6/13/97

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Los Angeles Times

March 16, 1990, Friday, Home Edition

SECTION: View; Part E; Page 8; Column 1; View Desk

LENGTH: 1956 words

HEADLINE: THE LEAGUE TURNS 70: WHERE TO NOW?; POLITICS: THE LEAGUE OF WOMEN VOTERS FACES DWINDLING FUNDS AND DECLINING MEMBERSHIP. BUT THE PUBLIC STILL HOLDS THE STAUNCHLY NONPARTISAN GROUP IN HIGH ESTEEM.

BYLINE: By KATHLEEN HENDRIX, TIMES STAFF WRITER

BODY:

In February, 1920, with ratification of the 19th Amendment just months away, suffragist Carrie Chapman Catt founded the League of Women Voters of the United States. Faced with a newly enfranchised group of 20 million women who had been told it was unladylike to vote, the national nonpartisan league dedicated itself to eradicating that notion and educating women about the issues and their new responsibilities.

Seventy years later, with membership and funds declining, the league is still working hard to get out the vote, influence government policy and promote participation in the political process.

But in an age of glitz, celebrity, short attention spans and sound-bite campaigning, the league is seldom in the limelight. Its loyal members seem to see themselves, by choice, as a backstage organization out to preserve the democratic process. They know the league has a visibility problem, that it has a reputation for doing drudge work, that it is described in rather unglamorous terms: solid, stalwart, dedicated, naive, boring.

Can such an organization expect to be around for its 80th birthday in the year 2000?

This year, members of the Los Angeles League, which was also founded in 1920, will be celebrating and soul-searching. There is an anniversary brunch this weekend, a fund-raiser in the fall and, shortly, a letter that league president Lois Saffian will be sending to past presidents, asking, "Where do we go from here?"

"We're facing a challenge right now as a volunteer organization," Saffian said recently at the league's offices in the Mid-Wilshire area. "How are we going to

continue the program we're known for with diminishing resources? . . . We have an important purpose that is never going to go away. What can we do to live up to that purpose?"

Said Paula Menkin, a member of the Los Angeles unit since 1946 and president from 1953 to 1955: "There's nobody else who does these things. To me, the fact it's not glamorous does not mean it's not exciting. It is exciting. I've now spent close to 50 years being excited by the issues. . . . Who else sits at city council meetings and watchdogs things for citizens? Nobody else would study the state Constitution, the city and county charters. These are the nuts and bolts of government."

But hard work alone will not ensure its future.

"I am both confident and worried," Saffian said. "The need is always there. By definition, democracy means government open to change by people, but people have got to know how to do it. People who want to keep (democracy) going gravitate toward the league. "

The national and local organizations have always been strapped for money, Saffian said, and nothing has changed.

"We're not terribly sophisticated in raising money," she said. "We're so focused on accomplishments and issues, we've had a hard time to get members to support us. They'll say, 'We're not here to raise money.' "

The diminishing resources that most concern Saffian are people -- the men and women who do the work (the league has admitted men since 1974). Los Angeles membership is 940, down from about 1,200 when Saffian took over the presidency three years ago. (At its peak, membership was about 1,600.)

Paradoxically, some observers say that the league has never been so powerful. One political consultant, Steven M. Glazer, said that invariably public opinion polls give the league one of the highest credibility ratings of any organization.

"As a result, they're being catered to by Republicans and Democrats," Glazer said of the league, which, for example, this year is backing ballot measures supporting a largely Republican-backed reapportionment initiative, bipartisan state and local ethics reform measures and a transportation ballot measure led by Gov. George Deukmejian.

"That is enormous clout to have. I don't even think they recognize the extent of it, but it's recognized by other insiders. They have this white hat image. They seem like these little mice at times, but they're the mice that roar."

Traditionally, league members have been educated, middle-class homemakers who joined in an era when they were expected not to work for money.

Ann Lane, a fire commissioner for the city for the past 13 years, joined the league in 1953.

"We had children, and we had to get out of the house to talk of something other than diapers," she said. "It was intellectually stimulating, and there were not a lot of other opportunities."

Members did and still do put in vast amounts of time studying issues, analyzing materials, monitoring governmental meetings, writing reports, helping to draft legislation, lobbying and speaking to groups on various issues.

The organization is frequently described as a leadership training ground for future public life, and the Los Angeles league is proud of members like former City Council President Pat Russell and Councilwoman Joy Picus. The league is "the single most important influence in my life that made me go into public life," Picus said recently.

"It was a career," Lane said. "I put in about 25 hours a week."

But few women are willing or able to do that kind of work any more. They are working full-time or are unwilling to perform such skilled labor for no pay -- or they prefer single-issue causes because the results are more tangible and the process quicker.

The league has always prided itself on being a multi-issue organization. In the early years league members nationwide supported collective bargaining, child labor laws, minimum wage legislation, and federal aid for maternal and child care programs. They fought the spoils system and promoted the merit system in government employment, backed Social Security, and discouraged isolationism.

Since the 1950s the league has been at the forefront of many environmental issues. League members worked for civil rights, especially through voter registration, and, in Los Angeles, supported school desegregation and busing.

In addition, the league supports the equal rights amendment and takes a pro-choice position in the abortion debate.

But voting and governmental processes have been a primary focus, and last year the national league decided to scale down, declaring it could no longer be all things to all people. Its priorities are public campaign financing and voter registration and turnout. The league has worked for passage of the national voter registration act, commonly called the "motor voter" act, which includes provisions enabling people to register when they get their driver's licenses. It passed the House in February.

The Los Angeles League appears to be headed in a similar direction.

"Locally, we're very proud of our effort to get high school students registered," Saffian said of their on-campus efforts.

Said lawyer Geoff Cowan, chairman of the city's ethics code commission: "I think they're needed now more than ever. They do the most thorough job in analyzing things. The support of the league on the city ethics (and campaign finance) ballot measure is so important. People tend to say, 'If the league supports it, it must be OK.' "

That is a frequently heard description of the league and one that may become controversial in California in the coming months. The state league has endorsed -- and helped write -- Proposition 119, a reapportionment measure that would redraw state legislative districts, sponsored by San Mateo County Supervisor Tom Huening, who is a Republican.

"Sometimes the state takes a position (that) local can't support," Saffian said in reference to the measure. "We're taking a no-action position.

"We're not a rubber-stamp organization . . . but it's important that we have the discipline not to undermine (the state league) ."

Selma Calnan, a member of the East San Gabriel Valley League, was one of five statewide members who co-wrote the reapportionment study the league undertook in 1987. But she opposes the state league's position and said of the restriction on opposition from a local unit, such as Los Angeles, "It's ridiculous."

Although Calnan said she is indebted to the league, she nonetheless has some harsh criticisms of the organization and said the reapportionment issue points up a fundamental weakness that goes back to its founding.

"Here they were, all innocent, feeling so righteous," she said of suffragists in 1920. "They dove into partisan politics and got skunked. They retreated into the hills, and remained above it all. And that's where they are today, above the partisan battle.

"They have a fastidious dislike for partisan politics and a great sense of certitude about their rightness. I'm probably that way, too, I guess. But they confirm their prejudices by only talking to each other."

As a result, she said, the league is strong in its knowledge of governmental process but weak on political savvy. That lack of savvy, she said, led the state league in the late 1960s to support deinstitutionalizing the mentally ill.

