

# WOMEN IN GOVERNMENT LEGISLATIVE ACTION: *Public Policy Achievements 1988-Present*

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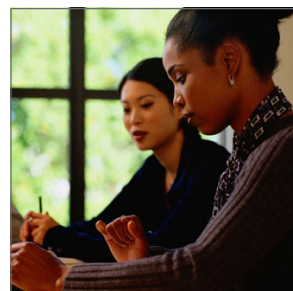
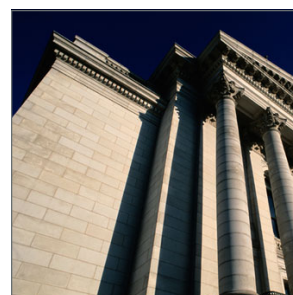
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*Women In Government is a national 501(c)(3), non-profit, bi-partisan organization of women state legislators providing leadership opportunities, networking, expert forums, and educational resources to address and resolve complex public policy issues. Women In Government leads the nation with a bold, courageous, and passionate vision that empowers and mobilizes all women legislators to affect sound policy.*

WOMEN IN GOVERNMENT



**WOMEN IN  
GOVERNMENT**  
LEADERSHIP THROUGH EDUCATION



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*Since January 2004, 36 states have introduced legislation or resolutions and 17 have passed resolutions and/or enacted legislation addressing cervical cancer screening.*

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## **HPV/Cervical Cancer**

The American Cancer Society estimates that in 2005 approximately 10,370 cases of invasive cervical cancer will be diagnosed in the United States alone. Furthermore, about 3,700 women will die from cervical cancer in the U.S. this year. First introduced through a segment at our *9<sup>th</sup> Annual State Directors' Conference* in January 2003, this issue has developed into a Task Force of legislators taking on the charge of an educational campaign to eradicate cervical cancer in the U.S. Women In Government launched the *Challenge to Eliminate Cervical Cancer Campaign* in early 2004. In January 2005, Women In Government released a report on nationwide efforts to eliminate cervical cancer entitled *A Call to Action: The "State" of Cervical Cancer Prevention in America*. The release of this report was a landmark in Women In Government's ten year campaign to eradicate the disease and was debuted nationally in a press conference held January 13th in Washington, D.C. Since the start of the campaign in January 2004, legislation has been introduced by Women In Government members in **36** states and **17** states have had their legislation or resolutions enacted. Furthermore, in partnership with the Gynecological Cancer Foundation, Women In Government State Directors assisted in designating September as *Gynecological Cancer Awareness* month in all 50 states in 2004.

## **Osteoporosis**

Millions of Americans are affected by osteoporosis, and women are four times more likely than men to develop the disease. From 1994 to 1997, Women In Government undertook an ambitious series of roundtables, which focused on health reform and under-recognized diseases in women. As a result, **44** bills in **19** states were introduced and **8** states passed this legislation, which included the establishment of the "Mibones" program in **Michigan**.

## **Campaign Finance Reform**

As the cost of running for office continues to rise, many legislators are concerned with the increasing amount of money in politics and its effect on elections. At the *8th Annual Midwestern Regional Conference*, a Task Force of women state legislators was formed to initiate a dialogue on the issue of campaign finance reform. Two of the topics studied were electronic filing of campaign contributions and states' public access to this material. The Task Force worked on the issue of campaign finance reform and furthered discussion in other areas including public funding of elections. The Task Force was composed of legislators from several states, including **Maine, Indiana, Minnesota, Wisconsin, Illinois, Missouri, North Dakota** and **Kansas**. Furthermore, State Directors from **Rhode Island** brought information received from Women In Government seminars to their respective appropriations and budget committees for review.

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*At the 8th Annual Midwestern Regional Conference, a Task Force was formed to initiate a dialogue on campaign finance reform.*

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## Homeland Security

The post September 11<sup>th</sup> environment has brought homeland security issues to the front of many states' legislative agendas. In response, Women In Government has brought these issues to several legislative roundtable discussions. Members from **Missouri** are working to develop a homeland security resolution. Women In Government also established a *Bioterrorism Task Force* composed of legislators from **Arkansas, Maine, Illinois, West Virginia, Ohio, Oklahoma, New Hampshire, Nevada, North Dakota, Rhode Island, Tennessee, North Carolina, Maryland, Georgia, Wisconsin, Colorado, Utah, Kansas, Arizona and Missouri**. As a direct result of a seminar at the *9th Annual Midwestern Regional Conference* in 2002, State Directors in **Indiana** have started to work on the issue of great lakes security.

