

**Sample Policy Speech: Making Campus Accessible for Disabled Students**

Diane Bright

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1 I'd like to ask you to use your imaginations and think how it would feel if you'd spent an evening studying for an exam. You get up in the morning all set to go to classes, you go down, you get to your door, and it won't open. You think, "Oh, I can just use my back door." But you go to your back door, and that won't open either.

2 It would be pretty frustrating, wouldn't it? That's the kind of frustration handicapped students feel when they can't get to class because of the snow. And that's the same kind of frustration I found when I tried to get my scooter through the snow and it short-circuited because it got so wet from the snow.

3 Now there are many reasons that campuses could be inaccessible, but what I would like to address today is the inaccessibility of this campus due to the uncleared snow. You may think, "This is never going to affect me," but sadly it could. By accident or illness, it could become a problem for you.

4 As you can see, I use a scooter to get around campus, and I have found that this campus is inaccessible due to the uncleared snow. I'd like to share that problem with you and then share my solution. Let's start with the problem.

5 As I see it, the problem faced by handicapped students has two components: the uncleared snow and the violation of the Americans with Disabilities Act. The first component is the inaccessibility of this campus due to the uncleared snow that creates a barrier for wheelchairs and scooters to pass through. Here in Wisconsin, we get an average of 43 inches of snow in any winter and an average of thirteen days of snowfall over one inch or more. As you can see, that would create a significant barrier for those of us who have to use scooters or wheelchairs to get around.

6 A fellow handicapped student shared his story with me. He is a quadriplegic; he has no use of his arms or his legs. He directs his scooter with a wand by his chin. He tried to get through the snow this winter, and he tipped over and was hurt. This is unfair, and it's dangerous. Why should he have to jeopardize his life just to try to get to class? And why is it fair for him to be kept out of class when he has paid for classes out of his pocket just like you and just like me? I've heard the same kinds of horror stories from several handicapped students. The fact remains that the snow creates a barrier that we just cannot pass through, and that barrier really creates a significant problem for us.

7 The second component of this problem is that the Americans with Disabilities Act, a civil rights act that was passed by Congress and signed by President Bush in 1990, prohibits discrimination and requires that barrier-free access to any public accommodation be given to the handicapped students. The university is in violation of this act. Let me read part of it for you: "People with disabilities have the right to full and equal access to any facility or accommodation of any public place. They have the right to make a request for acceptable services by that public accommodation." I believe that language is clear: "Full and equal access." And we're not getting that. That's why I believe the university is violating the Americans with Disabilities Act.

## Persuasive Policy Speech

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8 Now that we have a clear understanding of the problem, let me share my solution with you. An effective solution could have three components. The first component is that the university should adopt a policy of snow removal similar to the ordinance that the city of Madison has. That ordinance reads: “Sidewalks must be cleared of all ice and snow whenever it accumulates to one-half inch or more and the walks must be cleared by noon the day following the snowfall.” I think the university should adopt this as a campus policy.

9 Second, the university should set priorities to the areas that the handicapped students need. In an interview with Gene Turk of the Grounds Department, I learned of the university’s priorities. He says that first the stairs and the hills are taken care of. Then the parking lots and the sidewalks are cleared by the plows. There was never any mention of the ramps or the curb cutaways that we handicapped students need. We’re not getting a fair deal here. That’s why I think the university is violating the Americans with Disabilities Act. The university needs to set as priorities the areas that we need—the ramps and the curb cutaways.

10 The third component of my solution would address the lack of personnel in the Grounds Department. The university should hire a staff member who could focus on those areas that handicapped individuals need to get around. Some of you may be wondering, “How much would this cost?” A forty-hour week, at eight dollars an hour, would be \$15,000 dollars a year, plus benefits. The official published university budget is \$1 billion. Surely, they can find, in a budget that big, funding for \$15,000 to hire someone who could make this campus accessible to all of us.

11 In closing, I really believe this is a workable solution. If the university were to go ahead and adopt this policy, it would fulfill the requirements of the Americans with Disabilities Act and make this campus accessible, providing full and equal enjoyment for those of us who are the handicapped students. Won’t you help me effectuate this change? Please consider signing a petition that would encourage this university to change its snow removal plan. I will have those petitions in the back of the room when this speech is finished.

12 To end, let me share with you a quote out of the book *Access: The Guide to a Better Life for Disabled Americans*: “The disabled minority is not a closed society. While nobody would ever change skin color, anyone can join this minority by accident or by illness.” Disability does not respect age, sex, religion or social status. Every American should see himself or herself as an ally for the disabled person who is just seeking a fair deal. Thank you.

