



access



GATHERING OF GODDESSES AND GODS RAISES \$146K FOR WOMEN'S HEALTH FUND

Planned Parenthood of Indiana and Kentucky (PPINK) celebrated like it was the Roaring 20s in late April, raising \$146,000 for the Women's Health Fund at the 12th annual Gathering of Goddesses and Gods. Honorary Chair Marianne Glick welcomed attendees, many dressed in 1920s-inspired garb, and contributed a generous gift to match attendees' donations during the event. In addition to dinner, dancing and a silent auction, attendees were treated to unique pampering experiences, including henna tattoos, mini-massages, a speakeasy with vodka tasting, and dancing instruction. The proceeds will be used to help provide preventive health care for women and men in need in Indiana and Kentucky. The Women's Health Fund also provided 389 people with sexually transmitted disease (STD) testing at no cost to them during the month-long Get Yourself Tested promotion. Next year's Gathering of Goddesses and Gods will be held April 9, 2016—save the date and stay tuned for details!



LEFT TOP: Marianne Glick, honorary chair of the 2015 Gathering of Goddesses and Gods, chats with PPINK President and CEO Betty Cockrum at the 12th annual gala on April 25, 2015, in downtown Indianapolis.

LEFT BOTTOM: PPINK Youth Program Specialist Lizzy Bartelt, right, and Teen Council volunteers and interns entertained and educated attendees with their game "Are You Smarter Than a Teen Council Member?"

RIGHT: PPINK President and CEO Betty Cockrum addresses the crowd of 650 supporters, donors and volunteers.

CAUSES FOR CELEBRATION

Any time a legislature leaves town without doing serious damage to providers of reproductive health care is cause for celebration.



Yes, we are declaring outcomes of the Indiana and Kentucky legislative sessions victories and we are celebrating (see p. 2).

That doesn't mean there aren't more regulations—there are. And it surely doesn't mean some elected representatives didn't display some of the ugliest behavior I've ever seen in hearings and testimony—they did.

But we were strong, we were steadfast, and we made sure our voices were heard. Thank you.

Other states aren't so lucky. In Congress and in many other states—Alabama, Wisconsin, Ohio, Texas, to name a few—legislators remain intent on reducing access to reproductive health care. These "gynoticians"—politicians trying to pass themselves off as gynecologists—have been clear their intent is to put a stop to legal abortions. We know that come next January, the gynoticians will be at it again in Indiana and Kentucky. We wonder when a license to practice medicine was granted to certain legislators as they were sworn in as lawmakers.

Every so often, though, we get an encouraging sign. A few weeks ago, Gallup released the results of a poll showing that for the first time in many

Continued on page 4

Leadership Changes



After a long search for a new vice president of patient services, we decided the smart move for the long haul was to do some reorganizing of the Planned Parenthood of Indiana and Kentucky (PPINK) leadership

team. Suzannah Wilson Overholt has assumed responsibility for the daily operations of patient services. She continues in her role overseeing human resources, information technology and facilities, and has the title of Chief Operating Officer.

“Suzannah has for six-plus years demonstrated, without fail, the passion, work ethic and smarts to do what needs to be done to best serve the PPINK mission going forward,” President and CEO Betty Cockrum observed.

A new position of chief financial officer, reporting to Cockrum, has been created – it is anticipated that a new talent will join us in the near future to fill that critically important role. In addition, Vice President of Marketing and Education Judi Morrison has taken leadership of PPINK internal and external communications efforts.

“This new structure will ensure that PPINK achieves the sustainability and voice that is so critical to our organization,” Cockrum said.

Legislative Victories in Ind., Ky.

It was an interesting legislative year, alright, and not one especially kind to women. With Indiana making national news for all the wrong reasons—Religious Freedom Restoration Act, anyone?—we’re thankful to be celebrating anything at all.

Several opponents courageously offered their stories and encouraged the legislature to focus on supporting families, rather than intruding on their deeply personal decisions.

The Indiana session ended with more medically unnecessary regulations targeting the provision of abortions, but without some of the most potentially damaging restrictions on a woman’s ability to access reproductive health care. Fortunately, all proposed anti-choice legislation failed in Kentucky but so, too, did proposals seeking to protect women.

