Nadine Mckenzie

MergerWatch – Raising Women’s Voices

My time with Raising Women’s Voices (RWV) this summer was an eye-opening experience into the policy and advocacy side of public health. During my internship I worked on various projects such as the New York State (NYS) health insurance exchange, phone conferences to celebrate the anniversary of Griswald v. CT decision (allowed contraception use to be legal for married couples) and the impact of that decision on today’s issues; efforts to get women more interested in health reform and last but not least the contraception is prevention campaign (C is P). For the majority of my internship, I mainly worked on the NYS insurance exchange and the C is P campaign.

As a part of health reform each state has to set up a state insurance exchange that will work as a sort of buying club (e.g. Costco, Sam’s Club) where people are able to shop around and get the best insurance coverage that best fits their needs at a affordable price. Each state needs to have their exchange up and running by 2014 or else the federal government will come in and create it for them. This would not be a good alternative because they would not be accurately tailoring the program to the needs of the people in each particular state. Throughout the summer, RWV was tracking the status of health insurance exchanges in each state. Many states were trying to put anti-abortion bills into their state exchange so that abortions would not be covered in insurance plans or would be banned altogether in that state. A number of states also stopped funding to health organizations that provided abortions or gave information on abortions. One of the main organizations that were under attack of defunding was Planned Parenthood.
There are many aspects that go into creating a fair and equal exchange. RWV teamed up with Health Care for All New York (HCFANY) to urge state assembly members to create some kind of legislation to start the exchange in this legislative session which was ending in July. It was crucial to have this exchange put into place at least in the form of some legislation in this session to make sure New York was able to use the funds that were available before they were lost at the end of this legislative session. It was also important to get a bill in place to allow enough time to properly construct the exchange so it would be up and running in time for January 2014. There were two bills that were drafted: the senate’s bill and the governor’s bill. We had a lot of issues with the senate’s bill. So we went lobbying in Albany urging assembly members to vote on the governor’s bill. We also urged them to make changes such as creating an unbiased board that did not consist of people who stood to gain or profit from the exchange, adding in an active purchaser component, and to make it user friendly with support for citizens who use it. I also helped with press conferences held by HCFANY to raise awareness on the exchange. Although the legislative session did end without addressing the exchange, it was a very busy time. During this time NY was working on passing gay marriage bill which was passed just in time for the NY Pride parade. The NYS insurance exchange bill was addressed in a special session in which the governor’s bill was passed with some changes.

The Contraception is Prevention Campaign (C is P) was the focus for the rest of the summer. This campaign was advocating that contraception actually is a preventive method and should be included in the list of preventive services which require no co-pay for people with insurance coverage. When the department of Health and Human Services (HHS) was presented with this issue they decided to conduct a study to see if contraception was actually prevention. And the obvious response on my part was, how can it not be?! So the Institute of Medicine
(IOM) was charged to take on this study. While we were waiting for their results, RWV was using its representatives in many states across the country to raise awareness of this issue and by conducting events and acquiring signatures to be attached to a letter sent to be sent to HHS secretary Sebelius who would be the one determining if contraception was to be added to the list of preventive services. Initially when I was told about the campaign RWV was working on collecting women’s stories of their experience with health care. I thought it would be a great idea if I could go around asking women about their experiences with being able to afford contraception and how they would benefit if there were no co-pay. This idea then turned into a mini documentary containing stories of women and their experiences around accessing contraception. The IOM then came out with their decision that all forms of contraception where preventive and should be included in the list. Later HHS secretary Sebelius announced that some contraceptives would have no co-pay starting in 2012. This was a victorious moment for RWV and women across the country. I’m so happy I was able in a small way to be a part of history!

I knew that the venture of creating a documentary would be time consuming from my previous work on documentaries however there were still some difficulties because I was creating the documentary by myself. Nevertheless it was a fun learning experience. I conducted street interviews with people passing by which is very difficult to do in New York City because everyone is rushing somewhere and does not have time to share their personal story. Nevertheless I did get some street interviews from women who had personal experiences having difficulties affording contraception and others who had never used contraception or contraceptive options that required a co-pay. With the help of my boss, I was also able to set up interviews with young public health professionals and graduate students. I also interviewed one of our very own RRASC interns. The great part about these interviews was that I got to meet
new people with interesting stories and experiences in the public health field as well as the
opportunity to travel around NYC and see new parts of the city.

During my internship I most often used my people skills and networking skills when
interacting with new people in the field. I also used my writing skills and research skills
everyday as I was always researching what was the latest news on health reform in order to
update RWV’s Twitter and Facebook daily. A large part of my internship became social media
management which I was not originally anticipating but I learned a lot of information on
targeting messages to audiences. I was also very up to date with all the issues concerning health
reform, contraception and abortion. The three most important things that I have developed as a
result of my internship are: 1) how to network and form connections with people because that is
a huge part of advocacy – starting and maintaining good relationships with people in the field; 2)
how to be a go-getter and work in unanticipated situations; and 3) the importance of targeting
messages to gain the interest of the desired audience.

One highlight of my internship was being exposed to the advocacy and policy side of
public health. I got to see all the behind the scenes work that goes into making change. I also
thought it was great to go to the capital in Albany and meet with assembly members and just
experience the excitement of being a part of something historic. The C is P campaign was also a
highlight because we won! I was able to be a part of something that will change the lives of so
many women.

Even though there were some difficult moments that did not hold up to my initial
expectations I think they were beneficial and still allowed me to have a meaningful internship. I
learned that even though I am interested in health advocacy I’m not interested in the policy side
of it. I learned that I would like to focus more on the maternal and child aspect of public health. My internship helped me narrow down my focus in public health and find the area where I am most interested. I also learned what organizations look for when hiring a person for a specific job in the field of public health and what makes one candidate more appealing than another.

Experience is everything in the public health field. Employers are looking for someone who shows initiative, works well with others, has connections and lots of experience even if it’s not exactly in the same area as the available position, experience showing that the candidate is a go-getter and able to create change is valid.

I loved my organization. I think the work that RWV does is great and necessary. They really are trying to bring women’s health issues to the forefront of the implementation of health reform and without them many decisions made would not take into consideration the voices of women and their needs. I also really liked that RWV regional coordinators are made up of people working in reproductive rights and women’s rights organizations across the country. This encourages an atmosphere of unity between women’s groups and other organizations which is a strategy that is not used by many organizations. I had a great time this summer travelling, meeting new people and learning lifelong skills. I will never forget my time at RWV or the victories we accomplished this summer. For future RRASCs who are interested in women’s health and health reform policies, this organization is the perfect fit for you. Be assertive, respectful, and flexible and you will have a great summer just as I did.