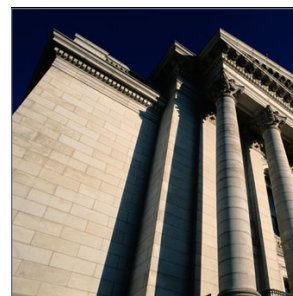
## Utilities

Women In Government has covered a wide range of topics under the umbrella of utilities, including state regulatory, legislative and private challenges in the area of telecommunications, the California energy crisis, and energy and electricity options for states. A sample of successful outcomes of these programs include legislation developed by Women In Government members in **Michigan** that would request the division of local and long distance telephone billing. In addition, legislators from **Michigan** also established amendments to electric restructuring bills.

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## Obesity

Women In Government programs have recently called attention to the growing epidemic of obesity. Currently 60 million Americans have been diagnosed as obese, and the number is increasing each year. Legislative members from **Indiana, South Dakota, Illinois, Georgia and Iowa** are taking action in their states to address this issue. State Directors from **Louisiana** have developed legislation to combat obesity and Women In Government members from **Maryland** are continuing to push for obesity-epidemic awareness by supporting an initiative that would create a statewide *Obesity in Youth Task Force*. In February 2004, Women In Government held an educational meeting on morbid obesity. After learning more about this disease, legislators from **Ohio, Georgia, Arizona, Indiana, Colorado, Maine, Kansas, Minnesota, North Dakota, Maryland, and Iowa** joined Women In Government in the creation of a *Morbid Obesity Task Force* chaired by a veteran Women In Government member from **Tennessee**. The Task Force convened its first meeting in May 2004, and over the course of three days created a work plan and studied model legislation. As a direct result of this Task Force, legislators in **Colorado** have issued a *State Legislative Challenge* to other state legislators to improve their health and general well-being. Women In Government members in **Tennessee** passed legislation defining obesity as a disease in 2001, and have recently introduced legislation addressing the issues of nutrition standards in schools as well as mandating insurance coverage for Bariatric surgery to treat morbid obesity.

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*Women In  
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*Legislative members in **Iowa** have worked on issues ranging from interest rate regulation, earned income tax credits and tax preparation assistance for low-income individuals.*

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## **Financial Empowerment**

Families in low-income areas are often the most vulnerable to exploitative market practices. Women In Government's financial empowerment goals include ensuring our legislative members are informed about family economic success issues and encouraging policymakers to utilize this information in their states to empower low-income constituents to achieve financial independence. In June 2003, Women In Government convened its first meeting of the *Assistance to Low-Income Families to Achieve Financial Independence Task Force*. As a result, legislative members in **Iowa** have worked on issues ranging from interest rate regulation, earned income tax credits and tax preparation assistance for low-income individuals. In 2004, three of our Annual Regional Conferences featured experts who addressed family economic success issues. The conferences, which exposed over **85** legislators to this issue, included segments on predatory lending, work supports and featured a legislative Task Force member who discussed the ongoing work of state legislators on the issue. As a result of these conferences, **17** legislators from **15** states plan to introduce legislation surrounding family economic success issues. Economic empowerment legislation has already been introduced by **2** legislators with **12** others planning to follow suit. Additionally, Women In Government members from **Michigan** are also working on the issue of payday lending. In May 2005 Women In Government plans to host a half-day training session on predatory lending at our upcoming *Outreach to Vulnerable Constituents: Legislative Training Sessions* Conference to be held in California. The session will include a *Predatory Lending Overview* followed by segments on model state legislation and realistic solutions for states surrounding the issues of predatory lending and family economic success.

## **State Offices of Women's Health**

In 1994, Governor Pete Wilson established the California Office of Women's Health, as a direct result of a 1992 Women In Government roundtable. In 2004, Women In Government focused on creating a platform for State Offices of Women's Health and their legislative supporters to prevent cardiovascular disease in women, while also promoting gender specific treatment and awareness. In March 2004, Women In Government hosted the *First National Summit of State Offices of Women's Health and Legislative Champions on Cardiovascular Disease in Women*. **18** administrators of state offices of women's health and **17** legislative champions participated in the Summit, which was the first time state offices of women's health and state legislators convened nationally. In March 2005, Women In Government convened a second Summit also focusing on cardiovascular disease in women that involved **25** participants from **19** states. As a direct result of these Women In Government programs, legislators from **Indiana, Maine, Alabama, Rhode Island, Iowa, Michigan, Maryland, Utah, Wisconsin, and Minnesota** have introduced or supported women's health legislation.