"We were so naive. We thought the local governments would pick up the tab" and fund local programs for those released. "I feel personally ashamed of that."

Hearing Calnan's charges of naivete regarding reapportionment, Joy Picus said: "In a sense, much of what she says is true. The league is naive. But that's important to their image.

"I commend the L.A. League for standing apart. It shows remarkable perception not to be part of that. It's significant that the major league in the state has done so."

Where, then, is the nonpartisan league's strength?

"Overall, I think it's a lot of wasted effort," said political consultant Joe Cerrell, of Los Angeles-based Cerrell Associates Inc. Stressing he was more aware of league activities on a national level, he said it might be more effective locally.

"But nationally they're a nice neuter group. I think they mean well, but their laundry list of accomplishments -- I don't think it's a very long list. They do the presidential debates. Whoopee."

The league, often a sponsor of local and primary debates, began sponsoring presidential debates in 1976, but in a struggle for control with the political parties in the 1988 election campaign, withdrew altogether.

"We live in a partisan world relative to state and national government," Cerrell said. "I would like to harness all that energy into getting good people elected to office."

Saffian took Cerrell's criticisms to heart. "It's really difficult to say where the league has been effective. It's immeasurable, except where the league has taken the leadership, like the motor voter act."

Cerrell's criticism, she said, may relate to "our need to publicize ourselves in a more sophisticated way. Maybe we've been like the nuns, thinking God will take care of us because we're so good and righteous. We need a good marketing plan. You wouldn't start a business without one today. We never did that." (Saffian said a public relations agency has agreed to take the L.A. League on as a pro bono client and will design a public relations campaign for the organization.)

If it is still around, what will the League look like in 2000?

"I hope we're all around in the year 2000," Saffian said, mentioning the precarious state of the human race and the planet.

Reflecting on the massive changes in so much of the world, she said the United States, in a crisis on so many fronts -- education, the environment, homelessness, the national debt -- probably will go through some major changes too, although not through a classic revolution.

"I think it would be playing its historic role, but in a probably different political environment. I hope that doesn't sound too radical," she said. "I have to believe it's not all a waste of time. And if enough of us felt that way. . . ."

GRAPHIC: Photo, Chapman Catt, league founder ; Photo, Carrie Chapman Catt leads a suffrage parade on streets of New York in 1917. League of Women Voters; Photo, League President Lois Saffian is "both confident and worried" about the future. TAMMY LECHNER / Los Angeles Times

LANGUAGE: ENGLISH

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The National Journal

January 21, 1989

SECTION: WASHINGTON UPDATE; Policy and Politics in Brief; Vol. 21, No. 3; Pg. 139

LENGTH: 793 words

HEADLINE: Women Voters: Still a Major League?

BYLINE: By Douglas L. Belden

BODY:

The League of Women Voters -- beset by declining membership and financial support, its debates spurned by presidential and congressional candidates last year -- is plotting a comeback. Spurred by the rock-bottom turnout on Election Day, the league plans to lead a public discussion -- inside the Capital Beltway and out in grass-roots country -- on how to make political campaigns more open to voters.

The league has "always been a multi-issue organization," said executive director Grant P. Thompson, supporting "long-term fundamental issues, the kinds of things that come back every 10 years or so." (The 69-year-old league, which until 1974 did not allow men to be full members, has a membership that is 7 per cent male. Thompson is the league's first male executive director.)

A long-term issue for the Washington-based league has been how to lure more people to the polls. Accordingly, in the 100th Congress, the group was a strong supporter of the Universal Voter Registration Act. The league also pressed for reduced political action committee clout, lobbying for a bill co-sponsored by Democratic Sens. David L. Boren of Oklahoma and Robert C. Byrd of West Virginia that would set spending limits and provide for public financing of congressional elections.

League president Nancy M. Neuman said her group would pursue an "insideand outside" strategy. In league parlance, "inside" means a conference, most likely to be held in Washington early this year, to which presidential (and perhaps some congressional) campaign managers, pollsters and academics will be invited to discuss possible reforms. The league will subsequently present either specific recommendations or an outline of options to Congress, President Bush and the news media.

Then, later this year or in early 1990, comes the "outside" phase. Many of the league's 1,150 local chapters are to sponsor "town meetings" in churches, schools and

community centers. To pay for these gatherings, chapters will seek contributions from local foundations and corporations, said league press secretary William H. Woodwell.

These efforts to stir the pot of campaign reform -- and give the league a higher public and political profile -- come at a somewhat awkward time for the group. Since 1969, its membership has declined from a high of 157,000 to the current 107,000. Membership was greatly depleted in the mid-to-late '70s, as more and more women began entering the work force, devoting less time to volunteer activities and civic clubs. Last year, league membership increased for the first time since 1982, but that jump was primarily a result of national direct-mail appeals, not recruiting drives by local chapters.

The league's over-all finances have also been declining in the past two years. The national legislative arm of the league recorded a deficit of $ 55,000 in 1986. By 1987, the tide of red ink had reached $ 223,000, though the educational arm -- a smaller unit of the league that sponsors debates -- broke even in 1986-87. According to Neuman, the deficit reflects not only a drop in revenue and contributions from corporations and foundations during the past few years but also increased expenditures in the national office on computers and accounting systems.

And at both the national and state levels, the league has been having trouble signing up candidates to participate in its debates. Negotiations with the presidential contenders broke down over league objections to the format proposed by the campaign managers. In pulling out, the league broke a tradition of sponsoring at least two presidential debates in each election year since 1976. At the same time, there was more of an effort by congressional candidates to "sponsor debates on their own or with more submissive sponsors," Woodwell said. Of 67 league congressional debates scheduled at the state level last year, 22 had to be canceled; five of the cancellations involved disputes over format, he said.

For all its financial and membership woes, the league still has a network of local organizations "in a class by itself," said Marsha Adler, a People for the American Way legislative representative. Sonia R. Jarvis, executive director of the National Coalition on Black Voter Participation, called the league "one of the strongest players in the [voter registration] game" at the local level.

And the league still has considerable lobbying clout. It is "not a lead group, but a firm supporter" of campaign reform legislation, according to Kathleen D. Sheekey, Common Cause's legislative director. The league's efforts, said Greg D. Kubiak, Boren's chief legislative assistant, have brought "a strong aspect of legitimacy" to campaign reform legislation.

GRAPHIC: Picture, The League of Women Voters wants to increase voter turnout on Election Day. Richard A. Bloom

HEADLINE: WOMEN VOTERS LEAGUE BACKS HEALTH REFORM

BODY:

After studying the issues, last January, the League of Women Voters of Arizona and other Leagues all over the United States, took a consensus of the membership as to what form they wished health care to take.

The League of Women Voters national consensus was that a basic level of quality health care at an affordable cost should be available to all U.S. residents and that the plan should include equitable distribution of services, efficient and economical delivery of care, advancement of medical research and technology and a reasonable total national expenditure level for health care.

League members felt that the new system should permit individuals to addto their basic services through purchase of insurance policies. The membership nationally was willing to pay a reasonable amount of additional taxes for universal health care.

Much of the health-care plan which was outlined by the White House is in synch with the League of Women Voters' position. Preventive care and health promotion and education are part of the package, as we'd hoped. So are prenatal and reproductive health care, which League members named as priorities.