### Critical Thinking Exercise

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#### Problem /Need:

What is the problem? Did the speaker relate the problem to you? Do you feel that there is a problem or a need for a plan? Explain.

#### Plan:

What is the plan? What ideas did the speaker suggest to reduce the problem? What ideas did the speaker have to address the need?

#### Practicality:

Is the speaker’s plan realistic and practical? How so? Did the speaker explain how the plan’s benefits outweigh any possible disadvantages? How so?

\*Keep in mind that your audience will be thinking about these questions when you present.

# Universal Health Care

Alice Pearson

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1 Suppose you come down with a serious, but treatable, illness. You are too sick to go to class, too sick to work. What do you do? You go to the doctor, right? What if, when you got to the doctor, you were turned away because you couldn't pay and were sent home to suffer alone?

2 Most of us have difficulty imagining this, but for many people this is not just a hypothetical situation. The current health care system in our country is based on your ability to pay. The more money you can pay, the better medical treatment you can receive. Of course, there's health insurance and some government programs to help people get medical care, but there are millions of uninsured people, people who have inadequate insurance, and people who don't fit the stipulations of the government programs.

3 If you are like me, you may never have given an enormous amount of thought to the topic of health care until very recently. According to my class survey, every one of us in this room has some type of health insurance, whether it be from the government, our parents and their employers, or our current employer. Because of this, most of us have never had to worry about getting medical treatment when needed. However, even if this issue doesn't directly affect you or your immediate family, I am asking you to look at it from the perspective of the 43.4 million people in our country who do not have health insurance.

4 I have learned about the plight of these people through my research and from firsthand accounts, including that of my mother, who is a public health nurse and is able to see the problem on a daily basis. Today I am here to propose that our country adopt a universal health care program. This would be a program in which everyone would receive free and equal access to health care. I will first explain the problems with health care in our country today. Then, by using Canada as a model, I will propose one possible solution and explain the advantages of it. Let's begin with the health care system in the United States.

5 Although our country is experiencing a time of economic prosperity, the number of Americans without health insurance is steadily increasing. According to Dr. David Himmelstein of Harvard University, "These may be the best of times for the economy, but they're the worst of times for health care." The "worst of times" that Dr. Himmelstein is referring to is best exemplified by the fact that an average of one out of every six Americans does not have health insurance.

6 This number is increasing every year, with children and members of working families suffering the brunt of it. According to former governor and presidential candidate Michael Dukakis in a recent article published in *America* magazine, the number of uninsured children is rising twice as fast as uninsured adults. The article also states that nearly 90 percent of people without insurance come from families where at least one of the adults is working. This is partly a result of welfare reform, which in many cases is forcing people to

take low-income jobs that do not provide insurance. If the person's job does happen to provide insurance, oftentimes the premiums are so high that they are simply not affordable.

7 Because of the lack of insurance in our country, people are not getting proper health care. Dr. Bob LeBow of the Physicians for a National Health Program states, "We see terrible consequences of patients lacking insurance in my clinic every day." One of these consequences is the putting off of visits to the doctor, in which case the person's ailment often becomes much worse. Recent studies done by the National Center for Health Statistics show that children without insurance receive less than half the visits to the doctor's office than children with insurance do. These studies also show that these uninsured children are four times less likely to receive medical and surgical care when they need it, and also four times less likely to receive prescription medicine when needed. These are all prime examples of what medical ethicist Larry Churchill of the Florida House of Representatives calls rationing of health care, and he states that "Access to health care is mainly contingent on having a way to pay for it."

8 It is ironic that the big issue in our country over universal health care seems to be the cost; yet statistics show that our current system is hardly cost efficient. According to the same article in *America* magazine mentioned earlier, we spend more money per person on health care in our country than in any other country in the world, and two times as much as any other industrialized country. Yet we are one of only two other industrialized countries that doesn't provide our citizens with universal health care, and about 20 percent of our population goes without adequate health insurance or health care.

9 It is time for the United States to make the same commitment to health care for all Americans that other countries have made to care for their citizens. The plan that I advocate is based on the system used by our neighbor Canada. As opposed to our country's system that leaves so many people uncared for, Canada's government provides all of its citizens with free universal health care. Of course, the Canadian system doesn't cover such things as cosmetic surgery, so some physicians do have private practices for those types of procedures, but the majority of doctors are paid a set salary depending on the service they provide.

10 What this means is that in Canada, if you get sick or hurt, you can go to any hospital or doctor's office and receive free basic medical treatment. In Canada, according to an article in *Public Health Reports*, "Health care is viewed as a right, and nobody is denied medical or surgical care because they are unable to pay."