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*Legislators from **10** states have introduced or supported women's health legislation as a direct result of Women In Government programs.*

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## Cardiovascular Disease

Cardiovascular Disease is the number one killer of women in the United States and actually kills more women than men. Women In Government has made achieving gender specific treatment for the disease a priority by featuring it at both the First and Second Summits of the Offices of Women's Health. As direct result of their participation in the summit, 5 legislators indicated that they plan to engage in cardiovascular disease prevention activities including Red Dress Day and other heart health events in their states. Additionally, Women In Government Executive Director Susan Crosby received "The Heart of Indiana Award" for her work on women and cardiovascular disease in February 2005.

## Domestic Violence

Statistics from the Centers for Disease control show that every year, nearly 5.3 million intimate partner victimizations occur among U.S. women ages 18 and older—this violence has resulted in nearly 2 million injuries and 1,300 deaths. Issues of violence and the public health risks of domestic abuse are of great importance to Women In Government members. State Directors from **Texas, Georgia, Indiana** and **Rhode Island** have raised awareness around this issue, as well as worked on programs that will create further protections from violent domestic situations. Women In Government continued its work on this issue at the *11th Annual Midwestern Regional Conference* in 2004, where Indiana State Representative Carolene Mays gave an overview of domestic violence legislation that was introduced and passed in her state.

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*Women In Government Executive Director Susan Crosby received "The Heart of Indiana Award" for her work on women and cardiovascular disease in February 2005.*

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## Women's Healthcare Platform

To ensure that all women receive proper gender specific healthcare, Women In Government formed the *Women's Healthcare Platform*. The platform was successfully promoted to both presidential campaigns in 2000. The Resolution was introduced in **Illinois, Tennessee, Kansas, Michigan, Minnesota, North Carolina, Pennsylvania** and **Wisconsin** and succeeded in passing in **Arkansas, Indiana, Louisiana, Nevada, Rhode Island, Texas** and **Washington**.

## Stroke

Stroke is the third leading cause of death in the United States and the leading cause of serious long term disability. Several legislators who attended Women In Government programs focusing on the issue of stroke have held Stroke Awareness Days in their states. Among those states were **Georgia, Louisiana, North Carolina**, and **Tennessee**. Since then many have continued their commitment to stroke awareness. A Women In Government member from **Alabama** helped to create the *Alabama Stroke & Heart Disease Task Force*, and a member from **North Carolina** worked to reauthorize the existing *North Carolina Heart Disease & Stroke Prevention Task Force*. Women In Government members from **Tennessee** have introduced legislation containing provisions for raising awareness of the general public, and specifically the minority community, about the importance of controlling high blood pressure.



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*Women In Government's Women's Health Care Platform was successfully promoted to both presidential campaigns in the 2000 election cycle.*

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*Legislators from Iowa, Maine and Illinois have introduced or supported higher education legislation as a direct result of Women In Government programs.*

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## Higher Education

One of the most critical issues affecting higher education access today is the rising cost of attending college. In July 2003, Women In Government convened its first meeting of the *Access to Higher Education Task Force*. When the Task Force met again in August 2004, **15** legislators from **9** states were in attendance. As a direct result of this Task Force, career ladder legislation was introduced in **Minnesota** during the 2004 legislative session. In September 2004, the Task Force rolled out its higher education plans and successes at the *11th Annual Midwestern Regional Conference*. In December 2004, an *Access to Higher Education Toolkit* rollout took place at the *11th Annual State Directors' and First Term Legislators' Leadership Training Conference*. As a direct result of our Regional Conferences and the *State Directors'/First Term Legislators' Leadership Training Conference*, Women In Government has found that **14** legislators from **13** states have expressed interest in joining our *Access to Higher Education Task Force* and/or doing work around this issue. Legislators from several states including **Iowa, Maine and Illinois** have introduced or supported higher education legislation as a direct result of Women In Government programs. In 2005, Women In Government will host a half-day Higher Education Intensive Training Session at our *7th Annual Eastern Regional Conference*. In addition, Women In Government has opened a comprehensive Access to Higher Education Policy Research Center in order to challenge state policymakers to reduce access barriers for women and minorities and make access to higher education a top legislative priority. The Research Center connects state legislators to existing higher education policy resources and foundations, and is currently working to produce a comprehensive toolkit for policymakers. The updated toolkit will include model programs and legislation, and policy resource lists as well as website component that will allow legislators to access a wide variety of higher education resources online.

