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## Issues in Maine Family Planning (Summer 2002)

Maine Family Planning Association Staff

*Family Planning Association of Maine*

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# Issues

## IN MAINE FAMILY PLANNING

Summer 2002

## Expanding Coverage or Playing Politics?

In a troubling move this past March, Tommy Thompson, Secretary of Health and Human Services, proposed a regulation change to the definition of "child" under *The State Child Health Insurance Program* (SCHIP). Under the proposed new regulation, the definition of personhood would begin at conception, providing a regulatory basis for denying access to abortion services for pregnant women who would otherwise qualify for them.

Enacted in 1997, SCHIP was created to provide capped federal funds for states to expand coverage for children who were not eligible for Medicaid under state standards. The program provides essential health care to Maine's uninsured children and young adults until the age of 18.

Expanding SCHIP's definition is the latest attempt to restrict women's access to abortion by exercising the power the Administration has over federal and state health care programs.

In response to the outcry from the Choice community, Tommy Thompson defended his policy by insisting that these changes will help low-income pregnant women get the care they need: "This is not an abortion debate."

Yet when the rule change was made public, it was evident that the so-called "expansion" was unlikely to help a pregnant woman. Rather, it provides protection of a fetus over the health and welfare of the pregnant woman.

April 29, 2002

THOMAS A. SCULLY, ADMINISTRATOR  
Centers for Medicaid and Medicare Services  
Department of Health and Human Services

Dear Mr. Scully:

While the FPA strongly supports expanding health care for pregnant women, we cannot support the proposed amendment as it is currently written. Insuring the fetus apart from the pregnant woman is extremely problematic and medically unsound. Therefore, the FPA asks the Administration to withdraw the proposed amendment and instead adopt practices that would expand current SCHIP coverage to include pregnant women.

The proposed amendment highlights the need for prenatal care for the fetus but does not provide for comprehensive medical care for the pregnant woman. A pregnant woman and fetus require prenatal care, care during labor and delivery, and postpartum care for the healthiest outcome. Unfortunately, the proposed amendment does not provide health insurance coverage to pregnant women for any postpartum care. As the regulation is written, the pregnant woman would only receive incidental treatment as a result of the medical care provided to the uninsured fetus. Upon delivery, the woman would no longer receive any health care.

Immediate loss of health care upon delivery is a dangerous medical practice. Should complications arise, the woman would find herself without health insurance. Clearly denying a woman medical care following a Caesarian section delivery flies in the face of enhanced treatment for either the woman or her child. Yet this essential postpartum care would not be covered by this SCHIP expansion.

Even more alarming is the possibility of denying a pregnant woman health care should that treatment potentially harm the health of the fetus. Necessary cancer treatment or HIV medication could be withheld under the guise of protecting the health of the fetus. This practice is not only medically unsound but ethically unacceptable.

It is for the reasons stated above that the FPA cannot accept the proposed amendment and asks that the Administration consider alternatives to enhancing the health of pregnant women.

Sincerely,  
George A. Hill, Executive Director

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## New Faces & Honorable Mentions

MARY AMORY, a resident of Midcoast Maine, was elected to the Board of Directors in June. Mary has a long history of advocacy not only in her community but also across the state and internationally. Her volunteer activities include board leadership roles for the Maine Art Education Association, Camden Youth Arts, and Maine Coast Artists. Mary's business, Longitude Consulting, focuses on leadership development, communication skill building, corporate culture and internal alignment with corporate strategy.

LIZ ARSENAULT joined the FPA in March as Development Associate. She holds a Bachelor's Degree in journalism from the University of Maine and an Associate's Degree in Culinary Arts from SMTTC. Liz lives in Southern Maine with her husband and enjoys cooking, reading, traveling and shopping.

REBECCA DELISLE, FPA's new staff accountant, graduated from Kennebec Valley Technical College in May with an Associate's Degree in Business Administration/Accounting.

