



ISSUE BRIEF : Q4 2019

REPRODUCTIVE HEALTH CARE IN OHIO

► BUSINESS FORWARD

ABOUT BUSINESS FORWARD

Business Forward, a national trade association, works with more than 100,000 business leaders across the country, including more than 4,500 here in Ohio. We've organized hundreds of briefings on how to help women succeed in the workplace, provide for their families, and grow our economy.

Our leaders represent a range of industries and business sizes. It is a highly active, civic-minded, bipartisan group.

Six in 10 members of our network are women, and they are substantially more active than the men in our network. They also carry two-thirds or more of the household duties that come with raising children. Helping women advocate for affordable health care, climate action, sensible immigration laws, and other reforms is among our most significant accomplishments.

This report is part of a series on women's progress in the workplace and the importance of reproductive health care to women's careers, their families' security, and America's economic competitiveness. More than 200 Ohio business leaders have participated by signing a statement in support of reproductive health care, providing case studies and individual testimony, and participating in our briefings on developments in reproductive health care.

The proportion of women at every level in corporate America has hardly changed. Progress isn't just slow. It's stalled.

WOMEN IN THE WORKPLACE 2018
(OCTOBER 2018)

McKinsey
& Company

EXECUTIVE SUMMARY

Women are America's largest potential driver of economic growth. By simply helping women match men's labor force participation, we could grow our economy by \$1 trillion.¹ But women cannot realize their potential in the workplace if government makes it harder for them to plan when to have kids. Reproductive health is a critical, but often overlooked, service to working women.

1. After decades of gains, women's progress in the workplace has stalled. They remain overrepresented in low-paying jobs, underrepresented in high-paying jobs, overworked at home, and undermined at the office.
2. The cost to women and their families is enormous. In the U.S. women earn 82 cents for every dollar men make, and 78 cents² in Ohio. They are working 26.4% more hours per year than they did in 1980³ to provide for their families.
3. The cost to our economy is also enormous. If women worked and earned at the rate men do, our economy would be \$1 trillion bigger.⁴
4. That's why so many of our global competitors are helping women succeed at work. They invest three times more supporting working women than the U.S. does.⁵ The U.S., once a leader, now ranks 20th out of the world's 22 advanced economies on women's labor participation rate.⁶
5. The Trump Administration, Republicans in Congress, and other officials here in Ohio are restricting reproductive health care and family planning services.



**REPRODUCTIVE HEALTH CARE
INCLUDES ENSURING ACCESS
TO ABORTION AND
AFFORDABLE BIRTH CONTROL,
AND ENDING PREGNANCY
DISCRIMINATION.**

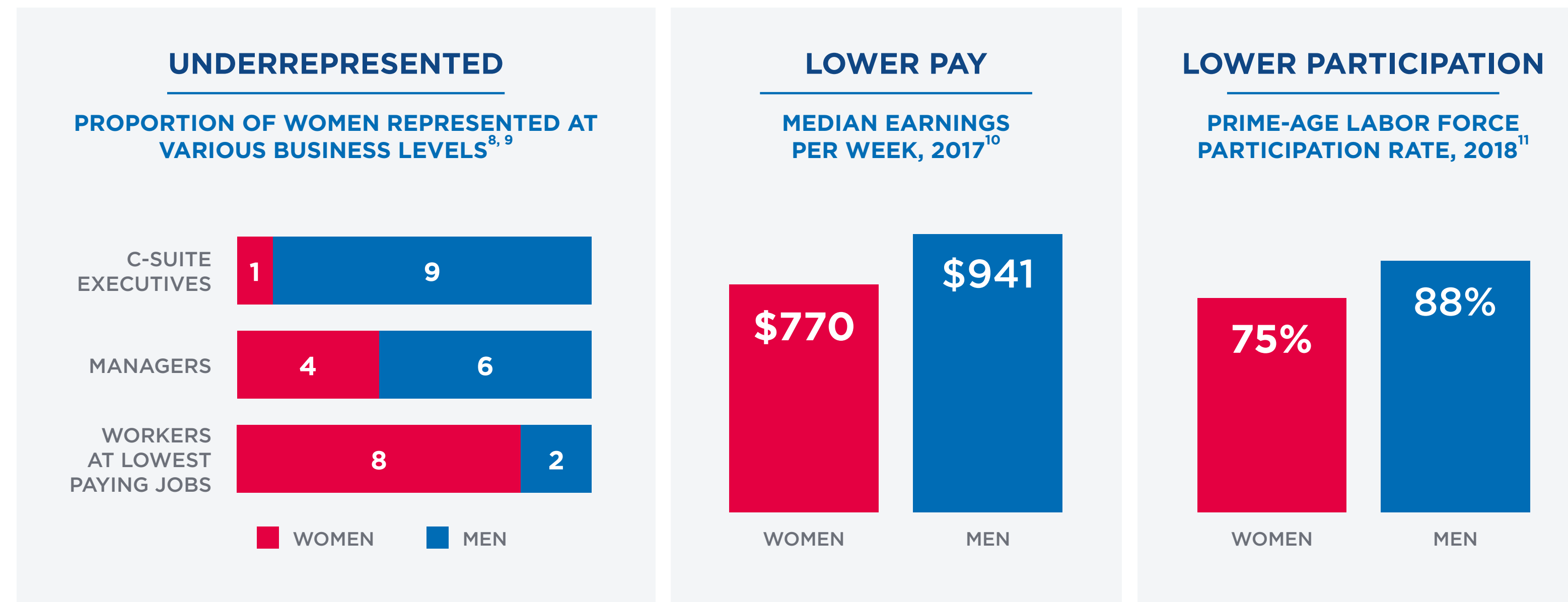


**FAMILY PLANNING CLINICS
PROVIDE BIRTH CONTROL,
OFFER PREGNANCY TESTS &
COUNSELING, HELP CLIENTS
WHO WANT TO CONCEIVE,
PROVIDE PRECONCEPTION
& STI/HIV SERVICES.**