KENTUCKY

In Kentucky, two bills that would have reduced access to reproductive health failed to advance in the House of Representatives Health and Welfare Committee. One of them would have required a woman seeking an abortion to have an in-person counseling session 24 hours before an abortion procedure. The other would have required a physician to perform an ultrasound on a woman seeking an abortion and to describe certain details to the woman.

Similar mandates have burdened Indiana women and providers for years. We remain forever thankful to Kentucky’s Reproductive Freedom Project, under the umbrella of the American Civil Liberties Union of Kentucky, for again leading lobbying efforts in Frankfort to defeat these bills.

Unfortunately, a bill that would have protected the rights of pregnant workers also failed to become law in Kentucky. The Pregnant Workers Fairness Act would have required employers to make reasonable accommodations for pregnant women to keep them safe, healthy and employed while pregnant—not exactly outrageous demands.

The impetus for the bill was a police officer in Florence, Ky., whose chief refused to put her on light duty while pregnant, citing a department policy that allowed light duty only in case of injury. The legislation sailed through the Kentucky House of Representatives before stalling in the Senate, which failed to take action on it in the closing days of session. The support for this bill was widespread, and we’re hopeful that similar common-sense legislation that encourages the health, safety and economic stability of women and families will reappear next year.

INDIANA

One of the brightest spots in an otherwise dreary session was the widespread opposition to an Indiana Senate bill that would have banned abortion based on sex or disability. Despite questions about the enforceability of the measure—one senator observed such a law would succeed only in making women lie about their reasons for seeking an abortion—anti-choice groups continued to pursue it, and it passed the Indiana Senate easily.

Several opponents—including an advocacy group for persons with disabilities and a mother with a story of a pregnancy gone tragically, hopelessly wrong—courageously offered their stories and encouraged the legislature to instead focus on supporting families, rather than intruding on their deeply personal decisions. Many Planned Parenthood Advocates of Indiana and Kentucky (PPAIK) supporters called and wrote their Indiana legislators, too. Thanks to these voices, the bill failed to receive a hearing in the House of Representatives. However, we expect to see it again next year.

Meanwhile, other bills did move. As of this writing, we are awaiting direction from the Indiana State Department of Health that will set forth what abortion providers must do to comply with a new law concerning disposition of aborted remains. We hope this won’t have a significant impact on our health centers, but we do know it will result in still more difficult conversations and still more forms for women to fill out in order to obtain an abortion.

We also are waiting to find out exactly how SEA546, which redefines an abortion facility to include those that provide only non-surgical abortions,

Continued on page 7

ACA UPDATE

MORE HOOSIERS ACCESSING ACA BENEFITS

Although Indiana lagged behind much of the rest of the country in expanding health care access through the Affordable Care Act (ACA), enrollment in the state’s Medicaid expansion plan—HIP 2.0—is increasing, bringing health care coverage to greater numbers of low-income Hoosier women and men.

Between Feb. 1, when HIP 2.0 was launched, and early June, 177,000 Hoosiers enrolled in the program, joining 110,000 people in existing state health coverage programs, according to state officials.

71 percent of those enrolled in HIP are women, and every county in Indiana has at least several hundred people enrolled. In June, the state started an advertising campaign to get even more Hoosiers signed up. Planned Parenthood of Indiana and Kentucky (PPINK) health centers that receive Title X funds have a certified ACA Navigator on staff to help people find coverage they qualify for and help them choose a plan.

It’s clear that women and families are benefiting from the Affordable Care Act. We also know from our health centers that many Hoosier women and men are still falling through the cracks, unable for a variety of reasons to access coverage.

“It’s clear that women and families are benefiting from the Affordable Care Act—for many women it’s the first time they’ve had guaranteed maternity coverage and contraception with no co-pays, along with other health coverage,” said PPINK President and CEO Betty Cockrum. “We also know from our health centers that many Hoosier women and men are still falling through the cracks, unable for a variety of reasons to access coverage.”

About 225,000 people in Indiana have obtained insurance through the federal exchange marketplace, which provides premium subsidies for lower-income enrollees. These subsidies were affirmed with a court case recently decided by the U.S. Supreme Court (see right).

