Supporting Women and Families

President Clinton's Accomplishments and Agenda

Your Hotline to The White House

Please let us know how the White House Office for Women's Initiatives and Outreach can help you by answering the following questions:

This postcard is addressed to the White House. We look forward to hearing from you.

Would you like to receive more information on a regular basis? ☐ Yes ☐ No

Let us know how to reach you:

Name: _____

Address: _____

_____

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President Clinton's Administration — Supporting Women and Families

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The White House Office for Women's Initiatives and Outreach
708 Jackson Place, N.W.
Washington, D.C. 20503

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Intensified Research Brings New Hope

A broad spectrum of new research is being supported that holds promise for increased understanding of the causes of the disease and for the development of new diagnostic, treatment, and prevention strategies.

- Researchers supported by the National Institutes of Health have identified breast cancer susceptibility genes that place women at increased risk of the disease. These findings hold promise for the development of improved treatments and potentially, to gene therapies that will prevent the disease from developing. The National Action Plan on Breast Cancer has published recommendations to address the legal and ethical issues arising from discovery of these genes.
- The National Institutes of Health and the Environmental Protection Agency have increased the research focus on the study of environmental risk factors for breast cancer. And a new Federal Interagency Coordinating Committee on this issue is examining how home, work, diet, atmospheric pollutants, drugs, and other environmental factors may contribute to the risk of breast cancer and other diseases and developing strategies to prevent these health hazards.

Ensuring Accurate and Early Detection of Breast Cancer

Mammography detects breast cancer early, when treatment is most effective. New advances in imaging technology will enable the disease to be detected even earlier and with greater accuracy.

- To ensure that women get the safest and most reliable mammography, the Food and Drug Administration has implemented the Mammography Quality Standards Act. Now, an FDA "seal of approval" assures women that their mammography facility meets the highest quality standards for equipment and personnel. Without this certification it is illegal for facilities to operate.
- The National Breast and Cervical Cancer Early Detection Program, implemented by the Centers for Disease Control and Prevention, makes free or low-cost mammography and Pap tests available to medically underserved women. To date, over 800,000 screening tests have been performed.
- Because older women were not using Medicare's new mammography screening benefit, an educational campaign to encourage its use was launched by the First Lady with the Health Care Financing Administration and the U.S. Public Health Service's Office on Women's Health.
- New imaging technologies are being developed and tested to improve the early detection and diagnosis of breast cancer, including magnetic resonance imaging, digital mammography, and image-guided needle biopsy. And technologies from the CIA, DoD and NASA used to track spy satellites, to guide missiles, and to see distant planets are being applied to improve the early detection of breast cancer.

Treatment Advances

- The Food and Drug Administration has put cancer drugs on a fast track for review and approval. For example, medications approved in other countries or those found to shrink tumors will be made available to treat severely ill breast cancer patients.
- New treatment approaches are evolving, including the sequencing of chemotherapies, the development of monoclonal antibodies shown to boost the immune system to fight cancer growth, new drugs for advanced breast cancer, and medications to help prevent the disease from occurring.

These Federal programs and many more initiatives being supported by the government and the private sector are making significant progress in the battle against breast cancer.

Prepared by the U.S. Public Health Service's Office on Women's Health
Department of Health and Human Services
For more information, contact: (202) 690-7650

Improving Health Care Services for all Women

Improving and targeting health care services to all women will safeguard their health today and tomorrow.

- Implementation of the Mammography Quality Standards Act by the Food and Drug Administration ensures that women today will get the safest and most reliable mammography in their communities. And a nationwide early breast and cervical cancer screening program, conducted by the Centers for Disease Control and Prevention (CDC), is making these life-saving screening tests available to medically-underserved women.
- A National Sexually Transmitted Disease (STD)-related Infertility Prevention Program, conducted by the CDC, is combating STDs, particularly chlamydia — the most common, yet least readily diagnosed STD affecting American women and one that often leads to chronic pelvic inflammatory disease and subsequent infertility. New federal guidelines recommend annual screening for this disease.
- HHS is implementing a major initiative, "Safe Passages", to promote healthy and productive transitions from childhood to adulthood. Girl Power!, a series of programs targeting girls, includes a public information campaign to help delay the onset and reduce the use of illegal drugs among girls between the ages of 9-14 years.
- An educational campaign to end the epidemic of adolescent smoking. This is of particular importance for girls and young women who represent the fastest growing segment of the population who smoke.
- A new Presidential Directive on Emerging Infectious Diseases has set the policy and provides coordination across government agencies to improve the surveillance, prevention, and national response to infectious diseases. Although no longer the primary killers of women, today, infectious diseases like HIV, tuberculosis, and Lyme disease have become major health threats to women.
- New programs to fight the epidemic of domestic violence are being implemented. A National Advisory Council on Domestic Violence has been established to develop strategies to eradicate this public health problem from our communities. Increased funding has been provided for the development of intervention and prevention programs, as well as for training of health care professionals.

These Federal programs and many more initiatives being supported by the Government and the private sector are making significant progress in improving women's health in this decade and beyond.

Prepared by the U.S. Public Health Service's Office on Women's Health
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Progress in Advancing Women's Health

An Administration Report Card

Improving women's health is a top Administration priority. Through government-sponsored public health interventions, today women live 30 years longer than they did at the turn of the century. In the year 1900, women died on average at age 48. Today, women die on average at age 79. The major killers of American women are now chronic diseases, including heart disease, cancer, stroke, chronic lung disease, and diabetes.

Since 1990, alarming inequities in women's health have been exposed — inequities that include the failure to include women in research studies; the inadequate attention to gender differences in the causes, treatment, and prevention of disease; the lack of funding for women's health concerns; the lack of public and health care professional education on women's health issues; the lack of women's access to health care services; and the dearth of women in senior medical and scientific positions in our Nation's health and research organizations.

Today, this Administration is writing a new national prescription to improve women's health. The result is the greatest focus on women's health in the history of our country.

Waging the Battle Against Breast Cancer

An Administration Report Card

Breast cancer — the most commonly diagnosed cancer and the second leading cancer killer of American women — affects one in eight women in their lifetimes. But, thanks to this Administration's commitment, there is good news in the battle against breast cancer. It has become a top national health priority. The product is being measured in increased knowledge of the causes of the disease, improved methods of early detection, and the availability of more effective treatments. For the first time in recent history, the death rate from this disease is dropping.

Significantly Increasing our National Investment

Federal funding for breast cancer research, prevention, and treatment services has increased dramatically — over six fold — from $90 million in 1990 to over $600 million today.

- ☑ The Department of Health and Human Services' funding for breast cancer has nearly doubled between 1993 and 1996 — from $271 million to $476 million — an increase unrivaled in recent history. Since 1993, the Department of Defense has committed over $450 million to breast cancer research programs.
- ☑ President Clinton directed the establishment of the National Action Plan on Breast Cancer — an innovative public-private partnership to coordinate a national strategy that is catalyzing action in research, service delivery and education about this disease. The Plan has awarded nearly 100 grants for innovative research and outreach projects.
- ☑ All Federal agencies have been mobilized to join in the battle against this disease with the establishment of a Federal Interagency Coordinating Committee on Breast Cancer.
- ☑ The latest breast cancer information is now available from the National Cancer Institute free by phone (1-800-4-CANCER) and on the Internet (Gopher @nih.gov).




