

A PROACTIVE POLICY PRESCRIPTION TO IMPROVE THE HEALTH AND WELLBEING OF WOMEN AND GIRLS IN WISCONSIN

WI POSITIVE POLICY PRESCRIPTION | 2017 ISSUE BRIEFS

WISCONSIN ALLIANCE FOR WOMEN'S HEALTH www.supportwomenshealth.org

EXECUTIVE SUMMARY

The current political landscapes in Wisconsin and on the federal level present unique and urgent challenges for women's health advocates and allies. We must work diligently, collaboratively, and creatively to oppose the many harmful policies certain to be introduced that will undermine the health, safety, and economic security of women in Wisconsin and throughout our nation.

We must also take initiative to build a bold and positive policy vision that, if enacted, would help Wisconsin women and girls realize their optimal health and wellbeing. A successful women's health policy agenda will involve more than just an outline of ideas we oppose; it will also embrace an inspiring vision that will energize advocates, the general public, and supportive elected officials around proactive policies that would result in real and lasting improvements to the lives of women and girls in our state.

It is with this framework in mind that the Wisconsin Alliance for Women's Health (WAWH) presents **A Proactive Policy Prescription to Improve the Health and Wellbeing of Women and Girls in Wisconsin**.

How to Use this Policy Prescription

This "prescription" provides in-depth analysis of 12 different state-level public policies that WAWH believes would help improve the health and wellbeing of women and girls in Wisconsin. Each individual policy prescription is categorized into three key issue areas:

Chapter 1 - Economic Security

Chapter 2 - Access to Health Care

Chapter 3 - Violence Against Women and Girls

Each policy prescription contains background information about the issue, why the issue is important to women and girls, what policies Wisconsin can implement to address the issue, a list of other organizations working on the issue, and what readers can do to help make these policies a reality.

The policy prescriptions contained in the first section are meant to be accessible to members of the general public and others who might not have any particular expertise on any of the issues discussed. For readers who might be interested in learning more about a specific issue, there is an issue brief compendium at the end of the document that provides lengthier descriptions, additional statistics, and a list of other informational resources that readers can access to further inform themselves about the topic. We believe that these more in-depth policy briefs will be of great value to legislative offices and advocacy organizations that wish to dive a bit deeper into a particular issue.

I Want to Work on One of These Issues. How Do I Get Involved?

There are many ways that you can become an advocate for one or more of these issues. Here are just a few:

 Contact your elected leaders. In fact, every policy prescription contains some type of policy action that your state legislators could take to make a difference. If you don't know who your legislators are or need their contact information, you can do so at <u>WhoRepresentsMe.info</u>. Make sure to include your full 9-digit Zip Code to get an accurate listing of your elected leaders

- 2. **Ask for help.** Need help finding your voice? Don't hesitate to contact WAWH! WAWH's mission is to "advance comprehensive women's health in Wisconsin by engaging, educating, empowering and mobilizing individuals and organizations," so we are always happy to help citizens advocate for women's health! You can go here to find lots of different ways to connect with WAWH and our staff via email, phone, or social media: http://wiawh.org/who-we-are/connect/
- 3. **Connect to great organizations.** Each policy prescription contains links to organizations that are already doing great work on these issues. Don't hesitate to follow the link to those organization's websites to learn more about how you can contribute to these organizations' advocacy efforts and make your voice heard.

Acknowledgements

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Many thanks to the organizations that provided crucial expertise and feedback regarding the wide array of issues included this prescription. While these organizations provided invaluable insights, their inclusion in this list is not meant to indicate that they endorse the contents of this manual:

9to5 Wisconsin

African American Breastfeeding Network

Community Coordinated Childcare Care, Inc. (4-C)

End Domestic Abuse Wisconsin

Planned Parenthood Advocates of Wisconsin

The Public Policy Institute

The Wisconsin Coalition Against Sexual Assault

The Wisconsin Council on Children and Families

The Wisconsin Early Childhood Association

Wisconsin Breastfeeding Coalition

Wisconsin Jobs Now!

CHAPTER 1 – ECONOMIC SECURITY

Eliminate the Gender Wage Gap

The Issue

As long as women have been established members of the workforce, there has been a gap in earnings between the genders. There are many causal factors that contribute to the "gender wage gap," most of which have to do with longstanding, system-wide biases against women. These biases mean that 1) women and men don't get the same type of jobs, 2) jobs for which women are usually hired pay less than jobs that men typically get, and 3) men and women get paid different amounts for the same work.

Since Congress's formal ban on sex discrimination in the Equal Pay Act of 1963, our society has partially addressed some of the issues that contribute to the gender wage gap, which helped reduce the wage gap from the 1970s to the 1990s. However, the wage gap has remained fairly constant since 2001, with women in the United States earning about 80% of what their male counterparts earn.

Women in Wisconsin are no exception, earning approximately <u>78.9%</u> of what their male counterparts earn, often for doing the same type of work-- jobs that involve the same effort, education, experience, and other qualifications. This is true of jobs requiring any level of education or experience, as <u>the gap actually widens</u> as education level increases. Highly educated women make about 26% less than equally educated males.

The gender wage gap is not just a statistical phenomenon; it is also a social reality of which many women are painfully aware of in their own lives. In recent focus groups conducted by the Wisconsin Alliance for Women's Health and 9to5 Wisconsin, low-to moderate-income women from the greater Milwaukee area gave high priority to the issue of equal pay during their discussion of challenges they face in daily life. When asked what could be done to make life easier, the women cited that equal and fair pay for women and people of color would greatly improve their lives. A study conducted in 2015 affirms this priority, with 58% of women polled ranking equal pay to be the most important challenge for women in the workplace.

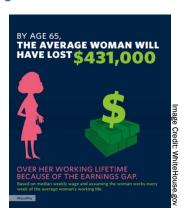
Why is Eliminating the Gender Wage Gap Important to Women?