It's our hope that the people of Arizona and our congressional representatives will enter into a bipartisan effort to provide all Americans with a more humane health-care system. Let's use the president's plan as an effective blueprint for reform.
- Joyce M. Forney
President
League of Women Voters, Arizona
Scottsdale

LANGUAGE: ENGLISH

LOAD-DATE-MDC: October 26, 1993

SECTION: Vol. 210 ; No. 10 ; Pg. 8; ISSN: 0028-6583

LENGTH:IA 20500

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BODY:

You've probably seen the T.V. ads on health care reform sponsored by the League of Women Voters Education Fund and the Henry J. Kaiser Family Foundation--they're the ones that righteously proclaim, "We're not backing any particular plan. We want decisions to be based on facts." There's even a toll-free number ("get the facts 1-800-facts-94"). Unfortunately the first "fact" publicized by the $ 4.1 million campaign is spurious. "A lot of people think that most uninsured Americans are poor and unemployed," intones the narrator. "In fact, 84 percent of Americans who lack health insurance are in families that work hard and pay taxes.... That's eight out of ten of us, and that's a fact." Wrong, on several counts. First, as George Will has pointed out, the "84 percent" is not "eight out of ten of us," but eight out of ten of the minority of "us" who are uninsured. Second, the statistics on which the ad is based don't show that 84 percent of uninsured families work "hard." In fact, the "84 percent" figure includes part-time and part-year workers along with full-time, full-year workers. And the statistics say nothing at all about paying taxes. They apparently just made that part up. Dr. Robert Blendon, the Harvard researcher cited by the League of Women Voters as an adviser, concedes that the ads contain a "mistake." A more accurate spot would say that about half (52.4 percent) of the uninsured live in families with a full-time, full-year worker. That number is bad enough. Why exaggerate?

IAC-NUMBER: IAC 14869076

IAC-CLASS: Magazine

LANGUAGE: ENGLISH

LOAD-DATE-MDC: March 28, 1994

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THE ARIZONA REPUBLIC

October 16, 1993 Saturday, Final Chaser

SECTION: Editorial/Opinion; Pg. B7

LENGTH: 253 words

League of Women Voters Education Fund

Straight Facts on Health Reform

The Henry J. Kaiser Family Foundation

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To Mike Lux | From Carla Bundy

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9:30 am EST, January 31, 1994

For more information, contact
Matt James, Kaiser, 202-347-5270
Carla Bundy or Susan Solomon, LWVEF,
202-429-1965 ext. 315 or 290

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KAISER FAMILY FOUNDATION AND LEAGUE OF WOMEN VOTERS EDUCATION FUND ANNOUNCE NATIONAL PUBLIC EDUCATION INITIATIVE ON HEALTH REFORM

Campaign Will Feature TV and Print Messages and 60 Nonpartisan Town Meetings With Elected Officials

Harvard University/Johns Hopkins to Provide Research for Campaign

Washington, DC -- The Henry J. Kaiser Family Foundation (KFF) and the League of Women Voters Education Fund (LWVEF) today announced a national campaign to inform the American people about key issues in health reform and to give citizens an opportunity to participate in the debate.

The initiative, called "Straight Facts on Health Reform," consists of two components that will be carried out concurrently: a national media campaign with paid messages airing on TV news and public affairs shows and placed in national newspapers and newsweeklies; and a series of 60 town meetings with elected officials broadcast on TV or radio in communities across the country. The budget for the initial phase of the campaign announced today is $4.1 million.

An 800 number will be used to provide the public with three in-depth special reports: "Uninsured in America," "Critical Choices in Health Reform," and "Health Reform Legislation: A Comparison of Major Proposals."

Both the LWVEF and the KFF believe that citizens should participate more fully in the health reform debate.

"This is the biggest health policy decision we will make in this generation, and it is too important to leave to the interest groups and spin doctors," said Drew E. Altman, president of the Kaiser Family Foundation. "Don't look for Harry and Louise, don't expect glitz or messages designed to pull at the heartstrings. We will provide basic information that people need, backed up by the best available facts and research."

"On this most personal of issues, it is vitally important that the American public hears where their elected leaders stand," said Becky Cain, chair of the League of Women Voters Education Fund. "More importantly, elected officials must hear where their constituents stand. All too often the debate over major legislation is left to the special interests, and the voice of the American people is lost. We don't want to see that happen with health reform."

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Research assistance provided by
The Harvard University School of Public Health and The Johns Hopkins University School of Hygiene and Public Health

Straight Facts on Health Reform/2

THE MEDIA CAMPAIGN: "The National Health Reform Quiz" -- The first messages in the national television and print campaign will focus on Americans without health insurance and will address the size and characteristics of the uninsured population and the consequences of being without health insurance. They will provide basic information to help people decide where they stand on the debate over health reform. The Kaiser/Harvard/Princeton Survey of Public Knowledge of Health Reform (10/19/93) showed that there are misconceptions about who is without health insurance. Survey respondents thought most uninsured Americans were poor, unemployed and elderly. In reality, more than two thirds live above the poverty line, almost none are elderly, and more than eight out of ten are workers and their families.

"We've found that the public is not well-informed about the critical facts driving health reform," said Robert J. Blendon of the Harvard School of Public Health and a senior program consultant to the foundation. "In the absence of accurate information, Americans are susceptible to being influenced by advertising that distorts the issues underlying this debate."

The Kaiser/Harvard/Princeton surveys of public knowledge and understanding will continue throughout the campaign. The next survey is scheduled for late February.

THE TOWN MEETINGS: "Citizens Voice for Citizens Choice" -- The other half of the initiative consists of 60 town meetings with elected officials, that will be organized to facilitate broadcast coverage. The Kaiser/Harvard/Princeton Survey of Public Knowledge found that the public is not generally familiar with either their Senators' or Representative's positions on health reform, or the key elements of the major reform proposals.

Each forum will encourage citizen participation in the health reform debate by presenting and debating alternative proposals, and helping constituents to understand their elected representatives' positions on health reform. Each meeting will be sponsored by the League of Women Voters Education Fund, the Kaiser Family Foundation, the local League of Women Voters and an area television or radio station, which will provide broadcast coverage.

The meetings will consist of two parts: general education on issues and proposals, and the questioning of members of the House and Senate by citizens and reporters. All meetings will be nonpartisan and elected officials with divergent views on health reform will be invited to attend.

The project has been endorsed by the Radio and Television News Directors Foundation (RTNDF) and is budgeted at approximately $600,000. Journalists who wish to attend or cover one or more of the town meetings may contact the LWVEF or KFF.

THE PARTNERS: The Kaiser Family Foundation -- The Kaiser Family Foundation is an independent health care philanthropy and is not associated with Kaiser Permanente or Kaiser Industries.

This project is part of the Kaiser Health Reform Project, an effort to provide the best available research and analysis on key issues in the health reform debate to policymakers, the media and the public. Throughout the health reform debate, the Kaiser Health Reform Project will issue targeted studies, hold media and policymaker briefings, facilitate public forums with elected officials, and track the public's understanding of issues related to health reform.

League of Women Voters Education Fund -- The League of Women Voters Education Fund's mission is to increase public understanding of major public policy issues and to encourage citizen participation in government. In pursuit of these goals, the LWVEF conducts research and provides a variety of educational services, including publications and public programs.