Late last year, an estimated 700,000 Hoosiers still lacked health insurance coverage of any kind. For people unable to obtain or keep coverage through one of the programs or in the private market, PPINK’s Women’s Health Fund is available to help women and men obtain the preventive services they need. Our Abortion Fund is also available to help low-income women obtain an abortion, which isn’t covered under public or exchange health insurance. For more information on supporting these funds, visit www.ppink.org.

KIPDA KYNECT PARTNERSHIP PROVIDES KENTUCKIANS WITH ONE-STOP SHOP



Meredith Eskridge is the resource and benefits specialist at the Louisville health center.

PPINK continues to support and promote access to affordable health insurance options made available through the Affordable Care Act. Through a partnership with KIPDA (Kentuckiana Regional Planning and Development Agency) and Kynect, Kentucky’s health benefit marketplace, the Louisville PPINK health center now has a resource and benefits specialist on site. Meredith Eskridge provides PPINK patients with information on affordable health insurance including Medicaid and guides them through the application process. Based on a patient’s eligibility criteria, she also advises on other social service benefits/resources that are available to facilitate improved healthcare choices.

Medicaid and social service benefit eligibility is available year-round but the KIPDA Kynector program is also gearing up for the next enrollment period, which begins Nov. 1, 2015, and runs through Jan. 31, 2016. The resource and benefits specialist is available to assist Kentucky patients during regular health center hours. For assistance, KIPDA can be reached at **502.266.5571**.

KING V BURWELL DECISION GOOD FOR WOMEN

Planned Parenthood of Indiana and Kentucky (PPINK) applauded the U.S. Supreme Court’s late June decision in *King v. Burwell* as a positive for women.

“This decision ensures that millions of women in the United States can continue to afford health care with subsidies for health insurance premiums,” said PPINK President and CEO Betty Cockrum. “For women, the Affordable Care Act (ACA) provisions ensure affordable access to comprehensive women’s health services, including birth control, maternity and prenatal care, mammograms and other critical preventive health services without a copay.”

Indiana is one of 34 states affected by the court ruling that didn’t establish a state-based health insurance marketplace under ACA. In states that do have their own state-based exchanges, such as Kentucky’s Kynect, premium subsidies were not in question in *King v. Burwell*.

IN THE NEWS: SOUTHERN INDIANA HIV OUTBREAK

This spring, a public health crisis emerged in southeastern Indiana as scores of Scott County residents—170 and counting—tested positive for HIV, largely spread through intravenous drug use.

As state health officials and the U.S. Centers for Disease Control set up shop in the small town of Austin, Planned Parenthood of Indiana and Kentucky (PPINK) acted as a resource for local and national media covering the HIV outbreak in southern Indiana.

We've worked to spread the word about our testing and education services for HIV, syphilis, hepatitis B, hepatitis C and other sexually transmitted diseases (STDs). We've also pointed out that as spending on the public health infrastruc-

ture fails to keep up with the increasing cost of providing health care, less-populous areas like Scott County and other rural counties throughout Indiana and Kentucky are affected the most.

That decline in funds from government sources was a factor in PPINK closing five Indiana health centers in recent years—including the health center in Scottsburg, Ind., the county seat of Scott County.

Throughout the spring, we contributed to articles in numerous outlets, including:

- Associated Press
- Louisville Courier-Journal
- Terre Haute Tribune Star
- Bloomington Herald-Times
- Huffington Post - USA Today
- AU, a national magazine covering HIV and AIDS-related issues

Visit www.ppink.org/announcements to find links to relevant news articles.

CAUSES FOR CELEBRATION

years, more people identify themselves as “pro-choice” than identify themselves as “pro-life.” This is big. We know a lot of people wouldn't put themselves in either category, but it's encouraging to hear that the trend is shifting in the right direction.

And then, Planned Parenthood of Indiana and Kentucky (PPINK) and other Planned Parenthood affiliates started getting calls from the Associated Press about their survey of abortion statistics, showing a decline in the number of abortions in most every state between 2010 and 2013. That's a welcome trend, and we celebrate the proven success brought to us by access to contraception (especially increased use of long-acting reversible contraceptives and emergency contraception) and medically accurate education that enables women and men, especially young ones, to avoid unintended pregnancies.