A New National Focus on Women's Health

Today, a new national focus on women's health is brightening the health futures for American women. With funding for women's health over $2 billion this year in the Department of Health and Human Services (HHS) alone — an increase of over $650 million in just three years — this Administration is intensifying research, developing innovative public and health care professional education programs, and designing targeted health care services for women.

- ☑ Federal departments, agencies, and offices as well as private sector organizations have been mobilized to advance women's health.
- ☑ To coordinate and stimulate these efforts, a new senior level health position was created. The first Deputy Assistant Secretary for Women's Health was appointed to direct the U.S. Public Health Service's Office on Women's Health that coordinates and stimulates women's health research, service delivery, and education programs across the agencies and offices of the Department of Health and Human Services.
- ☑ For the first time, all of the HHS offices, agencies, and regions have established offices and/or coordinators of women's health to stimulate new initiatives on women's health issues.
- ☑ President Clinton directed the establishment of the National Action Plan on Breast Cancer — an innovative public-private partnership to coordinate a national strategy that is catalyzing action in research, service delivery, and education about this disease. Funding for breast cancer programs has increased from $90 million in 1990 to over $600 million today.

Intensifying Research and Improving Treatments

Since 1950, we have learned more about health and disease than in the entire history of medicine. After years of neglecting women's health, advances from new research are leading to improved diagnosis, treatment, and prevention of disease and disability in women of all ages.

- ☑ Women and minorities are now included as subjects in government-supported research and in the evaluation of drugs and medical devices. In addition, research is now addressing both gender and racial/ethnic differences in the causes, treatment, and prevention of diseases such as breast cancer, HIV/AIDS, and heart disease.
- ☑ Research supported by the National Institutes of Health (NIH) is now focusing on the causes, treatment, and prevention of a broad spectrum of diseases and health concerns affecting women across the life cycle including heart disease, breast and ovarian cancer, and AIDS. Major studies are underway to examine adolescent and mid-life behaviors and their effect on future disease and disability. The Women's Health Initiative — the largest clinical trial ever conducted — is investigating the major risk factors for diseases in older women and evaluating the effects of hormone replacement therapy and behavioral interventions, including diet and exercise, on the health of older women.
- ☑ Researchers have identified genes that increase susceptibility to diseases including breast and ovarian cancer and Alzheimer's disease. The promise of these discoveries is the development of more effective treatments and one day, a method to repair gene mutations so the disease does not develop in the first place.
- ☑ Imaging technologies from the defense, space, and intelligence communities are being adapted to detect breast cancer and other diseases in women earlier and with greater accuracy.
- ☑ Life-saving experimental cancer-fighting medications are now on a fast track for FDA review and approval so that cancer patients will have more treatment options.
- ☑ Reproductive health initiatives are being implemented including: efforts to reduce the alarming high teenage and unintended pregnancy rates; developing new and more effective means of contraception; developing new microbicides to protect against STDs and AIDS; examining the causes and designing interventions for infertility; and evaluating alternative treatments for hysterectomy for non-cancerous uterine conditions such as endometriosis and fibroids.

Increasing Public and Health Care Professional Education

To help American women to lead long and healthier lives, new educational initiatives are underway to enhance knowledge of women's health issues and to improve the care that women receive by making sure health care professionals have up-to-date information and training on women's health issues.

- ☑ *A National Women's Health Information Center* — a comprehensive resource clearinghouse — is being established to provide the public, health care professionals, and researchers with access to state-of-the-art Federal and private sector information about women's health via a toll-free number and the Internet.
- ☑ A nationwide, 24-hour domestic violence hot-line, 1-800-799-SAFE, is providing immediate crisis information and assistance, counseling, and local shelter referrals to women across the country.
- ☑ The Substance Abuse and Mental Health Services Administration's *National Women's Resource Center* provides information and referral services (1-800-354-8824) addressing the prevention and treatment of both mental illness and substance abuse.
- ☑ *Healthy Women 2000*, a series of health education conferences and educational materials sponsored by the U.S. Public Health Service's Office on Women's Health, focuses on critical health issues affecting women in our country today and on the promotion of good health.
- ☑ A video and health promotion education curriculum to encourage healthy behavior among young women has been developed and distributed to college campuses nationwide.
- ☑ Educational campaigns are underway to inform health care professionals and counsel pregnant women about HIV testing and treatments to reduce the rate of HIV transmission from mother to child.
- ☑ A first medical school model curricula on women's health issues has been developed to bring women's health into the mainstream of medical education. Also, a first of its kind directory of women's health residency and fellowship opportunities in medicine has been prepared and widely disseminated.

Fact Sheet IV

Expanding Access to Quality Health Care

Our families will never be secure, our businesses will never be strong, and our government will never again be fully solvent until we tackle the health care crisis."

President Clinton
February 17, 1995

Every three minutes a woman is diagnosed with breast cancer.
Every 12 minutes another woman dies from the disease.

Leading the Fight for Health Care Security for All Americans

President Clinton believes that every American should have access to quality health care and is committed to achieving this important goal.

Strengthening Medicare and Medicaid

President Clinton believes that health care for women, children and older citizens must not be diminished. He is fighting massive congressional cuts of Medicare and Medicaid, which serve approximately 20 million women. For older women, Medicaid is the largest insurer of long-term care, covering more than two-thirds of nursing home residents, the vast majority of them women. President Clinton is also a strong supporter of Medicaid nursing home quality standards, helping to assure nursing home residents a safe and healthy environment.

Redressing Inadequacies in Clinical Research

Historically, clinical research has concentrated primarily on men. Under President Clinton, this inequity has been corrected. The largest clinical study ever conducted—a study of diseases affecting older women is now underway. The President signed legislation requiring that women and minorities be included in all clinical research supported by the National Institutes of Health, and the Food and Drug Administration has issued guidelines to encourage the participation of women in all phases of clinical drug development.

Focusing on Breast Cancer Research

The lifetime risk of developing breast cancer has risen from 1 in 20 to 1 in 8 in just 20 years. Funding for breast cancer research and programs has increased from approximately $90 million in 1990 to $600 million today. The funds span Health and Human Services and other federal agencies, including the Department of Defense and the Central Intelligence Agency. A project has begun to explore how our national investment in defense, space and other imaging-related fields may provide new technological approaches to improve the early detection of breast cancer. In 1993, the Clinton Administration convened a conference to formulate a comprehensive and coherent action plan to improve detection and treatment of breast cancer. By implementing the Mammography Quality Standards Act, the Administration has put into place comprehensive standards that ensure the quality of mammograms and the more than 10,000 mammography facilities in the U.S.

Offering Free or Low-Cost Mammography Screening to Those in Need

The Centers for Disease Control and Prevention's National Breast and Cervical Cancer Early Detection Program offers free or low-cost mammography screening to uninsured, low-income, elderly, minority and Native American women in 35 individual states and nine tribal organizations. More than 700,000 have been screened through May, 1995.

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202-456-7300, fax 202-456-7311
January 1996

Researching Environmental Factors and Breast Cancer

The National Cancer Institute has funded several grants to investigate the effect of environmental and other risks contributing to the high incidence of breast cancer. The Public Health Service's Office on Women's Health has established a federal Interagency Coordinating Committee on the Environment and Women's Health that is focusing on how home, work and atmospheric pollutants, exogenous hormones and other environmental factors may contribute to the risk of breast cancer and other disorders.