## Primary Education

As primary education policy is set largely at the state and local level, Women In Government recognizes the importance of providing state legislators with the resources they need to ensure every child receives a quality education. A Task Force of Women In Government members convened at several Regional Conferences to examine the issues of teacher shortages, testing, accountability and alternatives within public school systems. Legislators investigated model programs and legislation that could be replicated to stem the shortages. *The Education Reform Task Force* analyzed these topics, including the Elementary and Secondary Education Act (ESEA). Members of this Task Force included representation from **Minnesota, Michigan, Ohio, Oklahoma, Illinois, Rhode Island and Iowa**.

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*A Task Force of Women In Government members convened to examine the issues of teacher shortages, testing, accountability and alternatives within public school systems.*

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## Drunk Driving

According to data from the National Highway Traffic Safety Administration 17,013 people were killed in alcohol-related crashes in 2003, accounting for approximately 40 percent of all traffic fatalities. Women In Government featured a segment on drunk driving at the *4th Annual Eastern Regional conference* in 2002. As a direct result of this seminar, legislative participants from **Iowa** have developed legislation to raise awareness of drunk driving and to strengthen DUI laws.



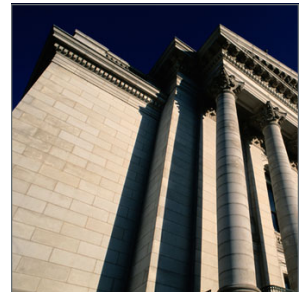
## Mental Health Parity

Women In Government has had a long history of providing its members with important policy information on issues related to mental illness. As a result of these segments, Women In Government Members in **Michigan, Georgia, Indiana, Washington** and **Iowa** have introduced or supported legislation relating to mental health. Legislation including the Hoosier Assurance Program, as well as the Mental Health Parity Law, has passed in **Indiana**. More recently, legislation has been passed in Indiana for mental health parity for substance abusers. Women In Government State Directors from **Iowa** have also developed a county mandate for mental illness. At the *7th Annual Western Regional Conference* in June 2004, Women In Government presented segments on Mental Health Issues. The first segment featured the President of the National Alliance for the Mentally Ill and focused on *Mental Health Issues for Special Populations: Children, Adolescents, Working Adults & the Elderly*. A second segment was devoted to the topic of *Women and Mental Health*. The last segment entitled *Mental Health Parity-Indiana, a National Model*, featured a presentation from State Representative Vaneta Becker and Stephen McCaffrey, President and CEO of the Mental Health Association of Indiana. Additionally, in September 2004, Women In Government held a half-day legislative training session in conjunction with our *11th Annual Midwestern Regional Conference* focused solely on mental health issues.

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*Mental health legislation including the Hoosier Assurance Program, as well as the Mental Health Parity Law, has passed in **Indiana**.*

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## Women In Prisons

Statistics from the Bureau of justice statistics show that the female prisoner population has more than doubled since 1990 from 44,065 to 94,336 in 2001. Women In Government focused several conference segments on parenting in prison as well as unique issues that women in the correctional system often face. Corrections Committee members from Texas and Arkansas utilized information from Women In Government seminars to establish programs that address issues of women in prisons.

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*Model legislation developed from the Prescription Access for Seniors Campaign has been successfully introduced in several states and passed in **Missouri**.*

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## Prescription Access for Seniors

In 2001 Women In Government introduced its *Prescription Access for Seniors Campaign and Task Force*. The State Prescription Drug Initiatives for Seniors was based on the principles that all senior citizens and people with disabilities should have access to insurance for outpatient pharmaceuticals, including medically necessary prescriptions. The *Prescription Access for Seniors Task Force* included legislators from **Illinois, Indiana, North Carolina, Florida, Kansas, Nevada, Missouri, Georgia and New Hampshire**. **5** pieces of model legislation were developed out of this program, which have been successfully introduced in several states and passed in **Missouri**.



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*As a direct result of Women In Government segments on privacy, legislation was introduced in **Washington** and **Maine**.*

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## **Gun Violence as a Public Health Issue**

American children are at a higher risk from firearms than any industrialized nation. It is estimated by the Centers For Disease Control that the rate of firearm deaths among kids under age 15 is almost 12 times higher in the United States than in 25 other industrialized countries combined. Legislators gathered at Women In Government programs to develop a Task Force to address gun violence as a public health issue. The Task Force members started a productive bi-partisan dialogue on gun violence with the purpose of developing specific action steps to follow and studied model programs at the state level. Members of the *Gun Violence as a Public Health Issue Task Force* included legislators from **New Hampshire, Minnesota, Illinois, Rhode Island, Missouri, Michigan** and **Iowa**.

