

Will it really be health care for all? Securing women's health in health care reform

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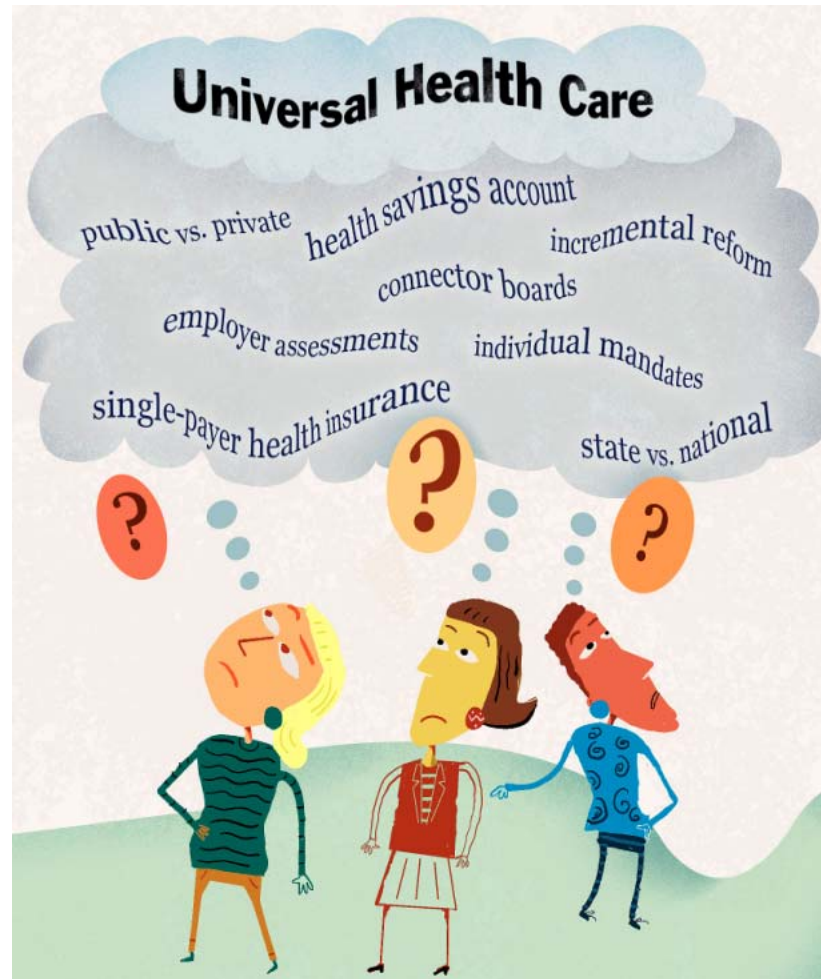
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New momentum for health care reform

- Massachusetts enacts state-level plan.
- California debates a plan to expand health insurance coverage
- New Mexico and Colorado discuss plans.
- All the major Presidential candidates have plans for health care reform.

Are women's health advocates ready for the health reform debate?

- Many of us are unfamiliar with the terms and concepts of health care reform.
- We're not sure how to evaluate competing proposals that supposedly will get us to "universal health care"



Health care reform and women's health: the risks of non-engagement

- If women's health advocates are not at the table when health care reform plans are drafted, our concerns may not be addressed.
- Key players – such as insurance companies and employers – may not be sympathetic.
- Opponents of women's reproductive health care are already powerful players in national health care reform.

Conservative religious activism on health care reform

- US Conference of Catholic Bishops
- Catholic Health Association
- National Association of Evangelicals
- National Right to Life Association
- Family Research Council
- Concerned Women for America

US Conference of Catholic Bishops: Key Criteria for Health Care Reform

- *Respect for life*: “Whether it preserves and enhances the sanctity and dignity of human life from conception to natural death.”
- Core benefits package should not include “morally objectionable procedures, such as abortion and euthanasia. Including these would be morally wrong and politically disastrous, destroying any chance of broad support for reform.”

-- Letter to the Citizens' Health Care Working Group from the Most Reverend Nicholas DiMarizio, Bishop of Brooklyn, Chairman of the Domestic Policy Committee of the U.S. Conference of Catholic Bishops, August 23, 2006

Catholic Health Association

- The nation's largest group of not-for-profit hospitals, nursing homes, health clinics
- CHA president Sister Carol Keehan has been named the most powerful person in health care by *Modern Healthcare* magazine
- Has launched "Covering a Nation" campaign: "Our Vision for U.S. Health Care"



Key principles of CHA's "Covering a Nation" campaign

"The health care system we envision will respect the role of religiously-affiliated health care organizations. Accordingly, it should:

- Protect the free exercise of ethical and religious beliefs; ensure that providers of health care services are not required to perform acts or procedures that infringe on their religious beliefs.
- Reject public financing for procedures prohibited by the *Ethical and Religious Directives for Catholic Health Services*, including abortion and euthanasia."

