



**Engines of Change:
Promoting Reproductive Rights, Health, and Justice
in Our Nation's Cities**



NATIONAL
INSTITUTE FOR
REPRODUCTIVE
HEALTH



Letter from the President

June 2013

In 2008, the National Institute for Reproductive Health made a commitment to create and implement a proactive agenda for women's reproductive health, rights, and justice at the local level. As this Urban Initiative for Reproductive Health (Urban Initiative) enters its sixth year of work to forward this agenda in communities across the United States, we felt it was important to take a step back and evaluate what we and our partners have achieved thus far, and to use these lessons to lay the groundwork for our future efforts. I am proud to present the result of this process.

Since its launch, the Urban Initiative's city-focused strategy has been in play in 30 cities across the country. From Austin to Baltimore, Denver to Pittsburgh, Memphis to San Francisco, the Urban Initiative has helped local advocates pass proactive legislation, enact effective and innovative reproductive health programming, build new coalitions, and expand support among policymakers and the public. It has countered the deceptive practices of crisis pregnancy centers, directed teens to youth-friendly reproductive health care, minimized the dangerous effects of environmental toxins on women's fertility, trained local legislative champions, and more. Most importantly, it has started to change minds about the meaning of local work—both its importance to the community and its impact on the national conversation.

This report aims not only to tell the story of the Urban Initiative's first five years, but also to make the case for the continued importance of advocacy at the local level, and most importantly, to share our roadmap for the years to come. Though much has changed in the five years since we began this effort, our underlying philosophy—that advocates and leaders working at the local level can have a significant impact on these issues—remains the same. Indeed, this type of advocacy and coalition-building may be more valuable than ever, providing a backstop to the seemingly ever-eroding rights at the state level.

We are as excited now as we were five years ago to support and partner with the dynamic advocates and elected and public health officials who have dedicated their careers to a shared vision of a world in which every woman has the ability to make fundamental decisions about her reproductive health and life. We hope you'll join us in the next five years of our work!

For choice,



Andrea Miller
President

Acknowledgments

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Executive Summary

America's cities are ground zero for some of our nation's most pressing reproductive health challenges. Greater proportions of women of reproductive age live in urban areas. In these communities, unintended pregnancy rates, sexually transmitted infections, and maternal and infant mortality and morbidity are often higher than national averages. The data is especially stark for particular groups of women who often have the least access to health care, including young women, lower-income women, and women of color.

At the same time, city governments can be engaged to establish policies and practices that have the potential to reduce health disparities and improve the lives and health of millions of women and families. Such policy changes can have an impact on more than those who actually reside within these cities: because healthcare providers who offer comprehensive reproductive healthcare services, particularly abortion, are increasingly concentrated in urban areas, cities serve as critical access points for both city-dwellers and rural and suburban women alike.

In 2008, the National Institute for Reproductive Health (National Institute) made a commitment to create and implement a proactive agenda for women's reproductive health, rights, and justice at the local level. Since that time, the Urban Initiative for Reproductive Health has provided more than \$850,000 in grants and strategic hands-on support to 45 organizations in 30 cities spanning 24 states to improve the reproductive, sexual, and maternal health of urban residents. During this same period, it has created and sustained a robust network that now connects more than 1,000 advocates, local elected leaders, and public health officials across the country.

The Urban Initiative and its partners have also created a track record of important local wins. Highlights include:

- ***Proactive Resolutions on Abortion Access:*** In 2013, advocates helped pass resolutions supporting insurance coverage of comprehensive reproductive health care, including abortion, in the Cambridge, MA, City Council; the Travis County, TX, Commissioners Court; the Philadelphia Board of Health; and the New York City Council. Projects are currently underway in Boston, MA; Denver, CO; Oakland, CA; and Seattle, WA.
- ***Addressing Deceptive and Misleading Practices of Crisis Pregnancy Centers:*** Following the Urban Initiative Summit in 2008, NARAL Pro-Choice Maryland helped Baltimore pass the first-in-the-nation local ordinance requiring crisis pregnancy centers (CPCs) to disclose that they do not provide or refer for abortion care. In the years following, with the continued support of the Urban Initiative, local ordinances or resolutions have also passed in Austin, TX; Montgomery County, MD; Chapel Hill, NC; and New York City, with advocates in Dane County, WI, moving forward with innovative policy ideas as of this writing.

- **Empowering Youth:** Youth investigators with TEEN HYPE (Helping Youth by Providing Education) compiled a directory of youth-friendly reproductive health clinics in Detroit, MI, and have distributed directories to 40 schools in addition to local elected and public health officials and advocates.

- **Expanding Comprehensive Sexuality Education:** The Milwaukee Public Schools' sexuality education curriculum was evaluated and expanded; advocates in Helena, MT, hosted a roundtable to review a revised sexuality education curriculum, which was then adopted by the Helena School Board; and the California School Health Centers Association trained school board members from cities across the state on the importance of comprehensive sexual health education.

- **Improving Reproductive Health Care:** A thriving coalition in Los Angeles, Public Health Foundation Enterprises, Inc., has implemented procedures and protocols leading to improved integration of Pap tests; expanded emergency contraception access in urgent care clinics; increased culturally competent training for providers to expand access to long-acting reversible contraception; and expanded STI treatment standards.

To date, the Urban Initiative has convened hundreds of stakeholders around the country for in-person events that have disseminated timely research, trained policymakers, highlighted the reproductive health experiences of teens, incarcerated women of color, and other important populations, and brought together advocates and public health officials to identify local reproductive health challenges and create tailored solutions. Combined with an online hub of resources and news, the Urban Initiative has reached communities across the nation to advance reproductive health care, rights, and access. Here is the story of where we've been and where we'd like to go.



Figure 1: Urban Initiative Partner Cities

Introduction: The Birth of a New Approach

In 2007, following years of frustration and setbacks to reproductive health and rights under the Bush administration, the National Institute for Reproductive Health began looking for new strategies to implement proactive reproductive health policies. Working at the local level presented an exciting opportunity to move beyond the defensive strategy necessitated by the political environment of the time. For many reasons, cities quickly became a clear choice for this type of approach.

Urban sentiment is often supportive of reproductive rights, even in states that are hostile overall, making partnerships between reproductive rights advocates and progressive public officials a real possibility. In many cities, a strong public health infrastructure already exists, meaning that small-scale interventions could cost-effectively build on what is there. With their large populations, big cities also allow a local action to positively impact a significant portion of a state's residents. Further, the limited number of reproductive healthcare providers in many suburban and rural areas means that most women access reproductive healthcare in cities, regardless of where they live.^{1,2}

The Mayors Against Illegal Guns Initiative,³ which united mayors from across the country to implement stricter municipal gun control policies, served as a blueprint for how local leaders could take action to improve reproductive health in the absence of leadership at the state and federal levels. And being housed in New York City, the Urban Initiative took great inspiration from our own organization's work with elected officials here, including Mayor Michael Bloomberg's support of innovative opportunities for city leaders to improve access to reproductive health care, starting with his groundbreaking commitment to ensure that the New York City public hospital system provide quality abortion services and training opportunities.

Conversations with partners in the pro-choice movement indicated that local leaders would be eager to take action. The source of their enthusiasm was apparent: significant racial and socioeconomic reproductive health disparities are alarmingly clear among their residents, with poor women and women of color significantly worse off than white women and women of means.^{4,5}

Dynamic city leaders already possessed the regional knowledge and networks necessary to address issues directly impacting their communities' reproductive health. What they often lacked, however, were the tools and support essential to getting the work done in a system with limited resources. It was with this new and ambitious idea—to make strides in reproductive health by working in urban communities where great needs lie alongside great opportunity—that the Urban Initiative began.



In San Francisco, the Urban Initiative supported formerly incarcerated women and reproductive justice advocates in organizing community roundtables to highlight the reproductive rights and needs of incarcerated women. In light of California's prison realignment program, which aimed to minimize prison overcrowding by releasing low-level inmates to county jails, Legal Services for Prisoners with Children convened a roundtable series to create and initiate a process to implement best practices for pregnancy care in county jails across the San Francisco Bay Area.

The first of two roundtables, held in September 2011, brought together approximately 45 people representing county social and health service organizations, public defenders, law enforcement officials, funders, legal service organizations, prisoners' rights organizations, and other advocates to discuss current practices in Bay Area county jails and juvenile detention facilities. The second roundtable, in May 2012, sought to create an action plan to address gaps in services provided to incarcerated pregnant women.

Through the roundtables, this unique coalition identified three important community issues to address: shackling of pregnant woman, local alternatives to incarceration, and local substance abuse and mental health resources. The roundtable series ultimately facilitated the strengthening of important community ties, creating new allies and building a coalition of advocates for the rights of incarcerated women in Contra Costa County, where both need and interest were greatest.

The roundtable and resulting coalition were critical in building momentum towards a statewide anti-shackling ban. In 2012, following years of careful work, Legal Services for Prisoners with Children and their allies achieved passage of this important bill, a significant victory towards protecting the reproductive rights and health of pregnant women in California's state prisons, juvenile detention facilities, and county jails.

Five years into this ambitious endeavor, the National Institute is seeking to assess the Urban Initiative's impact thus far. This Impact Report articulates both the program's short- and longer-term effect on local organizations and communities and evaluates any larger influence it may have had, and continues to have, on the reproductive health, rights, and justice movements. Drawing from the Urban Initiative's first five years, we have also highlighted four case studies from different regions which exemplify the opportunities and challenges inherent in local work on reproductive health.

The Launch of the Urban Initiative

In May 2008, the National Institute convened the Urban Initiative Health Summit in New York City, bringing together more than 220 participants from 35 cities. Comprising nearly equal numbers of advocates and public officials, attendees participated in city-based delegations, an approach designed to encourage enthusiastic buy-in and a team approach from local legislators and advocates. The Summit provided an opportunity for delegates to share their experiences working on reproductive health at the municipal level and highlighted the opportunities for positive action.

Attending as representatives of their cities, rather than their administrations or organizations, participants were afforded a unique forum to strengthen local ties within their delegations as they worked together to identify the many reproductive health challenges they faced.