 The gender wage gap is closely intertwined with racial discrimination. Compared to white men, women of any race make significantly less, with Latina and African

- American women respectively making <u>52% and 63%</u> of what white men make. Combatting this issue is a step toward improving overall equity in the workforce, especially for women of color.
- Decreasing the gender wage gap is extremely important for families where women are the sole breadwinner, which also <u>disproportionately</u> affects women of color. As many as <u>63%</u> of women with children are either the sole provider (41%) or co-provider (22%) in their house, shattering the norm that most families rely solely on men to make money.

What Wisconsin Can Do

Addressing this systemically ingrained wage bias against women requires a multifaceted policy approach and comprehensive array of policies. For more information on each issue listed below, see the more detailed gender wage gap issue brief and other policy briefs contained in the compendium to this report.



Many of the recommendations contained in this manual would help reduce the gender wage gap, such as increasing the state's Earned Income Tax Credit and raising Wisconsin's minimum wage. Other policy solutions include:

- Reinstate Wisconsin's Equal Pay Law that was repealed during the 2011-2013 legislative session.
- Restore Collective Bargaining Rights and Strengthen
 Unions. The gender wage gap for union workers is 56% lower than for non-union workers. Union representation also helps reduce the even larger wage gap experienced by women of color.
- Open pathways for free and fearless discussion of wages.
 In many situations, there are <u>rules</u> laid out to deter workers from discussing their earnings, which can leave employees in the dark on the fairness of their salary.
- Require companies to self-analyze or <u>audit their wages</u> with a discrimination lens.

How Can I Help Eliminate the Wage Gap in Wisconsin?

- Contact your <u>state legislators</u> and encourage them to support policies that would reduce the wage gap.
- ✓ If you are a woman facing discriminatory behavior in your workplace, learn how to confront the issue and speak with your employer. <u>Arm yourself with the facts</u> about what you're making, what you should be making, and your rights as an employee. For more education on discussing equal pay with your employer, <u>attend a local seminar</u>.

Increase the State Earned Income Tax Credit (EITC)

The Issue

The Earned Income Tax Credit (EITC) is designed to help move low-income families out of poverty by providing an incentive to work. The EITC is a "refundable" tax credit, which means that it is available to workers even if they did not earn enough wages to pay federal or state income taxes. In order to claim the EITC, a tax filer must have some earnings from work.

There is both a federal EITC and a Wisconsin EITC, and many workers are eligible for both. The federal EITC is determined by a worker's income, number of children, and marital status. The Wisconsin EITC is based on a percentage of the federal EITC (0%, 4%, 11%, or 34% depending on the number of qualifying children). Nationally, 1 in 5 people who are eligible for the EITC fail to claim the credit.

One weakness of both the federal and state EITC's is that neither provides much benefit to low-income workers who do not have dependent children. The federal EITC is only available to workers without dependent children age 25 or older and is only a small fraction of the tax credit provided to workers with dependent children. Workers without dependent children are completely ineligible for the Wisconsin EITC.

Unfortunately, Wisconsin recently <u>cut the state EITC</u> as part of the 2011-2013 state budget, which increased the amount of taxes that lower-income families paid to the state between 2011-2015 by approximately \$114 million.

Why is Increasing the State EITC Important to Women?

- The federal EITC has been an incredibly successful tool for lifting women, and especially women of color, out of poverty. In 2014, the federal EITC lifted the incomes of more than 5.6 million people above the poverty line, including almost 1.6 million adult women, nearly 3.1 million children, nearly 1.2 million African Americans, and more than 2.3 million Latinos.
- Many lower-income working moms cannot afford basic costs like child care and reliable transportation that are necessary in order to obtain and maintain stable employment. Increasing the state EITC will help make the costs of these necessities within the reach of more lower-income working moms.

Simultaneously increasing the state EITC and state
 minimum wage would be particularly helpful to low-wage
 working women and their families, as combining these
 policies would provide a higher income boost to lower wage workers and would cover a larger number of
 workers and families as compared to either policy in
 isolation.

What Wisconsin Can Do

Increasing the federal EITC has been one of the few areas of bipartisan agreement reached by Congress during recent years. Congress has both extended the eligibility for the federal EITC and increased the amount of the EITC for families with three or more children. These changes were recently made permanent. Wisconsin should follow Congress' lead. During the 2015-2016 legislative session, two pieces of legislation were introduced that would improve the state EITC for lower-wage workers and their families:

- The <u>first bill</u> would have restored the cuts that were made to the state EITC as part of the 2011-2013 state budget and created a refundable state EITC for lower-wage workers who do not have children.
- The <u>second bill</u> would have allowed an individual to claim
 the state EITC for a child who does not have the same
 principal place of residence as the tax claimant and even
 if another person claims the federal and state EITC for the
 child, so long as the claimant is legally the parent of the
 child and in compliance with a child support order for the
 child.

Unfortunately, neither piece of legislation passed into law.

How Can I Help Make Expanding the State EITC a Reality in Wisconsin?

- Contact your state legislators and them to support legislation that would expand the state EITC.
- Connect with organizations, such as the <u>Wisconsin</u>
 <u>Council on Children and Families</u> or the <u>Public Policy</u>

 <u>Institute</u>, which are already working on expanding the state EITC.

"In 2014, the EITC lifted the incomes of more than 5.6 million people above the poverty line, including almost 1.6 million adult women and hearly 3.1 million children."

