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This publication is intended for your information about issues important to education, women and children. How you choose to use the information included here is up to each individual.

This free newsletter is sponsored by the United States Forum of The Delta Kappa Gamma Society International. The Delta Kappa Gamma Society International is an organization of leading women educators with over 100,000 members. Delta Kappa Gamma members wishing to subscribe to this FREE newsletter should send a request to Angela.Bedenbaugh@usm.edu. We urge you to share this newsletter with other interested individuals who are not members of Delta Kappa Gamma or members who do not subscribe to this publication. This publication is intended for your information about issues important to education, women and children.

FORUM SUPPORTS AMERICAN HEART ASSOCIATION'S LETTER TO CONGRESS PAYCHECK FAIRNESS ACT DEFEATED IN SENATE NEW WOMEN'S PAY BILL INTRODUCED PREGNANT WORKERS FAIRNESS ACT NATIONAL COMMITTEE TO PROTECT SOCIAL SECURITY & MEDICARE

FORUM SUPPORTS AMERICAN HEART ASSOCIATION'S LETTER TO CONGRESS

The vast majority of tests of drug effectiveness and side effects have been conducted on men. Often few if any women or minority groups were included in the studies. Consequently, the results do not adequately address the health of women or minorities. A recent much publicized case in point is the difference in heart attack symptoms between women and men. The American Heart Association has sent a letter to Congress urging that women and minority health issues be address in health studies and drug testing. A copy of the letter is given below. The U.S. Forum as part of The Delta Kappa Gamma Society International has signed on in support of this letter.

"Dear Member of Congress:

We are writing in support of Section 908 of the Senate's version of the Food and Drug Administration (FDA) Safety and Innovation Act (S. 3187), which would require the FDA to report on the availability of new drug and device safety and efficacy data by sex, age, and racial and ethnic subgroups. As you work to reconcile differences between the House and Senate legislation, we strongly urge you to include this provision in the final FDA User Fee bill.

Numerous studies have found that subgroup-specific data about how new drugs and devices perform in women, minorities, and older Americans still is not publicly available to patients, clinicians, and researchers on a consistent and reliable basis. Sex-specific research results can and have yielded important differences in the way drugs and devices work in women and men. For example, the drug digoxin used to treat patients with heart failure is associated with an increased risk of death among women but not men. A next-generation ventricular assist device, used in heart failure patients, was associated with a higher rate of stroke in women versus men.

Having these types of results for women and other subpopulations is necessary for informed patient and provider decision-making. Yet, although progress has been made in the last two decades, there are still significant gaps in the analysis of research data to look for subgroup differences, and the availability of subgroup-specific safety and efficacy data to patients and their health care providers. These gaps caused the Institute of Medicine to conclude in its 2010 report, *Women's Health Research: Progress, Pitfalls, and Promise*, that:

"There also has been inadequate enforcement of requirements that representative numbers of women be included in clinical trials and that results in women be reported. ...a lack of reporting on sex and gender differences has hindered identification of potentially important sex-differences and slowed progress in women's health research and its translation to clinical practice."

Section 908 would require the FDA to publicly report within one year on the extent to which clinical trial participation and safety and efficacy data reported by sex, age, race, and ethnicity is included in applications for FDA approval of new drugs and medical devices. The FDA is subsequently required to publish an action plan that includes recommendations for improving the availability of helpful information to patients, healthcare providers, and researchers. This language builds on a provision of the HEART for Women Act, bipartisan legislation that was passed by the House by voice vote in September 2010. In addition to making this important information available to healthcare professionals and their patients, it would highlight areas where the participation of women and other subpopulations in clinical trials is lacking.

This provision would help to close the knowledge gap that is contributing to substantial inequities in health care for women and for minorities. Again, we hope you will take a step towards ending this inequity by including Section 908 in the final FDA User Fee legislation. Thank you for your consideration.

