



FOCUS

ON PLANNED PARENTHOOD

Planned Parenthood of the Great Northwest

Winter 2011

Why We Remember Roe

by Maureen Johnson,
Development Officer

Thirty-eight years ago, in *Roe v. Wade*, the Supreme Court ruled that the right to privacy in the United States Constitution protects the right of a woman to choose whether to continue a pregnancy to term or to have an abortion. As we mark the anniversary of this landmark decision, the importance of protecting women's access to abortion is as clear as ever. Anti-choice organizations and lawmakers still aim to overturn *Roe v. Wade*, but in the absence of their ability to do so at this time, they are working tirelessly to enact restrictive laws and regulations that result in

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Birth Control Matters: Making Prescription Birth Control Affordable for America's Women

This year marks the 50th anniversary of the approval of the birth control pill. Yet, for millions of women in this country, the price is just too high, making birth control simply out of reach.

Fortunately, a provision in the new health care law may allow all FDA-approved prescription contraception to be fully covered by new health plans. Simply put, that means that women may not need to find cash co-pays or out-of-pocket payments for prescription birth control.

Under the new health care law, health insurance plans will be required to fully cover women's preventive health care services without requiring any co-pays.

Over the next year, the U.S. Department of Health and Human Services (HHS) will decide which benefits will be covered at no cost for women.

We at Planned Parenthood, including our physicians, nurses, and health professionals who see patients every day, and leading medical organizations such as the American Congress of Obstetricians and Gynecologists, believe that prescription birth control should be covered with no co-pays, so that more women can afford the method of birth control that works best for them.

This potential change in policy is simple but so far reaching. If birth control were made available at no cost, virtually all women of childbearing age in this country would benefit significantly. Women would be able to more consistently use the birth control method that works best for them, without worrying about cost, and that will help reduce the rate of unintended pregnancies and improve the health of women and their children.



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Executive Update Message from Chris

Welcome to 2011 and the 112th Congress, for better or worse.

Planned Parenthood of the Great Northwest (PPGNW) is up for the challenge. We know it's not going to be easy. We're facing a more conservative national congress who has said their top priorities are to dismantle health care reform and defund Planned Parenthood. Read further in this issue to learn that we're facing more conservative state legislatures as well. And as the red get redder, budgets do too. Despite Federal matching dollars on the table, Washington's budget is so tight we're not sure if they'll be able to afford their 10 percent share of *Take Charge*, Washington's Medicaid program to help prevent unintended pregnancy for those without insurance; yet another group that continues to grow.

Every day, local women and men are losing their jobs. But they're not just losing their income and financial well-being; they're losing access to

health care that leads to physical and emotional well-being as well. While we *know* health care reform will come, our neighbors in need simply can't wait. They can't wait for the economy to turn around, and they can't wait until 2014 to know that they can see a doctor again. These families need our help today!

More than 95,000 of your neighbors turn to us every year for essential health care and education that they can't get anywhere else. They rely on us for affordable services and information that empower them to take control of their health and futures, which is why we will always stand up for their health and reproductive freedoms. Like you, they recognize the good work that we do, and can't imagine a world without Planned Parenthood.

So we're continuing to scale up to meet their needs. By the end of this year we'll have electronic medical records "live" at all PPGNW health centers ensuring seamless care to our increasingly



mobile clients. We'll continue to partner with agencies to ensure remote counties continued access to care and look to fill gaps in more populous communities. And we'll continue to fight the good fight in local politics to ensure that the "morals" of a few do not outweigh the needs of the many.

We're here to help any who need it. We're here to lend a voice to those who otherwise wouldn't be heard. But most of all, we're here because you care. Be bold and stand up for women's health, for access and safety, and for reproductive freedom.

Together, we can build healthier communities throughout the Great Northwest.

Respectfully,

A handwritten signature in blue ink that reads "Christine R. Charbonneau". The signature is fluid and cursive, written over a white background.