~ National Women's Law Center

Help Make Child Care Affordable for Working Families

The Issue

Balancing work and family responsibilities has become increasingly difficult for many working families. The cost of child care is a tremendous strain on many household budgets, especially in an economy where the majority of workers' wages have been stagnant for the past generation. To put the cost of quality child care in perspective, the average cost of infant care at a child care center in Wisconsin is higher than the average cost of tuition at a public university. Child care costs are even more pronounced in urban areas, such as Milwaukee County, where the annual cost for center-based infant care is over 18% more than the statewide average, even though the median household income for a married couple family in Milwaukee County is actually lower than the statewide average by about 6.5%. This means that a medianincome family in Milwaukee County would pay 17.3 % of their annual income towards child care for one infant.

Recent state child care policy changes in Wisconsin have had mixed results for working families. On the one hand, Wisconsin's implementation of the <u>Youngstar</u> quality rating and improvement system has <u>dramatically increased</u> the overall quality of child care centers in the state. Unfortunately, Wisconsin's child care subsidy program for low-income families (<u>Wisconsin Shares</u>) has consistently been <u>underfunded</u> for the past seven years. As a result, fewer lower-income families can afford high quality child care centers and many centers that have implemented quality improvements may not be able to sustain the improvements without higher reimbursement rates from the state.

According to Community Coordinated Child Care, Inc. (4-C), another current shortfall of Wisconsin Shares is that the program only has one eligibility scale for subsidies. This fails to account for regional cost of living disparities, which penalizes families in the higher cost counties that often have higher job growth. As a result, families lose child care subsidies before they can afford to pay for unsubsidized care. This affects job stability and children's access to quality early childhood programs. Wisconsin also does not have a state Child and Dependent Care Tax Credit (CDCTC). The federal government provides very modest assistance to low-income

families through the non-refundable federal CDCTC. Twenty-six states have <u>state CDCTC's</u>, 12 of which are refundable.

Why is Making Child Care More Affordable Important to Women?

- High child care costs represent a <u>barrier</u> to women's participation in the labor force because working mothers tend to have lower salaries than male counterparts. The average working mother who earns at or below the poverty level would pay 43% of her income for full-time child care for a child under five.
- Women continue to bear the <u>majority</u> of child care responsibilities, even in relationships where both partners work. Policies that make quality child care more affordable help remove work barriers.
- The lack of affordable child care disproportionately affects women of color and single mothers, who are significantly overrepresented in low-wage occupations.
- Many women providing child care are themselves among the working poor.

What Wisconsin Can Do

The Wisconsin Council on Children and Families has created a thorough report of Wisconsin's YoungStar and Wisconsin Shares programs that provides significant insights about how our state's child care subsidy and child care quality programs can be improved to better serve working families and child care service providers. The report recommends Wisconsin:

• Creates a new state funding stream separate from Wisconsin Shares of \$10 million to existing child care programs that are either trying to achieve or sustain the two highest YoungStar quality ratings; Increases Wisconsin Shares provider reimbursement rates to a level that would allow lower-income families to afford to send their children to high quality child care centers; and increases incentives for child care teachers and caregivers to enter and remain in the workforce.

In order to address regional cost disparities, 4-C recommends implementing several different eligibility scales based on a county's cost of living, which would lead to more families transitioning out of poverty and a more stable workforce in many business sectors throughout the state.

Wisconsin could also follow the lead of other 12 other states and adopt a *refundable* state CDCTC. A <u>refundable</u> state CDCTC would allow many more low-income working families to take advantage of the tax credit.

How Can I Help Make Affordable Child Care a Reality in Wisconsin?

- ✓ Call or email <u>your legislators</u> and urge them to support legislation that would increase state funding for child care subsidies, create a refundable state CDCTC, provide more support to existing programs that are striving to meet higher quality standards, and increase career support and compensation for child care providers.
- ✓ Connect with organizations such as the <u>Wisconsin Early Childhood Association</u>, <u>Community Coordinated Care, Inc.</u> (4-C), or the <u>Wisconsin Council on Children and Families</u> already working on increasing access to affordable, quality child care in Wisconsin.





Paid Family and Medical Leave

The Issue

Nearly everyone who works will eventually need to take time off of work in order to care for themselves if they become seriously ill, care for a seriously ill family member, or care for a new baby. While many workers have access to *unpaid* leave either through the federal Family Medical Leave Act (FMLA) or Wisconsin's state FMLA, only 12% of workers nationally have paid family leave through their employers and fewer than 40% have personal medical leave through an employer-provided, short-term disability program. As a result, many Wisconsin workers who take time off to take care for themselves or their families often face a significant loss of income. The U.S. is the only industrialized nation in the world that does not provide workers with any form of guaranteed paid leave from work.

Why is Paid Family and Medical Leave Important to Women?

- Women currently make up approximately half of the U.S. workforce, but are <u>still far more likely than men to be the</u> <u>primary caregivers for children</u>, even in relationships where both partners work.
- Women are highly overrepresented in low-wage
 occupations—approximately two-thirds of low-wage jobs in
 Wisconsin are held by women. Low-wage workers <u>are far</u>
 less likely to have access to paid family or medical leave
 and are much less likely to be able to afford to take any
 unpaid leave for which they might be eligible.
- Working women without access to paid leave are often forced to make incredibly difficult decisions about whether to take time off of work in order to care for themselves or their family members. Sadly, <u>nearly 1 in 5</u> low-wage working moms have lost a job due to their own illness or to care for a sick child.
- Sixty-three percent of families rely on women as either a <u>primary or significant breadwinner</u>.

What Wisconsin Can Do

Despite the ongoing inaction from Congress regarding paid family and medical leave, several states have enacted state insurance programs that provide workers with access to paid family and medical leave. California, New Jersey, and Rhode Island all have state family paid leave insurance laws in effect. In 2016, New York and Washington DC passed generous paid family and medical leave laws. New York's law, which will go into effect in 2018, will be the most generous in the nation.