Substantially Increasing Our Commitment to AIDS Funding

AIDS cases are increasing at a faster rate among women than men, and the Clinton Administration has increased resources to reach women affected by HIV/AIDS. The National Institutes of Health, which created a Women's Interagency HIV Study to identify the nature and rate of HIV disease progression in women, is requiring that women and members of minority groups be included in all National Institutes of Health-supported biomedical and behavioral research involving human subjects and has initiated a major research effort to develop female-controlled barrier methods, including vaginal compounds, to prevent HIV transmission.

Caring for Women Veterans

A series of Veterans Administration health-care initiatives has been implemented under President Clinton. The Veterans Administration has established four comprehensive health centers, four stress-disorder treatment teams, and hired many counselors to treat the after-effects of sexual harassment and assault.

Established Key New Positions and Offices for Women's Health

In addition to establishing the office of the Deputy Assistant Secretary for Women's Health in the Department of Health and Human Services, the President has signed legislation to mandate the establishment of the Office of Research on Women's Health at the National Institutes of Health, the Office for Women's Services at the Substance Abuse and Mental Health Services Administration, and has established other offices of women's health throughout Health and Human Services, the Centers for Disease Control and Prevention, and the Food and Drug Administration.

Researching Health of Older Women

Under President Clinton, the National Institutes of Health is implementing the Women's Health Initiative, a 15-year prevention study of the health of post menopausal women. With three study components that will involve 160,000 women, the Women's Health Initiative is the largest clinical study ever undertaken in the U.S. The initiative is examining the major causes of death, disability and impaired quality of life: heart disease, cancer—especially breast and colorectal cancer—and osteoporosis. Within the next 10 years, the initiative will provide guidance on the role of diet, the risks and benefits of hormone replacement therapy, Vitamin D and calcium replacements, and changing unhealthy habits to prevent these diseases.

Responding to the Needs of Older Women

President Clinton established an initiative at the Department of Health and Human Services, spearheaded by the Assistant Secretary for Aging, to bring focus to issues affecting older women and their families at the grassroots level through education, technical assistance and advocacy. The major areas of focus for this effort include income security, health, care giving, housing and prevention of crime violence. The centerpiece of the initiative is the National Policy and Resource Center on Women and Aging, designed to serve as a focal point for coordinating efforts to facilitate the initiative's goals.

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January 1996

Fact Sheet V

Promoting Reproductive Health Services for Women

"Certain choices are too personal for politics." *President Clinton and Vice President Gore*

The President is committed to ensuring that all women have access to reproductive health and family planning services, that all women are able to determine the number and spacing of their children, and that abortion is safe, legal and rare.

Reversed the Gag Rule

During his first week in office, President Clinton reversed the previous administration's attempts to prevent federally funded family planning clinics from providing full information on options for resolving unintended pregnancies.

Supports Reproductive Health and Family Planning

Under President Clinton, the annual budget for the Title X Family Planning Program has increased from $173.4 million to $193.3 million. This program is the primary federal mechanism for direct provision of reproductive health and family planning services to low-income women. It is estimated that subsidized family planning services, such as those provided through Title X, prevent more than 1 million unintended pregnancies and 500,000 abortions each year. In 1994, at the International Conference on Population and Development in Cairo, the United States agreed with more than 150 nations to promote reproductive health for all women and to address the threat to women's health from unsafe abortions.

Establishing Clinic Safety

President Clinton signed the Freedom of Access to Clinic Entrances Act to fight the escalating violence against women and doctors at women's health clinics.

Moved Forward with Reproductive Research

President Clinton ordered that the ban on mifepristone, a drug that terminates pregnancy without surgery, be revisited. Currently, the drug is undergoing clinical trials in the U.S.

Establishing Services for Victims of Rape and Incest

Under President Clinton, the Department of Health and Human Services implemented a congressionally ordered change to Medicaid to include abortion services for women whose pregnancies result from rape or incest, in addition to saving the life of the woman.

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January 1996

Fact Sheet VI

Caring for our Children

"There are certain fundamental national needs that should be addressed in every state, north and south, east and west—school lunches in all our schools, nutrition for pregnant women and infants —All these things are in the national interest."

President Clinton
1995 State of the Union

More than 5 million children are hungry each month in the U.S. Committed to Protecting Medicaid—The Health Safety Net for Our Children

Committed to Protecting Medicaid—The Health Safety Net for Our Children

President Clinton is fighting to maintain the health care protection that Medicaid provides. Medicaid is the social safety net that makes health care possible for millions of our nation's children, children who are disabled or who suffer from chronic illness. Some in Congress are proposing to cut $165 billion in Medicaid benefits to millions of low-income mothers and children and elderly and disabled Americans. The President is working to ensure that Medicaid is there to provide vital health care for those who cannot afford it.

Developed the Childhood Immunization Plan

President Clinton signed the Comprehensive Childhood Immunization Initiative so that children will be vaccinated against disease. The initiative makes vaccines affordable for families and improves immunization outreach. The goal is simple: 90 percent of all two year olds should be fully vaccinated by the year 2000.

Expanded Nutrition Services for Women, Infants and Children

The Clinton Administration has increased funding for the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) each year since fiscal year 1993 by a total of 18 percent. The Administration has also aggressively pursued cost containment initiatives such as infant formula rebates that have provided additional funds to handle more eligible participants. WIC works: Every $1 invested in WIC saves up to $4.25 in health care costs.

Launched Strategies to Reduce Teen Pregnancy

Under President Clinton's leadership, the Administration is developing new strategies to address the high rate of teen pregnancy in this country. The efforts are designed to encourage communities to build partnerships and to discover what strategies work. The Administration has supported innovative demonstration programs and expanded existing programs in communities all across the U.S.

Implementing the School Meals Initiative for Healthy Children

The Clinton Administration's School Meals Initiative for Healthy Children, an integrated comprehensive plan, improves the nutrition standards for school meals by requiring that they meet the Dietary Guidelines for Americans. This initiative also provides administrative streamlining and offers schools the implementation flexibility that best suits their program.

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January 1996

Protecting Women's Health by Preventing Teen Smoking

Smoking rates are alarmingly high for teenage girls. Tobacco raises a woman's risk of having cancer, heart disease, low birth weight babies, lung disease, and osteoporosis. Almost all smoking begins during the teen years, and preventing addiction during this period almost guarantees women will not smoke as adults. The Administration has launched a major, multi-pronged campaign to prevent teenagers from smoking and then becoming addicted to nicotine.

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January 1996

Fact Sheet VII

Generating Business and Economic Opportunities for Women

"Women entreprenuers are a dynamic force in our nation's current economic expansion. My Administration will continue to aggressively pursue forward–looking initiatives that will foster the success of these women-owned businesses, which contribute well over $1 trillion in receipts to our nation's economy."

President Clinton
January 29, 1996

Women-owned businesses contribute more than $1 trillion in sales to the U.S. economy annually.

Supporting the Family-Friendly Workplace

Under President Clinton's leadership, the Department of Labor's Women's Bureau launched a nationwide initiative to improve the lives of working Americans by encouraging employers to improve working conditions for working women and families. Under the Honor Roll program, the bureau is encouraging commitments from employers to improve pay and benefits, create a family-friendly workplace and value women's work through training and advancement.