ROBYN LEVIN joined our clinical team as a family planning and abortion care services counselor. Robyn works at our four family planning sites. She previously worked in Seattle, Washington as a Health Care Advocate at Aradia Women's Health Center. Robyn has a BA from Evergreen State College in social services and child development and attended Centro Investigaciones Medio Ambiente y Salud, a program in Ecuador with a focus on Spanish language and culture and environmental issues.

DIANA (DEE) PECORARO comes to the FPA as the Director of Development. She earned her MBA from New York University School of Business and has

18 years of experience in the for-profit financial arena, most recently with the Federal Reserve Bank of New York. Dec lives in Southern Maine with her precocious 6-year-old son, Joseph.

Following the passage of LD 1603, *An Act to Expand Family Life Education Services in Maine Schools*, FPA's Public Affairs Director, NICOLE CLEGG, was invited by Sexuality Information and Education Council of the United States (SIECUS) to speak at the Coalition to Support Sexuality Education Conference. She also spoke at the opening panel of the National Family Planning & Reproductive Health Association Conference.

SHERRY HUBER, one of the FPA's current and very active members, was honored this year with the **2002 Down East Environmental Award**, an award bestowed by the editors of *Down East — The Magazine of Maine*. Jeff Clark's article on Sherry, "First Lady of the Maine Woods," was featured in the May 2002 issue.

# Freedom



October 24, 2002  
Eastland Park Hotel

*the condition of being free ★ political independence ★ unrestricted use or access*

*F*his fall, the Family Planning Association of Maine invites you to our gala event, *Freedom*, an inspirational evening in Portland.

*Freedom* commemorates the 30<sup>th</sup> anniversary of *Roe v. Wade* and the commitment of Maine advocates to the protection of reproductive rights and access to family planning services. Valued members of the community will be honored with awards in the names of David and Sherry Huber, Linda Smith Dyer, and Parker and Linda Harris.

*Freedom* takes many forms and has unlimited interpretations, but at its core, it requires courage of extraordinary proportion: to speak of injustice, to live our lives truthful to who we are, to promote — often at great personal risk — a controversial issue or cause.

On Thursday evening, October 24, please join us as we recognize, honor and celebrate the past, present and future champions of *Freedom*.

Please mark your calendar today. Invitations will be mailed in September.

For more information, please call Liz at 207.772.1980.

Swing Music provided by the Tony Boffa Band.

Evening Attire.

# The Up 'Hill' Battle

**D**uring the past two years, the Bush Administration has taken very deliberate steps to chip away and restrict women's access to reproductive health care not only in Maine but around the globe.

We have spent the last issues of this newsletter reporting on the positive policies that Maine's legislature has enacted to improve access to family planning and the teaching of comprehensive family life education. While the news in Maine has been good, we felt it necessary to highlight the actions taken in Washington that could very well undermine our success.

## A SNAPSHOT

### Abstinence-Only-Until-Marriage

Despite fierce opposition from the medical community to the allocation of funds within the Social Security Act to promote abstinence-only-until-marriage, both House and Senate Committees voted in favor of the continuation of these funds. This action was taken, even though researchers hired by Congress, Mathematica Policy Research, Inc., stated in a report this spring, **"At this time no definitive research indicates that abstinence-only measures have any positive outcomes."** Perhaps even more egregious, the House Commerce Committee *defeated* amendments that would have required future funding be contingent upon effectiveness, information be medically accurate, and states be given flexibility in designing programs for sexually active teenagers. These valuable tax dollars, a quarter of a *billion* dollars over the next five years, are likely to be approved this fall.

*Postscript:* On July 26, a federal judge in Louisiana ruled that the state had illegally used federal dollars to promote religion in its abstinence-only program. The program, Rapides Station Community Ministries, utilized government funds to purchase and distribute bibles, stage

prayer rallies outside abortion care facilities, and perform skits to promote Christianity, in one instance using Mary as an example of the virtue of abstinence.