Similar legislation was introduced in Wisconsin during the 2015-2016 legislative session. If enacted, the <u>Wisconsin Family and Medical Leave Insurance Act (Wifi)</u> would do the following:

- make all Wisconsin workers eligible for up to 12 weeks of paid leave for personal or family illness, or to care for a new child:
- provide job protection for workers who take leave for an eligible reason and work at a business that employs 25 or more people provide;
- provide income replacement between 66% of wages for most workers and up to 95% of wages for those with lower incomes;
- provide 2.6 million workers with paid leave insurance coverage through an employee contribution of between \$2 - \$3.50/week;
- and, expand the definition of eligible family members for whom an employee could take paid leave to include siblings, grandchildren, and grandparents

While the legislation did not pass, paid family and medical leave advocates will continue building support for this legislation for the 2017-2018 legislative session.

For more details about how state family and medical leave insurance systems work and how such systems have affected businesses, see the more detailed paid family and medical leave issue brief contained in the compendium to this report.

How Can I Help Make Paid Family and Medical Leave Insurance a Reality in Wisconsin?

- ✓ Call or email <u>your legislators</u> and ask them to support the Wisconsin Paid Family and Medical Leave Act.
- ✓ Connect with organizations such as <u>9to5Wisconsin</u> or <u>Family Values @ Work</u> that are already working on making paid family and medical leave a reality for workers in Wisconsin.

Ensure Employees Have Paid Sick Days

The Issue:

For many workers in Wisconsin, choosing to take a day off of work if they are sick or to care for a sick family member means forfeiting a day's pay and sometimes even their job, as Wisconsin law does not guarantee employees any "paid sick days." Approximately 36% of American workers don't have access to a single paid sick day. An even higher percentage (45.5%) of Wisconsin workers are without paid sick days. This is especially problematic for the individuals least likely to receive paid sick days, such as those who work in small businesses or in low paying jobs.

Paid sick days are important for much more than just recovering from illness—they cover days needed for wellness checkups for parents and children, as well as other routine health appointments. Sick days also benefit employers and the general public by reducing exposure to illness. Paid sick days are also linked to <a href="https://distriction.org/linked-to-the-routine-to-the-ro

In focus groups conducted by the Wisconsin Alliance for Women's Health and 9to5 Wisconsin, women from multiple age groups indicated that paid sick days would significantly improve their quality of life and their families' wellbeing. The participants expressed a strong need for some workplace flexibility in order to respond to life's many unexpected caregiving challenges, for which most of these women were solely responsible within their families.

Wisconsin has already attempted to address the lack of paid sick days, but with little success. Voters in Milwaukee passed a paid sick leave ordinance that would mandate local employers provide workers with paid sick days, but the ordinance was voided by a state bill that preempted local ordinances that provide private-sector employees with paid time off.

Why are Paid Sick Days Important to Women?

- Although women and men are more likely today to <u>share</u> <u>responsibilities</u> for caring for relatives, women are still disproportionately more likely to be the <u>primary caregiver</u> to their children and their aging family members.
- Women disproportionately hold <u>lower income jobs and/or</u> work part time as compared to men, which means that

- one or more unpaid days off work can cause them significant financial distress.
- Women need time off to access preventive care and regular wellness checks. Access to these appointments is <u>vital</u> to maintaining general health and preventing longterm illness.
- The flexibility afforded by paid sick days will allow victims of crimes like domestic violence, sexual assault, and stalking to recover from the trauma related to their victimization.

What Wisconsin Can Do

Most states, including Wisconsin, do not have regulations in place to mandate paid sick days. In 2016, legislation was introduced that would provide private sector workers with paid sick days under state law. Though the bill did not pass, the provisions of this bill serve as a great framework for future legislative action. Under the bill, employees would be able to earn up to nine sick days annually depending on how many hours they work during the year. The bill would also provide job protections to ensure that workers could use paid sick days without the risk of losing their jobs. Workers would be able to use the days for a number of qualifying events, including to recover from an illness, to care for an ill family member, or to recover from the trauma stemming from domestic or sexual violence. For more information on the bill's details, see the detailed paid sick days issue brief contained in the compendium to this report.

How Can I Help Ensure Paid Sick Days for Employees in Wisconsin?

- ✓ Call or email <u>your legislators</u> and urge them to support paid sick days legislation.
- ✓ Connect with organizations working to make paid sick days a reality in Wisconsin, such as <u>9to5Wisconsin</u>.

What's the Difference between Paia Sick Leave and Paia Sick Days?

Paid sick days are intended to be used for limited-term absences, like minor illnesses or attending a checkup, where paid sick leave is used for extended absences, such as in cases of serious illness or maternity leave. Both address the reality that everyone will eventually need to take some time off work to care for themselves or their family, but in different ways to address short- and long-term situations.

Raise the Minimum Wage

The Issue

The current minimum wage in Wisconsin is \$7.25 per hour. The federal minimum wage is also \$7.25 per hour, but it has



not been adequately adjusted to keep up with the rising costs of living due to inflation. To put in perspective how far the minimum wage has fallen behind the real costs of living, the inflation-adjusted value of the federal minimum wage in 2014 was 24 percent below its value in 1968.

Wisconsin law prohibits local units of government from enacting an ordinance that establishes a general minimum or "living" wage that is different than state law. However, there are exceptions to this prohibition for living wage ordinances that apply to local government employees or employees paid under contracts with local governments. Several Wisconsin counties and cities have enacted such ordinances.

Raising the minimum wage would benefit more than just the workers who would see a direct raise from the increase. Other low-wage workers who make slightly more than the amount to which the minimum wage is raised would also benefit from the positive "ripple effect" of raising the wage floor.

Why is Raising the Minimum Wage Important to Women?