Making Working Women Count

The Department of Labor's Women's Bureau surveyed over 250,000 working women to learn more about their workplace experiences. The bureau is working to address the concerns expressed by survey participants: better pay and benefits, balancing work and family, and workplace recognition.

Increased Small Business Administration Lending to Women by 86 Percent

A significant number of women business owners must use credit cards and personal resources to maintain or finance their businesses. The Small Business Administration under President Clinton has increased the volume of loans to women by 86 percent from 1993 to 1994 alone.

Increasing Federal Procurement Contracts for Women

Supported by President Clinton, in 1994 the Federal Acquisition Streamlining Act for the first time explicitly opened up federal procurement contracts and subcontracts to women-owned businesses.

Expanding Small Business Administration's Women's Demonstration Program

Under President Clinton, the Small Business Administration added 19 centers nationwide to its Women's Demonstration Program. The women's business sites offer financial management, marketing, procurement, technical and other assistance to women to launch a business or to run one more successfully. Each site is tailored to meet the needs of the community.

Created a Forum to Address Women's Economic Issues

The President's Interagency Committee on Women's Business Enterprise comprises senior officials from 10 federal agencies, ensuring that women's economic issues are addressed at the highest policy-making levels. The committee released a report showing clearly the dramatic economic impact women–owned businesses have on our nation's economy and highlighted the Clinton Administration's many pro–woman entrepreneur initiatives.

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Helpful Clinton Administration Resource Numbers for Women and Families

Business

(202)-205-6673	President's Interagency Committee on Women's Business Enterprise (*Call for information and assistance on women entrepreneurial issues*)
1-800-827-5335	Department of Labor Women's Bureau Clearinghouse (*Call for information on women's legal rights in the workplace*).
(202) 219-6611	Department of Labor Women's Bureau, general office (*Call for information concerning economic and international issues*).
(202) 205-6673	U.S. Small Business Administration Office of Women's Business Ownership (*specifically created to help women entrepreneurs*)
1-800-8-ASK-SBA	U. S. Small Business Administration (*Call for information on managing and financing a woman-owned small business*).
1-800-532-1169	Department of Transportation Short–Term Lending Program (*Call for an application for a short-term loan, favorable to women in small businesses*).
(202) 512-1800	Working Women Count! A Report to the Nation, Government Printing Office, Publication #029-002-0082 (*Call for a copy of the survey results*).
1-800-669-4000	Equal Employment Opportunity Commission (*Call to report sexual discrimination or harassment*)
(202) 219-9475	Office of Federal Contract Compliance (*Call to report sexual discrimination in any company which contracts with the federal government*).
1-800-616-2242	Department of Health and Human Services, National Child Care Information Center (*Call for information concerning child care and other work and family issues*)
(202) 616-8894	Violence Against Women Office in the Justice Department (*Call for help and information concerning domestic violence*).

Education

1-800-4-FED-AID (1-800-433-3243)	Department of Education, Federal Student Loan Aid Information Center (*Call regarding information about and Applications for student loans*)
1-800-251-7236	National School to Work Program, Learning and Information Center (*Call for information about implementing a School-to-Work program in your area*). Help students make the connection between schoolwork and career.
(202) 606-5000	Corporation for National Service, AmeriCorps Program (*Call for information about Americorps, a program which loans money to students in return for community service*).
(202) 260-1856	Department of Education, Office for Safe and Drug-Free Schools (*Call for information regarding federal programs addressing violence and drugs in public schools*).
1-800-USA-LEARN	(1-800-872-5327), Department of Education, Information Resource Center (*Call for information about and referral to any Department of Education Program, including Goals 2000, Educate America Program*)
(202) 205-5463	Department of Education Bilingual Education and Minority Affairs (*Call for information about bilingual education programs*).
(202) 205-8572	Department of Health and Human Services, Head Start (*Call for information about Head Start, a pre-school program for underprivileged children*).
(202) 260-2670	Department of Education, Women's Educational Equity Act Program (*Call for funding for agencies and organizations which implement programs to promote educational equality for women and girls*).
(202) 514-4092	Department of Justice, Educational Opportunity Section (*Call for information about federal statutes concerning discrimination in schools*).

Health

1-800-799-SAFE	National Domestic Violence Hotline (*Call for information on domestic violence, emergency shelters, legal advocacy, assistance programs, social services, and batterers' programs*)
(202) 690-7650	Public Health Service, Office on Women's Health (*Call for general information on resources, services and education on women's health programs in the federal government*).
(301) 594-4000	Public Health Service, Office of Population Affairs (*Call for referral to regional federally funded family planning clinics*).
(301) 402-1770	Office of Research on Women's Health, National Institutes of Health (*Call for information about women's health research at the National Institutes of Health*).
(301) 827-0350	Office of Women's Health, Food and Drug Administration (*Call for FDA policies and regulations concerning women's inclusion in clinical trials and research*).
1-800-677-1116	Eldercare Locator, Funded by the Department of Health and Human Services Administration on Aging (*Call for assistance for elder persons and caregivers*).
1-800-729-6686	National Clearinghouse on Alcohol and Drug Information, Department of Health and Human Services, Center on Substance Abuse Prevention (*Call for information on drug and alcohol abuse*).
1-800-421-4211	National Institute of Mental Health Depression (*Call for information on depression*)
1-800-54-WOMEN	Women's Health Initiative, National Institutes of Health (*Call to sign up for a study on preventing heart and lung disease in women ages 50-79*)
1-800-4-CANCER	Cancer Information Service, National Cancer Institute (*Call for information about cancer and for referral to an FDA approved mammography center in your area*).
1-800-458-5231	AIDS Clearinghouse, Centers for Disease Control and Prevention (*Call for information about AIDS and referral to research and medical services*).

Children and Youth

(202) 219-8412	Department of Labor, Wage and Hour Division, Family and Medical Leave Team (*Call to find out your rights under the Family and Medical Leave Act*).
(202) 690-6782	Department of Health and Human Services, Administration for Children and Families, Child Care Bureau (*Call for referrals to local, federally funded child care centers, along with information about national child care policy*)
(202) 205-8821	Department of Health and Human Services, Administration for Children and Families, Family and Youth Services Bureau (*Call for information about federally funded youth programs*).
(202) 606-5000	Corporation for National Service, Learn and Serve America (*Call to apply for grants given to community and school–based programs which enable children K-12 to help alleviate local social problems*)
(301) 496-5454	Department of Health and Human Services, National Institute of Child Health and Human Development (*Call for biomedical information on children's disorders and health, as well as preventative medicine*).
(703) 385-7565	National Clearinghouse on Child Abuse and Neglect (*Call for information about child abuse and neglect*)
(202) 647-2688	Department of State, Office of Children's Issues (*Call for information about international child adoption*).
(202) 401-9373	Department of Health and Human Services, Administration for Children and Families, Office of Child Support Enforcement (*Call for information on child support enforcement*)

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Fact Sheet VIII

Supporting Women as Partners in Decision Making

"Women are beginning to participate more fully throughout this country in the life of America. As far as I know, the sky is not falling anywhere."

President Clinton
August 26, 1995

The Baltimore Sun noted that President Clinton has delivered on his promise to make diverse appointments: "No Administration has ever produced such diversity."

Appointing Women throughout the Administration

More than 40 percent of the President's appointees are women, by far the highest percentage of any Administration.