### Abortion Procedure Bans

Even though the United States Supreme Court ruled these bans unconstitutional in *Stenberg v. Carhart*, the House passed H.R. 4965 for the fourth time. This unconstitutional ban was presented as a part of a political strategy designed to garner support from the hard right during this election year. The authors of this legislation claim to be concerned only with "late-term" procedures, yet this bill could ban abortions even in the *earliest stages*



*Governor Angus S. King, Jr. congratulates EPA's Director of Training and Education, Fran Mullin, at a Blaine House ceremony following the passage of Maine's Family Life Education bill. Contrary to the policies and politics in Washington, Maine's comprehensive approach has proven successes in the reduction of teen pregnancy. Nancy Birkhimer, MPH (far left), Director of the Maine Bureau of Health's Teen and Young Adult Health Program, also attended the May ceremonies.*

of pregnancy. Additionally, it provides no exception for a woman's health, a core tenet of *Roe v. Wade*. The Court has made abundantly clear that a state may promote, but not endanger, a woman's health when it determines abortion legislation. There are those in Congress, politicians with no medical training, who continue to ignore the opinion of the highest court in America.

### United Nations Population Fund

The Administration announced on July 22, 2002 that it will withhold \$34 million appropriated for the UN Population Fund (UNFPA). As a result of this action,

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they will be forced to cut vital staff and shelve family planning and contraception programs designed to reduce the need for abortion and improve the health and well-being of women and their children. The impact of this cut could potentially result in an additional 800,000 abortions and, even more distressing, 4,700 maternal deaths and 77,000 infant and child deaths.

## Born-Alive Infant Protection Act

Signed into law on August 5, the Act guarantees legal protection to fetuses born alive at any stage of development. Anti-choice advocates have claimed a major victory even though it is redundant to current law. Newborns already receive full legal protection, and harming a newborn subjects a physician to criminal prosecution.

## APPOINTMENTS AND JUDICIAL NOMINATIONS

The Administration recently announced its nomination of Texas Supreme Court Justice **Priscilla Owen** to the Fifth Circuit Court of Appeals. Justice Owen has consistently denied pregnant teens judicial bypass of Texas' parental notification law calling it a "deceit" of parental authority and has ruled against buffer zones that protect reproductive health centers from violence. She has been scolded by fellow judges for using the bench as an opportunity to further her own political agenda.

**Alma Golden, M.D.**, was named the Deputy Assistant Secretary of Population Affairs, the lead spokesperson on federal policy that impacts family planning patients and providers. Dr. Golden is a noted supporter of abstinence-only-until-marriage (A-O) programs and a proponent for restricting minors' access to contraception.

## Buzz Fitzgerald

On February 8 of this year, longtime friend and FPA supporter, Duane "Buzz" Fitzgerald, died at Maine Medical Center. Buzz was well known throughout Maine as Bath Iron Works' CEO, and as a champion of causes not ordinarily taken up by corporate leaders.

The Family Planning Association of Maine's connection to the Fitzgerald family was initiated by Buzz' wife, Sue Fitzgerald. Sue served in increasingly responsible and influential positions on the FPA's Board of Directors for more than 10 years. Buzz' interest in our work found its source in Sue's commitment to our cause, which she herself has expressed in ways that can never be repaid.

It goes without saying that we will miss Buzz, not only because of his absolute decency, but because of his willingness to stand up and defend the work of organizations like ours, regardless of how controversial the issue. He and Sue made it easier for other business leaders to speak up when they might prefer a more cautious path.

To honor the contributions made by Sue and Buzz to family planning and reproductive freedom in Maine, the FPA established *The Sue & Buzz Fitzgerald Beacon Award*. *The Beacon Award* will recognize members of Maine's business community who have advocated in support of Maine women and teens during times of political controversy or whose business practices have contributed to overall health of Maine women and teens.