- Women, especially women of color, would greatly benefit from raising the minimum wage because of their overrepresentation in low-wage occupations. For instance, according to the National Women's Law Center, 38& of working women—and 37&of working women of color—would get a raise if the minimum wage increased to \$12.00 per hour by 2020.
- Increasing the minimum wage would also help working moms who provide for their families. About <u>one-third of</u> <u>Wisconsin single-moms</u> would get a raise if the federal minimum wage was raided to \$12 per hour by 2020.
- Raising the minimum wage can also help reduce the gender wage gap. According to <u>estimates from the</u> <u>President Obama's Council of Economic Advisors</u>, increasing the federal minimum wage to \$10.10 an hour and indexing it to inflation could reduce gender wage gap by about 5%.

What Wisconsin Can Do

Despite Congress' continued failure to raise the minimum wage, several states have enacted minimum wage increases in recent years. New York, Washington D.C., and California have all enacted \$15 per hour minimum wages that will gradually go into effect in 2018, 2020, and 2023 respectively. Oregon passed a minimum wage increase the will vary by region and will be fully implemented in 2023, after which minimum wage increases will be indexed to inflation. Twenty-nine states have a higher minimum wage than the federal minimum wage and 11 states index their minimum wages to inflation. Wisconsin is not among these states, which makes raising our state minimum wage even more critical for lower-wage workers.

Three separate pieces of legislation that would raise Wisconsin's minimum wage were introduced during the 2015-2016 legislative session. These proposals would have raised Wisconsin's minimum wage to between\$10.10 per hour and \$15 per hour. All three of the bills would have also increased the minimum wage for tipped employees (who are only required to receive \$2.13 per hour in direct wages if that amount combined with the tips received at least equals the federal minimum wage), but took very different approaches to doing so. For more information on each proposal, please see the more detailed issue brief on raising the minimum wage contained in the compendium to this report.

Effective and exciting advocacy for raising the minimum wage is also taking place in our communities. Organizations like Wisconsin Jobs Now and Fight for \$15 have helped organize lower-wage workers and their allies across the state of Wisconsin to participate in rallies and protests urging local units of government to pass living wage ordinances that are allowable under current state law and individual businesses in traditionally low-wage employment sectors to voluntarily raise their employees' wage.

How Can I Help Make a Higher Minimum Wage a Reality in Wisconsin?

- ✓ Call or email <u>your legislators</u> to urge them to support legislation that would increase the minimum wage.
- ✓ Connect to organizations like <u>Wisconsin Jobs Now</u> and <u>Fight for \$15</u> that are already working on increasing the state's minimum wage and organizing low-wage workers and their allies to urge individual businesses to increase their employees' wages.

CHAPTER 2 – ACCESS TO HEALTH CARE

Expand & Strengthen BadgerCare

The Issue

As originally passed, the Affordable Care Act (ACA) required all state Medicaid (known as "BadgerCare" in Wisconsin) programs to provide health insurance coverage to all adults under age 65 who live in a household with income up to 138% of the federal poverty level. In order to help states afford Medicaid eligibility expansion, the ACA also provides enhanced federal matching funds for any newly eligible groups of people who did not previously qualify for a state Medicaid program. The federal matching rate paid for 100% of benefit costs in 2016 and eventually tapers down to 90% of costs in 2020 and all subsequent years. In Wisconsin, the federal government currently pays for 58% of most Medicaid benefit costs, so the enhanced federal rate would result in a significant increase in federal aid to the state.

The 2012 Supreme Court case *NFIB v. Sebelius* made Medicaid expansion optional for states. As a result, <u>19</u> states, including Wisconsin, still have not expanded their Medicaid programs under the ACA, which has unnecessarily increased the number of low-income people who are without health insurance. An estimated <u>83,000</u> Wisconsinites would gain access to health insurance coverage under BadgerCare if Wisconsin expanded the program. If Wisconsin continues to reject BadgerCare expansion, doing so will cost Wisconsin taxpayers approximately \$392 million during the 2017-2019 budget period alone.

Why is Expanding BadgerCare Important to Women?

- Low-income, uninsured women are more likely to forego health care because of cost, are less likely to have a regular source of care, and utilize preventive services at lower rates than low-income women with health insurance.
- In <u>2015</u>, 8.7% of Wisconsin women age 18-64 were uninsured and 12.5% of Wisconsin women did not receive health care at some point because of cost.
- States that have expanded Medicaid under the ACA have reduced <u>racial disparities</u> in their uninsured rates, which is particularly important in Wisconsin given the state's <u>significant racial health outcome and access to care</u> disparities.

 Low-income women who do not have access to BadgerCare coverage often have to rely on a <u>patchwork</u> of care programs in order to receive the health care they need. For example, many of these women may have to go to publicly-funded safety net clinics to receive reproductive health care services.

What Wisconsin Can Do

Wisconsin should expand BadgerCare as offered under the ACA to cover all adults who earn up to 138% of the Federal Poverty Level as soon as possible. Full BadgerCare expansion on January 1, 2017 would allow an additional 83,000 Wisconsinites to receive health care insurance under the program and would save Wisconsin approximately \$834 million over the next six years. Legislation that would fully expand BadgerCare under the ACA was introduced during the 2015-2016 legislative session. The bill failed to pass, but will likely be reintroduced during the 2017-2018 session.

In light of the potential repeal of the ACA and other changes currently being discussed regarding the federal funding structure for Medicaid, there are now additional issues to consider regarding BadgerCare expansion. Those issues are discussed in more detail in the issue brief contained in the compendium to this document.

How Can I Help Make BadgerCare Expansion a Reality in Wisconsin?

- Call or email <u>your legislators</u> and urge them to support legislation that would fully expand BadgerCare.
- Connect with organizations such as the <u>Public Policy</u> <u>Institute</u> or the <u>Wisconsin Council on Children and</u> <u>Families</u> already working to make BadgerCare expansion a reality in Wisconsin.