- Six women hold Cabinet-level posts, the highest ever.
- The President has appointed the first woman to serve as deputy chief of staff.
- The President has appointed women for the first time to such positions as: Attorney General, Chair of the Council of Economic Advisors, Secretary of Energy and Office of Management and Budget Director.
- The President has appointed women to positions held traditionally by men: Chief Scientist at the National Aeronautics and Space Administration; and Deputy Director at the National Science Foundation.
- Nearly 60 percent of the President's judicial nominees are women and minorities, the highest proportion ever.
- The President nominated a woman to the Supreme Court, only the second president to have done so.
- Two out of the three policy-making councils in the White House are headed by women.

Providing Expanded Opportunities for Women in the Military

The Clinton Administration has opened nearly 260,000 positions previously not open to women who wish to serve in the military.

Convened White House Conference on Aging

President Clinton convened a White House Conference on Aging which provided specific recommendations for improving the lives of older women. These recommendations will be incorporated into the final report of the Conference which will be presented to the President and Congress for legislative and administrative action.

Created Interagency Council on Women

The President established an intragovernmental body to bring home the agreements reached at the United Nations Fourth World Conference on Women to benefit American women and their families. Housed at the White House, the President's Interagency Council is charged with coordinating the implementation of the Conference Platform for Action and reaching out to America's non-governmental organizations to work for successful implementation.

The White House Office For Women's Initiatives and Outreach, 708 Jackson Place, Washington, D.C. 20503
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Making Sure Women Are Heard

The White House Office for Women's Initiatives and Outreach was created by the President to ensure that his Administration better serves and listens to women. It serves as the primary liaison between the White House and women's organizations, listening to women's concerns and proposals and bringing these ideas to the President and others in the Administration. The office's main initiative, At the Table, is bringing hundreds of women to discussion tables, enabling them to get their thoughts and opinions heard by the President and others in the Administration.

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BREAST CANCER

How has funding increased?
Breast Cancer is the most commonly diagnosed cancer and the second leading cancer killer of American women. It affects one in eight women in their lifetimes; this is up from one in 20 women just two decades ago.

The Clinton Administration has made a tremendous commitment to combating breast cancer, increasing federal funding for research, prevention, and treatment services from only $90 million in 1990 to over $600 million today.

This is the result of efforts in several different parts of the federal government:

HHS's funding for breast cancer nearly doubled between 1993 and 1996 with $476 million currently being committed.

Funding for research at NIH has nearly doubled as a result.

Similarly, the Department of Defense has committed over $450 million to fund breast cancer research programs.

All of the Federal agencies have been mobilized to combat this disease with the establishment of a Federal Interagency Coordinating Committee on Breast Cancer.

What is the money being used for?
In 1993, President Clinton directed the establishment of the National Action Plan on Breast Cancer; a $10 million public-private partnership linking local, state and federal governments in order to help fight this disease.

The strategy provides a framework and plan for activities in three major areas: delivery of health care, conduct of research, and enactment of policy.

The Plan has increased research and education about this disease by awarding 100 grants for research and outreach projects.

The FDA has also actively assisted the ongoing fight by issuing regulations to implement the Mammography Quality Standards Act.

The aim of the act is to ensure safe, accurate, and reliable mammography on a nationwide basis.

Now an FDA "seal of approval" is required for facilities to operate ensuring the quality of mammograms at the more than 10,000 mammography facilities nationwide.

The Adminstration is also assisting the poor and medically undeserved.

A recent study found that 64 percent of women with incomes below the poverty level have not had a mammogram within the past two years compared with one-third of women with incomes 300 percent above the poverty level.

For this reason, outreach and screening programs must target low-income women who have lower screening rates.

In combatting this problem, the CDC has implemented the National Breast and Cervical Cancer Early Detection Program which makes free or low cost mammography and Pap tests available to medically undeserved women.

Over 800,00 screening tests have been performed.

Additionally, because screening rates decrease significantly with age, an educational campaign has also been launched by the First Lady with HCFA in order to encourage older women to use Medicare's mammography screening benefits.

MEDICARE AND MEDICAID

There is no doubt that health insurance directly affects access to clinical preventive services like those require for Breast Cancer screening.

Women who are insured are far less likely to have the necessary tests, exams, and check-ups as they grow older.

Women currently represent 59 percent of the overall elderly population in America and this percentage increases significantly among the very old. Typically older women are poorer than older men.

These demographic trends have important implications on the status of health care available to older women -- due to their longer life expectancies, women on average have a greater need for affordable health care than men.

Because more than 54 percent of Medicare beneficiaries and 60 percent of Medicaid beneficiaries are women, the Congressional proposed Medicare and Medicaid cuts will have an immediate effect on women in particular.

What does Medicare cover?

As the primary health insurance for women 65 and older, Medicare provides a wide range of services such as treatment for heart disease, high blood pressure, and cancer.

Medicare will also pay for bi-annual mammograms -- women 65 and older are six times more likely to develop breast cancer and seven times more likely to die form it than younger women.

Mandated Medicaid services for Women include--

Hospital coverage, laboratory and x-rays, nursing home and home health, clinics, family planning, and periodic screening.

Additionally, Medicaid is the single largest source of public funding for contraceptive services. The federal government reimburses states for 90 percent of their expenditures on family planning services serving 4 million women at 4000 clinics.

Medicaid also covers essential services for older women, including some not covered by Medicare -- such as prescription drugs, dental care, eyeglasses, hearing aids, and more extensive long-term care.

Significant cuts in Medicare would unquestionably hurt efforts at improving women's health as research has shown that people who cannot afford to pay for health care often will go without it. Older women with lower incomes are less likely to receive preventive services because they cannot afford the copayments.

If Medicaid programs are restricted by narrowing eligibility and benefits, low-income women will face large out of pocket costs, and physicians and other providers could be hard pressed to accept Medicaid patients

As the debate about Medicare continues, these are some of the issues under consideration as the President seeks to reduce the deficit while limiting cuts in Medicare and Medicaid.

VIOLENCE AGAINST WOMEN

Violence has become a critical and pervasive health issue for American women.

Homicide is the leading killer of women in the workplace.

As many 6 million women of all ages are the victims of assault, rape, and other personal violence every year, often perpetuated by their mates or someone they know.

An estimated 30 percent of emergency room visits by women each year are the results of injury from domestic violence.

The Clinton Administration has called for a comprehensive national approach to the violence epidemic. It is clear that trying to stop violence solely through a tougher criminal justice system will not work.

HHS is therefore currently working on preventing violence through its public health approach which combines the efforts of scientific and health professional groups and community based organizations to figure out what works best.

As a result an Intra-agency Working Group on Violence -- jointly led by HHS and the Department of Justice is confronting violence through coordinated action among many government agencies.

Through the Violence Against Women Office at the Department of Justice, the Administration has taken several very important steps to heighten awareness about the problem of violence against women, including domestic violence and sexual assault.

The Adminstration declared October domestic violence month in order to heighten awareness through a variety of local and national programs around the country.

The Department of Justice also provides grants to states to fight domestic violence through the community policing program. Presently, the Justice Department is awarding over $46 million to help 336 different communities in America.

In conjunction with the Crime Bill, the Clinton Administration enacted the Violence Against Women Act.

The most comprehensive federal effort ever to fight violence against women and to protect the rights of victims.

The law provided grants for local police and prosecutors to strengthen enforcement efforts in sexual violence and domestic abuse cases, and increases federal penalties for sex crimes.