*Christine Charbonneau, CEO
Planned Parenthood
of the Great Northwest*

2 Join us in Olympia: Washington's Reproductive Rights Lobby Day is Feb. 28.

Legislative Report

by Kristen Glundberg-Prossor

ALASKA loses pro-choice seats

The 2010 election changed

political environments across the nation and Alaska was no exception. The Alaska State House gained two more anti-choice legislators and the Senate remained the same, with a mixed R and D bi-partisan majority that has agreed not to work on controversial social issues. It is likely that anti-choice / anti-family planning legislation will be introduced and passed in the House. However, potentially harmful legislation could be stopped in the Senate.

Planned Parenthood of the Great Northwest's legislative watch list includes:

- Restrictions to medically necessary abortions for low income women.
- "Choose Life" License Plates with proceeds going to support Crisis Pregnancy Centers.
- Constitutional amendment stipulating that the constitution may not be interpreted to create abortion related rights in Alaska.

The 2011 Alaska Legislature convened on January 18. For more information or to get involved, please email ppactionak@ppgnw.org.

IDAHO just got more red

Idaho 2010 elections resulted

in moderate Republicans losing seats in the primary and Democrats losing seats in the general. PPGNW now counts eight pro-choice / pro-family planning seats in the Senate, out of 35; and 14 pro-choice / pro-family planning seats in the House, out of 70. PPGNW's goal to expand access to women's health care just got a bit tougher but our Idaho team is up for the challenge.

The 2011 legislative session convened on January 10, and will likely focus on Idaho's continuing budget crisis. We may also see a greater number of bills promoting an even more conservative ideology with regard to reproductive health. Our public affairs team will be busy monitoring all legislation which attempts to restrict access to reproductive health care services.

PPGNW is advocating for legislation that amends Senate Bill 1353, passed in 2010. This measure gave pharmacists and other health care providers the right to refuse to dispense abortifacient drugs and emergency contraception based on their personal beliefs. PPGNW will be lobbying to strike emergency contraception from the list of medications that a pharmacist or other health care provider can refuse to dispense.

For more information about PPGNW advocacy initiatives, please email ppactionid@ppgnw.org.

WASHINGTON slightly less pro-choice

The Washington Legislature

convened on January 10, with a somewhat altered composition regarding reproductive health policy. We lost three pro-choice / pro-family planning seats in the Senate and five in the House. The good news for Planned Parenthood is that the legislature retained a pro-choice / pro-family planning majority in both chambers.

The 2011 Legislature faces a budget crisis of historic proportions and PPGNW's number one priority is to retain funding for family planning. A budget crisis is exactly the wrong time to cut family planning because family planning saves over four dollars in unintended pregnancy care costs for every dollar we put in – starting the same year. Some family planning programs, like *Take Charge* Medicaid, are matched with nine dollars in federal funds for every dollar Washington State puts in. That's funding we can't afford to walk away from! As budget writers and the Governor look for cuts to balance the budget, Planned Parenthood's voice needs to be the loudest to retain critical funding for family planning.

Please join us for Lobby Day on February 28, 2011, in Olympia. It's fun! We provide training, transportation, and lunch! To sign up, or for more information on the Washington legislative agenda, email ppactionwa@ppgnw.org.

PPGNW Celebrates National Condom Week

Did you know that one out of two sexually active young people will get a sexually transmitted disease (STD) by age 25, and most won't know it? Did you also know that in the United States it costs more than 8 billion dollars a year to diagnose and treat STDs and their complications? How about this -- more than 3 million unintended pregnancies occur in the U.S. each year.

What we all need to know is that condoms are the only proven method to reduce chances of HIV and other STDs. Condoms also protect against unintended pregnancy and are affordable and widely available. Condoms, indeed, deserve to be celebrated!

PPGNW will be promoting National Condom Week, February 13-19, by offering free condoms in all of our 31 health centers and distributing over 70,000 condoms to university and community college campuses throughout the region.