WOMEN'S PROGRESS IS STALLED, AND TODAY'S GENDER GAP = \$1+ TRILLION IN LOST INCOME

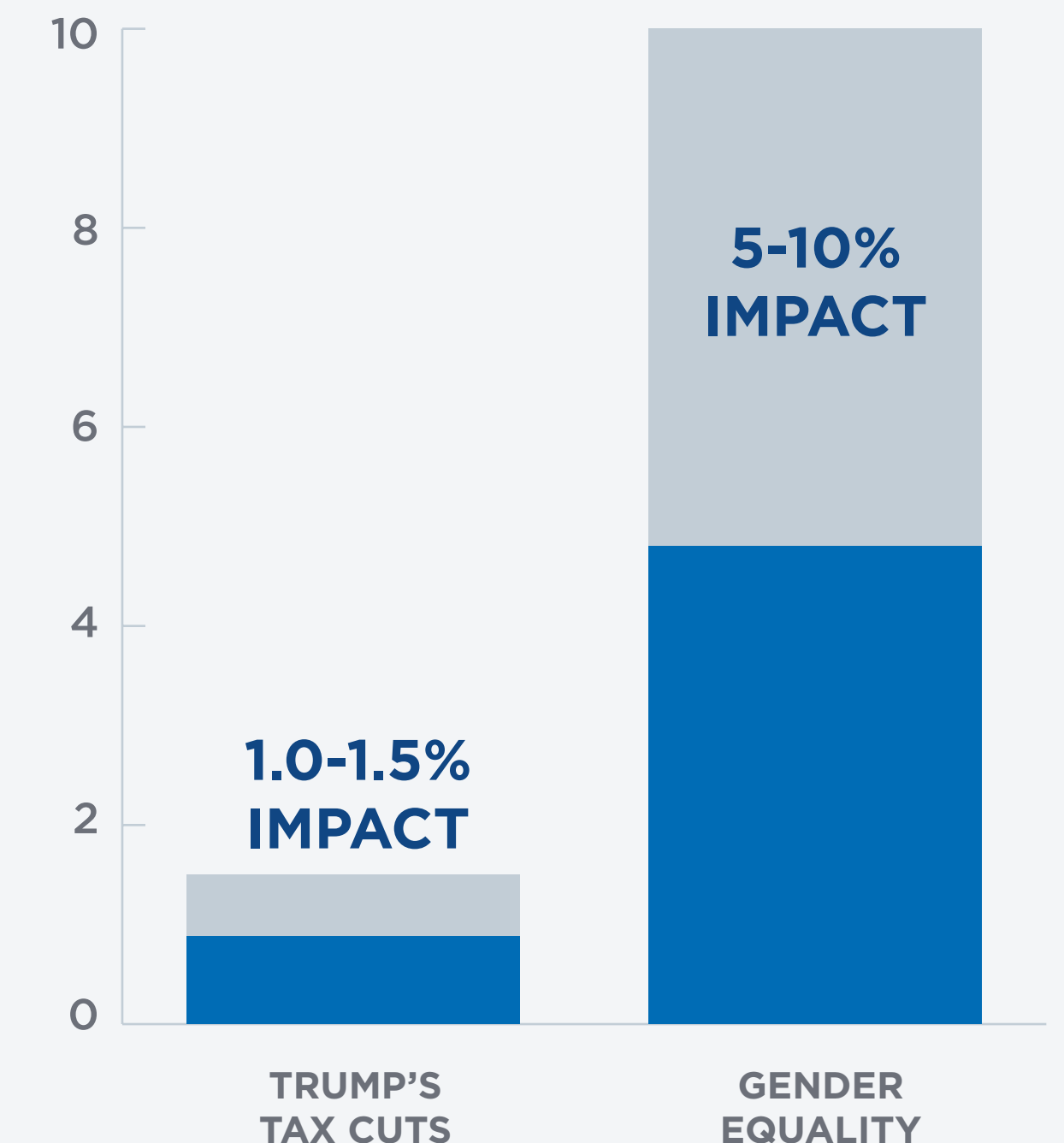
Women who work full-time earn just 82% of what their male counterparts earn. Women earn less, in part, because they tend to work in jobs and industries that pay less. In other words, they are overrepresented in low-paying jobs and underrepresented in higher paying ones. They are also less likely to be promoted. For every 100 men promoted to manager, 79 women are.⁷ Closing the gap requires both (1) helping more women enter the workforce and (2) helping more women enter higher paying fields, like engineering.

Women experience lower labor force participation rates than men. Helping women match men's participation rate would increase our GDP by 5-10%. McKinsey, S&P, and Citi estimate the impact of closing the gender gap is between \$1 trillion and \$1.6 trillion.



WHEREAS THE 2017 TAX LAW IS PROJECTED TO HAVE A LIMITED IMPACT ON THE ECONOMY, ENACTING POLICIES TO CLOSE THE GENDER GAP WOULD INCREASE GDP BY 5-10%.

PROJECTED IMPACT ON U.S. ECONOMY (% GDP GROWTH FROM 2018-2021)^{12, 13}



WOMEN IN OHIO EARN 78 CENTS FOR EVERY DOLLAR MEN MAKE

WAGE GAP¹⁴

Women in Ohio who work full-time, year-round **earn 78 cents for every dollar** men with similar jobs earn.



Over a career that leads to a deficit of:

\$459,080

At the current rate, women will not reach parity with men until:

2066

WOMEN OF COLOR¹⁵

The gap is larger for women of color:

LATINAS

\$0.61

AFRICAN AMERICANS

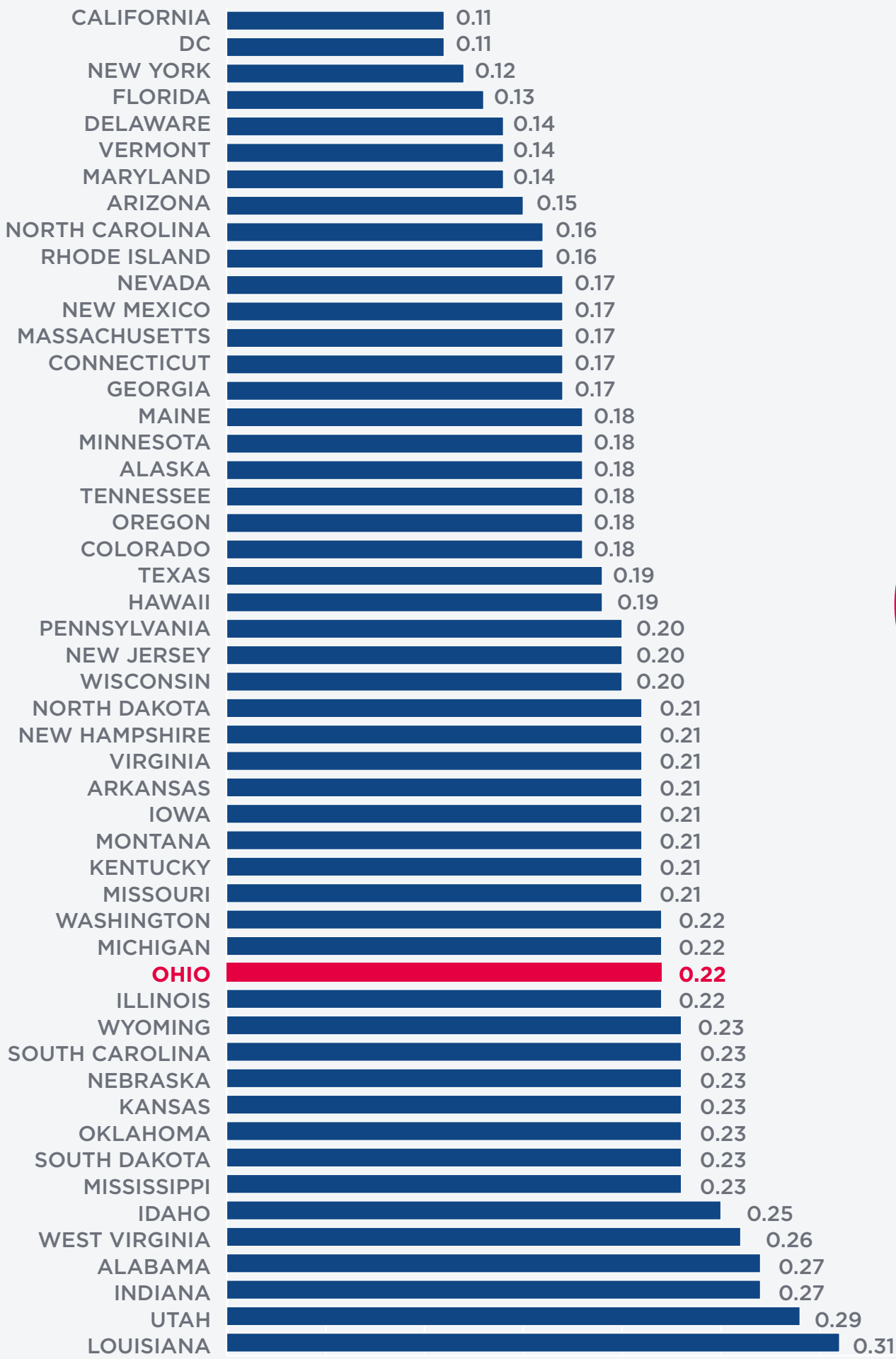
\$0.64

SMALL BUSINESSES¹⁶

34%

of Ohio businesses are women-owned.