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The LWVEF works with many partners -- foremost among them, the more than 1,100 state and local Leagues of Women Voters throughout the U.S. Within their own communities, Leagues have established a reputation for providing accessible, balanced and easily understood programs and materials people can use to learn about current public policy issues.

Harvard School of Public Health -- The Harvard University School of Public Health program on Public Opinion and Health Care, under the direction of Robert J. Blendon, has provided research assistance on public opinion on health reform and the uninsured, and advice on design of media messages. Robert Blendon, chairman of the Department of Health Policy and Management, is a senior program consultant to the Foundation.

Johns Hopkins University School of Hygiene and Public Health -- The Johns Hopkins School of Hygiene and Public Health has provided research assistance for the campaign, analyses of the uninsured population, analyses of the major health reform proposals and advice on the design of media messages.

- 30 -

PROJECT SUMMARY
STRAIGHT FACTS ON HEALTH REFORM

A joint project of the League of Women Voters Education Fund (LWVEF) and the Kaiser Family Foundation (KFF).

Research and technical assistance provided by the Harvard University School of Public Health and the Johns Hopkins University School of Hygiene and Public Health.

ANNOUNCEMENT DATE: January 31, 1994 (embargoed until that time)

OBJECTIVES: To provide a neutral source of public information and education on the issues and alternative proposals in health reform. To give citizens an opportunity to participate in the debate.

The campaign will not back any particular health reform plan, approach, or point of view.

WHAT THE INITIATIVE WILL CONSIST OF:

1) A national television and print public information campaign on key issues in health reform. Paid messages to air on network television and run in newspapers and news weeklies beginning January 31, 1994.

2) A series of approximately 60 town meetings on health reform with elected officials.

The budget for this initial phase of the campaign is $4.1 million. Other components of the initiative--such as a series of nationally televised debates on health reform--may be added.

THE PROJECTS:

The Media Campaign

- A national television and print campaign with messages airing on news and public affairs shows and placed in major newspapers and news weeklies.
- First messages called "The National Health Reform Quiz" to focus on the problem of the uninsured and will explain how big the problem is, who is uninsured, and what the consequences of being without insurance are.
- The objective of this project is to help assure that the debate over universal coverage is based on the best available facts and research, rather than misunderstandings and misinformation.
- An 800 number will be used to provide three special reports, "Uninsured in America," "Critical Choices in Health Reform," and "Health Reform Legislation: A Comparison of Major Proposals."
- The Harvard School of Public Health and KFF will conduct ongoing surveys of public knowledge and understanding to assess the need for further efforts.

The Town Meetings

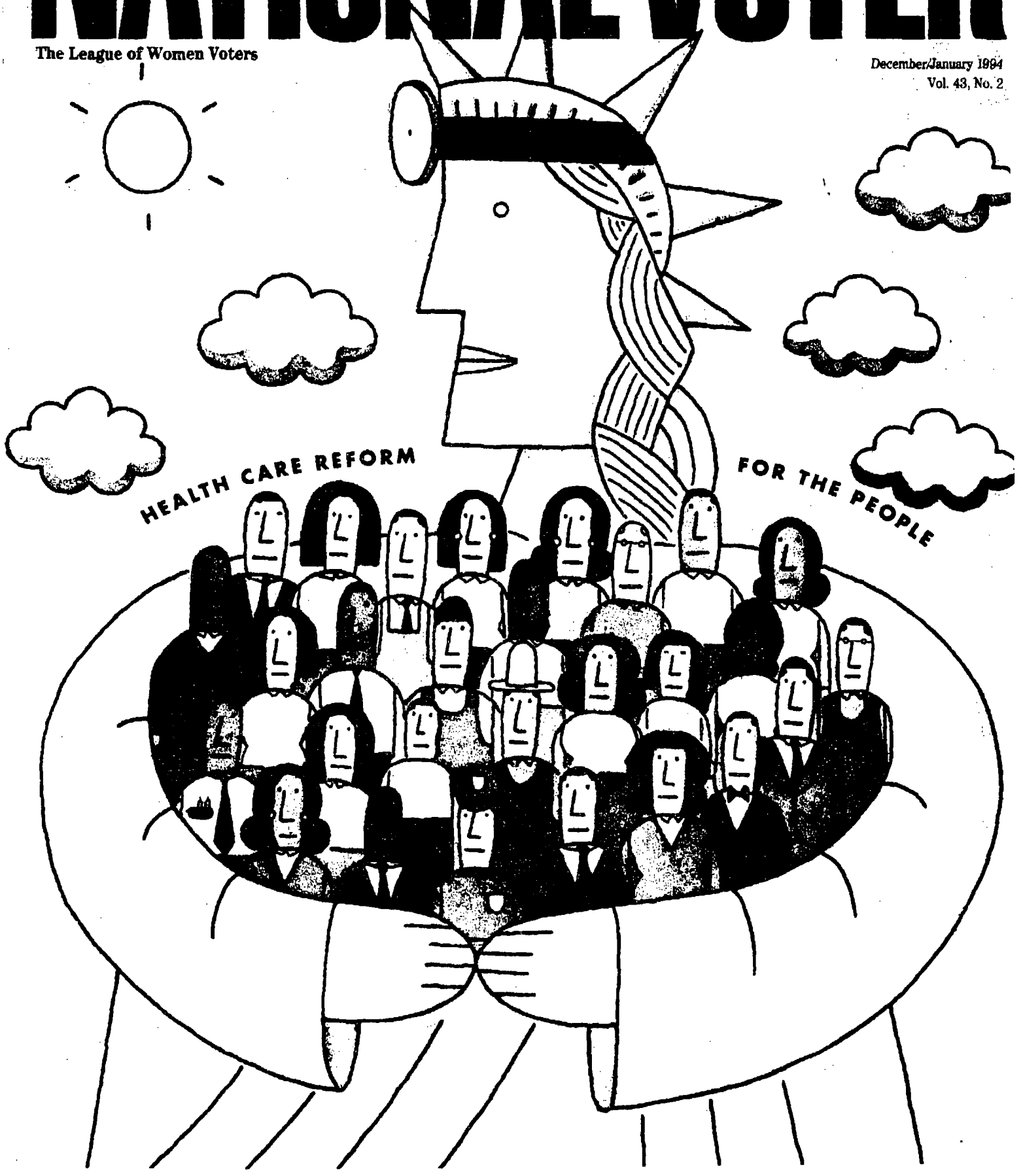
- Approximately 60 town meetings with elected officials organized around media markets across the country. (See attached map)
- The objective is to provide a forum for citizen participation in the health reform debate, to fully present and debate alternative proposals, and to make sure that constituents know their elected officials views on health reform.
- Each meeting will be cosponsored by the LWVEF, KFF, and an area television or radio station which will provide broadcast coverage.
- The meetings will consist of two parts: general education on issues and proposals and the questioning of members of the House and Senate by area reporters and citizens. A video featuring Walter Cronkite excerpted from the PBS documentary "What's Ailing Medicine" will be used during the educational segment. The documentary was supported by the Foundation.
- All meetings will be bipartisan and will be attended by officials with divergent