Interesting thing, though—two states that actually showed increases in the number of abortions between 2010 and 2013 were Michigan and Louisiana. These states share a border with Ohio and Texas, two states where gynoticians have been relentless in erecting barriers to access. It appears the only thing lawmakers in Ohio and Texas have succeeded at is sending women across state lines to obtain the services they need. We say it time and time again – women have always found ways to terminate their pregnancies. Let's first help with

planning pregnancies and let's also make certain options exist for termination that are safe and without undue burden.

Along those lines, we here at PPINK are continuing our internal efforts to ensure we are a provider of reproductive health services long into the future. As we enter a new fiscal year, we are investing in staff and structure to ensure our long-term financial health. There is much yet to be done, and a solid foundation and legacy to build upon. We embrace our new fiscal year with vigor and focus. Your abiding support carries us—we thank you.



Betty Cockrum, President and CEO

Continued from page 1

Peer Education Wraps Up Another Successful Year

In May, the Louisville TeenREACH program raised awareness about Planned Parenthood's “Get Yourself Tested” (GYT) campaign. Also in May, the Indianapolis Teen Council held an end-of-year party to celebrate the hard work of the 2014-2015 class. Peer education programs take a break during the summer months and will start up again in August.



Journalism Award for Camp Summit Coverage

A series of articles from spring 2015 that appeared in the *Times of Northwest Indiana* featuring our education programming at Camp Summit juvenile detention facility in Laporte County received a second-place award for government/politics coverage from the Indiana chapter of the Society of Professional Journalists. The series included articles about Camp Summit students and the classes taught by Sara and Albert Reuben Partners in Health Education, which are funded by a federal grant through a partnership with Health Care Education and Training (HCET). Other articles in the series covered the political battle that ensued when Gov. Mike Pence announced plans to close Camp Summit. Soon after the reporting, the plans to close the facility were put on hold indefinitely.

Support for this project is through the Personal Responsibility Education Program Competitive Grants under the Affordable Care Act HHS-2012-ACFACYF-AK-028.

Calling All Young Professionals in Indianapolis, Louisville

PPINK is seeking young professionals of all backgrounds to get involved with Planned Parenthood Young Leaders (PPYL) in Louisville or a re-launched group in Indianapolis. PPYL members participate in advocacy and fundraising efforts in conjunction with PPINK staff. Joining PPYL gets you access to events including trivia nights, advocacy trainings and networking with other Planned Parenthood supporters in your community!

For more information on PPYL in Louisville, please contact Tamarri Wieder at: tamarra.wieder@ppink.org

For more information on PPYL in Indianapolis, please contact Wanda Savala at: wanda.savala@ppink.org

Planned Parenthood of Indiana and Kentucky

PRESIDENT AND CEO
Betty Cockrum

CHIEF OPERATING OFFICER
Suzannah Wilson Overholt

VICE PRESIDENT OF PUBLIC POLICY
Patti Stauffer

VICE PRESIDENT OF MARKETING AND EDUCATION
Judi Morrison

BOARD OF DIRECTORS
Marya M. Rose, J.D., Chair
Kim Greene, J.D., Chair Elect
Katherine McConahay Willing, Secretary
Alan Albright, J.D., Treasurer

Susan Bornstein, M.D.
Michael Carter, J.D.
Robert Dion, Ph.D.
Claudette Einhorn
Sue Eleuterio
Angela Evans, J.D.
Steven Goldstein, M.D.
Crystal Grave
Africa Hands
Stephenie Hoelscher
Hervey Howell
Michele Janin
Senior Rabbi Brett Krichiver
Amy Levander
Christie Moore, J.D.
Stephanie Young Moss, Ph.D.
Brooke Pardue
Ursula Penrose, N.P.
Yvonne Perkins, C.P.A.
Nathan Ringham
Meredith Rubin
Cynthia Simon Skjodt
Todd Steele
Aaron Yarmuth

Youth Rally at Kentucky Statehouse



YOUTH RALLY DAY Peer educators from the Louisville TeenREACH program, along with PPINK Educator Taylor Ewing Johnstone, spoke and met with legislators at the Kentucky State Capitol in Frankfort during the 2015 session.