WAGE GAP¹⁷



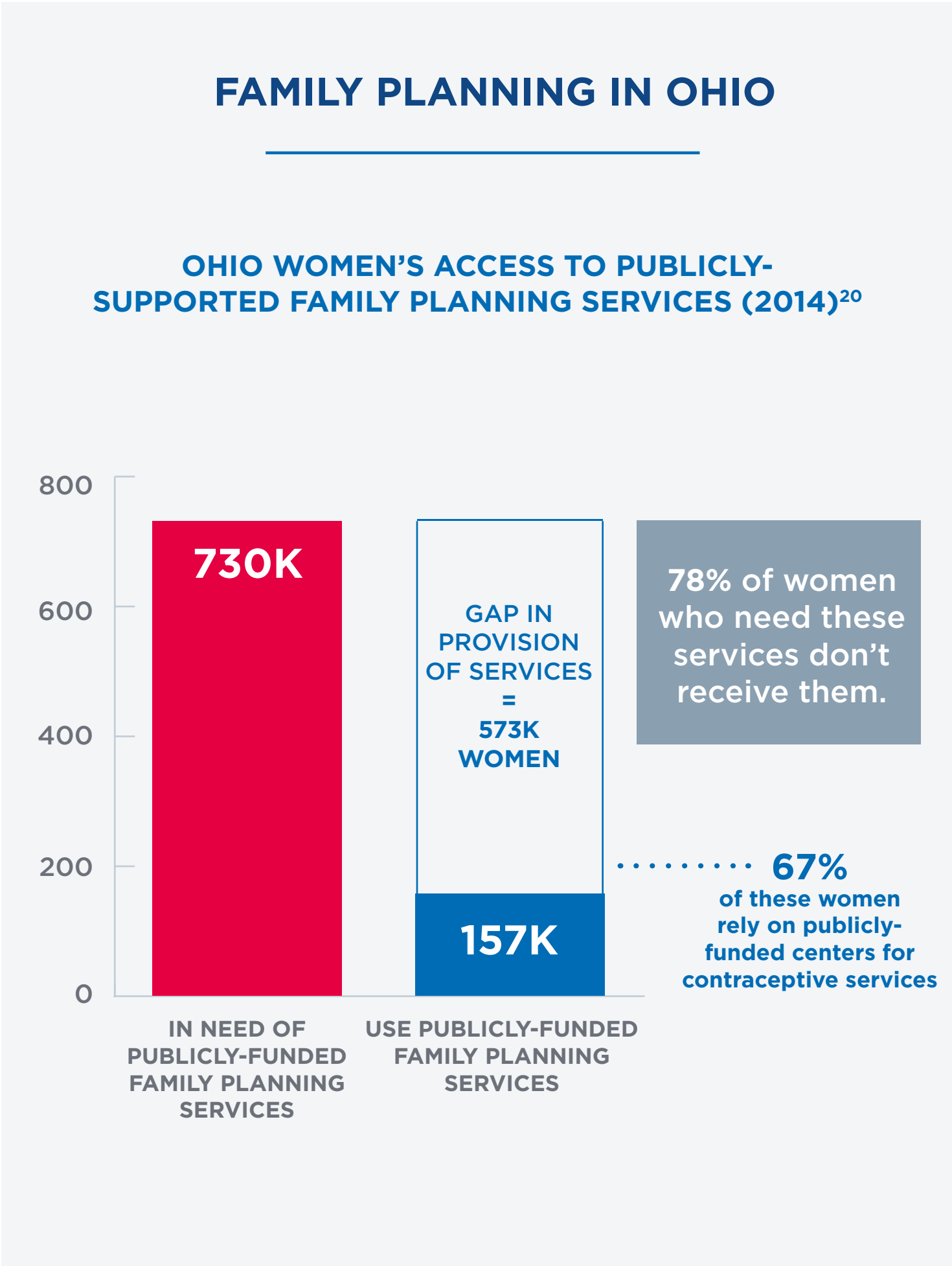
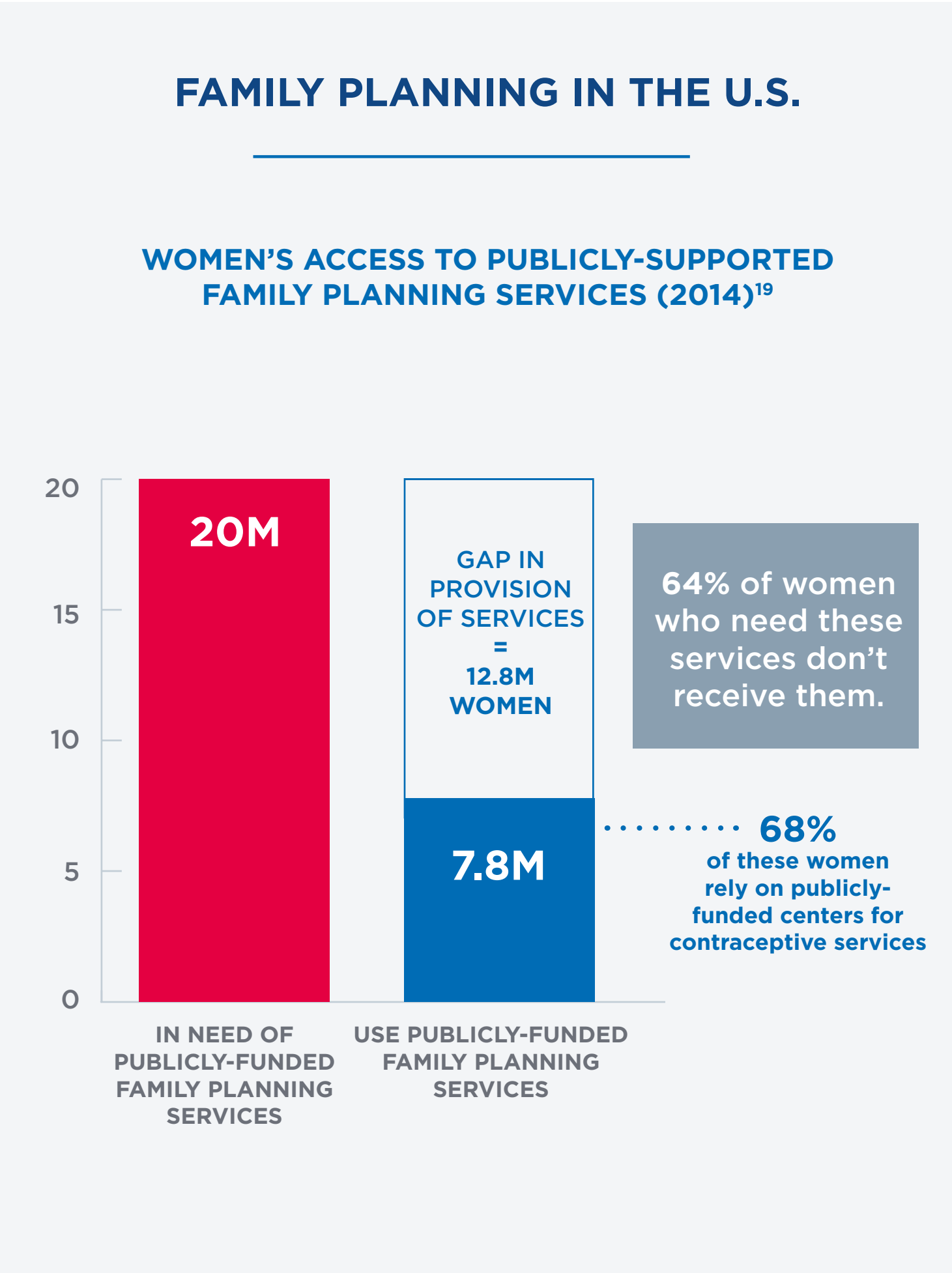
**LOWEST
WAGE GAP**