Voting Rights Threatened Women's Issues Redefined

THE NATIONAL VOTER

The League of Women Voters

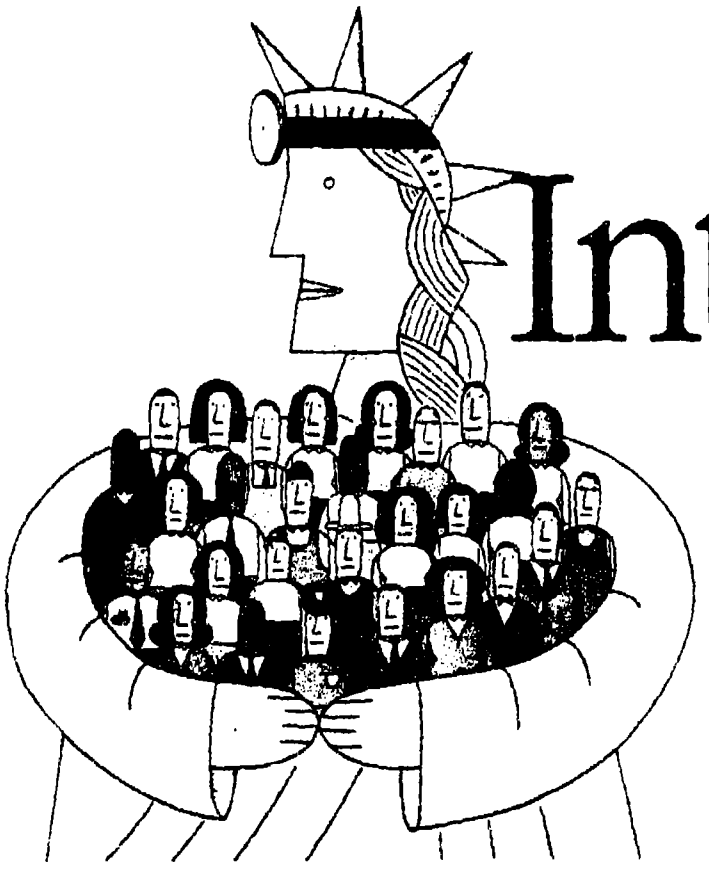
December/January 1994
Vol. 43, No. 2



by Jennifer A. Baratz

In Whose Interest?

Industry and Other Interests Are Drowning Out the Public's Voice in Health Care Reform



Ad Number One: An elderly woman looks somberly at the camera. The caption below her face asks, "Why should I have to choose between buying groceries and buying medicine?" The ad, sponsored by the Pharmaceutical Manufacturers Association (PMA), goes on to say that "No American should have to make that choice. That's why we support health care reform, with coverage for all prescription medicines."

Ad Number Two: "Meet the family nobody will insure," appears boldly atop a photo of a family of three. "Health care reform has become our country's most important public health issue, and the 300,000 member physicians of the American Medical Association (AMA) are determined to bring about change."

As health care reform has moved to the top of the U.S. political agenda, ads such as these have been appearing more and more frequently in newspapers and magazines throughout the country. Part of an aggressive campaign on the part of different health-industry interests to shape their public image and influence public opinion about options for reform, the ads make plain that reform of the United States' health care system is a high-stakes proposition.

With more than $800 billion spent every year on health care in this country, there's a lot riding on reform for doctors, hospitals, drug companies, insurers, medical equipment manufacturers and other interests. Lost amid all the jockeying for dollars and business, however, is the overriding fact that health care reform is a win-or-lose proposition for the American people as well. At stake for citizens is whether we can craft a system that effectively and efficiently meets people's real health care needs.

"Our health care system is failing both our nation's families and its economy," says League of Women Voters President Becky Cain. "Citizens need to speak up and be heard above the special interests or we might be faced with reform in name only—with a health system that only reinforces the inequities and inefficiencies that sparked this whole movement in the first place."

"A New Phenomenon"

Talk of reform is a new phenomenon in the health care industry. "For years, the industry worked to maintain the status quo of the health care system," according to Josh Goldstein of the Center for Responsive Politics, "and industry interests were successful in squashing any public discussion of reform."

That all changed in 1991, when Harris Wofford of Pennsylvania was elected to the U.S. Senate on a platform of national health reform. Wofford's election sent a powerful message to Washington—that the United States' health care system is not working and the American people want it fixed. Since then,

the health industry has changed its approach. "Now that health reform has become a public issue, there's been a shift (among industry interests) from squashing reform to shaping the debate in the way they want it to go," says Goldstein.

The Public Campaign: Ads and Ideas

The mass media can be a powerful tool for influencing public perceptions about policy issues, and the health industry knows it. According to Robert Blendon of the Harvard University School of Public Health, polls indicate that public confidence in health-industry leaders—doctors, insurers, pharmaceutical companies—is at a 25-year low. And so, health interests are spending millions of dollars to recast their public image and to focus the debate on issues that affect them.

Blendon points out, for example, that the industry's high-profile advertising effort has two principal aims. "One of its objectives is image advertising," he says. "The industry has been trying to build up public respect for people in the health care industry so that when they criticize specific things within reform proposals, the public will believe them to be credible. The other goal of the ads is to alert the public that the problems they have now could be even worse under health care reform."

The AMA ads, for example, emphasize the special nature of the doctor/patient relationship—that doctors are looking out for the well-being of their patients—and the importance of maintaining that relationship free of interference. While seemingly altruistic, the message advances the medical profession's interest in fighting off controls over doctors' practice styles or fees.

"The ads are focused on what the industry does to help people," according to Blendon. "They're saying, 'We really care. Trust us more than the politicians. You don't want to trust politicians to make decisions about your health care.'"

The health industry responds that it is merely trying to inform the public about the issues. "As President Clinton has said, this issue will be decided at America's kitchen tables," remarks Richard Coorsh, spokesperson for the Health Insurance Industry of America. "For Americans to make these decisions, they need information from all points of view," Coorsh goes on to say. "We are all entitled to get information to consumers so they can judge the impact of health care reform on them."

> While the League and others stress that universal coverage and cost containment are equally important goals of reform, industry places less emphasis on the more difficult issue of holding down health care spending.

Moreover, as Steve Berchem, assistant vice-president for the Pharmaceutical Manufacturers Association (PMA), points out, industry advertising and other public-relations efforts serve an advocacy purpose as well. "The Hill is influenced by constituents' interests and by what constituents have to say," observes Berchem. "The PMA wants to make sure that its voice is heard in the health reform debate and that the pharmaceutical industry is treated fairly."

To lend substance and added credibility to their advocacy, many industry interests have developed their own reform plans to address the problems of the health care system. In general, the industry proposals stress the importance of guaranteeing health care coverage for every American. But while the League of Women Voters and others stress that universal coverage and cost containment are equally important goals of reform, industry places less emphasis on the more difficult issue of holding down health care spending.

The reason for the industry's focus on expanding health care coverage? Universal health care coverage offers a significant financial benefit to the industry—it would mean reimbursement to doctors and hospitals for care that is now being provided without compensation. Containing the overall costs of the health care system, on the other hand, is likely to mean more government control of the use and purchase of medical technology, of fees paid to physicians, and of many other things that are the industry's bread and butter.

The Private Campaign: Money and People

With health care reform looming on the horizon during the 1991-92 election cycle, health care political action committees (PACs) increased their giving to federal candidates by 36 percent, and insurance PACs upped their ante by 6 percent. That's in addition to the more than $4 million in "soft-money" contributions from the health sector to the political parties, according to a report issued by the Center for Responsive Politics.

