municipal services like water and sanitation, that even bigger humanitarian crisis is looming. In the midst of the conflict, how does Save the Children help rebuild infrastructure and what innovative approaches can be utilized to better address the rebuilding of the infrastructure in Gaza and elsewhere?

Carolyn Miles:

I was actually in Gaza before fighting broke out, just about two weeks before, actually, and it's a very difficult place in the best of circumstances. It's very crowded, the infrastructure was not great in terms of hospitals and health facilities, for children, particularly. Now, much of that is destroyed, so there is going to have to be a big fundraising process and a big rebuilding process in Gaza and things like safe drinking water are really, really important for children, obviously, getting kids back into school, particularly after such a horrendous emergency, that's always really, really important and Save the Children's been working in Gaza for about 30 years, so we have lots of experience there and will certainly be engaged in rebuilding there. And we have been pushing for the cease-fire to continue because, obviously, that war has killed many, many children and that's something that, as Save the Children, we have to stand up and say something about, so we have been doing that.

Margaret Flinter:

I'm sorry the list is so long of places that are really...it's a tough summer.

Carolyn Miles:

I know. Like I said, it's a tough summer for kids.

Margaret Flinter:

We've said often, collectively here, that we almost can't remember a time when there were so many enormously hot spots around the country. Certainly Iraq and Syria are on our minds where some million and a half residents have fled their homes in the wake of the most recent campaign by the group ISIS as well as in fleeing Syria's civil war. The problem's obviously much larger than any one organization could address adequately. Maybe you could share with us how is Save the Children partnering with other organizations to address these crisis and how do you coordinate all of these entities that are attempting and wanting to help refugees in need?

Carolyn Miles:

Yes, I think one thing to point out about Syria and the conflict there, about half of those 1.5 million refugees are children under the age of 18, so it really is a huge crisis for kids and Save the Children is working inside Syria and then we're working in the five surrounding countries, so, Lebanon, Jordan, Iraq, Egypt and Turkey, and in all of those places we work together with both UN agencies. So, in a place like Jordan, for example, there's a very large refugee camp there. There's about 90 thousand refugees there. UNHCR runs the camp. Save the Children provides food every day to the 90 thousand inhabitants of that camp.

We work on preschool for the younger kids so there's something for them to do. UNICEF works on elementary school programs. There's a huge amount of partnership because this is a huge crisis. We've never seen a refugee crisis like the scale and scope of what's happening in Syria before. But our work is really about making sure that kids and families have places to go and they're getting the basics of a place to sleep, access to school for kids, which again, we're three and a half years into this crisis in Syria, so you can't have children out of school for three and a half years or they'll probably never go back.

Mark Masseli:

We're speaking today with Carolyn Miles, President and Chief Executive Officer of Save the Children, an independent nonprofit international organization meeting the needs of over 143 million children in 120 countries including the US. Carolyn, the US is also an area of focus for Save the Children and you recently released a report on Americans' readiness to respond to another disaster on these shores. It's been nine years since Hurricane Katrina and yet, 75 percent of those American parents with school aged children polled felt that we, as a nation, are still ill-equipped to handle such event. So, tell us about the findings of the Save the Children 2014 disaster report entitled What Are You Waiting For? and what distresses you most about the results and what recommendations are you making to address our disaster preparedness issues?

Carolyn Miles:

What we've found in the report...this is the seventh year, I believe, that we've done the report...and there was both good news and bad news. We look at these four critical factors in terms of keeping kids safe in school and child care environments, and the good news is

that when we started doing this report, there were four states that met these four criteria. There are now 29 states that meet the criteria, but there are still 21 that don't. Every day, 69 million children in the United States leave their parents and go to either school or child care. It's really important that those facilities are prepared for emergencies. The US is, I think, third on the list of countries as the most disaster prone countries in the world, so all sorts of natural disasters and we really have to do a better job at making sure that we're keeping our kids safe.

Margaret Flinter:

How are you continuing to promote the access to the basic essentials and health services in these countries that grapple with other disasters that gives children a healthy start despite these crisis that keep rolling over on top of them?