Current Status of State Medicaid Expansion Decisions



NOTES: Current status for each state is based on KCMU tracking and analysis of state executive activity. *AR, AZ, IA, IN, MI, MT, and NH have approved Section 1115 waivers. Wil covers adults up to 100% FPL in Medicaid, but did not adopt the ACA expansion. SOURCE: "Status of State Action on the Medicaid Expansion Decision," KFF State Health Facts, updated October 14, 2016. https://kff.org/health-reform/state-indicate/state-activity-acound-expansion.



Ensure Access to Medically Accurate, Comprehensive Reproductive Health Care

The Issue

Ensuring that women have access to comprehensive reproductive health care services results in a wide range of direct medical benefits to women, including reduced unintended pregnancies, improved maternal health, more effective diagnosis and treatment of sexually transmitted infections, and increases in women's economic security, educational attainment, and employment opportunities. Policies that promote access to reproductive health care provide enormous economic and social value, from reducing poverty to improving the societal status of women.

Despite these well documented benefits, a <u>tidal wave</u> of state-level political assaults on access to reproductive health care have occurred since the 2010 elections, and Wisconsin has been at the forefront of this trend. Since 2011, Wisconsin has enacted a wide array of restrictions on access to reproductive health care, from medically unnecessary abortion restrictions to attempts to defund family planning clinics.

These restrictions create real, sometimes insurmountable, barriers to accessing reproductive care for many women in Wisconsin. In addition to political restrictions, many women and health care professionals face harassment, and sometimes even violence, when they try to access or provide care from a small minority of extremist opponents of abortion. This legitimate fear of harassment and intimidation serves as a deterrent to professionals who would otherwise be willing to provide much-needed care and to women seeking care.

This unprecedented wave of political attacks on women's access to reproductive health care has spurred advocacy organizations to begin formulating a positive, <u>proactive</u> vision of how states can begin to create a policy environment that ensures everyone has the right to make their own reproductive healthcare decisions free from harassment, intimidation, political interference, or <u>false information</u>.



Why is Improving Access to Reproductive Health Care Important to Women?

- Access to comprehensive reproductive health care is an <u>essential component</u> to overall women's health, which in turn impacts community health.
- Medically unnecessary restrictions on access to reproductive care create substantial barriers to care for women seeking abortions, especially <u>low-income women</u> who cannot afford the costs of missing work, child care, travel, or lodging that are associated with mandatory waiting periods or clinic closures.
- Meaningful access to contraception and family planning services greatly increases women's ability to determine whether and when to have children, which has enormous consequences for the health and <u>economic security</u> of women.

What Wisconsin Can Do

Despite its troubling legislative track record since 2011, Wisconsin has also been at the national forefront of proactive reproductive health policy activism. Wisconsin introduced first-of-its-kind legislation in 2015 to protect a patient's right to medically accurate, comprehensive reproductive health care in a setting free of harassment and intimidation. The "Patients Reproductive Health (PRH) Act" provides a roadmap for what states can do to ensure reproductive health care decisions are made by patients in consultation with their health care professionals without undue interference from politicians. Key provisions include:

- Create robust legal protections for a patient's right to receive and a health care professional's right to provide medically accurate care.
- Repeal reproductive health care laws and regulations that restrict access to care and are not grounded in medical science or accepted standards of care.
- Enact protections for patients and health care professionals against threats of force and physical obstruction of facilities that are consistent with First Amendment rights, such as a state version of the <u>Freedom of Access to Clinic Entrances Act</u>.

Despite <u>failing to pass</u> during the 2015-2016 legislative session, many provisions of the bill will be reintroduced during the 2017-2018 legislative session.

How Can I Help Make Expanding Access to Reproductive Care a Reality in Wisconsin?

- ✓ Call or email <u>your legislators</u> and urge them to support the Patient's Reproductive Health Act.
- ✓ Connect with organizations like <u>Planned Parenthood of</u>
 <u>Wisconsin</u> and the <u>Wisconsin Alliance for Women's Health</u>
 already working on expanding access to care.

Help Protect Confidentiality for Insured Dependents

The Issue

The passage of the Affordable Care Act (ACA) allowed children to be covered as dependents under their parents' health insurance until age 26. The ACA also increased health coverage opportunities for other dependents. However, concerns remain regarding the disclosure of sensitive health records to other family members or partners with whom dependents share insurance. Current state and federal laws combined with private sector insurance billing and notification practices create significant barriers to protecting the privacy and confidentiality of insured dependents.

For example, when insurance companies send an Explanation of Benefits (EOBs) to an insurance policyholder that provides notice about medical care received by an insured dependent, this can represent a significant breach of privacy for the dependent who sought medical care, especially in cases where the dependent has accessed more sensitive health care services such as mental or reproductive health care.

These privacy concerns represent very real barriers to care. For instance, adolescents and young adults on their parents' policies are less <u>likely to access</u> needed care if they know that such care will not be confidential. Protecting confidentiality is also a concern in <u>abusive households or relationships</u>, as insured dependents who access care could be subject to threats or further abuse in the event that the nature of the medical services that they accessed were revealed.

Why is Ensuring Patient Confidentiality Important to Women?

- Meaningful access to confidential family planning services, mental health services, treatment for substance abuse disorders, domestic violence counseling, and other potentially sensitive health services is important for the overall health and wellbeing of women and girls. Many forego such care due to confidentiality concerns.
- Many women rely on their partners for health insurance coverage. Nationally, 1 out of 3 of women experience intimate partner violence. In many such scenarios, the disclosure of sensitive health services sought by victims can lead to further harm.



 When patients forego necessary care, they are at <u>increased risk</u> of adverse health outcomes, many of which could have long-term consequences.