-- From CHA's publication, "Our Vision for U.S. Health Care"

CHA's influence in health care reform: Health Care Coalition for the Uninsured

- AARP
- American Academy of Family Physicians
- American Hospital Association
- American Medical Association
- American Public Health Association
- America's Health Insurance Plans
- Blue Cross and Blue Shield Association
- **Catholic Health Association**
- Families USA
- Federation of American Hospitals
- Healthcare Leadership Council
- Johnson & Johnson
- Kaiser Permanente
- Pfizer, Inc.
- United Health Foundation
- U.S. Chamber of Commerce

National Association of Evangelicals

(claims to represent 30 million Americans)

Leadership

President was **Ted Haggard**, before he was forced out in a sex scandal. New President is Leith Andersen.

61 denominations

Examples include:

- Church of the Nazarene
- Assemblies of God
- Baptist General Conference
- International Pentecostal Holiness Church
- The Salvation Army
- U.S. Conference of the Mennonite Brethren Churches

254 organizations

Examples include:

- Christian Broadcasting Network
- Christian Medical and Dental Society

43 colleges

Examples include:

- Dallas Baptist University
- Nazarene Bible College

Key evangelical association principles for health care reform

- “Abortion is not health care. Any health care plan which includes coverage for elective abortion should be rejected. This includes abortion referral, payment for abortion, or the training of medical personnel for abortion practices.”
- “Euthanasia should never be endorsed by government or surrogates, including mandatory health alliances.”
- “Persons who engage in behavior which adversely affects their health, such as smoking, drug and alcohol abuse, promiscuity and over-eating, should be responsible for the additional medical liability.”

---www.nae.net

National Right to Life

- New proposal for state-based health care reform aims to avoid health care “rationing,” which it equates with “involuntary euthanasia.”
- Opposed what it called the “Clinton Health Care Rationing Plan of 1993-94.”
- “The pro-life movement believes that every human being has the right to life from inception to natural death, including the right not to be denied life-saving medical treatment through health care rationing.”

Concerned Women for America

- Founded by Beverly LaHaye, wife of Tim LaHaye, author of the best-selling “Left Behind” books.
- CWA describes itself as “the nation's largest public policy women's organization.”
- Cites a 25-year history of helping its members “bring Biblical principles into all levels of public policy.”



CWA statements on SCHIP (State Children's Health Insurance Program)

- Concerned that expansion of SCHIP may be “a stepping stone to universal health insurance.”
- Upset with use of SCHIP funds to provide health care for adults in some states.
- Outraged that “some states may be using their grant money to provide contraception, abortion or sterilization services to children.”
- Lack of parental notification “means a child may receive contraception or abortion without a parent’s knowledge.”

Current progressive strategy on health care reform

- The current strategy of major progressive health advocacy groups is to focus first on convincing Americans and policymakers of the need for universal health coverage.
- They have decided among themselves to table any discussion of which services would be covered, so as to avoid arguments over things like abortion at this stage of the process.
- Their advice to women's health advocates: Once there is agreement that everybody deserves coverage, the benefit packages will fall into place.

Where does that leave women's health?

- Our issues are not on the table.
- We are being advised to hold back until agreement can be reached on achieving universal health coverage.
- But, in the meantime, the Catholic Health Association is at the table, and no women's health organizations are there.
- How can we be sure our concerns will be remembered and addressed?

Getting a place at the table for women's health advocates

- Demonstrate the value of including women and women's health concerns:
 - Women are 80% of the single-issue health care voters in this country.
 - Women are the prime purchasers and arrangers of health care for our families.
 - Women owners of small businesses are very interested in how to provide health care coverage for their employees at an affordable price. -- *Lake Research*

Build a broad-based women's health coalition

- Address concerns of uninsured *and* insured women and our families.
- Cite problems of costly premiums, deductibles and co-pays that leave us digging deep into the family pocketbook to pay for health care.
- Fight against exclusion of women for coverage because of pre-existing conditions, such as pregnancy and breast cancer.
- Advocate for a comprehensive array of women's health services, including: reproductive health care, covered option to use midwives, improved breast cancer detection and treatment, primary care, improved home care for elderly and disabled, respect for end-of-life choices.

Once we have a place at the table

- Build mutual respect and partnerships with the mainstream consumer health groups that have not traditionally advocated for women's health.
- Exercise women's influence and voting power in favor of quality, affordable health coverage that works for us and our families.
- Make sure no services are excluded from benefit packages at the beginning.
- Once we are trusted partners, we influence have a voice in the design of the benefit packages.

Health care reform and women's health: the potential benefits of getting involved

- Health care reform can be a vehicle for addressing gaps in women's access to health care, whether due to limited or no insurance coverage or other factors.
- Reproductive health issues could be mainstreamed into health care reform, rather than marginalized as "lifestyle issues" or "abortion rights" issues.
- We can promote a holistic women's health agenda that addresses care across the lifespan.

A new national initiative: Raising Women's Voices for the Health Care We Need

- This initiative aims to:
 - Raise women's voices in state and national debates over health care reform;
 - Ensure that women's perspectives about our health care needs and those of our families can be identified and powerfully articulated in health reform dialogues;
 - Influence the development of state and national health reform policies, so that the health needs of women and our families are addressed.



Raising Women's Voices

for the Health Care We Need

A collaborative project of:
Avery Institute for Social Change
MergerWatch Project of Community Catalyst
The National Women's Health Network