**OHIO
RANKING:
#37**

**HIGHEST
WAGE GAP**

FAMILY PLANNING SERVICES REDUCE UNPLANNED PREGNANCIES AND SAVE OHIO TAXPAYERS \$227M EVERY YEAR

Making contraception available to women who want it but could not otherwise afford it reduces the number of unplanned births, abortions, miscarriages, and babies born at low birth weight. Without publicly-supported family planning services, rates of unintended pregnancy and abortion in the U.S. would be 33% higher, and 23% higher in Ohio. Many of the women who require publicly-funded family planning services are young, nonwhite, low-income, or uninsured.¹⁸



FAMILY PLANNING SERVICES SAVE TAXPAYERS MONEY

For every \$1 invested in publicly-supported family planning services, the government saves \$7.09 in Medicaid expenditures. That's because these services reduce reproductive cancers, STIs, and unintended births - all of which add to health care costs.²¹



YOU CAN SPEND...

\$1

ON FAMILY PLANNING

OR

\$7.09

IN MEDICAID EXPENSES

In 2010, family planning services in Ohio saved the government²²:

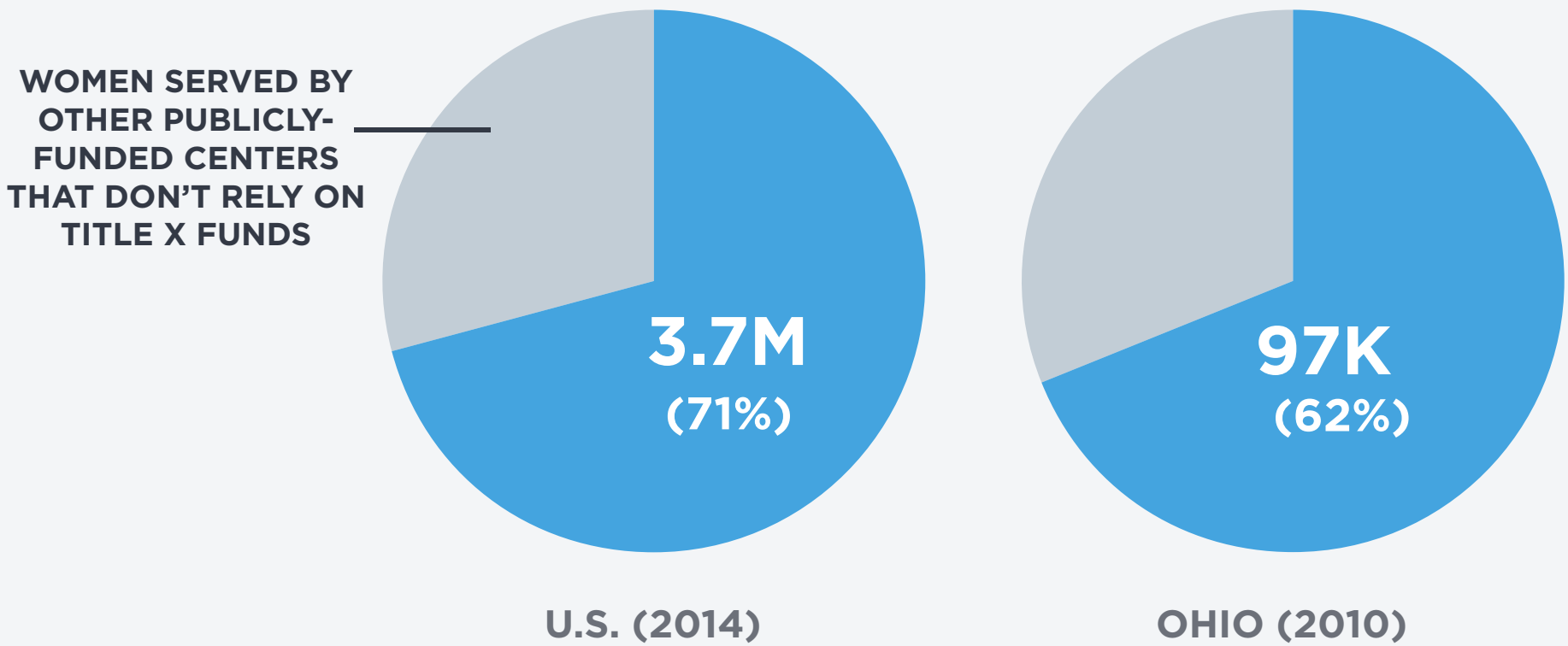
\$227 MILLION

THE TRUMP ADMINISTRATION AND OHIO LEGISLATURE POSE THREATS TO FUNDING FOR AND ACCESS TO FAMILY PLANNING

FEDERAL THREATS

In 2018, the Trump Administration proposed a new gag rule policy for Title X that will affect the nearly **4 million** people who rely on this program for affordable birth control and other related services.²³

WOMEN SERVED BY HEALTH CENTERS THAT RECEIVE SOME TITLE X FUNDING^{24, 25}



WOMEN IN OHIO RELY ON TITLE X CENTERS

Health centers that rely on Title X funding serve 62% of women that visit publicly-funded facilities in Ohio.

The rule prevents doctors, nurses and other Title X providers from informing patients about safe and legal access to abortion. It also blocks Title X funding from going to health centers that provide abortion services – regardless of how the funding is spent.

STATE-LEVEL THREATS



In April 2019, the Ohio legislature and Governor Mike DeWine (R) passed SB 23, a “heartbeat” bill that bans abortion after six weeks. In July, a federal judge temporarily blocked the ban. The instigating lawsuit is currently under review.²⁶

According to the Guttmacher Institute, Ohio, when compared to other states, **is hostile** to abortion rights²⁷:

- In 2017, **93%** of Ohio counties had no clinics that provided abortions and **55%** of Ohio women lived in those counties.²⁸
- Patients are required to receive counseling and wait 24 hours before procedure is performed.²⁹
- Health plans offered in the state’s health exchange under the ACA only cover abortion in cases of life endangerment to the women.³⁰

FEMALE EXECUTIVES SUPPORT ACCESS TO REPRODUCTIVE HEALTH CARE

Business Forward conducted a survey with GBA Strategies and Bellwether Research & Consulting (December 2017).³¹ The poll surveyed 1,500 American women across age, race, professional status, educational attainment, geographic area, and political spectrum on their perspectives on the issues facing women in the workplace today.