Predictably, the top recipients of health care PAC money were members of the House and Senate committees that have jurisdiction over health care legislation. Moreover, the amount that health PACs spend is bound to increase as health reform proposals move through Congress.

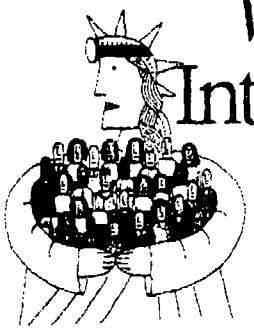
According to Goldstein, this money buys a seat at the table when the decisions about reform are being made. "Everyone agrees there will be some sort of reform," he says, "but the important decisions to be made are not the grand themes for reform but the vital minutiae. Who wins and loses the billions of dollars that are at stake will be determined by sentences in a law that will run more than 1,000 pages long."

Filling candidates' campaign coffers with PAC money is one way to buy influence, but the amount that can be spent is limited by laws governing campaign contributions. There are no limits, however, on what can be spent on "hired guns"—the lobbyists, pollsters and public-relations firms that trumpet their clients' concerns in the public eye and on Capitol Hill.

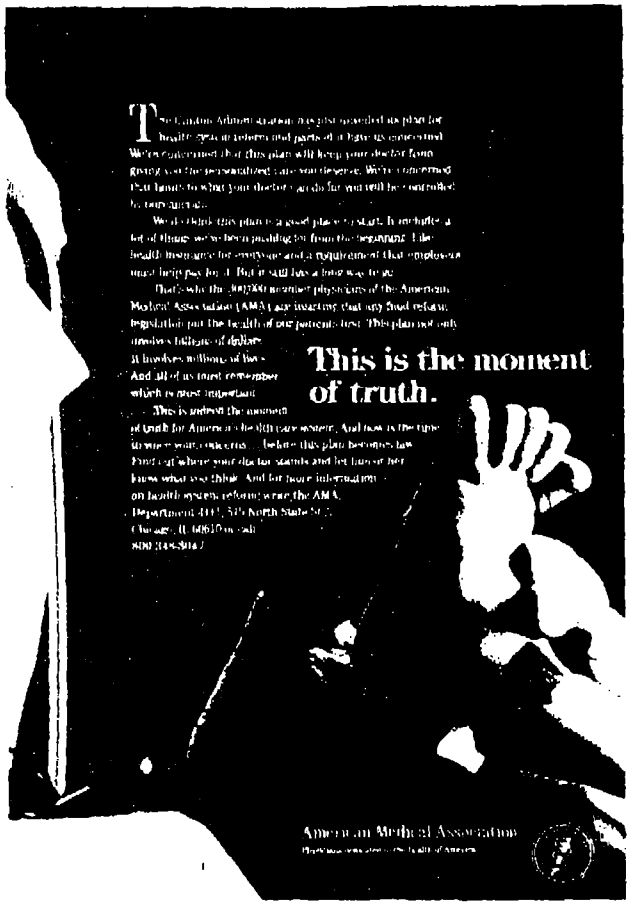
For example, the Federation of American Health Systems (FAHS), a trade group of for-profit hospitals, has hired Patton, Boggs & Blow, one of Washington's largest lobbying firms. In addition, like so many other health interests, the FAHS has joined an industry coalition with a lobbying effort of its own. "If you lose a big fight, you do not want to wake up the morning after and say you did not do everything you possibly could have," Michael Bromberg, executive vice-president of the federation, recently told *The National Journal*.

But industry lobbying is not limited to working with paid lobbyists and public-

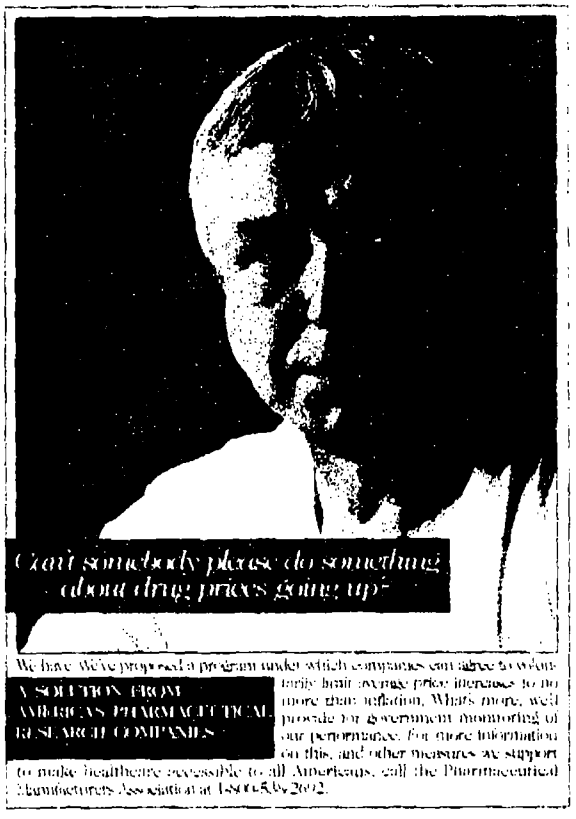
In Whose Interest?



relations consultants. Recognizing the political pressure that the grassroots can exert, many industry groups are calling on their members to make visits to their elected representatives. In March, the American Medical Association organized more than 1,000 doctors from throughout the country and brought them to Washington to meet directly with their members of Congress. All delivered the same message: universalize health care coverage and contain health care costs, but do not touch physician autonomy or salaries. The power of efforts such as this should not be overlooked.



American Medical Association ad says, "We're concerned."



Making sure its voice is heard: A Pharmaceutical Manufacturers Association ad.

"When you talk to people who aren't paid lobbyists, it's always useful," Representative Michael A. Andrews (D TX), a member of the House Ways and Means Committee's Subcommittee on Health, told *The Washington Post* after meeting with a group of doctors from his district. "Any responsible member (of Congress) wants to make sure his constituents have input, that they're being listened to . . . In the political sense, you bet I pay attention."

Recipe for Gridlock

Many people are fearful of what will happen to health reform if the health industry continues its aggressive efforts. With so many interest groups involved, Congress may be unable to pass comprehensive reform that satisfies everybody who's seeking to be heard. "We could end up with gridlock or a watered-down bill that's called health care reform but really isn't," according to Harvard's Blendon.

Moreover, he says, there's disagreement within the industry groups over which is preferable—gridlock or a watered-down bill. "Some organizations want the government to do something, but only at the margins. Some others hope the thing will just die."

And if health care reform does "just die"—or ends up so watered-down that it hardly changes the status quo—it is not just the health industry that will be to blame. Groups from across the political and economic spectrum—including labor unions, big industries, lawyers and small businesses—have been mobilizing their forces and calling in their political chits so that they, too, can have a say in the shape reform takes. The fragmentation that could result from all of these interests wanting to have a say will make comprehensive reform an extremely difficult and arduous process. In trying to please everybody, health reform may end up pleasing no

one at all—and may therefore fail to deliver the very thing the American people say they want and need.

The Importance of Citizen Participation

The one voice that needs to be heard clearly on Capitol Hill is that of the consumer. And while legislators have faced a barrage of lobby visits, phone banks and letter-writing campaigns organized by the special-interest groups, little is being heard so far in congressional offices from the people themselves.