With more than 15 million new cases of STDs diagnosed each year, PPGNW is doing its part to address this public health problem and will spend National Condom Week educating our patients and the public about the efficacy of the condom and promoting its use. Happy Condom Week!



Birth Control Matters

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Given that most women spend three decades of their lives trying to avoid getting pregnant, it is no surprise that this policy has widespread support. A survey conducted by Hart Research Associates found that 71 percent of all voters were in favor of fully covering prescription birth control with no co-pays. The number is even higher among women voters, of which 81 percent supported this policy.

The support holds strong across political, religious, and ethnic groups. The survey found that 77 percent of Catholic women voters and 72 percent of Republican women voters support covering birth control with no co-pays. Even 60 percent of male voters support this policy.

Most importantly, the survey revealed that fully covering birth control is absolutely necessary. More than one-third (34 percent) of American women voters have struggled with the cost of prescription birth control at some point in their lives, and, as a result, have used birth control inconsistently. That number rises dramatically among younger women, with more than half (55 percent) mentioning a time when they could not afford to use birth control consistently.

This is not surprising, given that out-of-pocket costs for birth control can be very expensive especially for many young women and women with low incomes. Insurance co-payments for birth control pills typically range between \$15 and \$50 per month, and for other methods, such as IUDs, co-pays and other out-of-pocket expenses can reach into the hundreds of dollars. Since the average American woman wants to have two children, she'll spend approximately five years pregnant, postpartum, or trying to have children, but 30 years trying to prevent pregnancy. That can add up to thousands of dollars spent on prescription birth control.

By eliminating this cost barrier and providing prescription birth control with no co-pays or out-of-pocket costs, women will have access to a full range of reliable, safe, and effective birth control methods, thereby helping them plan their families and reduce unintended pregnancies.

In the U.S., half of all pregnancies are unintended. If we are serious about reducing the unacceptably high rate of unintended pregnancies in this country, we need to get at the root cause and take practical steps to increase access to affordable birth control. The simple fact is that making contraception affordable reduces the number of unintended pregnancies. That's why Planned Parenthood and its thousands of health professionals support fully covering prescription birth control with no co-pays. We know from the three million patients Planned Parenthood health centers see each year that this change would dramatically improve the lives of women.

To sign the petition to HHS Secretary Sebelius to voice your support for birth control with no co-pays, please visit www.birthcontrolmatters.org.

Write-in-me Anonymous Journal Entry

I first came to Planned Parenthood (PP) when I was 18. I wasn't even sexually active yet, but my mom wanted me to be prepared – so I enrolled in *Take Charge* [Washington State Medicaid Family Planning Program]. I used *Take Charge* all through college to get my birth control. I also had terrible endometriosis (readers: that's when the lining of the uterus starts growing in places OTHER than the uterus – it's evil and can cause lots of problems). A doc at PP recommended a prescription that would lengthen my cycle to every three months instead and after about a year my endometriosis symptoms started being less horrible.

I lost my job and health insurance in February and started my own business. I cannot afford insurance, just like college, so I came back to PP. The staff are always so helpful and reassuring (even when Medicaid messed up, they helped me get it resolved), and my very expensive birth (and endometriosis) control pills are free. It's so great that this program exists!

Everyone who works at PP is working to protect women's rights. It's so awesome and amazing that you put yourselves on the line like that – in this age of domestic terrorism, especially – when as healthcare professionals you could opt for private hospitals and clinics and make a lot more money. You are good people. You give so much and get thanked so little. So thank you. I wish I could do more, or say more, but you have made it possible to live without debilitating pain, without being afraid of getting pregnant and risking my bodily health during pregnancy. I can love my body and my partner the way I want to, and without fear, because of you. I can live my life and have my business because of you. You may not realize it, but Planned Parenthood has meant more for me, as a low-income woman with grand aspirations, and endometriosis, than just about anything else. Control of my body influences everything else I've done.