Eighty-six percent of female executives believe that being able to time and plan parenthood is critical to a woman's professional development and her family's financial security – and 90% believe access to birth control is critical to family planning. There is significant evidence to support these beliefs. For example, 10% of the narrowing of the gender pay gap during the 1980s and 31% during the 1990s can be attributed to early access to the Pill.³²

Access to contraception helps women pursue higher degrees of education and establish in professional careers. The Pill accounted for more than 30% of the increase in the proportion of women in skilled careers from 1970 and 1990.³³

TIMING PARENTHOOD MATTERS

HOW IMPORTANT HAS THE ABILITY TO PLAN IF AND WHEN TO HAVE CHILDREN BEEN FOR YOUR ABILITY TO PURSUE YOUR PROFESSIONAL AND CAREER GOALS?³⁴

(PERCENT THAT BELIEVE IT IS IMPORTANT)

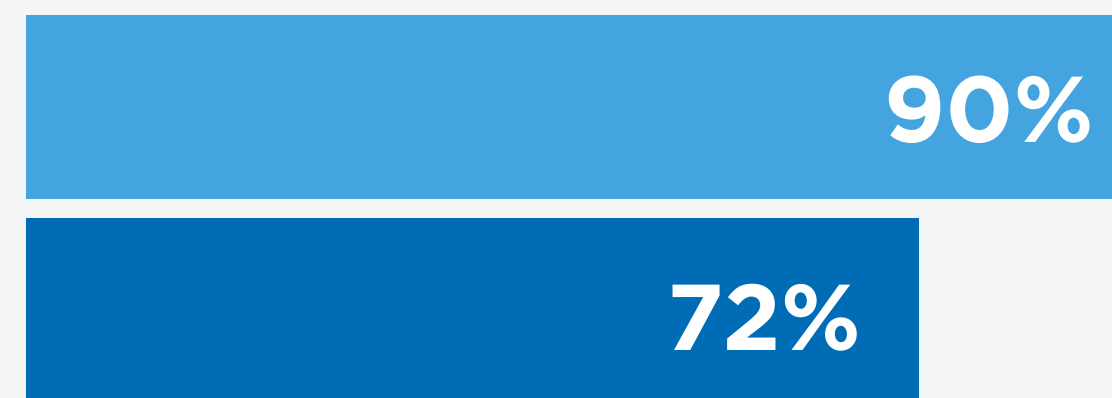


■ EXECUTIVES ■ TOTAL

BIRTH CONTROL IS CRITICAL TO TIMING PARENTHOOD

HOW IMPORTANT HAS ACCESS TO BIRTH CONTROL BEEN IN YOUR ABILITY TO PLAN THE SIZE OF YOUR FAMILY?³⁵

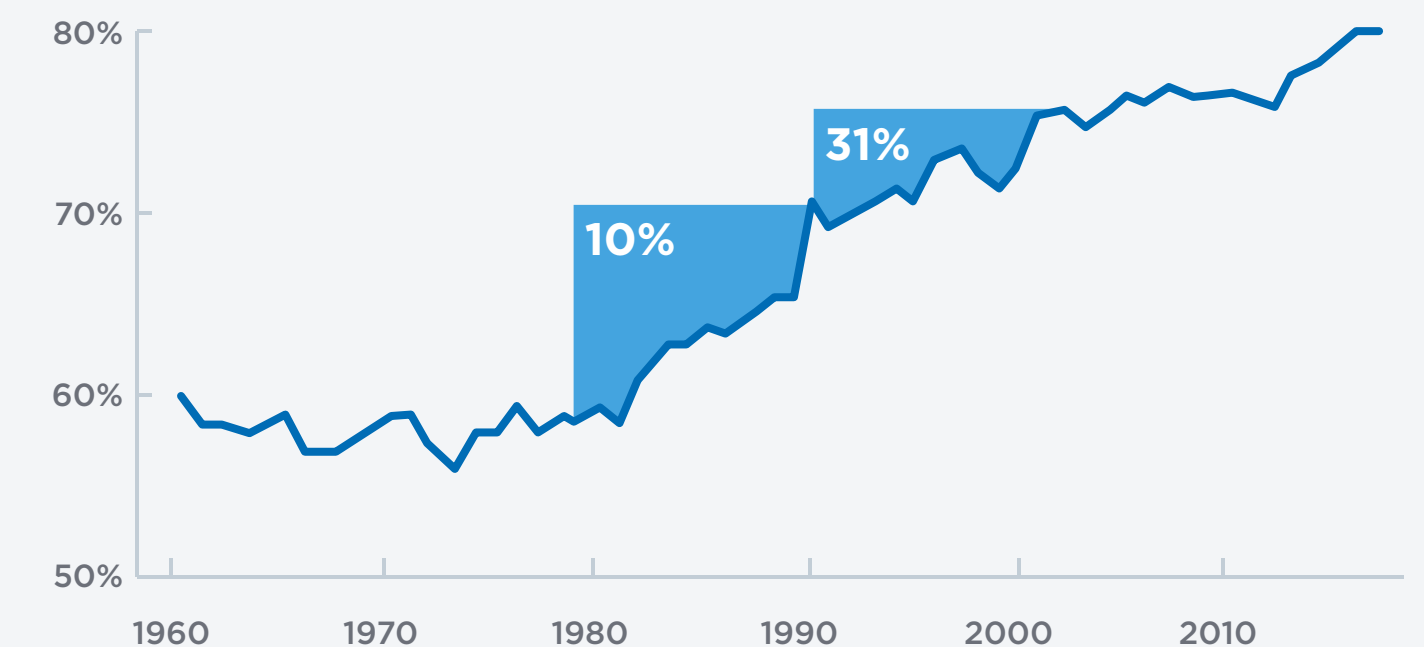
(PERCENT THAT BELIEVE IT IS IMPORTANT)



■ EXECUTIVES ■ TOTAL

LABOR FORCE PARTICIPATION AND BIRTH CONTROL

10% OF THE NARROWING OF THE GENDER PAY GAP DURING THE 1980S AND 31% DURING THE 1990S CAN BE ATTRIBUTED TO EARLY ACCESS TO THE PILL.³⁶