The law also helps improve the responses by the police and the courts in domestic violence crimes, enhance lighting in public places, and forces sex offenders to pay restitution, increases funding to battered women's shelters.

The law also created a national domestic violence hotline to help ensure that battered women and their families can find out how to get emergency help, find shelter, or report abuse to authority. The hotline has already responded to over 20,000 calls.

The Brady Bill (A five-day waiting period and background check) also plays a part in preventing domestic violence by keeping handguns out of the reach of individuals under restraining orders for domestic threats. As a result 60,000 felons, fugitives, and stalkers have not been able to buy handguns.

IN TERMS OF HEALTHY POLICY, WHAT ELSE IS THE PRESIDENT DOING?

Abortion
President Clinton is committed to promoting reproductive health services for women as exemplified by his efforts in the following areas:

- during his first week in office, the President reversed the Gag Rule
- President Clinton signed the Freedom of Access to Clinic Entrances Act
- In this Administration, the annual budget for the Title X Family Planning Program has increased from $172.4 million to $193.3 million. (This program is the primary federal mechanism for providing reproductive health services to low income women.)

Here you can included anything else that you wanted to say about abortion including the recent legislation making the Hyde Amendment permanent and a part of Medicaid.

The Hyde Amendment obligates states to pay for abortions for poor women whose pregnancies resulted from rape, incest, as well as for abortions of pregnancies which endanger the life of the mother.

Osteoporosis
Osteoporosis is a major public health threat for 25 million Americans, 80 percent of whom are women -- it is responsible for 1.5 million fractures annually. Medical experts however agree that it is preventable. For this reason...

In the last year, NIH has established the National Resource Center on Osteoporosis and Related Bone Diseases specifically aimed at finding more information on this disease and promoting education about it. The Center is a clearinghouse of information and research.

Additionally, the Office of Research on Women's Health (a division of NIH) is currently at work on the Women's Health Initiative --

A $625 million study being carried out in more than 40 centers across the country. It is the largest prevention-oriented clinical trial for women in US history.

The goal of the WHI is to examine the major causes of death, disability, and frailty from cardiovascular diseases, breast cancer, and osteoporosis in older women of all races and socioeconomic backgrounds.

The WHI will provide essential scientific data to evaluate dietary pattern, hormone replacement therapy, and other medical or behavioral intervention for preventing osteoporosis in postmenopausal women.

The FDA has also made gains as demonstrated by:

The approval of food claims for foods high in calcium as part of nutrition labels

The approval of he first collagen based material for use in acute long bone fracture -- this device is used for women suffering from osteoporosis

The approval of two new products that combine estrogen and progestin for hormone replacement therapy -- these products add two more choices for women interested in taking hormone replacement therapy.

In 1995, two additional drugs were approved for the treatment of postmenopausal osteoporosis -- Fosamax & Miacalcin Nasal Spray -- expanding women's options for medication.

Clinical Trials

What the WHI and the Clinton Administration's efforts at improving efforts to research women's health demonstrate is the turn that this administration has taken toward including women in tests where the results will directly affect their lives.

After years of neglecting women's health, this Administration finally including women in the clinical trials and research that will lead to improved diagnosis, treatment, and prevention of disease and disability in women of all ages.

Women and minorities are now included as subjects in government-supported research and in the evaluation of drugs and medical devices.

Research is now addressing both gender & racial/ethnic differences in the causes and treatment of diseases such as breast cancer, HIV/AIDS, and heart disease.

The President issued a mandate to NIH requiring the inclusion of women and minorities in all trials potentially affecting them.

Similarly, he is strongly encouraging the FDA to recommend that pharmaceutical companies included women and minorities.

Creating new positions to aid Women's Health

President Clinton has signed legislation establishing:

- the office of the Deputy Assistant Secretary for Women's Health at HHS
- the Office of Research on Women's Health at NIH
- Offices of women's health throughout HHS, CDC, and FDA
- For the first time, all of the HHS offices, agencies, and regions have established offices to stimulate new initiatives on women's health issues

Osteoporosis and Related Bone Diseases National Resource Center

New Drug Therapies for Treating Osteoporosis

Estrogen replacement therapy and injectable calcitonin are no longer the only pharmacologic options approved for the treatment of postmenopausal osteoporosis. In 1995, two new drugs were approved by the Food and Drug Administration. These include:

- *Fosamax*® (alendronate sodium), which belongs to a class of drugs called bisphosphonates, interferes with bone resorption (breaking down of bone). Therapy with 10 mg/day has been demonstrated to increase bone density and decrease vertebral fracture risk and mean height loss.

- *Miacalcin Nasal Spray*® (calcitonin salmon) is now available at a dose of 200 IU daily for treatment of osteoporosis in women at least five years postmenopause who have low bone density.

The FDA Endocrinologic and Metabolic Advisory Committee recommended approval of a slow-release formulation of sodium fluoride taken with calcium. Final FDA action is pending.

Other medications are being explored for the prevention and treatment of osteoporosis that may soon expand the options available to patients. Among the drugs being investigated are selective estrogen receptor modulators (SERMs), parathyroid hormone, and vitamin D metabolites.

The materials contained in this packet include review articles and comparative studies that have been conducted on some of these new therapies in recent years. They contain valuable information that provides a complete overview of the progress that has been made in osteoporosis research.

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The National Resource Center is operated by the National Osteoporosis Foundation in collaboration with The Paget Foundation and the Osteogenesis Imperfecta Foundation, and supported by the National Institute of Arthritis and Musculoskeletal and Skin Diseases, National Institutes of Health

Medications Used to Prevent and Treat Osteoporosis

Currently, estrogen, calcitonin, and alendronate are approved by the US Food and Drug Administration (FDA) for the treatment of postmenopausal osteoporosis. Estrogen is also approved for the prevention of osteoporosis. These medications affect the bone remodeling cycle and are classified as anti-resorptive medications. Bone remodeling consists of two distinct stages: bone resorption and bone formation. During resorption, special cells on the bone's surface dissolve bone tissue and create small cavities. During formation, other cells fill the cavities with new bone tissue. Usually, bone resorption and bone formation are linked so that they occur in close sequence and remain balanced. When osteoporosis is present, the balance is altered and bone loss occurs. Anti-resorptive medications slow or stop the bone resorbing portion of the bone-remodeling cycle but do not slow the bone-forming portion of the cycle. As a result, new formation continues at a greater rate than bone resorption, and bone density may increase.

Estrogen Replacement Therapy (ERT) and Hormone Replacement Therapy (HRT)

Estrogen replacement therapy (ERT) is the only medication approved for both the prevention and treatment of osteoporosis. ERT has been proven to not only reduce bone loss but to also reduce the number of hip and spinal fractures in postmenopausal women. ERT is administered most commonly in the form of a pill or skin patch and is effective even when started after age 70. When estrogen is taken alone, it can increase a woman's risk of developing cancer of the uterine lining (endometrial cancer). To eliminate this risk, physicians prescribe the hormone progestin in combination with estrogen (hormone replacement therapy or HRT) for those women who have an intact uterus. ERT/HRT relieves menopause symptoms and has been shown to have beneficial effects on both bone health and cardiovascular health. Side effects may include nausea, bloating, breast tenderness, and high blood pressure. Some studies indicate a relationship between estrogen use and breast cancer, while other studies indicate no relationship at all. The issue of a relationship between breast cancer and estrogen use is still to be determined.