*The Beacon Award* is emblematic of the dedication of the Fitzgeralds to the values and mission of the Family Planning Association of Maine and to their willingness to shed light on the health needs of Maine women and teens.

I know I am not alone when I say that Buzz and Sue have made a very strong impression on me personally, how I conduct myself when in conflict and controversy, and most of all how I listen to others whose views I may not share.

— George A. Hill



## A Critical Moment

For months I had been looking forward to Chuck's return. We had been the best of friends since grade school and I missed him terribly over the past two years while he was in the Peace Corps. I spent days planning our dinners and road trips, but I spent no time planning for any romance that might follow. Up to that point our relationship had never been intimate, but something had changed with age and it was a welcome surprise for both of us.

We were both overwhelmed with what the future could hold. My mind was racing with the possibilities until later that evening when I realized I had missed taking my birth control pills. The thoughts of my new relationship with Chuck vanished and were quickly replaced with panic and fear. Pregnancy was not part of the plan, at least not now.

I had heard of the "morning after pill" but knew very little of where to get it or how it worked. I went on-line and found a site that promoted the use of and access to emergency contraception [emergency contraception or EC is most commonly known as the "morning after pill"]. It was there that I learned that for EC to be effective it had to be taken within 72 hours and that I needed a prescription. It was late Sunday night and I did not have a lot of time to waste. Thankfully, the site also featured a toll free number and I was able to acquire a prescription by phone.

Chuck and I continue to date and we are both hopeful for the future. If all goes well, we will have a chance to plan our family when we are both ready for the responsibility. While the panic did not completely disappear until later that month, it was a relief to know that if my birth control failed, I still had options.

(Based on a true story)

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## In Brief...

The Nebraska Supreme Court ruled in **Dr. LeRoy Carhart's** favor on July 19 by refusing to hear an appeal that attempted to evict him from the building where he has housed his abortion care practice for almost ten years. The appeals court ruled that under his lease, Dr. Carhart had the first right to buy the building if its owners were willing to sell. The building had been sold in 2000 to abortion opponents who immediately began the eviction process.

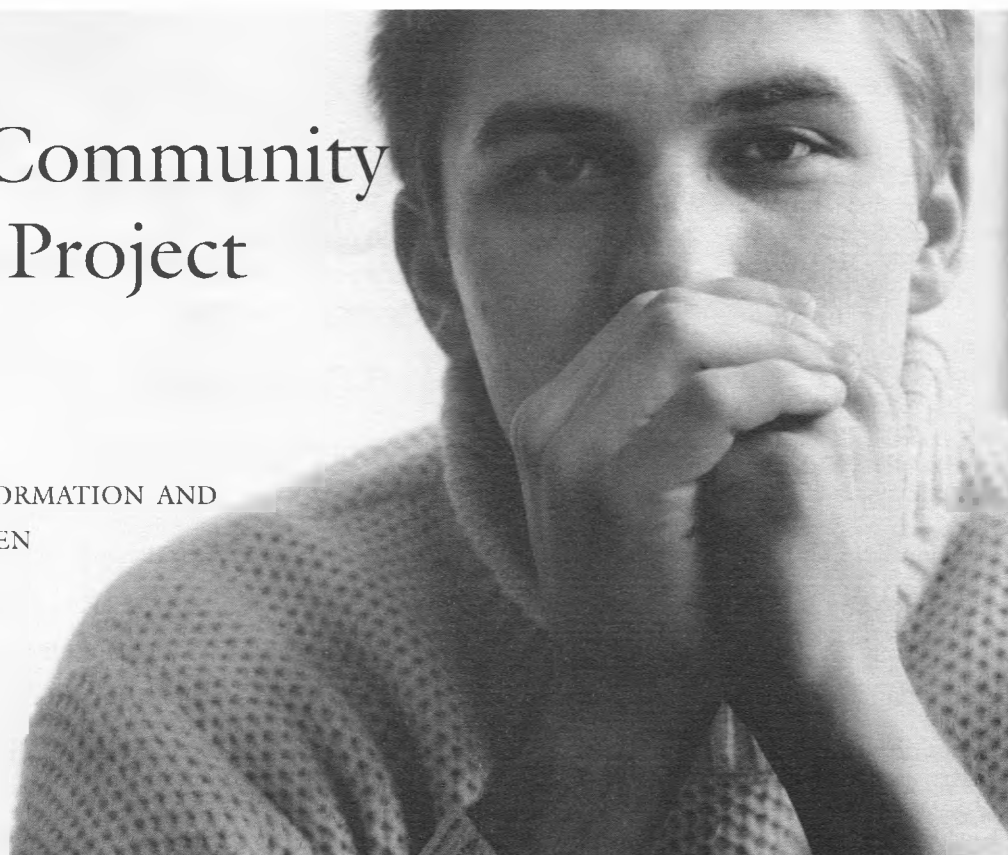
On August 6, a judge in Pennsylvania upheld a woman's right to have an abortion after her boyfriend sought an injunction to prevent her from doing so. **Judge Michael Conahan** lifted the earlier injunction preventing the procedure until a ruling was issued. Sadly, the woman miscarried shortly after the ruling was issued.