What Wisconsin Can Do

Several states have passed or introduced legislation to protect privacy for insured dependents, including <u>Maryland</u>, <u>California</u>, and <u>Massachusetts</u>. These proposals include provisions that limit when a summary of payments or an Explanation of Benefits (EOB) can be sent out to policyholders and prohibit these forms from being sent out if the insured has no remaining financial obligation for the services.

Wisconsin should follow the lead of other states and pass legislation that would help to protect insured dependents' privacy to the fullest extent possible. Wisconsin should adopt legislation that would do the following:

- mandate that patients are offered forms to request an alternate address for insurance communications that must be honored by insurance companies;
- mandate that no EOB form be sent out to insurance policyholders detailing the nature of services that their dependent received if there is no remaining financial obligation unless requested by the insured dependent;
- notify each dependent of services available that are not subject to cost-sharing;
- and implement a training program to educate insurers and health care professionals on the requirements proposed by the bill

How Can I Help Make Ensuring Confidentiality for Insured Dependents a Reality in Wisconsin?

- ✓ Call or email <u>your legislators</u> to urge them to support the patient confidentiality bill when it is introduced
- Connect with the <u>Wisconsin Alliance for Women's Health</u>, which is currently working on legislation that would protect insured dependent confidentiality.

Make Workplaces Friendlier to Breastfeeding Moms

The Issue

The American Academy of Pediatrics, the Institute of Medicine, and the World Health Organization all recommend exclusive breastfeeding for approximately 6 months, with continuation of breastfeeding for 1 year or longer as mutually desired by the mother and infant. However, according to the Centers for Disease Control and Prevention (CDC), many women who are not medically prevented from breastfeeding have difficulty achieving these recommended guidelines. In 2011, about 79% of U.S. newborn infants started to breastfeed, but only 49% were breastfeeding at 6 months and 27% at 12 months.

Inadequate workplace breastfeeding policies and laws serve as major obstacles that prevent many new mothers from starting or continuing breastfeeding. Women now make up approximately half of the U.S. workforce, and two-thirds of working women return to work within three months of giving birth. Many workplaces and many of our labor laws have not adequately evolved to accommodate breastfeeding moms' needs for break time and private space in order to express milk when they return to work.

The Affordable Care Act (ACA) began to address these issues by providing new workplace protections for many breastfeeding moms. Under the ACA, employers must provide breastfeeding moms who are hourly wage earners a reasonable break time and a private, non-bathroom location to express milk for one year after a child's birth. However, a significant percentage of women workers are not covered by the law, as employees who work for businesses with 50 or fewer employees that can demonstrate compliance would constitute an undue business hardship and women who have "salaried" positions are exempted.

Why are Workplace Breastfeeding Accommodations Important to Women?

- Mothers who breastfeed experience <u>short- and long-term</u> health benefits, including reduced likelihood of postpartum depression, cardiovascular disease, and certain types of cancer.
- Babies who are breastfed exclusively are <u>less likely</u> to experience illnesses such as ear infections, diarrhea, and pneumonia. In addition, children who were breastfed are <u>less likely</u> to become obese later in life.

What Wisconsin Can Do

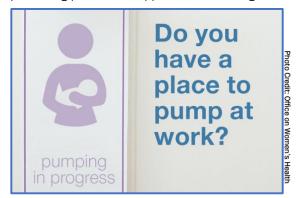
In addition to the workplace protections provided by the ACA, 28 states and the District of Columbia have passed workplace breastfeeding accommodation laws that vary greatly in scope. Wisconsin has yet to pass a state breastfeeding accommodation law. However, the bipartisan "Healthy Babies, Working Mothers Act" was introduced during the 2015-2016 legislative session. If passed, the bill would:

- Enshrine the ACA's workplace breastfeeding protections into Wisconsin law;
- Require an employer to provide access to an electrical outlet, running water, and a refrigerator for the storage of breast milk;
- Employers with less than 50 employees would be exempt from the first two provisions if the employer could demonstrate that complying with these provisions would create an undue business hardship;
- Require that if an employee receives employer-sponsored health care benefits that are dependent on the number of hours worked by the employee, the employer must treat any unpaid break time taken by the employee to express breast milk as paid work time for purposes of determining that eligibility.

The bill received a committee hearing, but did not pass before the end of the legislative session. The legislation will most likely be reintroduced during the 2017-2018 session.

How Can I Help Improve Workplace Breastfeeding Accommodations in Wisconsin?

- ✓ Call or email <u>your legislators</u> and urge them to support the Healthy Babies, Working Mothers Act.
- ✓ Connect with organizations in Wisconsin such as the Wisconsin Breastfeeding Coalition or the African American Breastfeeding Network that are already working on promoting policies to support breastfeeding mothers.



CHAPTER 3 – VIOLENCE AGAINST WOMEN AND GIRLS

Implement Effective Teen Dating Violence Prevention and Response Policies

The Issue

Teen dating violence is a form of intimate partner violence that can include physical, sexual, psychological, or emotional violence within a dating relationship where at least one of the partners is a teen. Such abuse can also include stalking behavior and can occur in person or electronically.

According to the Center for Disease Control's (CDC) <u>Youth Risk Behavior Surveillance — United States, 2013</u> survey, of the female high school students who had dated or gone out with someone in the previous year, 13% experienced some form of physical dating violence, which is defined to include being hit, slammed into something, or injured with an object or weapon on purpose by an intimate partner. This compares to a rate of 7.4% for male students. Wisconsin's physical teen violence rates were 10.3% for females and 6.7% for males.

The CDC survey also measured the amount of sexual dating violence experienced by teens. Nationally, 14.4% of female students had been kissed, touched, or physically forced to have sexual intercourse when they did not want to by someone they were dating or going out with one or more times during the 12 months before the survey. This compares to a rate of 6.4% of male students. Wisconsin's sexual teen dating violence rates were 15.7% for females and 4% for males, respectively.

