

January 9, 2004

Secretary Tommy G. Thompson
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Dear Secretary Thompson:

As leaders of more than 30 state and national organizations engaged in promoting women's health, we write to express our dismay that the Department has begun the new year by distributing a Women's Health 2004 Daybook that fails to address one of the most pressing women's health issues – pregnancy prevention.

Some 34 million American women – just over half of all American women of reproductive age (15 to 44) -- are in need of contraceptive services and supplies to help prevent unintended pregnancy, according to new data from the Alan Guttmacher Institute (AGI).¹ Providing these women with information about how to control the timing of a pregnancy will help promote both healthy women and healthy babies:

- **Healthy women:** Unintended pregnancy can have serious health consequences, particularly for women with high blood pressure, diabetes, cancer or mental illness. Diabetes during pregnancy, for instance, poses significant risks for women, especially African-Americans, who are far more likely to experience gestational diabetes.² Women who are able to decide when pregnancy should occur can take steps to avoid or minimize harmful pregnancy complications and can be carefully monitored by their health care providers.
- **Healthy babies:** When a woman can space her pregnancies, the likelihood of a high-risk pregnancy and low-birthweight baby is reduced, and infant health and survival improves. “The child of an unintended pregnancy is at a greater risk of being born at low birth weight, dying in the first year of life, not receiving resources necessary for healthy development and being abused or neglected,” the Institute of Medicine has reported.³ Timely prenatal care can be missed “because

¹ Sonfield, A. Preventing Unintended Pregnancy: The Need and the Means, *The Guttmacher Report on Public Policy*, December 2003.

² National Diabetes Information Clearinghouse, “Diabetes in African Americans.” Downloaded from <http://widiabetes.niddk.nih.gov/pubs/africanamerican/index.htm#5>

³ Institute of Medicine. *The Best Intentions: Unintended Pregnancy and the Well-being of Children and Families*. Washington, D.C.: National Academy Press: 1995.

it may take weeks or months for a woman to realize or accept that she is pregnant,” notes the Alan Guttmacher Institute.⁴

The new Daybook, entitled “Women’s Steps to a Healthier US: Wellness Starts with You!” is being distributed nationwide by the HHS National Women’s Health Information Center. The publication is labeled as part of the Steps to a Healthier US campaign launched by the Bush Administration in 2003. According to the HHS website, “the *Steps* initiative is committed to bringing policymakers, the health, education, and business communities, and the public together to establish model programs and policies that foster healthy behavior changes, encourage healthier lifestyle choices, and reduce disparities in health care.”

Missed opportunities to provide pregnancy prevention information

The Daybook falls short of the *Steps* initiative goals in several ways. Monthly chapters on such health prevention and promotion topics as asthma, breast and cervical cancer, colorectal health, diabetes control, exercise and a healthy diet certainly provide much commendable information. But the publication has no chapter on pregnancy prevention and only a few passing references to birth control. Among the publication’s missed opportunities to provide contraceptive information are these:

- ❑ For the month of April, a chapter on violence against women suggests that sexual assault victims go to the nearest hospital emergency room to be screened for possible sexually transmitted diseases (STDs) and pregnancy. But the Daybook fails to inform readers that the chances of pregnancy from rape can be greatly reduced with timely use of emergency contraception.⁵
- ❑ For the month of May, the Daybook lists scheduled health activities and observances, including “National Teen Pregnancy Prevention Month.” But the featured health chapter for May focuses on healthy bones, rather than teen pregnancy prevention.
- ❑ For the month of August, the Daybook’s chapter on “A Healthy Pregnancy and Breastfeeding” begins with the greeting “Congratulations! You’re Pregnant!” It suggests that a new mother “Ask your health provider about methods of birth control because you can get pregnant at this time, even if you haven’t had a period since giving birth and you are breastfeeding.” But it provides no further information about methods of birth control or where it can be obtained, such as at Title X family planning clinics.
- ❑ For the month of November, a chapter on diabetes control advises women who suffer from this disease to “bring your diabetes under control *before* you get

⁴ Sonfield, A. op. cit.

⁵ Stewart, F. H., & Trussell J (2000) Prevention of Pregnancy Resulting from Rape: A Neglected Preventative Health Measure. *American Journal of Preventative Medicine*, 19 (4): 228-229.

pregnant.” But the text offers no information on how to delay pregnancy while you are getting your diabetes under control.

The Daybook’s last chapter, for the month of December, does present information on preventing sexually transmitted diseases (STDs) and HIV. The chapter recommends the “ABC” method: A for abstinence; B for “be faithful” with only one partner who is also faithful and “C” for condoms as a third alternative. In the single most detailed reference to pregnancy prevention in the entire Daybook, the text advises: “Remember, if you choose not to follow A, B, or C, you could get pregnant or get an STD, even AIDS.” This advice should be not expected to serve as comprehensive pregnancy prevention information.

