



agog dinner & discussion

Women's Health: Innovative ways to ensure access to quality health care for underserved women in the community

In July, a small group of women met to discuss issues related to improving the health of women and children in Oregon. MFS Board member Marsha Murray-Lusby hosted the dinner & discussion, and Michele Stranger-Hunter of the Oregon Foundation for Reproductive Health served as the conversation leader.

Most of the discussion focused on the importance of women's reproductive health, as well as the advocacy work that is being done to increase the rate of pregnancies that are planned, wanted, and result in the healthiest infants possible.

The climate of health care reform and the renewed focus on prevention provide key opportunities for reintegration of reproductive health into primary care. Reproductive health is essential to a woman's ability to sustain good health throughout her lifespan.

In the 1970s, when defining the list of essential medical services available to Medicaid recipients, reproductive health was removed from the primary care list to be dealt with as a stand-alone health service. This resulted in the fragmented health care delivery system we see today with primary care clinicians not including reproductive health and separate services from OB-GYN and Family Planning specialty clinics off to the side. Another consequence was that women with prescription health insurance coverage had to pay an average of \$600 a year out of pocket for birth control. Contraception was dealt with as a discretionary expense and the woman's problem in Oregon, until 2007 when our Legislature mandated "contraceptive equity." Finally, women are able to get prescription contraception covered by their insurance plan. Now, if a woman has prescription coverage, the insurance plan must also cover prescription contraceptives.

Today, due to a great deal of grass roots activism, Oregon is only one of six states that has no legal restraints on access to reproductive healthcare.

Healthy Women: The Key to Healthy Families

Reproductive health is essential to women's ability to sustain good health from childhood through senior years – and is critical to ensuring that pregnancies are planned and result in the healthiest outcomes for infants. By asking all primary care doctors to either provide basic reproductive health care directly or by referral, we could go a long way toward preventing unintended pregnancy, supporting pre-conception health and earlier pre-natal care. The American Academy of Pediatrics and American College of Ob-Gyns recently passed supporting initiatives. Read [Healthy Women: The Key to Healthy Families: Integrating Best Practices for Reproductive Health into Primary Care for Oregon Women](#) for more information.

Did you know...

Unintended pregnancy is the single greatest reason women fall into poverty.

- While unintended pregnancy occurs in all groups of women, incidence is particularly high among those under age 20 (82%) and women with low income (62% for those below poverty level).
- 40% of Oregon women delivering an infant in 2007 had no health insurance when they conceived. Being uninsured prior to pregnancy means they likely had less access to

contraception if they were trying to avoid pregnancy, and little or no pre-conception care if they were intending to become pregnant.

- 45% of all deliveries in Oregon are covered by OHP or Medicaid.

Emergency contraception prevents an unintended pregnancy; it does not cause an abortion.

An emergency contraceptive, such as Plan B is an emergency birth control pill that provides a second chance at pregnancy prevention. It prevents fertilization of the egg. It will not interfere with an existing pregnancy, nor will it impact a woman's ability to become pregnant in the future.

In Oregon, only 1.7% of women report they have used Plan B to prevent an unintended pregnancy. It is little known, greatly misunderstood, and highly underutilized. The single greatest way to impact the number of unintended pregnancies would be by increasing women's awareness and use of emergency birth control.

What is being taught in the schools?

Throughout the U.S., what is and isn't taught in schools about sex education varies widely, from advocating abstinence to teaching about various methods of birth control. Similarly, the sex ed curricula used in Oregon varies from district to district. In 2007, an administrative rule passed requiring all districts to offer comprehensive, medically accurate, age-appropriate sex ed. In 2009, this rule was codified by the legislature. However, the Department of Education lacks the resources to evaluate what is being offered now and help districts come into compliance. In our discussion, participants shared their personal experiences as well as that of their children's regarding sex education in Oregon schools. We also identified that parents are the best sex educators of their children but are often uncomfortable themselves talking about sexual information.

Advocacy action steps:

- Encourage health care providers to initiate conversation about pregnancy planning with their patients. A simple question like: "Do you intend to get pregnant this year?" can open the door to further conversation about contraception methods and preconception care.
- Encourage women to talk with their primary care clinicians about their reproductive health.
- Talk with women you know about emergency birth control. Plan B prevents unintended pregnancies, unlike UR486, which terminates a pregnancy.
- Request to see the sex education curriculum at your child's school. In districts where improvements in content are needed, parents are the very best advocates with their local principal, district superintendent, or School Board.
- Continue the conversation with a group of women you think would be interested in discussing and developing the solutions, and get involved with local advocacy efforts focused on women's health.

The mission of Metropolitan Family Service is to strengthen families and individuals while enhancing their participation in community life. Organized by MFS, **A Gathering of Good (agog)** is a series of

community events promoting discussion, civic engagement and social change. In addition to exploring important social issues as a community, **agog dinners & discussions** raise public awareness of MFS's effective programming for children, families, and older adults. MFS is celebrating 60 years of community service in 2010.



Because together, we can do more.