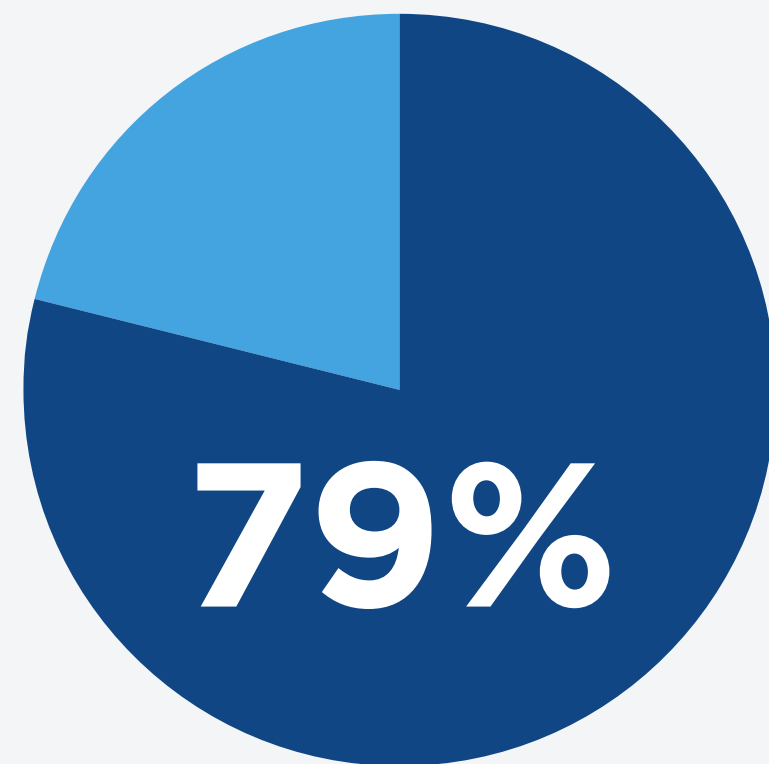


FEMALE SMALL BUSINESS OWNERS SUPPORT ACCESS TO REPRODUCTIVE HEALTH CARE

Nearly one-third of small businesses are owned by women. Their 11 million businesses contribute \$1.6 trillion to the U.S. economy each year. They are also more likely to provide health insurance to their employees than male small business owners. A survey of female small business owners by Small Business Majority (2018) demonstrates the importance of reproductive health care to their professional development and their families' financial security.³⁷

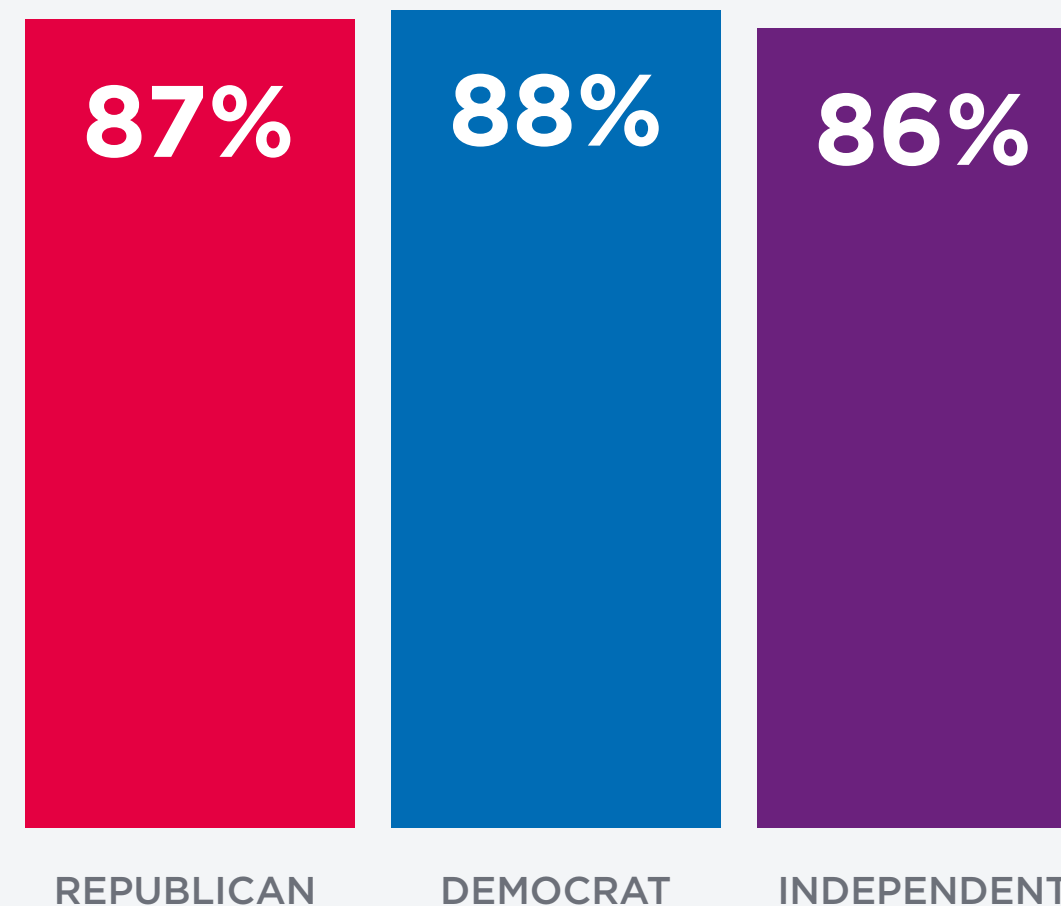
ACCESS TO HEALTH CARE

79% of female small business owners believe that access to reproductive health care is essential to women's economic security and wellbeing.³⁸



FREEDOM TO PLAN FAMILIES

Across party lines, female small business owners believe that women should have the freedom to plan if and when to have children.³⁹



FAMILY-FRIENDLY

Female small business owners generally support family-friendly policies.⁴⁰



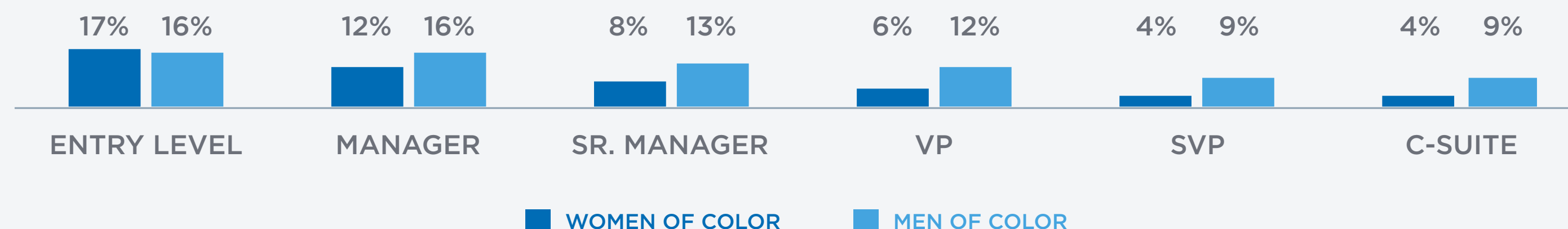
They are also more likely to provide health care to their workers.



FOR WOMEN OF COLOR WHO FACE ADDITIONAL BARRIERS IN THE WORKPLACE, ACCESS TO REPRODUCTIVE HEALTH CARE IS CRITICAL

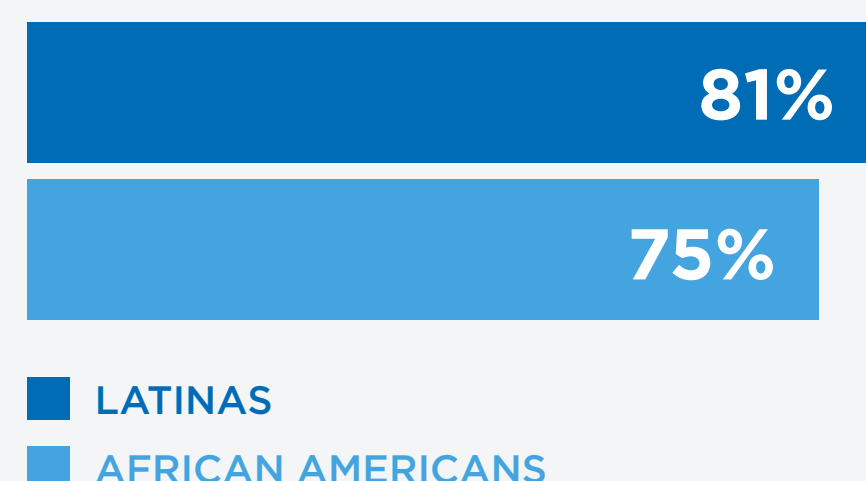
REPRESENTATION IN THE CORPORATE PIPELINE⁴¹

Women of color face greater institutional barriers to promotion in the workplace, and that suggests access to reproductive health care matters more to their careers.