11 As far as the health of Canadians goes, this system is working extremely well. An article in the *Washington Monthly* states that in Canada compared to the United States, the infant mortality rate is lower, the maternal mortality rate is lower, and the life expectancy is higher. Canadians can receive treatment from the doctor of their choice in a timely fashion without having to wait for approval from insurance companies.

12 Canada's health care system is financed through a combination of revenues—including federal grants, income taxes, and "sin" taxes on things like cigarettes and alcohol. You may be wondering if a system funded in this way is more expensive for Canadian

citizens. According to *Canadian Public Health Reports*, Canadians pay about 55 percent less per person on health care than we do in the United States.

13 The main difference in the cost of health care in the United States compared to that in Canada is the difference in administration. Because Canadian patients are not billed individually, and because there is no insurance paperwork or eligibility determination for government programs, the cost of administration in Canada is significantly less than in the United States. As stated in an article from *In Health* magazine, in Canada the average citizen pays about \$18 each year toward administration, while in the United States that cost is about \$95 a year.

14 Not only does the Canadian system provide excellent health care, as we have seen, but public opinion polls show that Americans and Canadians alike find it to be superior to the U.S. system. According to a poll published in *In Health* magazine, 72 percent of United States citizens would rather have the Canadian system, while only 3 percent of Canadians said they'd prefer the U.S. health care system. Clearly it is time for the United States to meet the health care needs of its citizens by adopting a program similar to that used in Canada.

15 So in conclusion, we have seen that there are definite problems with the equality and economics of the health care system in the United States, which are affecting our citizens and our nation as a whole. I have shown you a viable solution that our entire country would benefit from. Using Canada's system, or one similar to it, would ensure that a much greater percentage of the population receives the health care they need. Now it is time for our country, considered to be the most advanced in the world, to stop lagging behind other countries in caring for its citizens and begin setting an example of how a country can truly prosper under a universal health care plan.

## Universal Health Care by Alice Pearson

### Commentary

“Universal Health Care” is a persuasive speech on a question of policy. Have students pay special attention to how the speaker deals with three basic issues of need, plan, and practicality, as well as to how she supports her claims with strong, credible evidence. Here is a synopsis of the speech.

Specific Purpose: To persuade my audience that the United States should adopt a program of national health insurance.

Central Idea: The problem of inadequate health care faced by more than 40 million Americans can be solved by adopting a national health insurance program similar to that in Canada.

Method of Organization: Problem-Solution

Introduction: The speaker begins by asking her listeners to imagine themselves being unable to receive health care when they need it. In paragraph 2 she explains that this is precisely the situation faced by millions of people in the United States. Paragraph 3 brings the topic home to the speaker’s classmates by referring to the results of her audience-analysis questionnaire and by asking her classmates to see the issue from the perspective of those Americans who do not have adequate health care. In paragraph 4 the speaker establishes her credibility and provides an excellent preview of the main points to be discussed in the body.

Body: The first main point in the body demonstrates that there is a serious problem with the U.S. health care system (paragraphs 5-8). In paragraph 5 testimony from Harvard professor David Himmelstein points out the irony of poor health care in times of economic prosperity and establishes the fact that one in six Americans lacks health insurance. Paragraph 6 explains that the number of Americans without health insurance is growing every year, while paragraph 7 shows that the lack of insurance is preventing many people from getting proper health care. Paragraph 8 addresses the issue of cost by noting that the current system of U.S. health care is much less cost-efficient than that of most other countries. As in other parts of the speech, the speaker supports her claims in paragraphs 5-8 with evidence from credible sources and identifies those sources for the audience.

The second main point in the body presents the speaker’s solution to the problem (paragraphs 9-14). After sketching the basic elements of the plan in paragraphs 9-10, she devotes paragraphs 11-14 to demonstrating its practicality. Paragraph 11 draws from a *Washington Monthly* article documenting the fact that Canada has lower rates of infant mortality and higher life expectancies than the U.S. Paragraph 12 presents figures from *Canadian Health Reports* indicating that Canadians pay significantly less per person on health care than do people in the U.S. Paragraph 13 explains that this cost difference is due largely to the lower administrative costs associated with the Canadian system, while paragraph 14 cites a poll from *In Health* magazine showing that 72 percent of Americans would prefer the

Canadian system to the current U.S. system. Although the speaker could have provided more information about the size and composition of the polling sample, for the most part, she does an outstanding job of addressing the practicality issue.

Conclusion: Presented in paragraph 15, the conclusion begins by summarizing the main points presented in the body. Because of the complexity of the topic, the summary is fairly detailed, and it does a fine job of reinforcing the central idea. The speaker then ends with a final plea for the United States to catch up to other nations by establishing a universal health care plan.