The Summit served as an important reminder that urban women face urgent reproductive health needs that span the spectrum of sexual and reproductive health services up to and including abortion, and that their reproductive health is intimately connected to issues of race and socioeconomic status. Summit participants identified resources they would need to implement change in their city, including financial support, a clearinghouse of information on urban reproductive health and advocacy, reproductive justice trainings, networking and coalition-building opportunities, and technical assistance to support research and data collection.

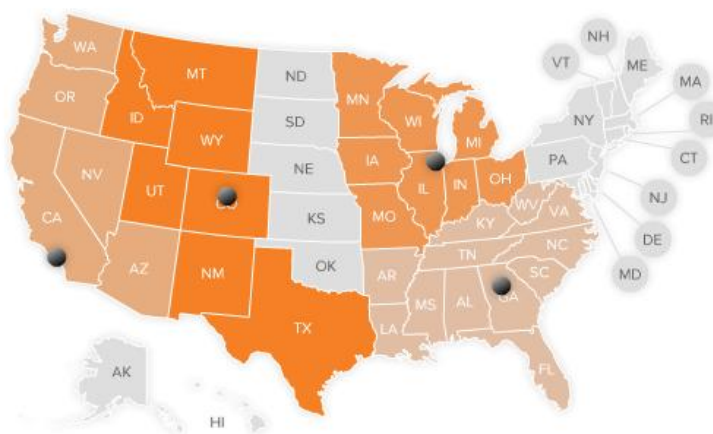


Figure 2: Urban Initiative Regional Summits

Excitement about the Urban Initiative and the success of the nationwide Summit led to a series of planning meetings and events throughout 2009 to set the stage for large-scale support of local reproductive rights work.

The first phase involved four Regional Summits (Fig. 2) to provide an additional opportunity for local leaders to strengthen relationships with each other and focus their attention on the particular issues that resonated most in their cities, counties, and regions. At the same time, to develop an appropriate plan of action for moving forward, the Urban Initiative enlisted a diverse panel of leaders with a range of expertise in reproductive health, rights, and justice. (For a complete list of Advisory Committee members, see Appendix A.) This Advisory Committee created a National Urban Reproductive Health Agenda, utilizing a reproductive justice framework to identify 12 Focus Areas that articulated the broad expanse of urban reproductive health challenges (Fig. 3).

Drawing upon all of this information, the Urban Initiative developed six over-arching goals to guide the program (Fig. 4). These goals aimed to address the broad range of concerns advocates and local leaders brought to the table and build upon the reproductive justice foundation laid out by the Agenda.

The Urban Initiative in Action

Since its inception, the Urban Initiative has relied upon a two-pronged approach to achieve its goals and make lasting improvements in urban reproductive health: (1) provide financial support and strategic technical assistance to organizations engaged in promising local work on reproductive rights, health, and justice; and (2) serve as a centralized repository of information

and resources that creates a sense of community for a broad network of local advocates and leaders nationwide.

Focus Areas

- Reduce Reproductive, Sexual, and Maternal Health Disparities
- Increase Access to Family Planning and Abortion Information and Services
- Empower Young People to Make Healthy Decisions
- Support and Implement Comprehensive Sexuality Education Programs in Local Schools
- Ensure Health Throughout the Continuum of Pregnancy, Birth, and the Postpartum Period
- Advance HIV/AIDS and Sexually Transmitted Infection Prevention and Treatment
- Preserve Safety Net Reproductive, Sexual, and Maternal Health Care Services
- Promote Healthy, Consensual, and Safe Relationships
- Integrate Strategies to Improve Environmental and Reproductive Justice
- Safeguard and Expand the Rights of Immigrants to Reproductive Health Care
- Improve Reproductive Health Services for Homeless Women
- Protect the Rights of Incarcerated Women to Reproductive Health Care

Figure 3: Urban Initiative for Reproductive Health's 12 Focus Areas

Funding and Strategic Assistance

Since 2008, the Urban Initiative has awarded more than \$850,000 in grant funding to 44 organizations in 30 localities spanning 24 states across the country (see Appendix B). The purpose of and process for our requests for proposals has evolved over time, often in response to the successes and challenges facing advocates and policymakers at the local, state, and national level. During the first five years, grants were awarded to both local organizations and statewide organizations that incorporate a local focus.

The first round of funding, in 2009, had two goals: to maximize the impact of the national summit by supporting four Regional Summits, and to support progressive local initiatives in the issue areas identified by national summit attendees as key to improving urban reproductive health outcomes. Funding in 2010 built upon these goals and utilized the knowledge and networks gleaned from the Regional Summits.

The first funding stream cast a wide net, offering grantees the opportunity to implement a policy or program relevant to their community that drew upon the Urban Initiative's growing list of "Promising Models." The second sought to adapt the theory behind the Summits to a city- and issue-specific level by supporting Policymaker Roundtables that brought together local leaders for a briefing on a reproductive health issue in their community. The third funding stream supported Policymaker Leadership Institutes to train local officials in reproductive health and justice issues and build their capacity as advocates.

In 2011, the Urban Initiative again issued a general request for proposals to support progressive local initiatives, but in final funding decisions began to develop a philosophy of focusing on select themes responsive to the current political landscape. This strategy allowed grantees the

The Urban Initiative will:

- **Promote policies and programs** that increase access to comprehensive reproductive health services, reduce unintended pregnancies, address reproductive health disparities, and lead to healthier birth outcomes
- **Identify elected leaders and public health officials** who embrace a proactive policy agenda to reduce unintended pregnancy and improve the reproductive health of their communities
- **Provide a forum** for elected leaders and public health officials to share their knowledge, expertise, and experiences
- **Support a new generation of leaders** who can effectively communicate a progressive agenda for reproductive health in their communities
- **Establish a clearinghouse** of promising local models of policies and programs that are funded, administered, or legislated at the municipal level
- **Foster collaboration** between advocates, elected leaders, and public officials in cities across the nation to create and implement the National Urban Reproductive Health Agenda.

opportunity to learn from each other in real-time and strengthened the capacity and expertise of the Urban Initiative.

That year, those themes were challenging the deceptive practices of crisis pregnancy centers, supporting environmental and reproductive justice, and protecting insurance coverage of abortion. Three previous grantees also received support to conduct an evaluation their 2010 projects, strengthening their model and building grantee capacity. The Urban Initiative also committed itself annually to supporting several local Roundtables, reflecting its now firm belief in the power of bringing together people from many different backgrounds as a way to develop creative solutions to reproductive health challenges.

Figure 4: Urban Initiative for Reproductive Health's Six Goals

philosophy, with both policy and Roundtable grants calling for a focus on local abortion access. In addition to the immediate benefits to both the grantees and the Urban Initiative's ability to offer substantive technical assistance, the thematic approach to funding was helpful in making the case on a national level that proactive reproductive rights work is a powerful and growing trend.

2012 saw a further refinement of the Urban Initiative's thematic funding

Throughout, the Urban Initiative has funded proposals that use four central strategies:

- **Promote Proactive Reproductive Health Policies** to improve urban reproductive health and engage and educate elected officials on reproductive health.
- **Convene Stakeholders** to spark new discussion on urban reproductive health challenges and identify potential solutions.
- **Educate Communities** to increase healthy behaviors and build support for proactive policies and programs.
- **Evaluate Impact** to promote evidence-based work and assess the progress of innovative policies and programs.

For each of these strategies, National Institute staff was available to provide a wide range of strategic guidance and technical assistance, including policy analysis, drafting, and strategy; research; communications support such as drafting press releases, talking points, and social media materials; presentations at events; crafting agendas for events; and aid in developing program evaluation plans.

Online Clearinghouse and Community

The Urban Initiative website (www.UrbanInitiative.org) provides a wealth of resources on urban reproductive health and advocacy to grantees and to a national network of policymakers, public health officials, advocates, and community stakeholders. Available resources include:

- **Promising Models** that provide blueprints for organizations seeking to replicate successful urban reproductive, sexual, and maternal health programs and policies.
- **Webinars** on a range of timely and relevant topics that offer opportunities for local policymakers and advocates to keep up-to-date on what's happening in urban reproductive health. (For a complete list of webinar topics, see Appendix C.)
- **Community Trends**, which identify reproductive health issues arising in communities across the country to help advocates learn from common experiences. For example, current Community Trends include "Racist Anti-Choice Billboards," "Crisis Pregnancy Centers," "Local Attempts to Limit Abortion Coverage and Women's Health Funding," and "Local Support for Coverage for Comprehensive Reproductive Healthcare."
- **Studies and reports** related to urban reproductive, sexual, and maternal health policy, which support advocates' research and promote the use of evidence-based strategies.
- **Voices from the Field**, which showcase the experiences of grassroots advocates working in their communities to advance reproductive health, rights, and justice.
- **Local news stories** on urban reproductive health issues, which keep advocates informed about what's happening around the country.
- **The "Urban Update,"** a quarterly e-newsletter that highlights Urban Initiative partner events and successes and other important local work.

Assessing the Impact of the Urban Initiative

Since its inception, the Urban Initiative has worked to advance a policy agenda to increase access to comprehensive reproductive health services, reduce unintended pregnancies, address reproductive health disparities, and lead to healthier birth outcomes. The Urban Initiative has also made it a priority to strengthen capacity at the local level.

Urban Initiative Webinars

Countering Racist, Anti-Choice Billboards: Strategies and Tactics

The Urban Initiative for Reproductive Health presents webinars to provide the network and other interested parties with opportunities for continued conversation and collaboration to improve reproductive health outcomes across the country. Webinars focus on important and timely topics in local reproductive health policy, programs, or research.



In response to a wave of outrageous billboards posted across the country, the Urban Initiative hosted a webinar titled "Countering Racist, Anti-Choice Billboards: Strategies and Tactics" in April 2011. More than 200 people registered to hear firsthand accounts from advocates on the ground about their work to counter these messages and remove the offensive billboards.