This is not a place of shame; it's a place of hope.

Health Center Update

by Bill Fairchild, Director of Marketing and Communications

Whether relocating health centers or rolling out systems upgrades, PPGNW continues to increase services and efficiencies.

Our new Northgate location opened in December to a busy schedule. This health center provides access to a previously underserved population in north Seattle between our Roosevelt location near the University of Washington and our Lynnwood health center, 30 minutes to the north. Northgate employs a new décor scheme designed to reduce patient anxiety in a health care setting. Learn more about this health center and its services online at www.ppgnw.org/ngt.

PPGNW also relocated our Sequim health center to its own location. This health center, previously operated by Family Planning of Clallam County, had been serving clients in a shared space which was not ideal for either staff or patients. The new location is only blocks away from their old address and, along with our Port Angeles, Forks, and Bremerton health centers, provides service to the Olympic Peninsula. Visit www.ppgnw.org/sqm to learn more.

Northgate opened “live” with electronic medical records, increasing to nine the number of connected health centers. The remainder of health centers will be “live” by the end of this calendar year with our locations in Fairbanks, Alaska; and West Seattle, Washington being brought on line early in the fourth quarter.



Remembering Roe

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additional barriers to women seeking health care, including required parental notification, mandatory counseling, and waiting periods. Anti-choice legislators used last year's health care reform debate as an opportunity to severely restrict women's access to abortion.

Although anti-choice legislators tried mightily to ban private health insurance coverage for abortion altogether, the final legislation contained a proposal by Senator Ben Nelson which separates coverage for abortion care from all other health care. The practical effect is that a woman will have to write two checks for her health care coverage – one to cover abortion services should she need them and another to cover all her other health care needs. The Nelson amendment places unacceptable burdens on insurers and consumers who want to respectively sell and purchase private health insurance plans that cover abortion. Additionally, with the recent change in leadership in the U.S. Congress, Planned Parenthood can anticipate a firestorm of legislation seeking to further restrict access to abortion. Despite being the law of the land for 38 years, *Roe v. Wade* is under enormous pressure.

The *Roe v. Wade* anniversary provides us with an opportunity to look back at how far we have come, and also look closely at the challenges that lie ahead to ensure a woman's right to choose. We reached out to two PPGNW leaders, Lee Minto, retired CEO of PPGNW and life-long champion of women's rights; and Alaina Smith, former president of PPGNW's Young Professionals network and current PPGNW Board

Member. When asked to reflect on the significance of the *Roe v. Wade* decision and the challenges ahead, Lee Minto commented, "Women have had the option to access safe, legal abortions for the past 38 years in this country thanks to *Roe v. Wade*; and for 41 years in Washington State by a reformed law

brought us as a society and to note some of the many benefits that resulted from the legalization of abortion. Before 1973, only 36 percent of abortions were performed at or before eight weeks of pregnancy. Today, 88.4 percent of all legal abortions are performed within the optimum safest time, during the first



12 weeks of pregnancy, and 62 percent take place within the first eight weeks of pregnancy. Only 1.3 percent occur after 20 weeks. Perhaps the most important benefit was the end of an era that supported the proliferation of "back alley butchers" who performed unsafe, medically incompetent abortions that left many women dead or injured.

passed by our citizens. I can't imagine that in the year 2011, American women could be deprived of their right to make decisions about their own child-bearing by an act of a suddenly more conservative Congress. Congress needs to hear from all of us who fought for and value freedom of choice in this country." Alaina Smith, who has grown up and lived in an era that has supported a woman's basic right to choose explains, "Even though I grew up in a post-Roe environment, that doesn't mean I take it for granted. With every challenge to women's right to choose – from South Dakota to the Supreme Court – it is more obvious that this is a battle our generation needs to keep fighting."