Carolyn Miles:

I think Ebola is actually, sadly, the perfect example of what happens when you have very weak health systems. So, Save the Children does spend a lot of time trying to make those health systems better and a big intervention that we do around the world is we train community health workers. Most of the places where we work and the people that we serve, a lot of our work focuses on training community health workers. They just usually have a basic education, but they can diagnose pneumonia, for example, which is a huge killer of children all around the world. They can provide oral rehydration salts to dehydrated children from diarrhea...again, a huge killer of children. They can help moms make a plan for their delivery and we do spend a lot of our time trying to shore up the health systems in these poor countries.

Mark Masseli:

We've talked to a lot of leaders around the world and certainly the role looms large for community health workers and it's good to see that you're leading the way on that. Sort of going into the internal workings of an organization, they don't run on just good will. The budget, since you've been on, has tripled to 700 million dollars a year, 90 percent of the funds raised for Save the Children go to fund actual programs, such a significant portion of the dollars that you raise. Tell us about the funding model and how you sustain it and maybe what the projection for the need is.

Carolyn Miles:

Yes, we do put a lot of focus on accountability and a lot of focus on measuring where those dollars go and more importantly, how effective they were in terms of the programs that we do. So we do measure all of our programs in terms of key indicators, whatever that project is about and what we're trying to do, whether it's get kids into school and make sure that they learn and pass through the fifth grade, or whether it's train more health workers and get them into service in communities. So a lot of time is spent on the tracking of those programs to make sure not only that the dollars are being well spent but that we are learning what works the best and we're learning also where things are not working and being able to make them better.

So our funding mix is actually one of the things that I think is really terrific about Save the Children is that we have a philosophy that anyone who cares about kids can get involved in the organization and certainly can figure out a way to help fund the organization. And so we have donors from a 10 dollar donor or kids that bring in their piggy banks to an individual who gives us 10 million dollars, so it's a very diverse funding base. We get about 30 percent of our funding through the US government, through USAID, and then about 70 percent of it is from corporations, foundations, individuals, and everything, as I said, from a 10 dollar donation to a 10 million dollar donation.

A lot of our partners, like the Gates Foundation, for example, pick a particular area that they really are passionate and want to work on. And with Save the Children, that area with Gates is newborn survival and so we've been working with them for 10 years and we are in that for the long term and are really trying to drive down the numbers of kids that die in that first month which is the biggest part of kids that die under the age of five. So I would say our funding model is quite diverse. We spend a lot of time fundraising because the needs, frankly, always far outstrip the resources that you have, so I certainly spend time fundraising and we have a group of people that that's really what their job is all about. Again, what I think is great about Save the Children is that there's a place for everybody to help in our organization.

Margaret Flinter:

Carolyn, you blogged earlier this year about your meetings with the Clinton Global Foundation at the United Nations and you suggested that there was still too much talk about what needs to be done to address the global needs of children and maybe there ought to be more shouting about the need to confront preventable causes of death and disease in children around the globe. We're in September now, another convening of the UN general assembly underway, probably more talks...what are the policy initiatives that you are advocating most strongly for?

Carolyn Miles:

Well, we are going to try to do some more shouting in September, certainly, and I think that there's a couple of things on our agenda.

One is Syria, which we talked about earlier, which I think is typically what these kind of very long, drawn out civil war type of situations like Syria...people do tend to forget and they tend to think there really isn't anything we can do anymore about Syria. So we will certainly be talking about what's happening to kids in Syria and remind people that there are things that we can do both for people that are still inside Syria and also for the refugees that are outside, whether that's providing school or continuing to make sure that these families have a roof over their head...they're still there. They still need help and so we'll be certainly pushing on Syria and trying to get people to remember about Syria.

The other piece I also mentioned was on newborns and one of the, I think, most successful things that the world has done is around child survival and if you look at the number of kids that die every year of things that we can prevent, that number has almost gone down by 50 percent since 1990 and that's quite a dramatic drop. But again, newborns are still the biggest part of that number and there's still 6.6 million kids every year that die of things we can prevent. And in many countries, 50 percent of that number is kids in that first month of life, so what can we do around newborns? We've been pushing with various countries to put together something called a Every Newborn Action Plan, so they actually have put together a plan in Ethiopia that says, "Here's the things we have to do for newborns in our country and here's what the Ministry of Health is committing to do."

And so almost every country now, certainly the ones that are critical in terms of child survival, have put together those plans and now it's time to actually do the work. And so we'll be spending time at the UN general assembly when the leaders of these countries are in town to really push that piece as well. So those are just two of the things we'll be talking about in a couple of weeks.

