

IMPROVING THE HEALTH OF MIDLIFE WOMEN: A POLICY AGENDA FOR THE 21st CENTURY

Fifteen High-Impact Actions for Congress

A comprehensive health policy agenda aimed at midlife women is urgently needed. Until recently, most of the policy attention has focused on younger women of reproductive age and older women who are eligible for Medicare. The years between 45 and 64 are a time when many women are at serious risk for the onset of chronic conditions such as heart disease, cancer, diabetes, arthritis, and osteoporosis.

The federal government has an important role to play in educating midlife women, the public, and clinicians about women's health risks and in improving midlife women's access to crucial preventive services. In January 2001, the Women's Research and Education Institute (WREI) held a two-day "health summit" bringing together women's health experts to identify the major gaps in midlife women's health and to chart a federal health policy agenda for the 21st century. The experts identified 10 gaps in the health of midlife women and 46 policy options to close those gaps.

Following the summit, WREI selected 15 high-impact actions Congress should take to make a significant difference in promoting health and preventing disease in midlife women. The full report, *Improving the Health of Midlife Women: Policy Options for the 21st Century*, describes these and other policy options in detail. This document outlines these actions.

- Ask that the Surgeon General issue a report on the health status of midlife women, focusing on how promoting health and preventing disease can avoid morbidity and early death.
- Direct the U.S. Department of Health and Human Services (HHS) to develop a public awareness campaign that will sound a wake-up call to the public and clinicians about the risk factors for midlife women, and the importance of health promotion in sparing midlife women from preventable illness later in life.
- Establish permanent offices of women's health at HHS and related federal agencies, and charge these offices with developing common objectives and complementary strategies to address gaps in midlife women's health.
- Provide funding so that all states, tribes, and territories can develop women's health action plans with a focus on midlife women's health promotion and disease prevention.
- Provide sufficient funding for the existing chronic disease prevention programs at the Centers for Disease Control and Prevention (CDC) for the purposes of increasing midlife women's access to health promotion and disease prevention information and services.
- Direct HHS to work with health plans and the managed care industry to develop a system of care that provides midlife women with annual physicals, appropriate screenings for major risk factors, and crucial preventive services.
- Expand insurance coverage for midlife women by enacting federal tax credits for small businesses that provide group health insurance.

- Require health plans to provide women with direct access to women's health providers, including obstetrician-gynecologists and nurse practitioners, for all covered gynecological services as well as timely and adequate access to new health care technologies.
- Direct HHS, through the directors of the Health Resources and Services Administration and CDC, to develop tool kits for clinicians and the public on health promotion and disease prevention in midlife women.
- Require that the Federal Employee Health Benefits Program provide insurance coverage for the clinical preventive services recommended by the U.S. Preventive Services Task Force.
- Expand the National Breast and Cervical Cancer Early Detection Program to provide cancer screening, treatment, and other pertinent services, including case management, to all eligible midlife and older women.
- Revamp the WISEWOMAN program to provide heart disease screening, intervention, and other pertinent services to eligible midlife and older women.
- Direct the Health Resources and Services Administration and CDC to develop community health centers as sites for health promotion and disease prevention for midlife women.
- Amend the Americans with Disabilities Act to incorporate President Bush's recently announced New Freedom Initiative and to ensure that midlife disabled women gain access to health facilities and health services.
- Direct HHS and the Veterans Administration to develop pilot programs using new technologies that can effectively reach and educate midlife women about their "at-risk" status and refer them to appropriate providers for follow-up services.

The Women's Research & Education Institute (WREI), which was established in 1977, is an independent nonprofit organization in Washington, DC. WREI gathers, synthesizes, and analyzes policy-relevant information on issues that concern or affect women, and serves as a resource for federal and state policymakers, scholars, advocates for women, the media, and the public.

Other WREI publications include:

The American Woman 2001–2002: Getting to the Top ed. by Cynthia B. Costello and Anne J. Stone (2001). \$16.95

The American Woman 1999–2000: A Century of Change—What's Next? ed. by Cynthia B. Costello, Shari Miles, and Anne J. Stone (1998). \$16.95

Older Women: The Economics of Aging by Anne J. Stone and Jennifer E. Griffith (1998). \$6.95

The Health of Mid-Life Women in the States by Cynthia B. Costello, Jennifer E. Griffith, Angela Wilbon, and Ashley Redfearn (1998). \$6.50

Managing Work and Families: Nonstandard Work Arrangements Among Managers and Professionals by Roberta M. Spalter-Roth, Arne L. Kalleberg, Edith Rasell, Naomi Cassirer, Barbara F. Reskin, Ken Hundson, David Webster, Eileen Appelbaum, and Betty Dooley (1997). \$12.50

Assessing and Improving Women's Health by Karen Scott Collins, Diane Rowland, Alina Salaganicoff, and Elizabeth Chait (1994). \$3.00

Women's Health Insurance Costs and Experiences (1994). \$3.00

Women in the Military: Where They Stand by Captain Lory Manning and Vanessa R. Wight (2000). \$7.00

Women in Uniform: Exploding the Myths; Exploring the Facts. Proceedings of the 1998 Women in the Military Conference (1998). All papers \$30.00

WREI is grateful to Wyeth for the generous support it has provided for the Midlife Women's Health project.

W•R•E•I