FREEDOM TO PLAN FAMILIES⁴²

How important has the ability to plan if and when to have children been for your ability to pursue your personal professional or career goals? (% that believe it's important)



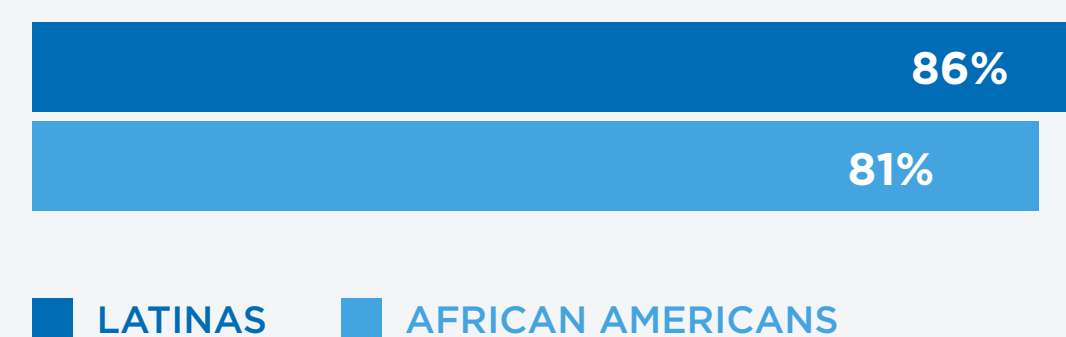
How important has access to birth control been in your ability to plan the size of your family? (% that believe it's important)



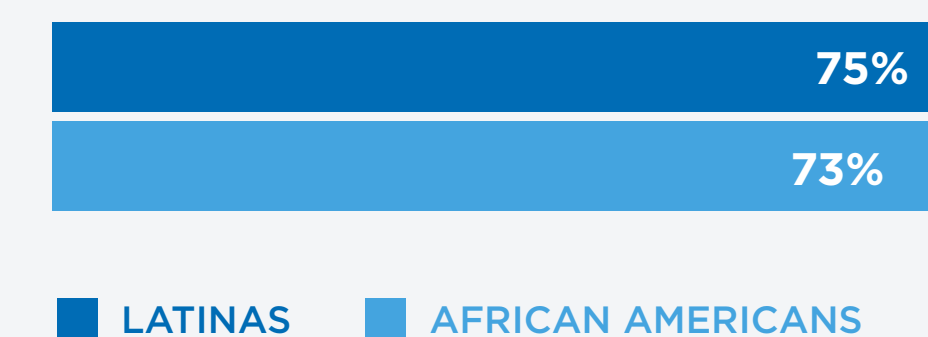
ACCESS TO BIRTH CONTROL AND HEALTH CARE⁴³

Women of color overwhelmingly support requiring insurance to cover birth control and making sure all women have coverage for routine medical care like mammograms and pap smears – even if they don't have health insurance.

REQUIRE COVERAGE FOR WOMEN'S ROUTINE MEDICAL CARE



REQUIRE COVERAGE OF BIRTH CONTROL

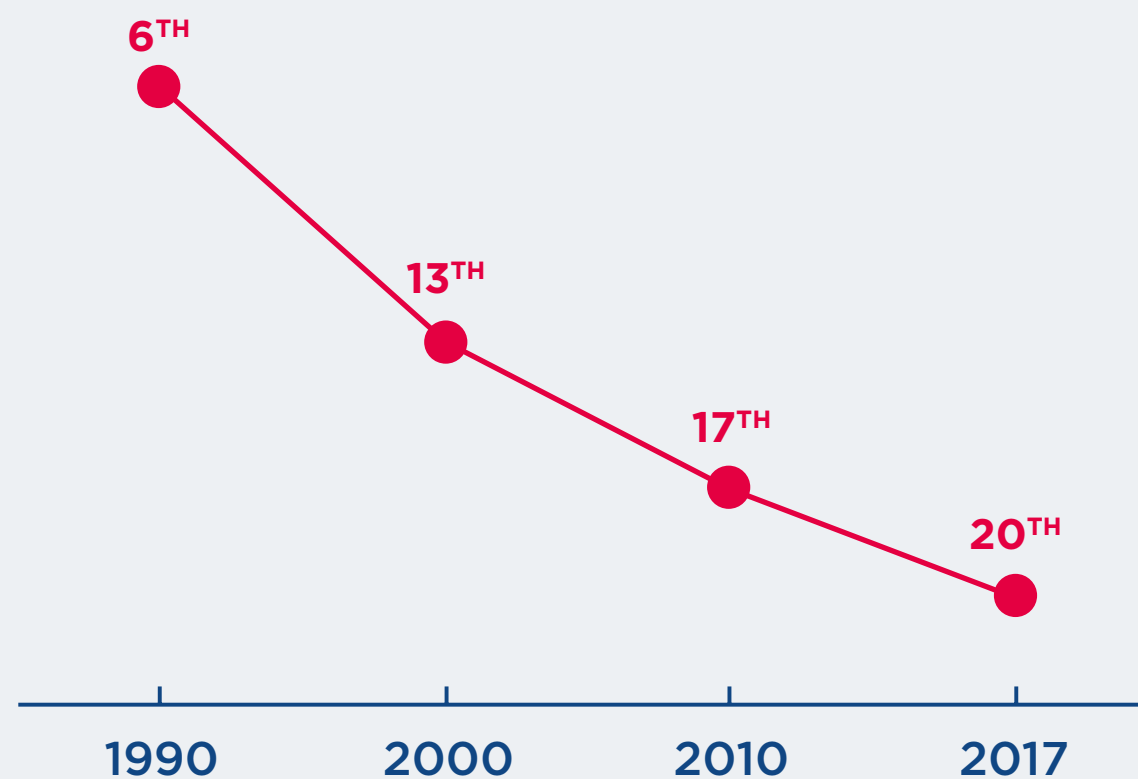


OUR GLOBAL COMPETITORS SPEND THREE TIMES MORE SUPPORTING WOMEN – AND IT’S BOOSTING THEIR ECONOMIES

Once a leader, the U.S. now ranks 20 out of 22 advanced economies in prime-age female labor participation.⁴⁴
In 2015, other OECD members spent more than three times more subsidizing family benefits (as a share of GDP) than the U.S.⁴⁵



U.S. RANKING FOR LABOR FORCE PARTICIPATION RATE, 1990-2017^{46, 47}



WOMEN'S LABOR FORCE PARTICIPATION RATE⁴⁹

U.S. = 66.2%
CANADA = 74%



The reason Canadian women are much more likely to be in the workforce than their U.S. counterparts comes down to three decades of public policies and business incentives.⁴⁸



- BETH ANN BOVINO
S&P GLOBAL

“While Canada began adjusting public policies and business incentives over three decades ago, the U.S. is just recently considering solutions, and these initiatives seem far from implementation.”