Mark Masseli:

We've been speaking today with Carolyn Miles, President and Chief Executive Officer of Save the Children, independent nonprofit international organization meeting the needs of over 143 million children in 120 countries including the United States. You can learn more about their work by going to [savethechildren.org](http://savethechildren.org), you can follow her on her blog, Logging Miles, and on Twitter [@carolynsave](https://twitter.com/carolynsave). Carolyn, thank you so much for joining us on Conversations.

Carolyn Miles:

Thank you both so much. I really enjoyed being with you. Thanks.

Mark Masseli:

At Conversations on Healthcare, we want our audience to be truly in the know when it comes to the facts about healthcare reform and policy. Lori Robertson is an award winning journalist and Managing Editor of [factcheck.org](http://factcheck.org), a nonpartisan, nonprofit consumer advocate for voters that aim to reduce the level of deception in US politics. Lori, what have you got for us this week?

Lori Robertson:

Well, in the run up to the November midterm elections, we're seeing Republicans claiming that their Republican primary opponents support the Affordable Care Act, but the claims use out of context quotes and exaggerations. In Georgia, in a contentious house race, Republicans Bob Johnson and Buddy Carter are both opposed to the Affordable Care Act and have called for its repeal, but you wouldn't know that from their competing ads. Johnson's ad claims that Carter said Obamacare was "Not so bad." That's a cherry picked quote. Carter said that, "Some of the things that have happened so far are not so bad," but he immediately added that, "The worst part is yet to come."

Johnson's campaign website further claims that Carter left the door open to Obamacare's Medicaid expansion in Georgia and it highlights part of an op ed Carter had written, but that, too, was out of context. Carter was explaining the views of others who favored the Medicaid expansion saying he disagrees with them. A Carter ad, meanwhile, says that Johnson has "Membership in and endorsement from groups that support Obamacare." The ad doesn't say this, but it's referring to Johnson's membership in the American Medical Association, which has generally been supportive of the Affordable Care Act. Johnson is a surgeon.

But Johnson, like Carter, has called for a repeal of the law. As the AMA president said in an interview on CSPAN this summer, "Some members of the AMA support the healthcare law and some do not." The Carter campaign sites other medical groups that support Johnson, but those associations don't change the fact that Johnson has been opposed to the healthcare law. And that's my Fact Check for this week. I'm Lori Robertson, Managing Editor of [factcheck.org](http://factcheck.org).

Margaret Flinter:

Factcheck.org is committed to factual accuracy from the country's major political players and is a project of the Annenberg Public Policy Center at the University of Pennsylvania. If you have a fact that you'd like checked, e-mail us at [chcradio.com](mailto:chcradio.com). We'll have factcheck.org's Lori Robertson check it out for you here on Conversations on Healthcare.

Each week, Conversations highlights a bright idea about how to make wellness a part of our communities and everyday lives. The flu doesn't just exact a toll on public health. It packs a meaningful punch on the economy every year, as well.

Comprehensive vaccination programs have had an impact on curtailing flu outbreaks, but there's still a lot of room for improvement. In 2011, an estimated 100 million workdays and close to seven billion dollars in lost wages were attributed to the flu, largely because many employees without paid sick leave are more inclined to work while sick. An estimated 80 percent of those who come down with flu like symptoms ignore doctors' orders and go to work, leading to more widespread co-infections. In a first of its kind study, researchers at the University of Pittsburgh School of Public Health decided to analyze the impact on flu outbreaks in the workplace and to ask, "What would the difference be if there were universal access to paid sick leave?"

Lead researcher Dr. Supriya Kumar says their study showed a pretty dramatic link between access to paid sick leave and a reduction in flu outbreak in the workplace. They also created another option. What if there were a new sick leave category focusing just on flu days?

Their model showed that if those workers specifically diagnosed with flu were guaranteed just one paid day off to recuperate, there'd be a 25 percent reduction in the spread of flu and when workers were guaranteed two paid days off, the numbers went up to a 40 percent reduction in co-infection. A universal paid leave program for all workers that has the potential to greatly reduce flu co-infection in the workplace positively impacting both public health while saving billions of dollars in the overall economy...now that's a bright idea. This is Conversations on Healthcare. I'm Margaret Flinter.

Mark Masseli:

And I'm Mark Masseli. Peace and health.

Female Speaker:

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