Victims of teen dating violence have a higher risk of substance abuse, eating disorders, suicidal thoughts, depression, and future victimization. Despite the prevalence and associated risks, Wisconsin has not passed legislation to specifically address teen dating violence prevention.

Why is Addressing Teen Dating Violence Important to Girls and Women?

- Wisconsin girls are <u>disproportionately</u> victimized by teen dating violence. Wisconsin high school girls experience physical teen dating violence at a 54% higher rate than high school boys and sexual teen dating violence at almost four times the rate.
- <u>Nationally</u>, females are twice as likely as males to be victimized by teen cyber dating abuse.



What Wisconsin Can Do

There are many <u>evidence-based policies</u> that states can implement in order to help prevent and effectively respond to incidents of teen dating violence. According to <u>End Domestic Abuse Wisconsin</u>, "school-based violence prevention programs are most effective when they combine education to students with policies that create a supportive environment for victims to report abuse and seek help."

Bipartisan, comprehensive teen dating violence prevention legislation was introduced during the 2015-2016 legislative session. The bill proposed to do the following:

- Direct schools to integrate teen dating violence prevention education into classroom instruction for middle-school and high-school students.
 - The bill would require the Department of Public Instruction (DPI) to create a model curriculum and response policy, both of which individual school districts could choose to adopt. If a school district chose not to adopt the model DPI policies and curriculum, the district would be responsible for developing its own policy and curriculum.
- Set guidelines for schools' response to teen dating violence to create an atmosphere in which victims can get help and abuse is not tolerated in order to help break the cycle of abuse.
- Provide teen dating violence training for teachers and administrators.

The bill received a committee hearing but did not pass before the end of the legislative session. The legislation will most likely be reintroduced during the 2017-2018 session.

How Can I Help Ensure Wisconsin Addresses Teen Dating Violence?

- ✓ Call or email <u>your legislators</u> and urge them to support evidence-based teen dating violence prevention legislation
- ✓ Connect with organizations in Wisconsin already working to address teen dating violence, such as <u>End Domestic</u> Abuse Wisconsin.

Implement Comprehensive Child Sexual Abuse Prevention Policies

The Issue

According to the <u>Wisconsin Coalition Against Sexual Assault</u> (<u>WCASA</u>), "child sexual abuse occurs when a child is exploited sexually by another person." Child sexual abuse may take many forms, but is most often perpetrated by someone the child knows and trusts.

Child sexual abuse is an unfortunately prevalent problem across the nation, and Wisconsin is no exception. The actual prevalence of child sexual abuse is <u>difficult to determine</u> because it is often <u>not reported</u> to law enforcement or human service agencies. In fact, sexual assault is widely recognized to be the most <u>underreported</u> violent crime.

Many states have recognized the serious consequences child sexual abuse has on both victims and their communities at large and have passed legislation aimed to prevent child sexual abuse. At least <u>26 states</u> have passed laws to either study child sexual abuse prevention programs or create child sexual abuse identification and prevention curriculum.

While this increased attention to addressing child sexual abuse is certainly welcome, many of the state legislative approaches to child sexual abuse prevention are too narrowly tailored and based on unsuccessful prevention models.

According to the National Alliance to End Sexual Violence (NAESV), many of these approaches "rely too heavily on children to prevent their own abuse and can promote a spirit of victim-blaming when children are unable to prevent abuse." Such approaches fail to take into account the power and control imbalances between children and adults that help create the dynamics that contribute to abuse.

As a result, NAESV recommends that states adopt a more comprehensive policy approach to child sexual abuse prevention that focuses more attention on adult and societal responsibilities for preventing and responding to abuse.

Why is Addressing Child Sexual Abuse Important to Girls and Women?

Research indicates that girls are <u>disproportionately</u> victimized by child sexual abuse.

- Sexual abuse can have a <u>devastating</u> impact on a child's <u>wellbeing and sense of self</u>. Child victims often experience severe anxiety, problems with school, difficulty forming or maintaining healthy relationships, and a whole host of other adverse effects.
- The relationship between Adverse Childhood Experiences (ACEs)—such as child sexual abuse—and <u>poor health</u> into adulthood are well documented.

What Wisconsin Can Do

WCASA has created a detailed roadmap for policymakers who wish to take a comprehensive approach to child sexual abuse prevention. The report, entitled 10 Core Concepts for Child Sexual Abuse Prevention, suggests four elements that should be included to effectively address each core concept along with research that provides a rationale for each specific recommendation. The 10 Core Concepts include: (1) Sexual Health & Development; (2) Gender Socialization; (3) Intersections of Oppression; (4)Boundaries; (5) Empowerment & Body Ownership; (6) Pro-Social Behavior & Skills; (7)Understanding, Identifying & Responding to Trauma; (8) Bystander Intervention; (9) Information About Sexual Abuse; and, (10) Safety & Risk Reduction.

While legislation that would require <u>child sexual abuse</u> <u>prevention curriculum be taught to children in Kindergarten</u> <u>through 6th grade</u> was introduced during the 2015-2016 legislative session, the bill did not incorporate the comprehensive approach advocated for by WCASA, NAESV, and other experts on child sexual abuse prevention. Currently, no comprehensive child sexual abuse prevention legislation has been introduced in Wisconsin. However, any such legislation should be assessed on whether it takes a comprehensive, evidence-based approach.

How Can I Help Ensure Wisconsin Adopts Comprehensive Child Sexual Abuse Prevention Policies?

- Call or email <u>your legislators</u> and urge them to support evidence-based, comprehensive child abuse prevention legislation.
- Connect with organizations, such as the <u>Wisconsin</u> <u>Coalition Against Sexual Assault</u>, which are already working to address child sexual abuse prevention.

"The clear truth is that child sexual abuse will hever be eradicated without getting to the root causes of Perpetration." ~ National Alliance to End Sexual Violence