Dr. Willie Parker, Medical Director of Planned Parenthood Metro Washington and board member of Physicians for Reproductive Choice and Health, provided context with a presentation on disparities in unintended pregnancy and abortion. Jasmine Burnett, an activist with SisterSongNYC, discussed the anti-choice policy goals behind this campaign and strategies for reframing the debate, as well as the Trust Black Women partnership that resulted from anti-billboard work in Atlanta. Toni Bond Leonard, President of Black Women for Reproductive Justice, spoke about the history of the anti-choice forces behind the billboards and their plans for the future, as well as the fight against the Chicago billboards. New York City Councilmember Letitia James reported on the community response to and ultimate removal of the billboards there. Participants overwhelmingly reported that the webinar was valuable both for their own knowledge of current policy as well as in combating any similar efforts that might arise in their states.

For a complete list of Urban Initiative Webinars, see Appendix C.



Activists gathered in the hearing room in City Hall on a sweltering day in Austin, TX, in 2010. Down the street at the state house, state legislators had spent the past several months decimating the reproductive rights of Texas women. Supporters of reproductive health and reproductive justice were fed up and concerned for the thousands of Texas women who would feel the direct effects of legislative attacks. But in City Hall, excitement was building.

After hearing constituents' testimony, the Austin City Council unanimously passed the "Limited-Service Pregnancy Centers Disclosure Ordinance." This bill required crisis pregnancy centers to display signs, in both English and Spanish, stating whether they provide medical services including sonograms and whether they are licensed by any federal or state entity or are under the supervision of a licensed medical provider.

This was the first piece of proactive reproductive rights legislation passed in Texas since 2005's enactment of a law ensuring access to emergency contraception for sexual assault survivors.

"Like so many other groups working in anti-choice states, achieving a victory like this one was huge not only for our group, but for reproductive rights advocates across the state. It truly invigorated the movement and boosted participation from the public in numerous facets of our day to day work," stated the then-executive director of NARAL Pro-Choice Texas, the lead advocate.

NARAL Pro-Choice Texas was able to achieve this major victory with financial and technical support from the Urban Initiative. Advocates in Baltimore, MD, had recently enacted a similar ordinance, and the Urban Initiative played a pivotal role in helping Austin harness the resources and lessons-learned from that experience.

And while the Austin ordinance was later repealed and changed, this local win provided a desperately needed victory for pro-choice supporters in the city. It showed opponents that reproductive health, rights, and justice advocates had more to offer than just defensive postures. And it showed the advocates themselves that local elected officials were an often untapped resource, who could serve as important allies for reproductive rights and access to care.

To assess the Urban Initiative's impact, the National Institute engaged in a multi-pronged analysis of the last five years using the following methods:

- ***Review of all grant proposals, interim reports, and final reports*** from Urban Initiative grant-making over the last five years (see Appendices D and E) to identify major accomplishments and challenges as well as common strategies and experiences. This encompassed a total of 54 grants to 44 organizations.
- ***Qualitative interviews*** with grantees and national partners using a structured interview guide. Topics included their perceptions of major accomplishments and challenges, resources they used, the status of their current relationship with the Urban Initiative,

and recommendations for the future. A total of 19 people were interviewed; eight grantees and six national partners were selected at random while four of the five grantees working to counter crisis pregnancy centers were interviewed to allow a deeper analysis of a grant cycle of issue-specific funding (see page 16).

- **A brief online survey**, sent to the entire Urban Initiative network, in an effort to evaluate the use and quality of Urban Initiative resources and technical assistance. Despite numerous, incentive-based invitations to participate, only 34 respondents completed the survey so the results were analyzed in combination with records of technical assistance, web analytics, and webinar registration to create a fuller picture.

This analysis found that, more than just providing one-shot infusions of funding, the Urban Initiative has enabled local organizations to innovate and adapt successful policies and public health interventions to their on-the-ground realities. Many organizations made significant progress in creating and deepening their relationships with colleague organizations—including establishing a wider array of coalition partners—as well as city- and state-level officials. By providing strategic technical assistance, National Institute staff helped build the capacity of local organizations to accomplish these goals, while positioning them for more long-term success. At the same time, the opportunities for information-sharing between and among grantees and other Urban Initiative members has brought the perspectives of local advocates into the national movements for reproductive health, rights, and justice.

Have Reproductive Health, Rights, or Justice Advanced in Urban Areas?

The National Institute recognizes that while local advocates may be the experts on making change in their communities, they also face limited time, money, and resources—all of which make tackling the complex issue of reproductive health even more difficult. By providing financial assistance along with additional expertise and person-power, the Urban Initiative has sought to help bolster the capacity of local advocates so that they can take bold action.

Local policies passed (or blocked)	13
Programs enhanced	15
Roundtables	10
Summits (regional and local)	7
Trainings	6
Organizations Receiving Grants (2009-2012)	44

Enacting Local Policy Initiatives

The Urban Initiative grantees' policy achievements alone are quite remarkable, both individually and when considered collectively—showing variety not only in terms of issues they address but also spanning a wide range of municipalities.

- **Austin, TX**, passed an ordinance requiring crisis pregnancy centers to inform women about the limited services they provide (NARAL Pro-Choice Texas Foundation, 2010).
- **Baltimore and Montgomery County, MD**, enacted the first-in-the-nation ordinances requiring crisis pregnancy centers to disclose the limited nature of their services (NARAL Pro-Choice Maryland Foundation, 2009).
- **Chapel Hill, NC**, adopted a resolution in the Town Council opposing the deceptive practices of crisis pregnancy centers (NARAL Pro-Choice North Carolina Foundation, 2011).
- **Columbus, OH**, adopted a resolution calling on fair hearings for the state's Prevention First Act, a bill which would increase access to birth control, emergency contraception, and comprehensive sex education in Ohio (NARAL Pro-Choice Ohio Foundation, 2009).
- **Denver, CO**, passed a resolution aimed at the Denver Public Schools Board of Education supporting comprehensive sex education (Denver Teen Pregnancy Prevention Partnership, 2009).
- **Missoula and Helena, MT**, school boards adopted improved comprehensive sexuality education curriculum (NARAL Pro-Choice Montana, 2010).
- **New York, NY**, passed a resolution calling on the U.S. Congress to reinstate coverage for comprehensive reproductive health care services, including abortion (NARAL Pro-Choice NY, 2013).
- **Oakland, CA**, suspended passage of a well-intentioned but problematic ordinance that would have negatively affected local nail salon employees, and agreed to get more community input before moving forward (Asian Communities for Reproductive Justice, 2009).



Tennessee occupies an unwelcome spot on the list of the top ten states with the highest teen birth rates. Shelby County, home of Memphis, has teen pregnancy rates among the highest in the state. This stark reality has been exacerbated by the lack of accurate data on teen pregnancies and confusion about what sexual and reproductive health care services are available for teens.

To fill this gap, the Urban Initiative supported Memphis Teen Vision (MemTV) in bringing together researchers from the University of Memphis with local providers and public health officials to discuss the creation of a comprehensive picture of the reproductive health services available to adolescents in the city. This discussion had an immediate, twofold impact: the University of Memphis began a research project to support new efforts to address teen pregnancy, and MemTV began work on a guide for adolescents on existing teen-friendly reproductive and prenatal health care providers.

Nearly a year later, armed with the University of Memphis' report and MemTV's guide, the group convened a first-ever meeting of communications professionals, health care providers, and agencies working with teens to discuss effective strategies for getting the research into the hands of teens and policymakers. The groundbreaking result of this meeting was the county's first comprehensive guide of teen-friendly medical providers.

Although Memphis still faces high rates of teen pregnancy, support from the Urban Initiative has helped increase access to teen-friendly reproductive and prenatal healthcare for the city's teens, and advocates now have the data they need to effectively lobby policymakers for meaningful action.

- **Philadelphia, PA**, passed a Board of Health resolution that calls for the full restoration of coverage for reproductive health care services, including abortion; this includes calling on Congress and the President to repeal the Hyde Amendment and calling on state lawmakers to oppose restrictions on abortion coverage in the state health care exchange (Women's Medical Fund, 2013).
- **San Francisco, CA**, created the Healthy Nail Salon Recognition program to incentivize nail salons to stop use of products containing the "toxic trio" (California Healthy Nail Salon Collaborative, 2010).
- **Travis County, TX**, Commissioners Court recognized the 40th anniversary of *Roe v. Wade* and called for the restoration of family planning funding in Texas (NARAL Pro-Choice Texas Foundation, 2013).



The Philadelphia Board of Health passing their abortion coverage resolution on February 14, 2013

Convening Stakeholders

Through Summits, Roundtables, and trainings such as Policymaker Leadership Institutes and Policymaker Bootcamps, Urban Initiative-supported events have convened hundreds of local lawmakers, public health officials, school board members, and other decision-makers and stakeholders to address local reproductive health issues and consider solutions.



2010 Illinois Caucus for Adolescent Health Roundtable

One such convening occurred in Chicago, IL, on August 11, 2010. The Illinois Caucus for Adolescent Health (ICAH) hosted *Young, Smart and Pregnant: Overcoming Barriers to Academic Success*, featuring teens from their Young Parent Alliance. More than 125 advocates and representatives from Chicago Public Schools, the Department of Health, and offices of elected officials gathered to highlight the challenges pregnant and parenting youth face and to build support for the Pregnant and Parenting Youth Bill of Rights. Attendees

also shared resources and programs available for pregnant and parenting youth. Panelists, including an adolescent health care physician, a nurse, a teacher, and two parenting youth, shared their ideas to improve the lives of pregnant and parenting youth in Chicago. ICAH continues to work to advance the Bill of Rights, and in the meantime, was able to support the recent adoption citywide of medically accurate and age-appropriate sexuality education.

Educating Communities

UI-supported Roundtables provide a space for interested community members to discuss a timely reproductive health issue and hear from experts on recent research or data on the topic.

In 2010, in Baltimore, MD, for example, the Healthy Teen Network and the Baltimore City Health Department hosted a roundtable to release their report on teen pregnancy, which was conducted in conjunction with the Baltimore Department of Health, Urban Health Institute at Johns Hopkins University, and Center for Adolescent Health. The breakfast featured opening remarks from Baltimore Mayor Stephanie Rawlings-Blake and Health Commissioner Dr. Oxiris Barbot. Dr. Patricia Paluzzi, Healthy Teen Network's President/CEO, presented the strategic plan to address teen births and facilitated a discussion to develop a plan of action in Baltimore City. (For more examples, see MemTV sidebar and Appendix E.)