— Citi GPS,
Women in the Economy II
(November, 2017)



“If the U.S. expands women-friendly policies to the level of other European countries, the women’s labor force participation rate could reach 82.0%.”⁵⁰

— Blau & Kahn,
National Bureau of
Economic Research (2013)

OHIO BUSINESS LEADERS SUPPORT ACCESS TO REPRODUCTIVE HEALTH CARE

Dear Elected Officials,

Here’s what business leaders know: The freedom to plan our futures — including if and when to have children — is key to a woman’s professional and personal success. Without robust contributions from more than half the U.S. population, our workforce grinds to a halt — and so does economic growth.

Current U.S. policies pose a threat to the country’s economy and hurt national productivity. After decades of headway, gender equity has stalled. Even as women earn more college degrees, men earn more money. Women’s workforce participation in our country is almost dead last —ranking 20th — among 22 advanced global economies.

If we advanced policies that help women participate in the workforce at the rate men do, the U.S. economy would grow by an additional \$1 trillion each year.

Instead of limiting access to women’s health care, public officials should support policies that allow working women to thrive. Protecting and expanding reproductive health care can drive economic growth. Our families will be more stable, our businesses more productive, and our workforce stronger.

MORE THAN 200 OHIO BUSINESS LEADERS SIGNED THIS STATEMENT, INCLUDING:

Andrea Doty, Cincinnati	Debra Dawson, Springfield	Judith A. Koch, Cincinnati	Mooydeen Frees, Cincinnati
Andrew Henderson, Hudson	DeLores Nolan, Hillsboro	Kamal Kumbhani, Dayton	Nancy Dolman, Oregon
Angela Miller, Brecksville	Diana Klueter, Toledo	Karen Balogh, Cleveland	Nancy Hornyak, Columbus
Annick Richardson, Dayton	Diana Lewis, Springfield	Karen Brady, Avon	Nancy Peacock, Medina
Annmarie Morrow, Oxford	Diane Hanas, Conneaut	Karen Musketnuss, Westerville	Nancy Hetrick, Norwalk
Arlene Opoka, Maumee	Diane Varner, Windham	Karen Keller, Columbus	Nelson Dowler, Stow
Barbara Olson, Monroe	Diane Murray, Cincinnati	Karla Lortz, Delaware	Pam Fubler, Akron
Barbara Fanello, Mansfield	Diane Miley, Troy	Kathi Stowe, Hilliard	Pat Pollard, Galloway
Barbara Sapp, Hilliard	Donna Throckmorton, Ashtabula	Kathie POWER, Wadsworth	Patricia Blochowiak, Cleveland
Barry Schwartz, Cincinnati	Donna Blankenship, Dayton	Kathy Chuparkoff, Cleveland	Patricia Gutwein, Cleveland
Beth Vollmar, Toledo	Donna Levine, Cincinnati	Kathy Jones, Dayton	Patricia Malin, Cincinnati
Betty Palmer, Zanesville	Elizabeth Jones, Loveland	Kathy Piller, Cincinnati	Patricia Peter, North Ridgeville
Betty Jacobs, Akron	Elizabeth Chapple, Aurora	Katie Dresbach, Sheffield Lake	Patricia Brown, Munroe Falls
Bill Dresbach, Sheffield Lake	Ethan Kirchner, Fayetteville	Kelvin Parker, Toledo	Patti Haney, Fairfield
Bonnie Bogdan, Perrysville	Faye Jaeger, Cincinnati	Kenneth Amburgey, Sugar Grove	Paulette Capperis, Cleveland
Bonnie Bender, Salem	Frances Drosenos, Cuyahoga Falls	Kenneth Trescott, Canton	Rebecca Mosher, Columbus
Brad Anderson, Lancaster	Garry Still, Shreve	Kevin Davis, Cleveland	Ricki Iannitti, Hamilton
Carlyn Akexander, Cleveland	Gary Cartwright, Millfield	L. Fare, Sidney	Robert March, Warren
Carol Muntz, Cincinnati	Gary Boska, Cleveland	Lawrence Rezash, Miamisburg	Robert Krulich, Eastlake
Carol Darst, Springfield	Gayle Valenccheck, Cleveland	Leslie Switalski, Brecksville	Ron Linker, Millfield
Carol Becker, Marion	Gina Bates, Apple Creek	Linda Basham, Columbus	Roxie Weaver, Franklin
Carol Davis, Plain City	Ginny Jones, Mentor	Linda Purkey, Franklin	Ruth Loya, Hinckley
Carole Louy, Waterville	Gloria Villarreal, Toledo	Lisa Witham, Mentor on the Lake	Sandra Weatherspoon, Fremont
Carole Koerper, Toledo	Gregory Gifford, Lucasville	Lowell Palm, Washington Court House	Sandra Scanlon, Lockbourne
Carolyn Horvath, Cleveland	Harleen Moorhouse, Berea	Lynda Hicks, Fairborn	Sharon Beltz, Hamilton
Carolyn Bivens, Cincinnati	Heather Peacock, Eaton	Mala Payton, Dover	Sharon Moscato, Logan
Catherine Rogers, Nashport	Heather Hettick, Creston	Marcia Rock, Englewood	Sheila Kohls, Maineville
Catherine Poling, Columbus	Helen Geiger, Louisville	Margaret Bauer, Miamisburg	Shirley Osborn, Bryan
Catherine Whitright, Chardon	Herbert Larson, Cleveland	Margaret Schubbe, Powell	Steve Rusk, Van Wert
Cathy Hendrick, Akron	Hope Metzler, Warren	Marge Fear, Cleveland	Sue Kats, Dayton
Charlotte Bruhn, Oxford	Icy Williams, Cincinnati	Marilyn Swope, Zanesville	Susan Steck, Cleveland
Cheryl Bennett, Toledo	Isaac Williams, Clayton	Marjorie Castanien, Defiance	Suzanne Patzer, Columbus
Cheryl Mick, Newton Falls	James Stevens, Columbus	Marjorie Ray, Columbus	Swami Kavyo, Cleveland
Christine Harrison, Austinburg	Janet Czerwonko, Madison	Martha Rodriguez, Dayton	Tammy Jarvis Kelley, Proctorville
Christopher Stimson, Akron	Janice Wilfing, Springfield	Marva Beaver, Urbana	Teny Bannick, Athens
Cinda Glenn, Cincinnati	Jean Hanson, Avon	Mary Thoma, Oakwood	Teresa Summers, Columbus
Claudette Beal, Cortland	Jennie Wiseman, Coshocton	Mary Cheers, Dayton	Thomas Baldeschwiler, Newark
Connie Kaiserkendall, Springfield	Jenny Hoffman, Columbus	Mary Nitecki, Republic	Tom Leonhardt, Cleveland
Craig Ballweg, Saint Marys	Jill Langel, Columbus	Melanie Garner, Cincinnati	Vicki Macina, Sandusky
Danajean Cicerchi, Westlake	John Davis, Ada	Michael Ahern, Chesterland	Virginia Wasserman, Mount Gilead
Danny Schweighart, Winchester	JoRita Fox, Toledo	Michael Bethards, Newark	Wyckliffe Howland, Canton
Deboarah Wagoner, Chillicothe	Joyce Roy, Bridgeport	Michele Cole, Akron	Yvonne Young, Dayton
Debra Ouellette, Columbus	Joyce Mandel, Beachwood	Michele-Marie Merritt, Cincinnati	

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For more resources on this topic see:

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An overhead, high-angle photograph of three business professionals (two women and one man) sitting around a conference table. They are all looking down at documents or laptops, appearing to be in a collaborative meeting. The image is monochromatic with a dark blue tint. The text and logo are overlaid in white.

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