



CONNECTICUT WOMEN'S HEALTH CAMPAIGN

Newsletter February 2008



Legislative Update

CWHC Priorities

The CWHC has selected three priorities for the 2008 legislative session: a sexual assault nurse examiner program; the Connecticut Home Care Program for the Disabled and a comprehensive sexuality education grant program. Details of the sexuality education and home care program are outlined below.

More Health Insurance Coverage for Pregnant Women

As of January 1, 2008, more pregnant women without health insurance will qualify for the HUSKY A/Medicaid program. Last year, Connecticut approved legislation increasing the income limit from 185% to 250% of the federal poverty level (FPL), or \$42,925 for a family of three.

High Demand for Smoking Cessation

Legislative leaders and Atty. General Blumenthal have urged Governor Rell to allocate \$2 million already appropriated and available through the Connecticut Cancer Partnership to restore the "Quitline" with full counseling and nicotine replacement. Demand for Quitline services exceeded funding and its services were shut down after one month. The state will receive over \$140 million in 2008 from tobacco litigation, but spends less than 1% of funds on related smoking cessation activities.

New Grant Program Proposed for Healthy Teens

An adolescent health coalition is seeking a com-

Women's Health Calendar—Upcoming Events

February 21, 2008 — Join the Permanent Commission on the Status Women for **Making Women Visible Day** at the State Capitol from 10:00 a.m.—12:00 p.m. Financial journalist Stacey Tisdale will speak. Don't forget to wear red! For more details visit: www.cga.ct.gov/PCSW

March 9, 2008 — Women and Family Life Center's 6th annual Women's Health Conference, Mystic Marriott Hotel and Spa, Mystic, CT (for details, visit [here](#))

April 17—18, 2008 — Raising Women's Voices for the Health Care We Need National Conference, Simmons College, Boston, MA. (click [here](#) for flier in PDF format)



Women's Health Resources

A health campaign and TV documentary series about socioeconomic disparities in health can be found at: www.unnaturalcauses.org

Narrative medicine is an outgrowth of insights gained and habits developed patient-centered medical interviewing, and relationship-centered care. Narrative skills and methods provide means

New Grant Program Proposed for Healthy Teens

An adolescent health coalition is seeking a comprehensive sex education initiative for 2008. The *Healthy Teens Act* would ensure that Connecticut's youth have medically accurate, age-appropriate sex education. This would help them to develop skills to make safe and responsible choices about their sexual health.

Under the proposal, the Department of Education would offer incentive grants to districts, schools, school-based health centers, and community-based organizations who have experience delivering comprehensive, medically accurate sexuality education to teenagers or to parents.

Studies show that few Connecticut students get comprehensive, age-appropriate, medically accurate information about sexual health before they become sexually active. And an estimated 80,000 Connecticut high school students report they have had sexual intercourse and nearly 80% first had sexual intercourse between the ages of 13 and 16.

The National Campaign to Prevent Teen Pregnancy reports that many parents don't talk with their children about sex, because they are uncomfortable, don't know what to say, and mistakenly think that schools are doing the job. Furthermore, Connecticut has no designated funding stream for comprehensive sexuality education in schools.

Connecticut Home Care Program for the Disabled

The Connecticut Home Care Program for the Disabled pilot is a starting point for expanding home and community based services to individuals with disabilities.

The program was launched on October 1, 2007 and offers a package of home-based services to a maximum of 50 individuals, age 18 – 64, with degenerative, neurological conditions. Eligible individuals need case management and other supportive services but must not receive such services from other programs.

Those individuals served by the program must be at risk of institutionalization or currently in a nursing home and need help with at least three of critical needs. The asset limit is \$20,328.00 for a single applicant or \$30,492 for a married applicant. Individuals whose monthly income exceeds \$1,702.00 are required to contribute towards the cost of care. Individuals who are either Medicaid active or eligible for Medicaid are not eligible for the home care pilot.

Narrative medicine is an outgrowth of insights gained and habits developed patient-centered medical interviewing, and relationship-centered care. Narrative skills and methods provide means of achieving responsive, communicative and competent care to realize a system that is just and egalitarian health care for all. See <http://www.narrativemedicine.org/about/about.html>

CWHC General Membership

Click on the links provided to see a list of existing [CWHC members](#), [our principles](#), and a [sign up sheet](#). CWHC will *not* ask members to sign on each year. If your organization is on the attached list, you are "grandmothered" into membership. If you wish to be a new member, please fill out [this form](#).

If you are an existing member that is no longer interested in membership, please [e-mail](#).

Future CWHC Electronic Bulletins

The CWHC newsletter will be issued as needed during the off-session and once a month or more often as needed beginning the month after the start of Connecticut's legislative session. These bulletins will not be limited to legislative information, nor will they contain calls to action. **If you would like to post an announcement about a publication, conference or other event, please [e-mail](#).**

CWHC News

Connecticut Cancer Partnership: Spending Of State Funds Appropriated In FY2007 for Initiatives

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Connecticut Cancer Partnership: Spending Of State Funds Appropriated In FY2007 for Initiatives

The \$7.145 million appropriated by the State Legislature has made it possible for several Partnership initiatives to begin. A variety of mechanisms were used by the Department of Public Health to distribute the funds. Highlights of the scorecard below detail the funding and the organizations who are implementing select programs.

- **Appropriated - \$7.145 million**
 - \$5.5 million appropriated by the Connecticut Legislature to Comprehensive Cancer Control programs.
 - \$1.645 million appropriated as one-time additional allocation to Breast and Cervical Cancer Early Detection Program.
- **Expended and Committed - \$7.145 million**
 - \$1.645 million added to Breast and Cervical Cancer Early Detection Program contractors for enhanced screening and diagnostic services for uninsured and under-insured women (17 contractors statewide).
 - \$1.46 million added to Tobacco QuitLine for expanded counseling and Nicotine Replacement Therapy (NRT).
 - Small additional grants for: community tobacco cessation programs; educating Medicaid providers on cessation interventions; a centralized clearinghouse of cancer survivorship; and colorectal cancer screening for 600 underserved adults in community health centers.

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