Evaluating Programs

All UI grants include an evaluation component, wherein we ask the partner to self-evaluate the work accomplished during the grant period and the impact of their work. In 2011, the UI went further and supported three organizations in

"The kids became really excited about being secret shoppers. It gave them a voice, which wasn't something we necessarily thought about.... I was kind of surprised as to how much it actually empowered them."

- Grantee

creating a year-long evaluation plan for an existing reproductive health program. One such grantee was Planned Parenthood of Southwestern Oregon (PPSO), which evaluated the Adolescent Health Care Communication Project (AHCCP). The independent evaluation was conducted to determine the program's effectiveness at increasing the knowledge of first-year nursing students on topics related to adolescent sexual health and confidentiality laws, and enhancing their skill in communicating with youth and taking an appropriate professional approach when providing services. The results showed strong evidence supporting the observed effectiveness of this training program, and clear benefits for both providers and youth.

In 2010 and 2011, two-time grantee Fremont Community Health Services in the Twin Cities (MN) expanded their reproductive and sexual health program "Seen on da Streets" by increasing outreach-based STI testing, offering expedited partner therapy, and expanding the audience to include young women and Latino youth. They then evaluated the scale-up of a texting-to-email program designed to increase access to sexual and reproductive health information and care to young people and reduce no-show rates at appointments.

Building a Movement

Our analysis also found that the Urban Initiative itself has been a leader in building local coalitions across the country. This, in turn, has positively impacted organizations and the local reproductive rights movement as a whole by allowing for more varied discussions, connecting promising ideas with promising places and people, and engaging new leaders in reproductive rights advocacy. A diverse range of advocates have been able to draw upon the resources the Urban Initiative offers to support their work and learn about new important issues.

Crisis Pregnancy Centers

Borne out of the 2008 National Summit, the Urban Initiative's work addressing crisis pregnancy centers (CPCs) began with support for NARAL Pro-Choice Maryland to pass the nation's first local ordinance regulating CPCs in Baltimore. The Urban Initiative has since worked with advocates across the country. Montgomery County, MD; Austin, TX; and New York City passed similar ordinances, requiring CPCs to post signs making clear what services they do not provide. Grantees in St. Louis, MO; Madison, WI; and Chapel Hill, NC conducted "secret shopper" investigations, revealing that the vast majority of CPCs use manipulation and misinformation to dissuade women from choosing abortion. The resulting reports earned extensive media coverage.

In response, CPCs and their supporters filed lawsuits alleging that the ordinances violated their right to free speech. No ordinance has yet been struck down, but they have all been enjoined while litigation is ongoing. With Urban Initiative support, and responding to the outcomes of ordinances in other cities, the Chapel Hill Town Council in early 2013 passed the Medically and Factually Accurate and Objective Information resolution, representing a possible new strategy in countering CPCs.

"It was the confidence that came with the win. We live in a nasty red state. We lose everything all the time....[To] walk in with something that was proactive, positive, pro-choice, and not just accomplish it, but accomplish it quickly and well and with much support, truly did light a spark both within the membership as well as within the broader pro-choice community. To see that things can advance, but it might have to happen at the city level first."

- Grantee

Though the chill cast by legal challenges is disappointing, interviews with grantees and media hits demonstrate that there has been much value in pursuing this strategy. The work towards passage included a broad community education effort about the dangers of CPCs that was then supplemented by the media attention to the legislation and ensuing legal battles. One grantee noted that the media coverage "was a great opportunity . . . to make the work that we're doing more broadly known and make people more aware of CPCs and the deceptive practices they are using, and why this is something that people should care about in general." This translated into a significant impact on the organizations themselves, expanding their coalitions and building their base of supporters.

For volunteers, advocates, and legislators accustomed to playing constant defense, this work has been particularly meaningful. Grantees noted that fighting back was "crucial in the movement-building sense" and that volunteers were particularly inspired. The ordinances passed represented a rare policy "win" that left supporters feeling energized. Even where ordinances were not passed, the investigative reports were invaluable to pro-choice legislators and advocates, who appreciated being armed with resources, data, and stories.

The View from the Grantees

Urban Initiative Fostered Policy and Program Change, External Relationships, and Internal Capacity

Grantees reported a range of achievements resulting from Urban Initiative support, including enacting local ordinances, producing successful resource guides, increasing skills-building for their target population, and improving relationships with legislators. (For a complete list of grantee accomplishments, see Appendix E.)

Grantees also cited as a benefit the expansion of an organization program found to be especially successful during the grant period, either by bringing it to more communities or by extending its run past an originally established endpoint.

“[T]his is a big step in terms of forming relationships...and developing our relationships with city council members here, establishing ourselves as a local organization as opposed to just a statewide organization.... This has really put us onto the map.”

- Grantee

Notably, nearly all interviewees identified the building of meaningful relationships and coalitions as one of the most important outcomes of their funding, regardless of the original goal of the grant. This relationship-building proved mutually beneficial, allowing grantees to build support for their ideas and policies among key stakeholders and policymakers, while providing those individuals the opportunity to learn about reproductive health issues from new points of view. Indeed, the Urban Initiative’s ability to foster this type of relationship-building was repeatedly cited as the most significant impact that the Urban Initiative had on an organization once the grant period ended. This theme of relationship-building was echoed again even in discussions about the unanticipated benefits of Urban Initiative support.

“From our point of view, [the relationship] is very good. We’ve felt open to call whenever we have questions and email. We always get great answers so I feel like we have a good relationship.”

- Grantee

Grantees also noted that the Urban Initiative investment impacted both their programming and their staff. Several organizations found that the successful trial of a new idea allowed them to incorporate it into the organization’s annual budget or ongoing strategic planning. Staff acquired new skills that continued to benefit the organization after

the grant period ended, and the work they did as part of the Urban Initiative built up overall institutional knowledge. The empowerment of youth who were not the designated targets of a grant but who helped grantees with their activities in some way was another unexpected bonus.

Grantees Used Resources Tailored to Their Projects and Capacities

Individualized technical assistance and the resources made available via the online clearinghouse were the resources grantees were most likely to have used. Because the RFP process identified organizations that were often well-prepared to take on their projects, many grantees also needed more limited technical assistance than originally anticipated. However,

many cited as most valuable the Urban Initiative's the ability to connect grantees with individuals or organizations that helped them achieve their goals—another testament to the Urban Initiative's ability to foster networking. Another important Urban Initiative contribution to grantees' work was expertise in program evaluation.

Navigating City Politics and Maintaining Coalitions Posed the Greatest Challenges

As one interviewee noted, "Effecting change in a huge system is really hard." This fact is true for most aspects of public policy and within most localities, even those with the most supportive elected and appointed officials. While each grantee faced unique circumstances, the difficulty of working through local bureaucracy was the most common challenge shared during the interviews. Grantees with little experience working with local government before their Urban Initiative project often faced an especially steep learning curve when advocating for a new policy; finding and connecting with the right person in such a bureaucracy to move their specific issue was a particular challenge.

"After the funding ended, we kind of went our separate ways. We continued to work on our initiatives, and I saw other funding came out but it wasn't a good fit for us. I do keep them in our mind."

- Grantee

Some organizations also struggled to hold legislators' attention in the face of so many competing demands on their time, including the demands of the election cycle. In addition, grantees cited the challenges posed by having limited time, concerns over sustaining the funding, working with a high-needs population, and holding coalition members accountable. In addition, while many of the relationships built during the Urban Initiative project were long-lasting, maintaining new connections takes work and thus some of these new partnerships fell by the wayside once the funding period ended.

Relationship with the Urban Initiative Is Limited by Time and Topic

"We talked to staff at the Urban Initiative to help put us in touch with people on the ground in those cities that could provide additional information or additional advice."

- Grantee

Grantees' affiliation with the Urban Initiative was centered on their grant period, with interviewees characterizing their current relationship as either "strong and ongoing" or "nonexistent"—depending on when they become involved and the status of their project. While most interviewees could articulate some portion of the Urban Initiative's overall goals,

few could speak to whether they thought the Urban Initiative was successful in achieving those goals over the past several years. Requests to name any specific successes of the Urban Initiative were met with hesitation and responses often hypothesized general possibilities or focused on a grantee's own project. Similarly, interviewees had difficulty identifying the Urban Initiative's core areas of expertise. Responses varied widely from coalition-building, compiling promising models, and conducting research and advocacy, with no clear consensus emerging among grantees.

Feedback from National Partners

National Institute staff solicited feedback from national partners in an effort to measure the impact of local work on the national conversation about reproductive health, rights, and justice, as well as to seek a perspective on the Urban Initiative from organizations with no direct financial ties to the program. National partners were asked about the overall goals and strategies of the Urban Initiative and whether they believed the program has been successful.

"...to assist organizations, groups, individuals who are doing reproductive justice work in a local community. I see the Urban Initiative as taking larger concepts and helping distill them for our work in the grassroots. Also, connecting people, ideas and opportunities that you wouldn't normally be able to connect."

- National Partner

The resulting response reflected that national partners were involved with the Urban Initiative in the early planning stages, during the Summits, and, for some, as part of the development of the National Urban Reproductive Health Agenda. But beyond those initial efforts, national partners were largely uninvolved with the Urban Initiative until the 2012-2013 cycle, when the Urban Initiative grant stream was aligned with the National Institute's role in

CAARE, the national coalition effort to restore funding for abortion care.

Greater Understanding of the Urban Initiative Goals

All of the national partners were able to articulate key aspects of the Urban Initiative's goals to a greater extent than grantees, perhaps due to the fact that these national organizations were initially introduced to the program through the national and regional summits, where the overall purpose was expressly articulated.

Even so, most felt that their connection to the Urban Initiative ended there, and they stated that they did not consider themselves to have an ongoing relationship with the effort. That, coupled with the National Institute's tendency not to take credit for local partner's work, meant it was not surprising to find national partners were unaware of many of the specific successes that the Urban Initiative had supported in the past five years.