Calcitonin

Calcitonin is a naturally occurring hormone involved in calcium regulation and bone metabolism. It slows bone loss, and anecdotal reports indicate that it relieves the pain associated with bone fractures. Because calcitonin is a protein, it cannot be taken orally as it would be digested before it could work. Calcitonin is available as an injection or nasal spray. While it does not affect other organs or systems in the body, injectable calcitonin may cause an allergic reaction and unpleasant side effects including flushing of the face and hands, urinary frequency, nausea, and a skin rash. The only side effect reported with nasal calcitonin is a runny nose.

Alendronate

Alendronate is a newly approved medication from the class of drugs called bisphosphonates. Research studies using alendronate to treat postmenopausal women with osteoporosis showed that alendronate produced small increases in bone density in both the spine and hip. Side effects are uncommon but may include abdominal or musculoskeletal pain, nausea, heartburn, or irritation of the esophagus. Like all bisphosphonates, alendronate must be taken on an empty stomach. The manufacturer strongly recommends taking this medication with a full glass of water first thing in the morning and then waiting at least one-half hour, and preferably one hour, before the first food, beverage, or medication of the day. To minimize side effects, the manufacturer urges people to remain in an upright position for at least one half hour after taking this medication.

Fast Facts on Osteoporosis

Definition

Osteoporosis, or porous bone, is a disease characterized by low bone mass and structural deterioration of bone tissue, leading to bone fragility and an increased susceptibility to fractures of the hip, spine, and wrist.

Prevalence

Osteoporosis is a major public health threat for 25 million Americans, 80 percent of whom are women. In the U.S. today, 7-8 million individuals already have osteoporosis and 17 million more have low bone mass, placing them at increased risk for this disease.

✔ One out of every two women and one in eight men have an osteoporosis-related fracture.
✔ By age 75, one third of all men will be affected by osteoporosis.
✔ While osteoporosis is often thought of as an older person's disease, it can strike at any age.
✔ Osteoporosis is responsible for 1.5 million fractures annually, including:

- more than 300,000 hip fractures
- 500,000 vertebral fractures
- 200,000 wrist fractures
- more than 300,000 fractures at other sites

Cost

The estimated national direct expenditures (hospitals and nursing homes) for osteoporosis and associated fractures was $10 billion ($27 million each day) and the cost is rising.

Symptoms

Osteoporosis is often called the "silent disease" because bone loss occurs without symptoms. People may not know that they have osteoporosis until their bones become so weak that a sudden strain, bump, or fall causes a fracture or a vertebra to collapse. Collapsed vertebra may initially be felt or seen in the form of severe back pain, loss of height, or spinal deformities such as stooped posture or dowager's hump.

Risk Factors

✔ Certain people are more likely to develop osteoporosis than others. Factors that increase the likelihood of developing osteoporosis are called "risk factors." The following risk factors have been identified:

- Being female
- Thin and/or small frame
- Advanced age
- A family history of osteoporosis
- Early menopause
- Abnormal absence of menstrual periods (amenorrhea)
- Anorexia nervosa or bulimia
- A diet low in calcium
- Use of certain medications, such as corticosteroids and anti-convulsants
- Low testosterone levels in men
- An inactive lifestyle
- Cigarette smoking
- Excessive use of alcohol
- Caucasian or Asian, although African Americans and Hispanic Americans are at significant risk as well

✔ Women can lose up to 20 percent of their bone mass in the 5-7 years following menopause, making them more susceptible to osteoporosis. However, 1.5 million American men are affected by osteoporosis and one out of eight men age 50 and older will develop fractures.
✔ White women 60 years of age or older have at least twice the incidence of fractures as African-American women. However, one out of five African-American women are at risk of developing osteoporosis.

Detection

Specialized tests called bone density tests can measure bone density in various sites of the body. A bone density test can:

- Detect osteoporosis before a fracture occurs
- Predict your chances of fracturing in the future
- Determine your rate of bone loss and /or monitor the effects of treatment if the test is conducted at intervals of a year or more

Prevention

Building strong bones, especially before the age of 35, can be the best defense against developing osteoporosis, and a healthy lifestyle can be critically important for keeping bones strong. So, to help prevent osteoporosis:

- Eat a balanced diet rich in calcium
- Exercise regularly, especially weight-bearing activities
- Don't smoke and limit alcohol intake
- Talk to your doctor if you have a family history of osteoporosis or no longer have the protective benefit of estrogen due to natural or surgically induced menopause.

Fractures

✔ The most typical sites of fractures related to osteoporosis are the hip, spine, wrist, and ribs, although the disease can affect any bone in the body.
✔ Forty percent of all women will have at least one spinal fracture by the time they reach age 80.
✔ Spinal osteoporosis is eight times more likely to afflict women than men.
✔ The rate of hip fracture is two to three times higher in women than men; however, the death rate for men within one year after a hip fracture is 26 percent higher than in women.
✔ A woman's risk of hip fracture is equal to her combined risk of breast, uterine and ovarian cancer.
✔ In 1988, about 250,000 Americans age 45 and over were admitted to hospitals with hip fractures. Osteoporosis was the underlying cause of many of these injuries.
✔ Individuals suffering hip fractures have a 5 to 20 percent greater risk of dying within the first year following that injury than others in their age group.
✔ Among those who were living independently prior to a hip fracture, 15 to 25 percent are still in long-term care institutions a year after the injury.

Treatment and Care

Although there is no cure for osteoporosis, there are treatments available to help stop further bone loss and fractures:

- Studies have shown that estrogen can prevent the loss of bone mass in postmenopausal women.
- Alendronate, a bisphosphonate, has recently been approved by the Food and Drug Administration for treatment of postmenopausal osteoporosis.
- Calcitonin is a treatment that can be used by women and men for osteoporosis. This drug has been shown to slow bone breakdown and also can reduce the pain associated with osteoporotic fractures.
- Treatments under investigation include other bisphosphonates, sodium fluoride, vitamin D metabolites, and selective estrogen receptor modulators.

Medical experts agree that osteoporosis is highly preventable. However, if the toll of osteoporosis is to be reduced, the commitment to osteoporosis research must be significantly increased. It is reasonable to project that with increased research, the future for definitive treatment and prevention of osteoporosis is very bright.

3/96

This information has been brought to you by:

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Fact Sheet I

Expanding Economic Opportunities for America's Families

"...We need a united front for treating women all over the world with dignity and respect and giving them opportunities in the family and education and in the workplace."

President Clinton
Jackson, Wyoming, August 26, 1995

More than half of low-wage workers are mothers.

Delivered the Family and Medical Leave Act

The first bill President Clinton signed after taking office, the Family and Medical Leave Act, allows workers to take up to 12 weeks of unpaid leave for an infant, spouse, or ailing loved one without losing their jobs. Women and men are no longer forced to choose between their families and jobs.

Expanded Earned Income Tax Credit Making Work Pay

The President has expanded the Earned Income Tax Credit as a first step toward ensuring that no child of full-time working parents will have to live in poverty. The expansion gives a tax cut to more than 15 million working families.

Committed to Increasing the Minimum Wage

The President has proposed increasing the minimum wage from $4.25 to $5.15 over two years, through two 45-cent increases. For a full-time, year-round worker at minimum wage, a 90-cent increase would raise yearly income by $1,800 as much as the average family spends on groceries over seven months. Two-thirds of minimum wage workers are women.