## **Privacy**

Women In Government has provided its members with access to the leading experts on the umbrella issue of privacy. Among the successful outcomes of these segments include legislation in **Washington**, which protects privacy in the area of genetic testing, and the establishment of truncated receipts and protections against identify theft in **Maine**. At the *6th Annual Eastern Regional Conference in 2004*, Women In Government featured a segment on *Identity Management* which focused on new technologies and regulations in identity security.

## **Patient Protection**

Women In Government members from across the country have addressed the ongoing issue of patient protection. Legislators from **Kansas, Oregon, Delaware, Louisiana, New Jersey, Vermont, Alabama, Indiana, Colorado, Idaho, South Carolina, Texas, Florida, Mississippi, Alaska, Georgia, Arizona, Washington, and Nevada** have introduced and passed legislation in regards to patient protection as a direct result of Women In Government programs. Among these have been the Managed Care Consumer Protection Act and the Patient Protection Act.

## **Innovations in Drug & Health Therapies**

Many of the health issues addressed by Women In Government are being treated by innovative new drug therapies and approaches. Hepatitis-C is one of several leading health issues of interest to Women In Government members. Members in **Colorado** have brought this issue to the forefront of their legislature. Moreover, State Directors from **Louisiana** have developed the Louisiana Cancer Center as well as a statewide tax break for chemotherapy medications.

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## Sepsis

Women In Government presented members with an educational segment on the cutting-edge issue of sepsis in 2003 at both the 6<sup>th</sup> Annual Western Regional Conference and the 9th Annual State Directors and Biennial First Term Legislators Leadership Conference. The information presented during this program has moved several members to begin work on this issue in their legislatures. State Directors from **Utah** and **Nevada** have passed legislation in regard to women's healthcare and the data collection of information on sepsis disease. Members from **Arizona** are working on legislation focusing on awareness and access to treatments.

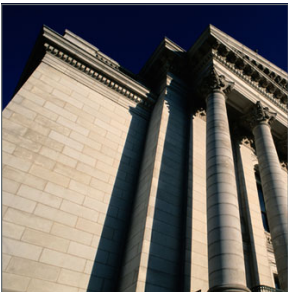
## The Aging Face of Healthcare

As the number of people reaching retirement age grows in the United States, both federal and state governments are facing new challenges in order to meet their healthcare needs. Women In Government has brought together state legislators, Medicaid directors, and the pharmaceutical industry to discuss how the healthcare system is being affected by and responding to the aging population. As a direct result, Women In Government, in partnership with Electronic Data Systems, created a cutting edge "online community" for leaders in government and industry to address these issues. By the end of 2001 the community had over 1,200 active participants from both the public and private sector. In November 2004, Women In Government held two meetings focusing on healthcare issues, of one which convened state legislative staffers. Participants attended sessions on the Medicare Drug Benefit Program, the Medicaid Modernization Act, the status of healthcare today, and other healthcare issues related to aging.

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*In partnership with Electronic Data Systems, Women In Government created a cutting edge "online community" for leaders to address how healthcare is being effected by the aging population.*

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*Michigan, Washington, Indiana, Kansas, Arizona and Colorado have introduced legislation that would ensure health insurance coverage of diabetes for constituents in their states.*

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## Diabetes

The American Diabetes Association estimates that there are approximately 18.2 million people in the United States living with diabetes. Among healthcare issues addressed by Women In Government members is coverage for this group, which represents 6.3 percent of the population. Women In Government programs have addressed a variety of concerns in this area, including health insurance to cover ancillary equipment and insurance screening. Members from **Michigan, Washington, Indiana, Kansas, Arizona** and **Colorado** have introduced and re-introduced legislation that would ensure health insurance coverage of diabetes for constituents in their respective states. Additionally, Women In Government has worked to address the issue of diabetes holistically by informing legislators about health conditions surrounding it, such as kidney disease. Diabetes is the number one cause of chronic kidney failure in the United States. At two of our 2004 Regional Conferences, Women In Government addressed kidney failure with a segment entitled *Chronic Renal Failure and The Impact on Health Budgets*.

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## **Immunizations/Vaccinations**

Providing access to essential vaccines for all children creates a healthier population and saves lives. Women In Government State Directors in **Indiana, Michigan, Texas, Tennessee, Minnesota, Ohio** and **Arizona** have developed initiatives to provide greater access to and the requirement of immunizations and vaccinations in children. Legislators in **Indiana** and **Minnesota** went on to pass legislation establishing an immunization and data registry. Furthermore, these legislators have worked for the addition of the Chicken Pox vaccination as a required immunization for school-age children. Members in **Tennessee** developed programs that guarantee immunizations for all children by two years of age. **Arizona** state legislators established legislation that requires the immunization of all children in childcare facilities.