PPINK
SOCIAL MEDIA



PLANNED PARENTHOOD OF INDIANA AND KENTUCKY
Facebook.com/PPofIN
Twitter.com/PPIndKentucky

SARA AND ALBERT REUBEN PARTNERS IN HEALTH EDUCATION
Sarphe.wordpress.com

PLANNED PARENTHOOD ADVOCATES OF INDIANA AND KENTUCKY
Facebook.com/PPAdvocatesIndiana
Twitter.com/PPAdvocatesofIN

Supporters Sway County Council in Northern Indiana

In March, the St. Joseph County Council in Indiana defeated a proposed ordinance that was billed as an “Ordinance Concerning Patient Safety.” This potentially damaging ordinance, had it passed, would have created a new barrier for women in St. Joseph County (South Bend, Mishawaka and surrounding areas) seeking safe, legal abortions.

The voices of our supporters indeed carry great power, especially when backed by factual, medically accurate information.

The ordinance would have required physicians providing abortions in St. Joseph County to have admitting privileges at a local hospital—already a state-level requirement in Indiana—and would have required the county health department to maintain records of abortion complications and enforce the ordinance.

St. Joseph County Council members voted 6-3 to defeat the measure after an effective and organized grassroots effort led by April Lidinsky and Julie Wells, co-chairs of PPINK North Central Community Action Partners (CAPS), and former PPINK board member Dr. Elyn Stecker. These local advocates for women’s reproductive health helped educate County Council members and the community as a whole about the proposed ordinance’s lack of medical necessity and negative consequences.

Local PPINK CAPS members built a strong coalition of supporters, who stood in agreement with professional health and medical groups, including the St. Joseph County Board of Health, on the ordinance.

“The voices of our supporters indeed carry great power, especially when backed by factual, medically accurate information,” said Betty Cockrum, president and CEO of PPINK. “Ordinances like this are simply government intrusion into women’s health care and violate the sacred and private relationship between a woman and her doctor.

“We are most grateful to PPINK CAPS members, the elected officials who stood up against this ordinance, and the many organizations and citizens who lent their voices to ensure women in St. Joseph County continue to have access to the full range of reproductive health care,” Cockrum concluded.

LEGISLATIVE VICTORIES IN IND., KY.

Continued from page 2

will affect our Lafayette health center. A judge late last year struck down a previous version of this law that exempted physician offices. We knew the Indiana General Assembly would be eager to “fix” this law to make it pass Constitutional muster. We may again see the inside of a courtroom before this is done. No matter what, we will continue to serve the Lafayette community just as we have for more than 40 years.

And just one more. Indiana’s self described “education session” missed opportunities to promote effective public health education policy. Indiana legislators struck down a bill to expand comprehensive sex education. The committee chair issued an edict that the words “sex” and “pregnancy” were NOT to be used in testimony. Legislation designed to promote HPV awareness failed due to last minute intervention by the Governor.

DISEASE INTERVENTION

As the sessions neared the end in both Indiana

and Kentucky, issues related to virus transmission and drug abuse came forward in both Indiana and Kentucky. Once again, our southernmost legislators proved to be the most interested in taking measures to help protect the health of its citizens.

In both states, county and state health departments are grappling with disturbing rises in the rates of infection of HIV, hepatitis C and syphilis. All three infections are easily spread through intravenous drug use, as well as sex. Communities in both states that find themselves in a cycle of poverty, drug abuse and lack of economic opportunity are increasingly also finding themselves dealing with a public health crisis.

The Kentucky legislature, moved by a grassroots effort led by families of Kentuckians who lost their lives to drug overdoses, voted to expand drug treatment programs using state funds, and to permit needle exchange programs that would help prevent transmission of infections through intravenous drug users’ sharing of needles. Communities around the

state, including Louisville, quickly moved to start such programs in Kentucky.

In Indiana, an HIV outbreak centered in Scott County has made national and even international news for the rapid rate of transmission and sheer number—170 cases and growing—of HIV infections in such a small population. After an initial reluctance to implement a needle exchange program at all, Gov. Mike Pence finally implemented an emergency 30-day program and then extended it to a year, followed by legislative approval of programs only in communities facing an imminent public health crisis.