"The silence from the grassroots is deafening," says the League's Becky Cain, "and that leaves the health industry and other interests with the only voices in town. Legislators need the support of their constituents to deliver health reform that's for the people."

In October 1993, the League of Women Voters Education Fund (LWVEF)

How to Get Involved: The Health Care Debate Needs You

To overhaul the U.S. health care system, Congress will have to enact new laws and amend existing ones. These actions—certain to result in winners and losers among the powerful special interests who have a stake in the current health care system—will touch the lives of all U.S. residents. While ordinary people cannot match the special-interest groups in hiring lobbyists and directing PAC contributions into politicians' campaign coffers, citizens need to add their voices to the health care reform debate.

One of the most effective methods of citizen input is for individuals to express their concerns in letters or phone calls to their elected senators and representatives. There is growing evidence that, when constituents speak, Congress listens. And, according to a survey completed in May 1993, a majority of congressional staffers said personal letters from individual constituents carried more weight than mass mailings, telegrams and phone calls.

- **The Subcommittee on Health and Environment** has jurisdiction over health matters. Rayburn House Office Building, Washington, DC 20515, (202) 225-2927. The subcommittee chair is Rep. Henry A. Waxman (D CA) and the ranking Republican member is Rep. Thomas J. Bliley (R VA). Contact: Subcommittee on Health and Environment, 2415 Rayburn House Office Building, Washington, DC 20515, (202) 225-4952.
- **The Senate Labor and Human Resources Committee** has broad jurisdiction over health matters. The chair is Sen. Edward M. Kennedy (D MA); the ranking Republican is Sen. Nancy L. Kassebaum (R KS). Contact: Senate Labor and Human Resources Committee, 428 Dirksen Senate Office Building, Washington, DC 20510, (202) 224-5375.
- **The Senate Finance Committee** has authority over legislation involving taxes and the federal tax system. Moreover, the Finance Committee is responsible for legislation involving Medicaid, Medicare and other health insurance funds such as workers compensation. The chair is Sen. Daniel P. Moynihan (D

FAX TRANSMITTAL

Date: 12/16/93

To: Debbie Fein

From: Ellen Weir

LEAGUE OF WOMEN VOTERS
OF THE UNITED STATES
1730 M Street, NW
Washington, DC 20036
202/429-1965 fax: 202/429-0854

COVER PLUS 9 **PAGES TRANSMITTED**

Other Messages: RE: Article for The National Voter. Here is what I sent to Mike Lux and also the piece that Jason Solomon sent us. Thanks for your help on this.

THE LEAGUE
OF WOMEN VOTERS

THE NATIONAL VOTER
MAGAZINE

November 8, 1993

Mike Lux
Office of Public Liaison
The White House
Washington, DC 20500

Dear Mr. Lux:

I am delighted to follow up our telephone conversation today about a guest article from First Lady Hillary Rodham Clinton for the March/April 1994 issue of *The National Voter*.

As I mentioned, the upcoming *Voter* issue will discuss health care reform--one of the League's priority issues--in a feature article. As we envision it, the piece will examine the White House health care reform proposal and several of the alternative plans, along with background on what the League supports and why. After conducting a three-year study of the financing and delivery of health care in the United States, the League concluded that universal access for U.S. residents to a basic level of quality health care at an affordable cost and stringent containment of health care expenditures are the two critical elements of comprehensive health care reform. The League is supporting the President's plan.

We would be looking to the White house to provide a one-page sidebar covering the principles underlying the President's health reform proposal; the goals of reform and the costs of doing nothing; the importance of citizen participation--in the reform process and in a new health care system; and any related topics. **The copy deadline for the March/April issue is December 13, 1993.**

I am enclosing our guidelines for writers and two recent issues of *The Voter*. You may be interested in the League's comprehensive health care position statement (pages 22-23 of the June/July 1993 issue). Also, our cover story for the December/January 1994 *Voter*--off press today (!)--examines the campaign by industry interests to influence the health reform debate and the need for citizen participation in the dialogue. In the second part of the cover segment, guest authors representing communities with specific health care needs comment on universal access.

Again, thanks for considering our request. I will check in with you next week to follow up. In the meantime, if you have any questions or need additional information, please feel free to contact me or Bill Woodwell, *Voter* consulting editor, at 202/429-1965.

Sincerely,

Ellen Weir
Associate Editor

1730 M Street, N.W.
Washington, D.C. 20036
202/429-1965
FAX: 202/429-0854

THE LEAGUE OF WOMEN VOTERS

THE NATIONAL VOTER
MAGAZINE

GUIDELINES FOR *THE NATIONAL VOTER*

March/April 1994

This issue of the League of Women Voter's national magazine will continue *The Voter*'s extensive coverage of health care reform--one of the League's legislative priorities. We plan to examine the White House health care reform proposal and several of the alternative plans, along with background on what the League supports and why. The League is supporting the President's plan.

Article Length: The suggested length for a one-page article is 500-600 words.

Deadline: The deadline for copy is December 13, 1993.

Graphics and Other Needs: The League requests that you provide an author photo and any supporting illustrations or graphics that you would like to accompany the article.

Articles on Disk: If possible, please furnish the article on computer disk (IBM format, WordPerfect preferable).

About the Magazine: *The National Voter* is published quarterly and is read by more than 120,000 members and supporters of the League of Women Voters across the United States and around the world. Copies are also distributed to every member of Congress. The League would be delighted to provide additional copies of *The Voter* to contributing writers for special distribution.

Contact: Bill Woodwell or Ellen Weir (202/429-1965) for additional information.

1730 M Street, N.W.
Washington, D.C. 20036
202/429-1965
FAX: 202/429-0854

THE HEALTH SECURITY ACT OF 1993: A SUMMARY

The Clinton plan offers a system of guaranteed private insurance. It proposes to build on the current system of private insurance with two critical changes: first, the guarantee of comprehensive health benefits that can never be taken away; and second, greater consumer power for people and small businesses to choose quality health insurance at lower cost.

Our national goal is health security for every American -- comprehensive health benefits that can never be taken away. No limit on benefits over your lifetime. No refusal of insurance if you have a pre-existing condition. No losing your insurance if you get sick or lose your job. And no rate increases if you get sick.

Our principles are clear and distinguish our approach: Security -- comprehensive benefits that can never be taken away. Simplicity -- creating a single claim form to reduce paperwork and bureaucracy. Savings -- controlling health care costs. Quality -- making the worlds' best care better. Choice -- preserving your right to choose your doctor and expanding choice of private insurance plans. Responsibility -- every American assumes responsibility to bring an out-of-control system under control and put funding on a fair and responsible basis.

Real reform and real savings are possible only if health care benefits are guaranteed to every American. Without universal coverage, there's no guarantee we will be able to control costs and provide comprehensive benefits. For example, today, everyone of us pays a part of the $25 billion bill for health care for the uninsured; and a single claim form doesn't save money unless everyone is using it.

Comprehensive benefits include preventive care, prescription drugs, doctor visits, hospital services, home health care, hospice care, emergency care and ambulance services, mental health care, vision care, and dental care for children and eventually, for adults.

For seniors, the protection of Medicare remains with improvements -- new prescription drug coverage and a new long-term care program. Our health security plan will achieve real savings in Medicare and re-invest those savings to improve benefits.