Improved Access to Child Care

The Clinton Administration has launched initiatives to make child care more affordable and accessible and has encouraged employers to address this need. The Administration has increased investments in child care and established a Child Care Bureau to streamline federal child care programs. (The Child Care Information Center: 1-800-616-2242.) The Clinton Administration has also initiated a Healthy Child Care Campaign to increase access to preventative health services for children in child care and to ensure safe child care environments. In addition, the Administration has increased child care availability for military families by providing additional funds for before and after school programs and to expand family child care.

Strengthened Equal Opportunity for All

After an extensive review of laws and regulations, the President reaffirmed his Administration's support for affirmative action as a tool to expand economic and educational opportunity. He believes that affirmative action must be designed to sustain and support our ideals of personal responsibility and merit.

Strengthened Enforcement of Child Support

Many families—particularly those headed by women—are forced into economic crisis and poverty when a non-custodial parent fails to pay child support. From 1992 to 1994, there has been an increase in child support collec-

tions of more than 20 percent—from $8 billion to a record of nearly $10 billion. The President's child support plan, a part of his welfare reform legislation, would double child support collections by the year 2000. By executive order, federal agencies have been directed to cooperate with state efforts to identify and locate absent parents.

Promoting Work for Low-Income Families

The Clinton Administration has approved 49 welfare reform demonstrations in 35 states, more than the two previous administrations combined. The Clinton Administration waivers are based on the President's vision for welfare reform: work responsibility and a steadfast commitment to the well-being of children and families.

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Fact Sheet II

Making Our Homes and Communities Safer

"If children aren't safe in their homes, if college women aren't safe in their dorms, if mothers can't raise their children in safety, then the American Dream will never be real for them..."

President Clinton
March 21, 1995

In a typical year, more than 4.5 million American women 12 years or older are victims of a threatened or attempted violent crime.

Initiated Programs to Combat Violence Against Women

The Violence Against Women Act, part of the President's crime bill, takes a comprehensive approach to combating violence against women. The law will help improve the responses by the police and the courts to domestic violence crimes, enhance lighting in public places, force sex offenders to pay restitution, increase funding to battered women's shelters and ensure that a "stay away" order obtained against an abuser will no longer stop at the state line. In addition, the Administration has: created the Violence Against Women Office in the Department of Justice to lead a national effort to combine tough new federal laws with help for states and localities; created a national domestic violence hotline to help ensure that battered women and their families have access to help at all times; and funded projects linking organizations working to combat domestic violence with aging agencies, an effort aimed specifically at protecting older women against domestic violence.

Signed the Brady Bill and Assault Weapons Ban

The Brady law works to keep handguns out of the reach of criminals including individuals under restraining orders for domestic threats. The law: A five-day waiting period and background check. The assault weapons ban outlaws the 19 deadliest assault weapons and their copies.

Signed Three-Strikes-and-Out Law

This law puts criminals behind bars for good if they commit three violent crimes.

Supported Notifying Communities about Release of Sex Offenders

This new law requires appropriate community notification when serious sex offenders have been released.

Introduced Operation Safe Home to Fight Crime in Public Housing

To combat crime in public and assisted housing, the Administration launched an aggressive interagency effort for a more effective Operation Safe Home Program. In one year, more than 3,000 criminals were arrested and $1.5 million in drugs were seized.

Supported the Family Preservation and Support Act

The Clinton Administration won bipartisan support for this act—the first federal investment in child welfare protection in more than a decade. With federal help and support, states have been able to use these resources flexibly and creatively to strengthen families and reduce child abuse.

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Fact Sheet III

Investing in Education and Training for Our Families

"Let's give our children a future. Let us take away their guns and give them books." — *President Clinton*
January 24, 1995

The typical college graduate earns 74 percent more than a worker with a high school degree.

Expanded Student Loans

The Student Loan Reform Act, which includes the President's Direct Lending Program, lowers interest rates for students and allows for flexible income contingent repayment plans. The act also saves taxpayers billions of dollars.

Promoted National Service and Educational Opportunity

President Clinton created AmeriCorps so young people can serve their communities—teaching, caring for the sick, making the streets safer—while earning money toward their education. Already, 20,000 American women and men serve in AmeriCorps.

Enhanced School-to-Work Opportunities

With bipartisan support, President Clinton signed into law the School-to-Work Opportunities Act, the most important national program ever to provide apprenticeships for students who don't go on to college. School-to-Work helps all young people—including the 70 percent who don't get four-year degrees—to get the education they need to obtain good jobs.

Advanced Improved Standards for Education

This legislation sets world class education standards in areas of math and science and provides voluntary assistance to states and communities to implement education reform. In addition, the President supported the Reauthorization of the Elementary and Secondary Education Act which helps to improve basic and advanced skills for low-income students.

Expanded Head Start

President Clinton has expanded Head Start services while improving the program's quality and making it more responsive to the needs of local communities. The President's increase in funding for Head Start will allow 50,000 more children to take advantage of the program by the year 2002. The Administration has also launched an innovative program to give infants and toddlers an Early Head Start.

Safe and Drug-Free Schools

This President-supported program expands security and violence prevention in schools across the nation by teaching students the dangers of drug and alcohol abuse and teaching them alternatives to violence.

Expanding Lifelong Learning

The President has proposed a "G.I. Bill of Rights for Workers" to reform job training programs and put resources and information directly into workers' hands. Lifelong Learning is critical for our workers to compete successfully in the new global marketplace.

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THE WHITE HOUSE

WASHINGTON

January 1996

It is time for us to recognize a simple but profound truth: by improving the lives of American women, we are making a vital investment in America's future. By investing in women, we enable them to reach their fullest potential as individuals and as members of our society. When women thrive, their families thrive. When families thrive, communities flourish, and our nation reaps the benefits.

We must value the contributions women make in every aspect of life: in the home, on the job, in their communities, as mothers, wives, sisters, daughters, learners, caregivers, workers, citizens, and leaders. Today, 58 million American women are in the work force, comprising half of all workers. Almost every woman will work for pay sometime during her life. It isn't easy. Women still make only 72 percent of what men make in comparable jobs. Each day, women working outside the home must balance job responsibilities with family responsibilities. They struggle to arrange and pay for quality child care. They must be effective on the job and still find time to help their children with homework, to attend parent-teacher meetings, to take their children to doctors' appointments and school events. We must pursue policies that help women to be successful in the workplace and in the home.

My Administration is committed to helping women achieve that success, and the proof of our commitment is found on the following pages. We have initiated strong, practical measures to improve women's economic and educational opportunities, to provide quality health and child care, to prevent violence on the streets and at home, and to make sure that women's voices are heard at every level of our government. The unprecedented number of women I have appointed to my Cabinet and to positions of leadership throughout the federal government reflects my belief that women should be full partners in decisionmaking.

But we must do more. We have a historic opportunity -- and a solemn responsibility -- to lead the world in our efforts to better the lives of women. At the United Nations Fourth World Conference on Women, the First Lady joined tens of thousands of women from around the globe in addressing issues vital to American women and families -- personal and economic security, access to education, health care, jobs, and credit, and the chance for every boy and girl to live up to his or her potential. My Administration is working hard to address these concerns.

I ask you to join me in our work to improve the lives of women and families in our nation and around the world. The challenges are great, but the rewards are even greater for us all.

Bill Clinton