Recognition of the Importance of Local-Level Policy Change

The national partners did concur with the National Institute that local-level policy change is a very important part of the reproductive rights movement and essential to its long-term success. They felt that local advocacy could be overshadowed by the pressing demands of national- and state-level challenges, but that it was nonetheless an ideal place to build partnerships and work on proactive policies.

"I think city-level policy change is important. We don't give it enough attention...it's a very important area to be doing work in because it has an impact in day-to-day lives. You can get more stuff done at the city-level than the state-level, and it gives us a place to try out more proactive things that you couldn't accomplish in a state, even in conservative states."

- National Partner

When asked to identify what factors were most important for creating local change, interviewees largely agreed that educating and bringing together a broad coalition of advocates to push local policy change was essential to success. Education of elected officials, keeping in mind that they often move up the political ranks to positions in state or national government, was also seen as an advantage of this strategy.

Urban Initiative Member Survey

As of November 2012, the Urban Initiative network had 854 “members,” defined as individuals who have created an online account and have access to the password-protected “MyUI” areas of the online clearinghouse. Additionally, there are 1,154 individuals (including policymakers, public health officials, reproductive health advocates, and community stakeholders with different reasons for connecting to the Urban Initiative) on its email list; these individuals receive the quarterly Urban Update along with periodic announcements and requests for proposals. The resources available through the network and email list are designed to provide inspiration for those looking to advance new policies and information for those seeking to learn more about a particular issue or about urban reproductive health overall. To assess the type of resources used and their effectiveness of the resources, a survey was sent to all members of the mailing list. (For a complete list of survey responses, see Appendix F.)

Responses show that members benefited from the centralized information provided by the Urban Initiative. More than 90% of survey respondents indicated that they utilized the Urban Initiative website in the last six months, although 50% indicated they had accessed it only “rarely.” Of all of the resources the Urban Initiative currently offers, the website itself, which encompasses recent news stories, community trends, and research was the most popular, followed by opportunities for Urban Initiative funding and the online clearinghouse of Promising Models (Fig. 5). When respondents had used a resource, they overwhelmingly rated it as “very helpful” or “somewhat helpful.”

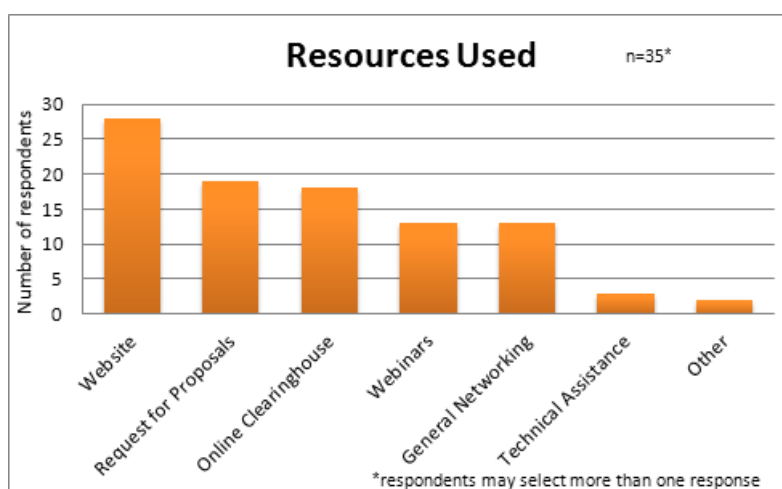


Figure 5: Urban Initiative Resources Used

"I think it would be useful to educate the movement about what's going on with the Urban Initiative. I don't ever know where you guys are granting, what the goals are, if there is a strategic plan you're implementing—it would be helpful to know that. If there are ties that could go on with the state and federal level, it would be great to have a little more synergy."

- National Partner

The most common reason respondents used the website in their work was because they were developing local programming and policies, wanted to remain current on reproductive health research, or were involved in building coalitions, expanding their networks, or working with youth.

Responses to open-ended questions indicated that members are looking for resources similar to those sought by grant partners, namely, guidance on

networking and building coalitions. Respondents noted that they would like to see this topic covered in upcoming webinars and more generally on the site. Other topics respondents hoped to see covered in webinars included information on health reform, LGBTQ health, and reproductive justice.

Analytics

While survey respondents provided largely positive feedback, web analytics indicate that there are relatively few visitors to the Urban Initiative website. The audience for this type of work is, by its nature, limited, but both unique visitors and overall page views since September 2009 demonstrate room for growth.

The resources available in the online clearinghouse cover all twelve Focus Areas, although, as demonstrated by the graphs, certain Focus Areas are represented to a much greater degree than others (Figs. 6 and 7).

Online Services Statistics	
Total number of Urban Initiative network members	856
Total number of mailing list recipients	1,156
Average newsletter open rate	24.6%
Average number of webinar registrants	116.5
Total number of website visits since September 2009	15,581

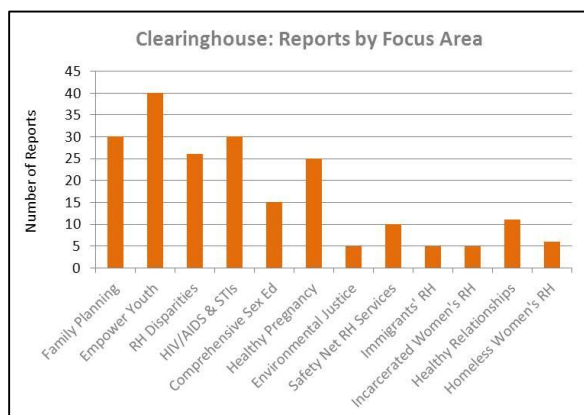


Figure 6: Urban Initiative Reports by Focus Area

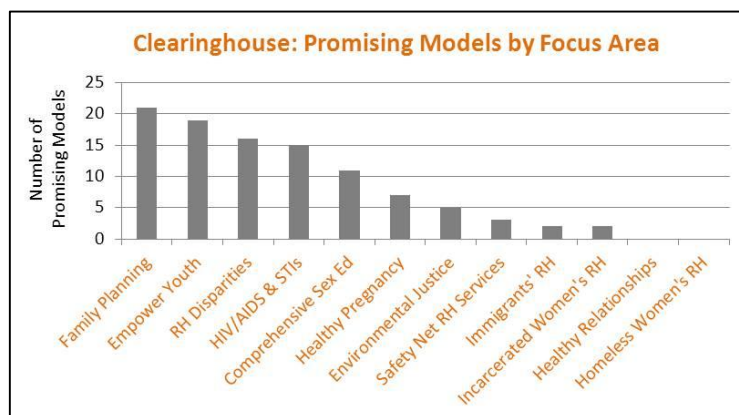


Figure 7: Urban Initiative Promising Models by Focus Area

Discussion

The Urban Initiative began with an exciting new idea: to use work on the local level to improve people's reproductive lives, make advances in reproductive rights, and, in the process, build the movements for reproductive health, rights, and justice. The goals laid out in its first few years were lofty. As one national partner noted, "they're not the kind of goals that you say, 'oh, we've checked this one off and it's done and we don't have to do it anymore.'"

Still, our analysis indicates that the Urban Initiative has been consistently and, to a large extent, successfully working toward reaching its goals—and remains poised to continue to do so in the coming years. Most notably, thanks to the Urban Initiative, organizations working at the local level have been able to enact proactive pro-choice policies, create innovative public health programs, establish new citywide coalitions, build their capacity, and forge new relationships with like-minded organizations and key stakeholders in their cities and other urban centers around the country.

At the same time, it is clear that this work is far from complete and that adjustments are warranted if the Urban Initiative is to enhance its impact and address some of the key challenges identified through this assessment. That need, coupled with the current political, economic, and organizational climate, requires careful consideration, in particular, of the Urban Initiative's broad issue agenda, its emphasis on funding those organizations most likely to succeed, and its supposition that advances made in individual municipalities can be replicated elsewhere and leveraged to create larger-scale change across the country.

A Broad, Yet Focused Agenda

The twelve Focus Areas established in 2008 by the Urban Initiative's Advisory Committee (see page 7) were intended to reflect and amplify the many challenges to reproductive health faced by people in urban areas. The original hope was that it would be possible to make meaningful strides in all twelve of these broad and complex issue areas. In retrospect, this goal may simply have been overly ambitious.

In its first five years, the Urban Initiative was not equipped to make substantial commitments to work in all twelve focus areas. This was true for a host of reasons, most significantly the levels of funding available, the issue expertise of National Institute staff, the organization's relationships with potential partners, and trends in politics and policy the National Institute felt had to take precedence. As a result, certain focus areas—youth and abortion access in particular—were strongly represented, while others got much less attention, including two—access to care for immigrant women and homeless women—that received no funding.

Placing a Priority on (Likely) Success

During each grant cycle, the Urban Initiative placed a significant emphasis on proposals in which potential partners demonstrated a strong likelihood that they could be successful and that their work could translate into lasting and meaningful change within the grant period. As a result, the Urban Initiative tended to prioritize grant applicants who were the most prepared to complete their projects. That, coupled with the high-quality, strategic and technical assistance the National Institute offers, has led to a consistently strong set of outcomes in each grant cycle.

At the same time, organizations that might have had great *long-term* potential—but required more significant financial investments and/or strategic and hands-on assistance in the near term—may have missed out on the opportunity to participate in the Urban Initiative. And, arguably, it is precisely these organizations that might benefit most from the kind of capacity-building the National Institute can provide.

Creating Connections to a Broader Vision and Movement

While grantee partners made important steps forward in individual cities and communities, some might argue that the grander vision behind the Urban Initiative got lost in the shuffle of the intervening five years. During the interviews, grantees acknowledged they had little understanding of the Urban Initiative’s overarching goals and little connection to the full scope of its work. Similarly, representatives from national organizations were frequently unaware of the grantees’ accomplishments in recent years.

“So many different areas of my work as an activist are enhanced or hindered by policy at the local level.... I think we lose sight of the impact that local policy has.”