Following the legalization of abortion, the largest decline in birthrates was seen among women for whom the health and social consequences of unintended childbearing are the greatest – women over 35 and teenagers. Of significant note is the fact that the overall U.S. abortion rate has declined steadily since 1980, most rapidly from 1990-1996, primarily due to better contraceptive access and use.

We have a unique opportunity to thoughtfully consider how far Roe has

Looking ahead, we will continue to urge the Obama administration and members of Congress to fix the Nelson provision within health care reform ensuring that women will be able to access insurance coverage for abortion and allow them to make important medical decisions allowed by the U.S. Supreme court in *Roe v. Wade*.

Alaska Parental Notification Moves Forward

by Laura Einstein, Chief Legal Counsel

In August 2010, voters in Alaska approved a ballot initiative requiring parental notice before a minor (women under age 18) can have an abortion. Lawyers from the Center for Reproductive Rights, PPFA, ACLU, and PPGNW joined forces to wage a legal challenge to the new law.

On November 19, 2010, we filed a motion for preliminary injunction, requesting the court to enjoin the law from going into effect because the law violates the Alaska Constitution. On December 13, the day before the law was to go into effect, Judge Suddock, who is assigned the case, issued an order enjoining parts of the law.



The judge agreed with us that certain requirements in the notice process were too burdensome and vague; doctors trying to figure out how to comply with the specific requirements faced serious criminal or civil penalties. Therefore, Judge Suddock enjoined the criminal or civil penalties; permitted PPGNW staff (instead of a doctor) to provide the notice to a parent; shortened the process for providing notice to avoid unnecessary delays; and relaxed the evidence a minor must show in a judicial bypass proceeding. While not a total victory, it is a giant step

toward making it possible for us to comply with the law in a way that is not burdensome for our patients.

Why didn't the judge enjoin the whole law? The judge believed he had an obligation to try to implement the will of the voters. The judge also believed that based on some remarks by the Alaska Supreme Court in an earlier decision, the Supreme Court had determined that a parental notice law (as opposed to a parental consent law) was permissible under the Alaska Constitution. Going forward, we will continue to try to convince the judge that the whole law is unconstitutional. A trial will probably take place in early 2012.

Social Media at PPGNW

by Nathan Engebretson, New Media Coordinator

Recommendations from our friends have a strong influence on us. From watching movies to trying out a new restaurant, if our friends like it, we're more likely to give it a try. More and more people are discovering their friends' interests and opinions and are being influenced by their views and suggestions through social media sites like Facebook.



One of the easiest ways you can support Planned Parenthood of the Great Northwest (PPGNW) is by staying connected through our social networking sites. Not only will you be up-to-date on the latest reproductive and sexual health news and opportunities to get involved, but every comment, *like*, and forward is a public show of support for PPGNW. By becoming a Facebook Fan, a YouTube Subscriber, or a Twitter Follower you're giving us your social media stamp of approval that might convince your friends that they, too, should get involved with PPGNW. Plus, your comments and posts enrich our online Planned Parenthood community.



So go ahead. Make a comment, share a link, become a fan, post a photo, click that *like* button. Your participation is building an online community of supporters. Every time you do, you're performing a mini-advocacy action on behalf of an organization you care about. Your online connections will see your support and soon your friends will be our fans.

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PLANNED PARENTHOOD[®] OF THE GREAT NORTHWEST



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Someone you know is planning for the future

Please join the PPGNW Legacy Club for an informational seminar on planned giving and charitable gift annuities. Featuring guest speaker Howard A. Johnson CIMA, CFP, ChFP, CLU.

Friday, March 11, 2011, from 11:30 a.m. to 1:00 p.m. at 2001 East Madison Street, Seattle, WA 98122

A Charitable Gift Annuity (CGA) can help stabilize your income during volatile economic times. Current rates for CGAs are 5.5% and above for those over 65.

Please join us to learn more. Lunch will be provided, but space is limited. RSVP to Jennifer.Pan@ppgnw.org or call 206.328.7529.

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