Factoring in inflation, funding for family planning services through **Title X** has declined 57% between 1980 and 2001. As health care costs, the number of uninsured, and the cost of contraceptive technology rise dramatically, family planning centers are facing difficult times. Next year's estimated **unfunded costs** to Maine's Family Planning system and the services it provides to women and teens is \$1.4 million.

**Consumers for Affordable Health Care (CAHC)** will be hosting a timely conference on September 23 to explore the viability of a universal health care system for Maine. For more information, call 1-800-838-0388.

# Teen Male Community Partnership Project

EXPANDING ACCESS, INFORMATION AND  
SERVICES FOR YOUNG MEN



Common sense dictates that if two people are having sex, then both share in the risk regardless of gender. Yet ask our clinicians and outreach workers and they will tell you that the majority of our patients are women with men seeking medical attention only when suffering from visible symptoms.

The reasons for this phenomenon are understandable — only women face the risk of pregnancy and reproductive technologies are largely designed for women. Addressing the health care needs and behaviors of men are critical to the overall goals of reducing teen pregnancy and slowing the transmission of HIV and other sexually transmitted infections. We are hopeful that, if given the opportunity, healthy and informed men will take a more active and responsible role in relationships, parenting, and in seeking health care.

The Family Planning Association of Maine (FPA) faces many obstacles in reaching this underserved population. Perhaps the greatest obstacle is perception. Most men believe family planning health centers are for women. Dismantling this misconception could help young men seek the information and counseling about sexual and reproductive matters they need.

Recognizing that information and education are essential, particularly for younger men, the FPA, with a grant from the U.S. Office of Population Affairs, has initiated the *Teen Male Community Partnership Project*. Working with existing community- and school-based outreach efforts, the FPA hopes to reach young men and deliver a basic core of services, including contraceptive counseling; screening, testing and treatment of sexually transmitted infections; reproductive health education; and preventive health care.





**Downeast Health Services**

Calais: 454-3634/(800)924-2628  
Ellsworth: 667-5304/(800)492-5550  
Machias: 255-3391/(800)313-1223

**Family Planning Association  
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Augusta: 626-3426  
Belfast: 338-3736  
Damariscotta: 563-1224  
Rockland: 594-6880

**Health 1<sup>st</sup>**

Fort Kent: 834-3513  
Houlton: 532-0503  
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Presque Isle: 768-3062

**KVCAP Family Planning**

Pittsfield: 474-8487/(800)542-8227  
Skowhegan: 474-8487/(800)542-8227  
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To connect to the health center closest  
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**1-877-326-2345.**

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