- National Partner

Still, grantees and national partners agree with the National Institute’s conclusion that it is important to support local work; grantees, especially, reiterated that local advocates are often best equipped to identify the needs of their communities and to determine the appropriate solutions. In addition, grantees recognize and appreciate the Urban Initiative’s support of organizations located in the South, where they feel local work is essential to making any progress; they urged the Urban Initiative not to abandon work in the more conservative parts of the country.

National partners recommended strategies to help expand local coalitions even further, such as by partnering with additional local organizations or creating stronger links between grantees and relevant state and national groups. Finally, grantees are nearly universal in their view that the Urban Initiative should continue to include a reproductive justice perspective and to prioritize the needs of marginalized populations; national partners similarly support this focus on reproductive justice.

Responding to the External Environment

Since the Urban Initiative's launch, the fundamental understanding of the importance of cities and our commitment to focusing on them as engines of change has not altered. What has changed is the environment in which the National Institute works and the tactics it pursues based on the insights gained through its partnerships. When this project began, many municipalities had been experiencing boom times, which set the stage for new investments in the kinds of innovative reproductive health initiatives that the National Institute could encourage, promote, and replicate through local partnerships. While fiscal pressures now place some of the most expansive of these programs out of reach, local officials often remain particularly sensitive to the toll the economic downturn has taken on their communities, providing new motivation for city governments to take advantage of their unique position to make an impact. This new environment requires a much more strategic and targeted approach, as well as continued openness to opportunities to leverage the Urban Initiative's efforts for greater effect both in other cities and at the state level.

Moving Forward

The National Institute remains committed to making strategic investments that support a diverse range of organizations and emerging leaders in order to build capacity, generate exciting and innovative work, and strengthen our movement. To that end, the Urban Initiative will continue to support local policy initiatives, convenings and trainings, and local reproductive health programs, while remaining nimble enough to establish timely funding streams that respond to the needs identified by partner organizations and National Institute staff. These additional funding streams may include capacity- and skills-building opportunities or support for creating or strengthening coalitions.

The National Institute also continues to believe that the Urban Agenda for Reproductive Health, with its twelve focus areas, provides a critical context for advocates seeking to improve the reproductive health and lives of women and families in cities throughout the country. But to maximize our impact, the Urban Initiative expects to partner most often with organizations working locally on issues that align with the National Institute's strategic plan and the organization's corresponding expertise and capacity. Three broad issue areas emerge as the most likely Urban Initiative priorities for the near term:

- Access to abortion care
- Availability of family planning information and services
- Young people's ability to obtain sexual and reproductive health education and care

While this may, at first blush, appear to suggest a narrowing of the Urban Initiative, these issues actually cut across many, if not all, of the twelve focus areas within the Urban Agenda. Thus, for instance, work on the first priority issue area means ensuring that abortion is safe, accessible,

and affordable regardless of an individual's location, income, immigration status, race, ethnicity, gender identity, or health insurance status.

Moreover, the Urban Initiative continues to recognize the benefits of having a reproductive justice framework inform the types of policies, programs, advocacy strategies, grantees, and coalitions that will be supported within these issue areas. For example, to ensure long-term success across a wide range of communities, accessible abortion care must be addressed within a reproductive justice framework, which recognizes “the social, political and economic power and resources to make healthy decisions about our gender, bodies, sexuality and families,”⁶ but also “aims to transform power inequities and create long-term systemic change.”⁷

Further, even when the grant-making might seem to favor a more “traditional” reproductive rights or reproductive health approach, the Urban Initiative will seek to identify additional, complementary avenues—such as a dedicated set of roundtables or follow-up grants emphasizing reproductive justice—to provide opportunities to expand the pool of potential partners and the issues that can be addressed within the broader set of the twelve focus areas.

It is also our view that streamlining the issue agenda will enable the Urban Initiative to create a clearer narrative, thereby promoting a greater understanding of the program's mission and strategy among grantee and national partners alike. We are also hopeful that linking Urban Initiative partners' achievements together and explicitly articulating the belief that cities can help to change the national conversation on these issues may serve to inspire members of the network to seek out opportunities to make change in their own localities—even if they have traditionally focused on state- or national-level advocacy.

During the 2012-13 grant cycle, the National Institute tested a strategy to address some of challenges emerging from this assessment, which may provide a possible roadmap for the future. In light of the 40th anniversary of *Roe v. Wade* and the growth of the CAARE coalition's work on public funding for abortion care, in which the National Institute plays a leadership role, the Urban Initiative aligned its policy grant-making to help build a critical mass of public support for abortion coverage. Already in 2013, elected or appointed officials in New York, NY; Travis County, TX; Philadelphia, PA; and Cambridge, MA, have taken action, and the Urban Initiative continues to support work to this effect in several additional cities. This approach not only helped local advocates and policymakers to feel a greater connection with their counterparts in other cities, it also created new linkages between local advocates and those whose traditional focus is state- or national-level policy work.

In addition to its grant-making and related strategic assistance, the National Institute will continue to find new and innovative methods to expand the online community of the Urban Initiative, placing an even greater emphasis on highlighting local successes, innovative advocacy, and trends in local reproductive health care issues. Through the Urban Update newsletter, twice-yearly webinars featuring local and national partners, and new resources and updates posted online, the National Institute will seek to maintain and grow the network of

individuals and organizations committed to advancing reproductive health, rights, and justice at the local level.

Finally, the National Institute plans to strengthen the connections among local, state, and national partners through its own additional, new programming, which was informed by many of the lessons learned through the Urban Initiative: the Strengthen Our States (SOS) Initiative, launched in 2013, is a multi-year, multi-state effort to advance reproductive health and rights on the state level. In its first year, the SOS Initiative is partnering with 15 organizations from 13 states to advance statewide reproductive rights advocacy strategies, launch effective campaigns to counter anti-choice bills, train pro-choice state lawmakers, and strengthen state-based coalitions.

These two programs, taken together, will enable the National Institute to further its efforts to partner effectively and authentically with local and state organizations while better integrating local, state, and national strategies, and strengthening the reproductive health, rights, and justice movements across the country.

Endnotes

¹ Steinwald, A.B. (2008). *Primary Care Professionals: Recent Supply Trends, Projections, and Valuation of Services*. Washington, D.C.: United States Government Accountability Office GAO-08-472T.

² Jones, R. K., & Kooistra, K. (2011). Abortion Incidence and Access to Services in the United States, 2008. *Perspectives on Sexual and Reproductive Health*, 43(1), 41-50.

³ Mayors Against Illegal Guns. (2013). Coalition History. Retrieved December 15, 2012, from <http://www.mayorsagainstillegalsguns.org/html/about/history.shtml>.

⁴ Fiscella, K., & Williams, D. R. (2004). Health Disparities Based on Socioeconomic Inequities: Implications for Urban Health Care. *Academic Medicine*, 79(12), 1139-1147.

⁵ Guttmacher Institute. (January 2010). U.S. Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity. Retrieved December 13, 2012 at <http://www.guttmacher.org/pubs/USTPtrends.pdf>.

⁶ "What is Reproductive Justice?" Asian Communities for Reproductive Justice. <http://strongfamiliesmovement.org/what-is-reproductive-justice>

⁷ Ibid.

Appendix A. National Urban Reproductive Health Agenda Advisory Committee

Name	Title	Organization	Location
James Wagoner	Executive Director	Advocates for Youth	Washington, DC
Meghan Patterson	Co-Director, Center for Health Equity and Social Justice	Boston Public Health Commission	Boston, MA
Deborah Kaplan	Assistant Commissioner	Bureau of Maternal, Infant & Reproductive Health, NYC DOHMH	New York, NY
Rocio Cordoba	Executive Director	California Latinas for Reproductive Justice (CLRJ)	Los Angeles, CA
Barbara Sugland	Executive Director	Center for Applied Research and Technical Assistance	Baltimore, MD
Nancy Northup	President	Center for Reproductive Rights	New York, NY
Kathleen Brandert	Education and Training Manager	CityMatCH	Omaha, NE
Cindy Harding	Co-Vice Chair, Policy and Communication	CityMatCH Board of Directors	Los Angeles, CA
Matt Carroll	Director	Cleveland Department of Public Health	Cleveland, OH
Paul Lopez	Councilmember	Denver City Council	Denver, CO
Andrea Miller*	Executive Director	NARAL Pro-Choice Massachusetts	Boston, MA
Angela Abloh-Odjidja	Program Manager	National Association of County and City Health Officials	Washington, DC
Robin Summers	Chief Operations Officer	National Family Planning and Reproductive Health Association	Washington, DC
Elaine Rose	Executive Director	Planned Parenthood Public Policy Network of Washington	Seattle, WA
Dázon Dixon Diallo	Executive Director	SisterLove, Inc.	Atlanta, GA
Loretta Ross	National Coordinator	SisterSong Women of Color Reproductive Health Collective	Atlanta, GA

*Now President of NARAL Pro-Choice New York and the National Institute for Reproductive Health

Appendix B. Urban Initiative Grantees

ACCESS Women's Health Justice
Aid to Inmate Mothers
Arizona Family Planning Council
Asian Communities for Reproductive Justice
California Black Women's Health Project
California Healthy Nail Salon Collaborative
California School Health Centers Association
Denver Teen Pregnancy Prevention Partnership
Feminist Women's Health Center
Healthy Teen Network
Illinois Caucus for Adolescent Health
Legal Services for Prisoners with Children
Legal Voice
Memphis Teen Vision
MI LOLA
Milwaukee Public Schools Foundation
Minnesota Organization on Adolescent Pregnancy, Prevention and Parenting
NARAL Pro-Choice Colorado
NARAL Pro-Choice Maryland Fund
NARAL Pro-Choice Massachusetts Foundation
NARAL Pro-Choice Missouri Foundation
NARAL Pro-Choice Montana Foundation
NARAL Pro-Choice North Carolina Foundation
NARAL Pro-Choice Ohio Foundation
NARAL Pro-Choice Texas Foundation
NARAL Pro-Choice Washington Foundation
NARAL Pro-Choice Wisconsin Foundation
Neighborhood Health Source
New Voices Pittsburgh
Planned Parenthood Association of Pennsylvania
Planned Parenthood of Georgia
Planned Parenthood of Southwestern Oregon
Planned Parenthood of the Heartland
Planned Parenthood of the Texas Capital Region
Public Health Foundation Enterprises, Inc.
SisterSong Women of Color Reproductive Health Collective
Southwest Women's Law Center
Teen HYPE
Teen Pregnancy & Prevention Partnership
Trust Women
University of Chicago, Section of Family Planning and Contraceptive Research
Urban League of Portland
Wisconsin Alliance for Women's Health
Women's Law Project