Sincerely,

American College of Cardiology
American Heart Association/American Stroke Association
American Society of Echocardiography
Association of Women's Health, Obstetric and Neonatal Nurses
Business and Professional Women's Foundation
Florida Heart Research Institute
Hypertrophic Cardiomyopathy Association (HCMA)
NAACP
National Association of Nurse Practitioners in Women's Health (NPWH)
National Council of Women's Organizations
National Hispanic Medical Association

National Partnership for Women & Families

National Patient Advocate Foundation

National Research Center for Women & Families

National Women's Health Network

National Stroke Association

Society for Women's Health Research

Sudden Cardiac Arrest Association

Summit Health Institute for Research and Education, Inc.

WomenHeart: The National Coalition for Women and Heart Disease

Women's Research and Education Institute"

PAYCHECK FAIRNESS ACT DEFEATED IN SENATE

The Paycheck Fairness Act (S.3220) was voted on and defeated 52 to 47 in the Senate.

To see how your senator voted check by state below.

Alabama:

Sessions (R-AL), Nay

Shelby (R-AL), Nay

Alaska:

Begich (D-AK), Yea

Murkowski (R-AK), Nay

Arizona:

Kyl (R-AZ), Nay

McCain (R-AZ), Nay

Arkansas:

Boozman (R-AR), Nay

Pryor (D-AR), Yea

California:

Boxer (D-CA), Yea

Feinstein (D-CA), Yea

Colorado:

Bennet (D-CO), Yea

Udall (D-CO), Yea

Connecticut:

Blumenthal (D-CT), Yea

Lieberman (ID-CT), Yea

Delaware:

Carper (D-DE), Yea

Coons (D-DE), Yea

Florida:

Nelson (D-FL), Yea

Rubio (R-FL), Nay

Georgia:

Chambliss (R-GA), Nay

Isakson (R-GA), Nay

Hawaii:

Akaka (D-HI), Yea

Inouye (D-HI), Yea

Idaho:

Crapo (R-ID), Nay

Risch (R-ID), Nay

Illinois:

Durbin (D-IL), Yea

 $Kirk\ (R\text{-}IL), \textbf{Not Voting}$

Indiana:

Coats (R-IN), Nay

Lugar (R-IN), Nay

Iowa:

Grassley (R-IA), Nay

Harkin (D-IA), Yea

Kansas:

Moran (R-KS), Nay

Roberts (R-KS), Nay

Kentucky:

McConnell (R-KY), Nay

Paul (R-KY), Nay

Louisiana:

Landrieu (D-LA), Yea

Vitter (R-LA), Nay

Maine:

Collins (R-ME), **Nay** Snowe (R-ME), **Nay**

Maryland:

Cardin (D-MD), Yea

Mikulski (D-MD), Yea

Massachusetts:

Brown (R-MA), Nay

Kerry (D-MA), **Yea**

Michigan:

Levin (D-MI), Yea

Stabenow (D-MI), Yea

Minnesota:

Franken (D-MN), Yea

Klobuchar (D-MN), Yea

Mississippi:

Cochran (R-MS), Nay

Wicker (R-MS), Nay

Missouri:

Blunt (R-MO), Nay

McCaskill (D-MO), Yea

Montana:

Baucus (D-MT), Yea

Tester (D-MT), Yea

Nebraska:

Johanns (R-NE), Nay

Nelson (D-NE), Yea

Nevada:

Heller (R-NV), Nay

Reid (D-NV), Nay

New Hampshire:

Ayotte (R-NH), Nay

Shaheen (D-NH), Yea

New Jersey:

Lautenberg (D-NJ), Yea

Menendez (D-NJ), Yea

New Mexico:

Bingaman (D-NM), Yea

Udall (D-NM), Yea

New York:

Gillibrand (D-NY), Yea

Schumer (D-NY), Yea

North Carolina:

Burr (R-NC), Nay

Hagan (D-NC), Yea

North Dakota:

Conrad (D-ND), Yea

Hoeven (R-ND), Nay

Ohio:

Brown (D-OH), Yea

Portman (R-OH), Nay

Oklahoma:

Coburn (R-OK), Nay

Inhofe (R-OK), Nay

Oregon:

Merkley (D-OR), Yea

Wyden (D-OR), Yea

Pennsylvania:

Casey (D-PA), Yea

Toomey (R-PA), Nay

Rhode Island:

Reed (D-RI), Yea

Whitehouse (D-RI), Yea

South Carolina:

DeMint (R-SC), Nay

Graham (R-SC), Nay

South Dakota:

Johnson (D-SD), Yea

Thune (R-SD), Nay

Tennessee:

Alexander (R-TN), Nay Corker (R-TN), Nay Texas: Cornyn (R-TX), Nay

Hutchison (R-TX), Nay

Hatch (R-UT), Nav Lee (R-UT), Nav

Vermont:

Leahy (D-VT), Yea Sanders (I-VT), Yea

Virginia:

Warner (D-VA), Yea Webb (D-VA), Yea

Washington:

Cantwell (D-WA), Yea Murray (D-WA), Yea

West Virginia:

Manchin (D-WV), Yea Rockefeller (D-WV), Yea

Wisconsin:

Johnson (R-WI), Nay Kohl (D-WI), Yea

Wyoming:

Barrasso (R-WY), Nay Enzi (R-WY), Nay

NEW WOMEN'S PAY BILL INTRODUCED

A new bill called the Equal Employment Opportunity Restoration Act (EEORA) will soon be introduced in Congress. The bill was introduced in the House (H.R. 5978) by Rep. Rosa DeLauro (CT) and in the Senate by Senator Al Franken (MN). This bill attempts to discourage company-wide discriminatory practices. The Supreme Court ruling in the Wal-Mart v. Dukes (Betty Dukes) case against the workers is the reason for this bill. In this respect it is similar to what happened in the Lilly Ledbetter case where the Supreme Court ruled against Ms. Ledbetter, and Congress then passed the Lilly Ledbetter Act.

PREGNANT WORKERS FAIRNESS ACT

Here are three startling examples of women who, thanks to the pregnancy loophole, were fired for doing what was best for their pregnancies:

- A retail sales associate in Salina, Kansas was fired for drinking water while working because it violated store policy.
- A nursing home activities director in Valparaiso, Indiana lost her job because she could no longer lift heavy tables, an activity that took up less than 10 minutes of her workday and with which her coworkers routinely volunteered to assist.
- A pregnant truck driver in Tennessee was instructed by her obstetrician not to lift more than 20 pounds and sought light duty work. Her employer terminated her, as it made such modifications only to those injured on the job.

Sounds crazy, right? Unfortunately, thousands of pregnant women are forced to choose between losing their jobs (or taking unpaid leave) and endangering their pregnancies, when just a few small workplace accommodations are usually all that's needed.

To close this egregious pregnancy loophole, Pregnant Workers Fairness Act (H.R.5647) was introduced in the House of Representatives by Reps. Nadler (D-NY). So far the bill has 85 cosponsors. To give this bill a solid start, we need as many Representatives to co-sponsor this bill as possible. See below for the toll free number to contact your U.S. Representative.

NATIONAL COMMITTEE TO PROTECT SOCIAL SECURITY & MEDICARE

If you are interested in keeping up with the latest on what is going on with Social Security and Medicare you may want to check out the web site of this committee. That site is NCPSSM.com.

CONTACT ADDRESSES FOR GOVERNMENT INFORMATION

U.S. GOVERNMENT CONTACT INFORMATION can be obtained through Congressional Switchboard 1-866-327-8670 [this is a toll free number]. You can contact your Congressman and Senator through this number without paying long distance charges. http://www.house.gov/ for members of the House of Representatives http://www.senate.gov/ for members of the U.S. Senate White House <u>1-202-456-1111</u>

STATE GOVERNMENT CONTACT INFORMATION can be obtained through

http://www.emailyourgovernor.com/ Information available at this site allows contact with governors, members of the state legislature, state supreme court, congressional delegation and state agencies such as the Education Department, Attorney General, Motor Vehicles Department and Voter Registration. PLEASE NOTE THAT SOME OF THIS INFORMATION MAY BE OUT OF DATE

INFORMATION ON HOW YOUR CONGRESSMAN VOTED ON KEY BILLS http://projects.washingtonpost.com/congress/111/bills/ FIVE CONSTITUENT CONTACTS WILL CAUSE A LEGISLATOR TO PAY SERIOUS ATTENTION TO A GIVEN ISSUE.

Archival copies of the U.S. Forum Connection can be found at http://ocean.otr.usm.edu/~w305514/HomePage.htm

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