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# To Save a Child

Dawn Follendorf

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1 For every morning that you wake up and eat breakfast, there are 840 million people beginning their daily struggle with chronic, persistent hunger. For every morning that you have the privilege of going to class, 250 million children head off to work where many will make less than \$1 a day. And for every day that this vicious cycle continues, there are 24,000 fewer people in our world.

2 Millions of children living in developing countries cannot depend on their parents to support them. Rather, they live each day with little more than the hope that someone more fortunate than them might take compassion on them. By sponsoring a child for two years through an organization called Compassion International, I have seen the difference that \$28 a month can make in a child's life.

3 Today, I'd like to encourage you to become involved with Compassion International. First, I will look at the desperate help children worldwide need. Second, I want to explain Compassion International and what it is they are doing to help meet the needs of these children. And finally, I will show you that Compassion International is an upstanding, legitimate organization that will put your money to work saving the lives of children. Let's start by looking at the need for this organization.

4 The demand for organizations such as Compassion International in developing countries is so great because of two main reasons: poverty and poor education. According to the World Bank website, it is poverty that causes 250 million children to work full- or part-time jobs while they should be receiving an education. In Thailand, for example, the typical 11- to 15-year-old boy or girl is forced to work an average of 50 hours every week. Similarly, in Bangladesh, children who do not attend school work as long, if not longer, hours than adults by the time they reach just 13 years of age.

5 According to a brochure sent to me by Compassion International, the average family income in Central America is \$50 per month. Unfortunately, the cost of food in Central America is the same as in the United States. Because so few families can afford the cost of groceries, half of all children living in Central America are malnourished. Twenty percent of them are so severely malnourished that improved diet alone will not cure them.

6 Of course the problem isn't limited to Central America. The Hunger Project website claims that worldwide "about 24,000 people die from hunger or hunger-related causes every day, and three-fourths of them are children under the age of five." To put this in perspective, 24,000 deaths is equivalent to more than half the students on this campus dying every day. To think of it another way, it means that more children lose their lives to hunger every week than the number of Americans that lose their lives to cancer in an entire year.

7 According to the Hunger Project, “the best way to reduce hunger is through education because the educated are best able to break out of the cycle of poverty that causes hunger.” Once again, let’s look at Central America. Most of the children in Central America are not required to go to school. And if they do go, it is rare that they ever make it past the 6th grade because even public education is too expensive. This cycle is never-ending. If children do not become educated, they will never be able to make enough money to break out of the cycle of poverty. However, this vicious cycle can be broken with the help of Compassion International.

8 Compassion International was founded in 1952 by the Reverend Everett Swanson as a result of working with orphans in Korea. Swanson established a program through which people could sponsor needy Korean children for a few dollars a month. Those children would receive benefits that included food, clothing, education, shelter, and health care. Since then, Compassion International has expanded to 22 countries and has assisted more than 500,000 children across the globe.

9 Compassion International works in this way: In each community where they sponsor children, there is a place called the project. This is where the children go to receive nutritious meals and additional schooling. The projects are small, usually 150 children, and the local staff works hard to become personally acquainted with each sponsored child and his or her individual needs. Through providing them with an education now, Compassion is helping children to support themselves and their families in the future.

10 When you sponsor a child, it is usually for several years until the child is either 18 or has completed their schooling. You can sponsor a child for just \$28 a month and even have the option of paying several months to a year in advance. Compassion International understands that there may be a time when you can’t support your child. This is why there is no obligation to continue your sponsorship. Compassion International claims that they will immediately look for a new sponsor for your child and he or she will have continued support without interruption.

11 I have been sponsoring a little boy named Jose Francisco for two years. He lives in Ecuador with a family of seven and is ten years old. I get about three letters a year from Jose, and it’s clear from those letters that he has had new opportunities to learn and grow—both physically and mentally. Being Jose’s sponsor has been incredibly rewarding and is something that every one of us has the opportunity to do.

12 At this point, most of you are probably thinking, “How much of my money actually goes to helping my child?” Any true skeptic would feel the same way. From my class survey, more than 50 percent of you thought that less than half of your money would go directly to your child. And I, too, was reluctant to sponsor a child at first for the same reason.

13 Because of this, I read a report on Compassion conducted by the Better Business Bureau. This report shows that 78 percent of your money goes directly to your child. Of the rest of your money, 9 percent goes toward fund-raising. The other 13 percent is for administration purposes and includes the increase in net assets.