Appendix C. Urban Initiative Webinar Topics and Statistics

Date	Title	Registrants
5/26/2010	Preserving the Right to Abortion Information and Services Through Local Legislation	78
10/20/2010	Engaging and Empowering Youth to Meet Public Health Challenges in Urban Communities	83
4/21/2011	Countering Racist, Anti-Choice Billboards: Strategies and Tactics	224
11/2/2011	Reproductive Health Care for Incarcerated Women	101
7/10/2012	Pharmacy Access to Emergency Contraception for Adolescents: Findings from Two Local Mystery Shopper Studies	125
11/28/2012	Innovative, Citywide Approach to Teen Pregnancy in Milwaukee	149

Appendix D. Matrix of Urban Initiative Grantee Issues & Strategies

Issue	Organization	Year	Strategy
All	California Black Women's Health Project	2009	Roundtable
All	Illinois Caucus for Adolescent Health	2009	Roundtable
All	NARAL Pro-Choice Colorado	2009	Roundtable
All	SisterSong Women of Color Reproductive Health Collective	2009	Roundtables
Abortion Coverage	Planned Parenthood Association of Pennsylvania	2011	Policy
Abortion Coverage	Southwest Women's Law Center	2011	Policy
Abortion Coverage	Trust Women	2011	Policy
Abortion Coverage	ACCESS Women's Health Justice	2012	Policy
Abortion Coverage	Legal Voice	2012	Policy
Abortion Coverage	NARAL Pro-Choice Colorado	2012	Policy
Abortion Coverage	NARAL Pro-Choice Texas Foundation	2012	Policy
Abortion Coverage	NARAL Pro-Choice Colorado	2011	Policy
Access	NARAL Pro-Choice Maryland Fund	2009	Policy
Access	Women's Law Project	2009	Education
Access	Aid to Inmate Mothers	2010	Education
Access	Arizona Family Planning Council	2010	Policy
Access	NARAL Pro-Choice Texas Foundation	2010	Policy
Access	Public Health Foundation Enterprises, Inc.	2010	Policy
Access	Women's Law Project	2010	Policy
Access	Aid to Inmate Mothers	2011	Evaluation
Access	Legal Services for Prisoners with Children	2011	Roundtables
Access	NARAL Pro-Choice Missouri Foundation	2011	Education
Access	NARAL Pro-Choice North Carolina Foundation	2011	Policy
Access	NARAL Pro-Choice Wisconsin Foundation	2011	Education
Access	MI LOLA	2012	Roundtables
Access	Planned Parenthood of the Heartland	2012	Roundtables
Access	University of Chicago, Section of Family Planning and Contraceptive Research	2012	Roundtables
Access	Wisconsin Alliance for Women's Health	2012	Roundtables
Disparities	Asian Communities for Reproductive Justice	2009	Policy
Disparities	Feminist Women's Health Center and Planned Parenthood of Georgia	2009	Policy
Disparities	NARAL Pro-Choice Massachusetts Foundation	2009	Roundtables
Disparities	NARAL Pro-Choice Ohio Foundation	2009	Roundtables

Disparities	NARAL Pro-Choice Washington Foundation	2009	Roundtables
Disparities	California Healthy Nail Salon Collaborative	2010	Policy
Disparities	New Voices Pittsburgh	2010	Policy
Disparities	Urban League of Portland	2010	Roundtables
Disparities	California Healthy Nail Salon Collaborative	2011	Policy
Youth	Denver Teen Pregnancy Prevention Partnership	2009	Education
Youth	Illinois Caucus for Adolescent Health	2009	Policy
Youth	Minnesota Organization on Adolescent Pregnancy, Prevention and Parenting	2009	Policy
Youth	Planned Parenthood of the Texas Capital Region	2009	Education
Youth	California School Health Centers Association	2010	Policy
Youth	Neighborhood Health Source	2010	Education
Youth	Healthy Teen Network	2010	Roundtables
Youth	Illinois Caucus for Adolescent Health	2010	Roundtables
Youth	Milwaukee Public Schools Foundation	2010	Education
Youth	NARAL Pro-Choice Montana Foundation	2010	Roundtables
Youth	Teen HYPE	2010	Education
Youth	Teen Pregnancy & Prevention Partnership	2010	Roundtables
Youth	Memphis Teen Vision	2011	Roundtables
Youth	Neighborhood Health Source	2011	Evaluation
Youth	Planned Parenthood of Southwestern Oregon	2011	Evaluation

Issue Key

- *All:* These grants supported the four Regional Summits, which covered all four of the issues discussed below
- *Abortion Coverage:* Initiatives focused on expanding or protecting insurance coverage of abortion
- *Access:* Initiatives focused on expanding access to reproductive health care and abortion, such as clinic safety, reproductive health care for incarcerated women, and combating stigma
- *Disparities:* Initiatives focused on decreasing or eliminating disparities in reproductive health and rights
- *Youth:* Initiatives focused on reproductive health care for youth and/or increasing the capacity of youth to be reproductive health, rights, and justice advocates

Appendix E. Urban Initiative Grantee Achievements

Organization	Year	Impact
Promote Proactive Policies and Engage Elected Officials		
NARAL Pro-Choice Maryland Fund	2009	Successfully advocated for first-in-the-nation passage of ordinances requiring crisis pregnancy centers to disclose the limited nature of their services in Baltimore City and Montgomery County.
Asian Communities for Reproductive Justice	2009	Released a report on the intersection of reproductive justice and environmental justice and helped to stop an ordinance that could have threatened the livelihood of nail salon employees.
Feminist Women's Health Center and Planned Parenthood of Georgia	2009	Launched a campaign promoting the use of the female condom.
Illinois Caucus for Adolescent Health	2009	Created the Pregnant and Parenting Youth Bill of Rights and advocated for its passage by the Chicago Board of Education.
Minnesota Organization on Adolescent Pregnancy, Prevention and Parenting	2009	Implemented a science-based, comprehensive sex education curriculum to pilot in middle and high schools.
Arizona Family Planning Council	2010	Hosted a Policymaker Leadership Institute to develop community-based recommendations that would reduce health disparities and improve pregnancy outcomes in Phoenix.
NARAL Pro-Choice Texas Foundation	2010	Won passage of an ordinance in the City of Austin to inform women about the limited services provided by crisis pregnancy centers.
Public Health Foundation Enterprises, Inc.	2010	Created a Reproductive Health Working Group within the Los Angeles County Department of Women's Health and succeeded in evaluating a Pap test program, expanded access to emergency contraception in urgent care clinics and emergency departments, created a pilot training for long-acting reversible contraceptives, and created a new Expedited Partner Therapy model.

Women's Law Project	2010	Assisted the city of Pittsburgh with implementation and enforcement of their new clinic safety ordinance and built support in Philadelphia for implementation of a similar ordinance.
California Healthy Nail Salon Collaborative	2010	Successfully advocated for passage of a San Francisco ordinance creating the Healthy Nail Salon Recognition program to incentivize nail salons to stop use of products containing the "toxic trio."
New Voices Pittsburgh	2010	Hosted a Policymaker Leadership Institute to introduce local elected officials to the reproductive justice framework and to discuss the reproductive health of incarcerated women in county jails, later helping to secure passage of a statewide anti-shackling bill.
California School Health Centers Association	2010	Hosted a Policymaker Leadership Institute for school board members from cities across California on comprehensive sexual health education.
Planned Parenthood Association of Pennsylvania	2011	Hosted a bootcamp for legislators that provided pro- and mixed-choice allies with an overview of reproductive health issues facing Philadelphia and Pennsylvania overall and provided on-camera media training for talking about those issues.
Southwest Women's Law Center	2011	Hosted a bootcamp for local legislators in New Mexico on current and pending reproductive health policy and provided messaging training and talking points on insurance coverage of abortion.
Trust Women	2011	Conducted a messaging training for Kansas legislators on current reproductive health policy and provided messaging training on insurance coverage of abortion.
NARAL Pro-Choice Colorado	2011	Trained state and local elected officials on protecting coverage of abortion care in health reform implementation.

NARAL Pro-Choice North Carolina Foundation	2011	Released a report on crisis pregnancy centers and successfully advocated for passage of a resolution opposing their deceptive practices in the Chapel Hill Town Council.
California Healthy Nail Salon Collaborative	2011	Conducted outreach and built support for the establishment of Healthy Nail Salon Recognition programs in communities across California.
ACCESS Women's Health Justice	2012	Worked with Alameda County Medi-Cal officials to increase awareness and capacity of County Medi-Cal workers to ensure equitable and timely access to Medi-Cal for pregnant women seeking abortion services. Working to address abortion coverage issues with the Oakland City Council. Published letter to the editor in Oakland Tribune and blog post on Oakland Local on abortion coverage.
Legal Voice	2012	Working to pass a city council resolution in Seattle opposing the Hyde Amendment and other restrictions on abortion coverage, linking local work to state advocacy efforts to pass the Reproductive Parity Act to ensure insurance coverage for abortion.
NARAL Pro-Choice Colorado	2012	Achieved a favorable City opinion on funding sources for City and County of Denver health benefits to provide solid legal grounding for municipal employee coverage of abortion. Published op-ed in the Denver Post in honor of Women's History Month.
NARAL Pro-Choice Texas Foundation	2012	Travis County Commissioner's Court unanimously passed a resolution recognizing the 40 th anniversary of <i>Roe v. Wade</i> and calling for the restoration of family planning funding in Texas.
Convene Stakeholders		
California Black Women's Health Project	2009	Co-hosted the Western Regional Summit in Los Angeles, CA, on October 29-30, 2009, bringing together nearly 150 advocates, elected leaders, and public health officials from 12 cities in four states to discuss reproductive health challenges and opportunities for solutions.