As summer moves along, we are highlighting the role that Planned Parenthood’s education, counseling and testing resources can play in a strong public health network (see p. 4), and the need to adequately fund that network. And we will keep working and building, because we know that come January, when the legislative season starts again, we will be fighting for our lives once more.

Planned Parenthood of Indiana
and Kentucky

P.O. Box 397
Indianapolis, IN 46206-0397
317.637.4343 / 800.230.PLAN
ppink.org

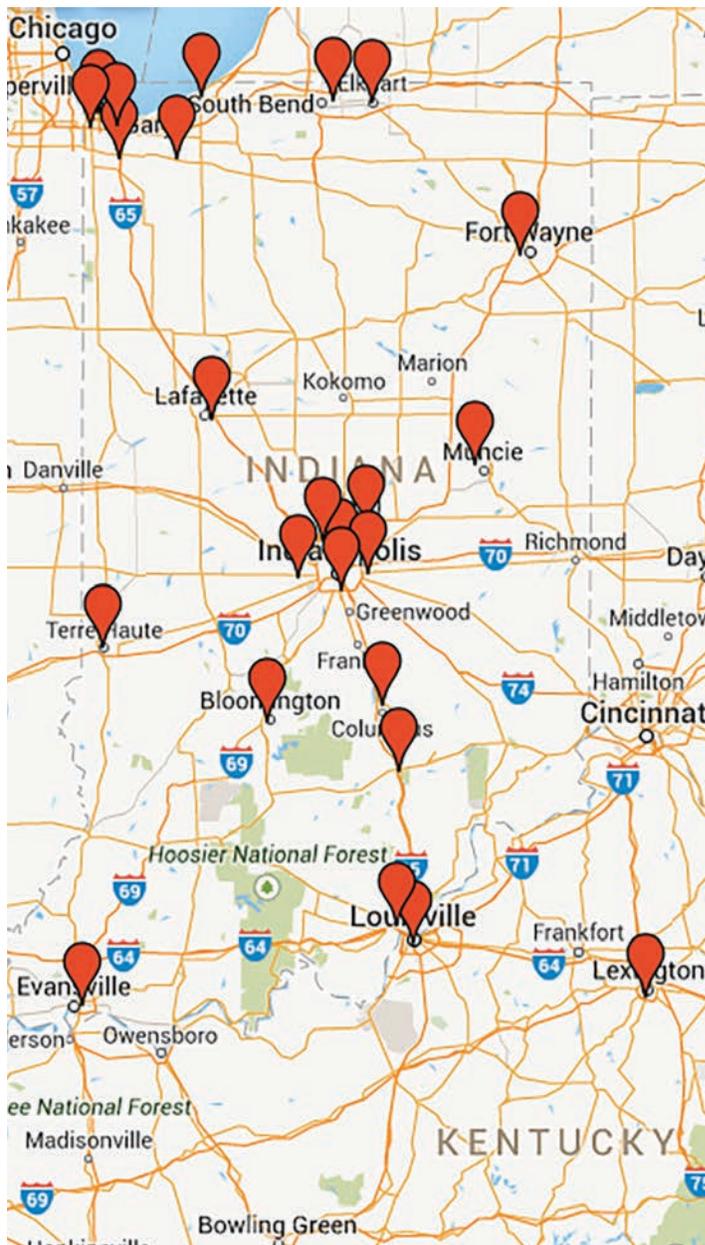
**CENTER
LOCATIONS**

INDIANA

- Avon
- Bloomington
- Columbus
- East Chicago
- Elkhart
- Evansville
- Fishers
- Fort Wayne
- Gary
- Hammond
- Indianapolis:
 - Eastside
 - Midtown
 - Southside
 - Georgetown at 86th
- Lafayette
- Merrillville
- Michigan City
- Mishawaka
- Muncie
- New Albany
- Seymour
- Terre Haute
- Valparaiso

KENTUCKY

- Lexington
- Louisville



4PLAY
Soirée
PLANNED PARENTHOOD
PPINK²⁰¹⁵
08.29.15
JOIN US AT
21c
PPINK.ORG/4PLAY