14 Another reassuring factor for me was that when I went to Compassion International's website, I discovered that they are audited both internally on a periodical basis and externally every year. Both of these audits help to ensure that funds are properly received, tracked, and managed for each child. From this evidence it's clear that Compassion International is an upstanding organization and is deserving of its rank from *Smart Money* magazine as "one of the top ten charitable organizations in the entire country."

15 So today I'd like to encourage you to sponsor a child of your own through Compassion International. When you consider that \$28 a month amounts to less than one dollar a day, is this really too much to give to provide a child with an education, food, and health care that will help break the cycle of poverty? If \$28 a month, every month, is still too much, I encourage you to provide a child with a one-time gift of \$28.

16 Your \$28, whether you give it just once or every month, can help save a child's life and fill them with hope for the future. This is why the time to start thinking about sponsoring a child is right now, and the time to take action is today. If you are interested in sponsoring a child or want to find out more information, I'll be distributing brochures for Compassion International after my speech.

17 May your compassion for the well being of the world's children encourage you to open your heart and maybe even your checkbook. Because as Compassion International states, "while we cannot individually change the world, we can change the world for one child."

## **To Save a Child** by Dawn Follendorf

### **Commentary**

A persuasive speech seeking immediate action, "To Save a Child" is an excellent example of how to use Monroe's motivated sequence. In addition to having students read the speech, you can show the video of it from *Speeches for Analysis and Discussion: A Videotape Supplement to The Art of Public Speaking, Eighth Edition*. Here is a synopsis of the speech.

**Specific Purpose:** To persuade my audience to help children worldwide by contributing to Compassion International.

**Central Idea:** Contributing to an organization such as Compassion International can help break the cycle of poverty that affects millions of children.

**Method of Organization:** Monroe's motivated sequence

**Introduction:** The introduction consists of paragraphs 1-3. In paragraph 1 the speaker accomplishes the attention step of Monroe's motivated sequence by relating the plight of millions of impoverished children around the world to the daily activities of her audience. Paragraph 2 introduces the topic of the speech and establishes the speaker's credibility by noting that she has sponsored a child through Compassion International for the past two years. The introduction ends in paragraph 3 with a detailed preview statement that provides an excellent lead-in to the body.

**Body:** In the first main point of the body, the speaker demonstrates the need to help impoverished children around the world (paragraphs 4-7). Drawing on sources such as the World Bank and the Hunger Project, she uses statistics and testimony to argue that poverty, hunger, and poor education create a need for charitable organizations such as Compassion International. The speaker does a fine job translating statistics into terms that can be readily understood by her classmates when she states that the 24,000 hunger-related deaths that occur in the world every day are equivalent to half the students on her campus dying every day. She also draws a comparison between the number of daily hunger-related deaths and the number of Americans who die of cancer every year.

After providing a brief transition at the end of paragraph 7, the speaker moves to the satisfaction step of Monroe's motivated sequence, which constitutes the second main point in the body of her speech. Paragraph 8 provides information about the founding and growth of Compassion International. Paragraph 9 provides details about the activities of Compassion International in the communities where it sponsors children. Paragraph 10 explains the options for donating to Compassion International, with special emphasis upon a monthly gift of \$28. Paragraph 11 concludes the satisfaction step of Monroe's motivated sequence with the speaker explaining her personal involvement in Compassion International. The content of this paragraph, combined with the sincerity of the speaker's delivery, significantly

enhances her credibility and strengthens the persuasive appeal of her message.

In paragraphs 12-14 the speaker moves to the visualization step of Monroe's motivated sequence. Knowing from her class survey that many of her classmates were skeptical about the extent to which money donated to charitable organizations actually goes to the people it is intended to help, the speaker provides evidence to document the financial integrity of Compassion International. In paragraph 13 she cites figures from the Better Business Bureau to show that 78 percent of the money donated to Compassion International goes directly to helping needy children. In paragraph 14 she explains how Compassion International is audited on a regular basis to help ensure that its funds are properly received, tracked, and managed. She ends paragraph 14 with a quotation from *Smart Money* magazine indicating that Compassion International is one of the top 10 charitable organizations in the United States. All in all, paragraphs 12-14 provide an excellent example of how to develop the visualization step when using Monroe's motivated sequence.

Conclusion: Consisting of paragraphs 15-17, the conclusion presents the action step in the motivated sequence. In paragraph 15 the speaker asks listeners to donate \$28 a month. If they can't afford that, she encourages them to make a one-time gift of \$28. In paragraph 16 she calls for immediate action and explains that she will distribute brochures from Compassion International after her speech. Paragraph 17 reinforces the call for action and ends the speech with a moving quotation about the manner in which each individual can make a difference in the life of a child.