The Daybook contains no recommended internet links to organizations that provide information on family planning and birth control. By contrast, in a section on men’s and children’s health resources (“You can use these great resources to help you protect the other precious people in your life!”), the daybook tells how to order a publication on erectile dysfunction from an internet site operated by the National Institutes of Health.

Need for prevention of unintended pregnancy

The American Medical Women’s Association has powerfully outlined the risks to women and families from unintended pregnancies: “The consequences of unintended pregnancy are significant and can affect women and families in profound and irrevocable ways. Approximately half of all unintended pregnancies end in abortion...For pregnancies carried to term, the mother ... is at greater risk of depression, physical abuse, and not achieving her educational, financial and career goals. Relationships that she may be in are at three times a greater risk of dissolution.”⁶

Some of the American women who are at the highest risk for unintended pregnancy also have the least access to pregnancy prevention information and services. The unintended pregnancy rate for Latinas, for example, is twice that for white women.⁷ Some 42 percent of Latinas have no health insurance,⁸ and more than 25 percent do not receive prenatal care in the first trimester.⁹ Clearly, there is a strong need for culturally-appropriate pregnancy prevention information and services.

In a country where women and teenaged girls have more than 3 million unintended pregnancies a year, it is simply unconscionable that our leading government health agency has omitted from an official publication the important pregnancy prevention information women need to protect their health. The failure to inform women about how

⁶ Resolution on emergency contraception, adopted by the House of Delegates, American Medical Women’s Association, November 1996

⁷ NARAL Foundation, *The Reproductive Rights and Health of Women of Color*, July 2000.

⁸ Kaiser Family Foundation, “Women’s Health Policy Facts: Women’s Health Insurance Coverage” July 2001

⁹ Karen Scott Collins, Allyson Hall and Charlotte Neuhaus, *U.S. Minority Health: A Chartbook*, The Commonwealth Fund, 1999.

to prevent unintended pregnancy is especially troubling, given the administration's focus on curtailing women's access to legal abortion. The 7 percent of U.S. women at risk of unintended pregnancy who do not practice contraception account for almost half of the country's unintended pregnancies,¹⁰ and half of all unintended pregnancies end in abortion.¹¹

Call for increased action to prevent unintended pregnancy

We urge your Department to take strong, positive steps in the year 2004 to promote healthy women and healthy babies by making available to women of childbearing years the information and services they need to prevent unintended pregnancy.

An immediate positive step that could be taken would be to include pregnancy prevention information in the list of topics slated to be addressed by the HHS Office of Women's Health during the scheduled observance of National Women's Health Week, May 9-15, 2004. The list of topics currently posted on the website of the National Women's Health Information Center promoting National Women's Health Week (<http://www.4woman.gov/whw/2004>) includes many worthy health prevention subjects – such as smoking cessation, pap tests, mammograms, exercise and diet – but once again fails to include pregnancy prevention.

We stand ready to assist the HHS Office of Women's Health in communicating this desperately-needed women's health information.

Signed,

Family Planning Advocates of NYS
 National Family Planning and Reproductive Health Association
 Alan Guttmacher Institute
 Association of Reproductive Health Professionals
 Physicians for Reproductive Choice and Health
 National Women's Law Center
 Planned Parenthood Federation of America
 Center for Reproductive Rights
 ACLU Reproductive Freedom Project
 Black Women for Wellness
 National Council of Jewish Women
 Catholics for a Free Choice
 National Latina Institute for Reproductive Health
 NARAL ProChoice America
 Mexican American Legal Defense and Education Fund
 Center for Women Policy Studies
 National Health Law Program

¹⁰ Sonfield, A. op. cit.

¹¹ Henshaw, SK, Unintended pregnancy in the United States, *Family Planning Perspectives*, 1998, 30(1):24-29 and 46.

Reproductive Health Technologies Project
Sexuality Information and Education Council of the U.S. (SIECUS)
National Network of Abortion Funds
Planned Parenthood of New York City
Clara Bell Duvall Reproductive Freedom Project, ACLU of Pennsylvania
Population Connection
Law Students for Choice
Institute for Reproductive Health Access
Interfaith Impact of New York State
California Church IMPACT
National Council of Jewish Women, California
Planned Parenthood Affiliates of California
California Women Lawyers
California Catholics for a Free Choice
American Civil Liberties Union
of Northern California
Hadassah, Women's Zionist Organization of America
Colorado Organization for Latina Opportunity and Reproductive Rights
Women's Health & Family Planning Association of
Texas

NOTE: For further information and discussion, please contact JoAnn M. Smith, President & CEO of Family Planning Advocates of NYS, or Lois Uttley, Vice President, at 518-436-8408.