Illinois Caucus for Adolescent Health	2009	Co-hosted the Midwest Regional Summit in Chicago, IL, on October 21-23, 2009, bringing together nearly 150 advocates, elected leaders, and public health officials from 14 cities in nine states to discuss reproductive health challenges and opportunities for solutions.
NARAL Pro-Choice Colorado	2009	Co-hosted the Rocky Mountain West Regional Summit in Denver, CO, on September 23-25, 2009, bringing together more than 100 advocates, elected leaders, and public health officials from 16 cities in 10 states to discuss reproductive health challenges and opportunities for solutions.
SisterSong Women of Color Reproductive Health Collective	2009	Co-hosted the Southeastern Regional Summit in Atlanta, GA, on September 30-October 2, 2009, bringing together nearly 150 advocates, elected leaders, and public health officials from 22 cities in 12 states to discuss reproductive health challenges and opportunities for solutions.
NARAL Pro-Choice Massachusetts Foundation	2009	Launched a citywide coalition to provide recommendations to the Boston Public Health Commission on adolescent reproductive health.
NARAL Pro-Choice Ohio Foundation	2009	Won passage of a resolution by the Columbus City Council supporting fair hearings on the Ohio Prevention First Bill and developed educational resources for the community on available reproductive health services.
NARAL Pro-Choice Washington Foundation	2009	Developed an emergency contraception community survey with Kings County Public Health.
Urban League of Portland	2010	Hosted a Policymaker Roundtable on the high rates of low birth weight and infant mortality in the African-American community and presented policy recommendations based on best practices.
Healthy Teen Network	2010	Hosted a roundtable in conjunction with the Baltimore Department of Health and local advocates to release their report on teen pregnancy in Baltimore and develop strategies to reduce rates.

Illinois Caucus for Adolescent Health	2010	Hosted the “Young, Smart and Pregnant: Overcoming Barriers to Academic Success” forum where participants shared their experiences and perspectives on how to better support pregnant and parenting youth in Chicago; advocated for the Pregnant and Parenting Youth Bill of Rights in Chicago Public Schools.
NARAL Pro-Choice Montana Foundation	2010	Hosted two roundtables in Missoula and Helena in support of comprehensive sex education, resulting in passage of comprehensive sex education curricula by the school boards in both communities.
Teen Pregnancy & Prevention Partnership	2010	Hosted a Policymaker Roundtable to address high rates of teen pregnancy, sexually transmitted infections, and reproductive health disparities in St. Louis.
Legal Services for Prisoners with Children	2011	Convened two roundtables of formerly incarcerated women and girls, advocates, prison officials, healthcare providers, and policymakers to discuss shackling and reproductive care provided to incarcerated pregnant women in the San Francisco Bay Area and to develop improvements to current procedures.
Memphis Teen Vision	2011	Developed a guide to teen-friendly reproductive health care providers in Memphis.
MI LOLA	2012	Hosted “A Community Conversation on Women’s Reproductive Health,” a roundtable for activists, academics, students, and health care providers. The event focused on the role of religion, health policy, and providers in abortion access, with an emphasis on the barriers faced by Latinas.
Planned Parenthood of the Heartland	2012	Will host a Roundtable on abortion access in Omaha discussing barriers to abortion training and provision in medical schools and beyond.

University of Chicago, Section of Family Planning and Contraceptive Research	2012	Hosted “Examining Access to Abortion in Chicago: A Roundtable to Identify Barriers & Opportunities for Change,” which focused on the gaps in policy, provider support, and research that lead to barriers to abortion access in Chicago. Developed a white paper to guide action on strategies discussed.
Wisconsin Alliance for Women’s Health	2012	Hosted a Reproductive Justice Roundtable that brought together state reproductive health advocates, state and local elected officials, and reproductive health care providers to discuss national and state policy trends on access to abortion and other reproductive health care and identify opportunities for collaboration in the future.
Educate Communities		
Women’s Law Project	2009	Created a guide to passing successful clinic safety zone legislation for local advocates based on successes in Pittsburgh and hosted a conference for clinic escorts in Pennsylvania to discuss their work and share best practices.
Denver Teen Pregnancy Prevention Partnership	2009	Successfully advocated for unanimous passage of a resolution by the Denver Public Schools Board of Education supporting comprehensive sex education.
Planned Parenthood of the Texas Capital Region	2009	Developed the "Empowering Healthy Teens" Campaign to address teen pregnancy and STI rates.
Aid to Inmate Mothers	2010	Implemented a program that offered reproductive health education courses in prison and connected women to County Health Department reproductive health services upon release.
Neighborhood Health Source	2010	Expanded their reproductive and sexual health program “Seen on da Streets” by increasing outreach-based STI testing, offering expedited partner therapy, and expanding the audience to include young women and Latino youth.
Milwaukee Public Schools Foundation	2010	Developed an evaluation tool for their Human Growth and Development curriculum and expanded the number of schools and classrooms receiving the curriculum across Milwaukee.

Teen HYPE	2010	With the help of teen “mystery shoppers,” created and distributed a guide to teen-friendly health care providers in Detroit.
NARAL Pro-Choice Missouri Foundation	2011	Launched investigations into CPCs in Columbia and St. Louis, MO, and published an investigative report on their findings.
NARAL Pro-Choice Wisconsin Foundation	2011	Conducted an investigation into the activities of crisis pregnancy centers in Madison.
Evaluate Impact		
Aid to Inmate Mothers	2011	Conducted an evaluation of their program to connect women recently released from incarceration with county health services and made appropriate adjustments.
Neighborhood Health Source	2011	Evaluated the scale-up of a texting-to-email program designed to increase access to sexual and reproductive health information and care to young people and reduce no-show rates at appointments.
Planned Parenthood of Southwestern Oregon	2011	Conducted an evaluation of their Adolescent Health Care Communication Project, a program offering youth-led trainings to current and future reproductive health care providers designed to improve their communication skills with teens.

Appendix F. Urban Initiative Resources Survey Responses

1. When did you join MyUI, the members-only section of the Urban Initiative website?

Less than one year	10 (29%)
1-2 years	10 (29%)
More than 2 years	12 (34%)
Don't know	3 (9%)

2. In the past six months, approximately how often have you accessed the Urban Initiative website?

Often	3 (9%)
Sometimes	11 (31%)
Rarely	16 (46%)
Never	5 (14%)
Don't Know	0 (0%)

3. Which of the following Urban Initiative resources have you ever used? Please check all that apply:

Website	28 (80%)
Webinars	13 (37%)
Online Clearinghouse	18 (51%)
Technical Assistance	3 (9%)
Request for Proposals/Grant Announcements	19 (54%)
General Networking with Other Partners/Organizations	13 (37%)
None of the Above	0 (0%)
Other	2 (6%)

4. If you have used the following resource, please indicate how helpful you think the resource is.

Website:

Very helpful	16 (46%)
Somewhat helpful	12 (34%)
Somewhat unhelpful	1 (3%)
Very unhelpful	0 (0%)
Have not used this resource	6 (17%)

Webinars:

Very helpful	11 (31%)
Somewhat helpful	3 (9%)
Somewhat unhelpful	0 (0%)
Very unhelpful	0 (0%)
Have not used this resource	21 (60%)

Online Clearinghouse (i.e. downloading promising models and/or policies):

Very helpful	11 (31%)
Somewhat helpful	8 (23%)
Somewhat unhelpful	1 (3%)
Very unhelpful	0 (0%)
Have not used this resource	15 (43%)

Technical Assistance:

Very helpful	8 (23%)
Somewhat helpful	1 (3%)
Somewhat unhelpful	0 (0%)
Very unhelpful	0 (0%)
Have not used this resource	26 (74%)

General Networking with Other Partners/Organizations:

Very helpful	10 (29%)
Somewhat helpful	9 (26%)
Somewhat unhelpful	0 (0%)
Very unhelpful	0 (0%)
Have not used this resource	16 (46%)

Request for Proposals/Grant Announcements:

Very helpful	17 (49%)
Somewhat helpful	8 (23%)
Somewhat unhelpful	0 (0%)
Very unhelpful	0 (0%)
Have not used this resource	10 (29%)

Other (Listed Above):

Very helpful	8 (23%)
Somewhat helpful	3 (9%)
Somewhat unhelpful	0 (0%)
Very unhelpful	0 (0%)
Have not used this resource	24 (69%)

5. Which of the following resources of the Urban Initiative has been most useful in terms of your work? (Please select one.)

Website	12 (34%)
Webinars	6 (17%)
Online Clearinghouse (i.e. downloading promising models and/or policies)	9 (26%)
Technical Assistance	2 (6%)
Request for Proposals/Grant Announcements	12 (34%)
General Networking with Other Partners/Organizations	8 (23%)
None of the Above	0 (0%)
Other	3 (9%)

6. What other resources could the Urban Initiative provide that would be helpful to your work?*

Reproductive Health Research	3 (8%)
Resources in Movement Building/Grassroots Organizing	3 (8%)
Networking Opportunities	4 (11%)
Other	8 (21%)
Unsure	8 (21%)
Existing Resources are Sufficient	12 (32%)

*Free responses; responses have been categorized.

7. What, if any, area of your work would you be most likely to draw upon the Urban Initiative's resources for?*

Networking Opportunities	5 (10%)
Technical Assistance	3 (6%)
Requests for Proposals	8 (29%)
Model Policies	8 (29%)
Information on a Specific Focus Area	11 (39%)
Research & Reports	2 (7%)
General Information on Local Work	9 (32%)
N/A	2 (7%)

*Free responses; responses have been categorized.

8. The Urban Initiative presents webinars on a range of topics to provide local policymakers and advocates the opportunity to keep up-to-date on what's happening in urban reproductive health, engage in continued conversation with each other and collaborate on improving reproductive health outcomes across the country. What particular webinar topics would you like to see the Urban Initiative convene in the near future?

Webinar requests were wide-ranging with the most requested topic being information on the implementation of the Affordable Care Act.

9. Have you ever recommended the Urban Initiative to a colleague for assistance in their work?

Yes	32 (91%)
No	2 (6%)
Unsure	1 (3%)