

Women and Health Care

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Based on the Henry J. Kaiser Family Foundation report titled, "Women and Health Care: A National Profile" available at: <http://www.kff.org/womenshealth/7336.cfm>

Overview

Women have unique roles and needs in the health care system. A lack of adequate access to health care jeopardizes a woman's ability to contribute to her community, care for themselves and their families, and be productive members of the work force. Women have changing health needs throughout the course of their life. These range from reproductive health needs at a younger age to chronic illnesses and higher rates of disability and physical limitations as they get older. Almost 40% of women have a chronic condition requiring ongoing medical attention (compared to 30% of men). Nearly 25% of women report that they have been diagnosed with depression or anxiety (more than twice the rate for men).

Meeting the reproductive health needs of all women is especially vital. Reproductive health and well-being is central to women's ability to achieve and maintain upward social and economic mobility. Services must be responsive to women's unique health needs and cover the comprehensive scope of sexual and reproductive health services.

Health Insurance

Women who lack access to health insurance consistently fare worse on several measures of access to care, with women who are Latina, low-income, single, and young being particularly at risk for being uninsured. Uninsured women are less likely to receive vital screening tests for several conditions, including breast and cervical cancer, high blood pressure, high cholesterol, and osteoporosis. Even when women have insurance, they are more likely to report delaying or sacrificing care that they think they need, with one reported reason being affordability. Low-income women are increasingly relying on public programs like Medicaid for their health needs, but still experience barriers due to provider shortages and waiting lists to obtain some services.

In general, women who are often most in need of health care, especially vulnerable and low-income populations, are more likely to face challenges like high costs, lack of insurance, and limited access to specialists. All of these barriers prevent meaningful access to comprehensive health care for women.

What is at Stake

- The Affordable Care Act (ACA) requires coverage of maternity care and comprehensive preventive services free of cost-sharing (which includes access to contraceptive services and supplies, well-woman visits, mammograms, cancer screenings, prenatal care, and counseling for domestic violence) in most private health insurance plans. It also prohibits sex discrimination in health care programs and activities, and eliminates pre-existing conditions exclusions which often preclude women from accessing meaningful health coverage. The ACA will also go a long way to ensuring that vulnerable women, including low-income women and women living with HIV, have adequate access to health insurance. Significant funding is set aside to eliminate health disparities and inequities that significantly impact health outcomes.
 - House of Representatives voted to repeal the ACA, and conservative senators, state legislators and governors are pursuing repeal of this historic legislation in front of the U.S. Supreme Court. The ACA takes great strides towards promoting comprehensive

health coverage and access to women, and full implementation and support of this law must be encouraged.

- Medicaid and Title X are enormous payors of public health services for millions of low-income women in the US. The beneficiaries of these programs often have no other way to access health services, including family planning services and maternity care. Medicaid currently covers nearly 1 in 5 low-income women, and pays for 1 out of every 4 births in the country. Title X is the only dedicated source of federal funding for family planning services in the country, serving more than 5 million low-income and uninsured women.
 - U.S. House Representatives voted to completely defund Title X in 2011, and several states have attempted through legislative action to eliminate Title X funding in their state. Medicaid has been the target for significant cuts, with attempts made to convert the program into a capped block grant to states (as opposed to the cooperative federal match program that currently exists). Full funding and support for both of these vital public programs must be guaranteed in order to protect women's health, and especially vulnerable and low-income women.