For small business, our plan provides insurance discounts to help them afford comprehensive benefits for their employees. Most small businesses already provide health insurance to their employees but they're forced to pay as much as 50% more than larger companies. Our plan helps assure them the best benefits, controlling costs and expanding coverage.

If we fail to act:

- **Every American -- 100% -- can expect to pay higher insurance premiums nearly every year, with no guarantee of security, no guaranteed benefits, and no guarantee that insurance will be there when they need it.**

- **One of every four Americans will lose their insurance at some point in the next two years.**

- **Almost $1 out of every $5 Americans spend will go to health care.**

- **By the end of the decade, just to keep their benefits, American workers will sacrifice almost $600 in wages every year.**

- **Millions of Americans will find that rising costs will force their firms to cut back on benefits and limit choices of doctors and health plans.**

Our plan for health security is the most comprehensive and responsible, building on what works in our current system and fixing what doesn't. We maintain an essentially private system, streamlined and less bureaucratic than what we face today. And, we're demonstrating how that system will work -- from details on the benefit package and premiums to a firm explanation of the most responsible financing possible.

LEAGUE OF WOMEN VOTERS

The United States is a world leader in developing new medical technologies, uncovering the mysteries of disease through basic clinical research, training nurses and doctors, and constructing hospitals, clinincs, laboratories, and medical schools. People from all over the world come to the United States for specialized training and treatment.

But the health care system, as a whole, is in deep crisis. We are spending too much, and getting too little for our money. Health care spending now consumes more than 14% of our GDP, projected to grow to more than 18% by the end of the decade..**without insuring one more person.**.

Roughly 39 million Americans have no health insurance at all, and another 23 million have only bare bones coverage. Every month, 2 million Americans lose their insurance coverage for some period of time, many to never gain it back. More and more Americans have to give up their regular doctor because their employer cuts back on the health plans they offer in order to cope with rising costs. Millions in rural areas have no access-- insured or not-- to a doctor or hospital. And the quality of American medicine is being threatened by the lack of measurable standards and real accountability in the health care system.

Today's health care system can be particularly inadequate for women. Women are more likely than men to be unemployed, have low income, or work part time, and are therefore more likely to lack health coverage. Even those women with insurance find that there coverage jeopardized by divorce or widowhood, since their insurnace is tied to their marital status. And despite the fact that women are the primary victims of life-threatening diseases such as breast and ovarian cancers, women are still at the bottom of our national medical research agenda. Any serious reform proposal must address the health needs of women head on, and provide affordable coverage to all women.

The President has placed women's health concerns at the core of the plan. Under the Health Security Act, all women will be guaranteed coverage regardless of health status, marital status, employment status, or ability to pay. Women will be guaranteed a comprehensive package of benefits that will include unprecedented coverage, without cost-sharing, of a wide range of preventive services, including mammograms, Pap smears, diagnostc services, and prenatal care.

In addition, new research initiatives will concentrate on child health (including birth defects, prenatal care, and adolescent health), and illnesses that primarily strike women -- including breast cancer, ovarian cancer, and osteoporosis. And the new home health and community based long-term care program will provide greater choice and flexibility for older women and will help reduce the undue burden born by many women caregivers.

The time for health care reform has come, and the passage of the Health Security Act will usher in much needed attention to women's health and wellness. I look forward to working closely with the League in the weeks and months ahead to advance our shared commitment to this goal.

FAX TRANSMITTAL

Date: 6/10/94

To: Liz Boyer 456-2239

From: Betsy Lawson

LEAGUE OF WOMEN VOTERS
OF THE UNITED STATES
1730 M Street, NW
Washington, DC 20036
202/429-1965 fax: 202/429-0854

0589

COVER PLUS 4 **PAGES TRANSMITTED**

Other Messages:

The League of Women Voters Education Fund is a nonpartisan public policy educational organization, which:

- builds citizen participation in the democratic process.
- studies key community issues at all government levels in an unbiased manner.
- enables people to seek positive solutions to public policy issues through education and conflict management.

We believe in:

- respect for individuals.
- the value of diversity.
- the empowerment of the grassroots, both within the League and in communities.
- the power of collective decision making for the common good.

We will:

- act with trust, integrity and professionalism.
- operate in an open and effective manner to meet the needs of those we serve, both members and the public.
- take the initiative in seeking diversity in membership and programs.
- acknowledge our heritage as we seek our path to the future.

LWV LEADS CITIZEN CAMPAIGN TO TAKE BACK THE SYSTEM

In the 1990s, the League is rededicating its efforts nationwide to promote voting and citizen participation in government.

The League of Women Voters in 1991 launched a nationwide citizen campaign to Take Back the System—a plan of action to make voter registration more accessible, provide voters with information on candidates and issues and restore the voters' confidence and involvement in our American electoral system.

The League believes that democracy depends on the informed and active participation of its citizens. When citizens are prevented from participating meaningfully in their government, American democracy is endangered. The League of Women Voters believes that the time has come for voters to Take Back the System.

Goal:

To promote an open governmental system that is representative, accountable and responsive.

THE LEAGUE'S NATIONAL AGENDA

The League of Women Voters of the United States works to influence public policy in four broad issue areas, encompassing a range of interrelated principles and goals.

GOVERNMENT: The League's goal is to promote an open governmental system that is representative, accountable and responsive; that has a fair and adequate fiscal basis; that protects individual liberties established by the Constitution; that assures opportunities for citizen participation in government decision making; that provides sound agriculture policies; and that preserves public health and safety through gun control measures.

League members have studied and reached positions on: Agriculture Policy, Citizen

FAX TRANSMITTAL

Date: 6/10/94

To: Liz Boyer 456-2239

From: Betsy Lawson x233

LEAGUE OF WOMEN VOTERS
OF THE UNITED STATES
1730 M Street, NW
Washington, DC 20036
202/429-1965 fax: 202/429-0854

COVER PLUS # 12 **PAGES TRANSMITTED**

Other Messages:

(1) League Board members (2 pages)

(2) Press Release on convention (2 pages)

(3) Health Care position memo to Hill for 6/15/94 (3 pgs) + press release on President Clinton's health care bill

...please distribute -

(4) Background on league + positions (5 pgs)

as of 2/16/94

LWVUS and LWVEF Board of Directors/Trustees, 1992-94

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(415) 363-2670

THE LEAGUE OF WOMEN VOTERS
A Voice FOR CITIZENS
A Force FOR CHANGE

FOR IMMEDIATE RELEASE
JUNE 6, 1994

PRESS CONTACTS:
Bobbie Faul-Zeitler (301) 951-0748
Carla Bundy (202) 429-1965

PROGRAM & EVENT HIGHLIGHTS
41ST NATIONAL CONVENTION OF THE
LEAGUE OF WOMEN VOTERS - WASHINGTON DC

Convention '94
41st National Convention
Sheraton Washington Hotel
June 10-15, 1994
Washington, DC

75th ANNIVERSARY 1920-1995

1730 M St, NW
Washington, DC 20036
Tel - 202 - 429 - 1965
Fax - 202 - 429 - 0854

LWV

WASHINGTON, D.C. -- The League of Women Voters convenes its 41st National Convention on Friday, June 10 in Washington D.C., at the Sheraton Washington Hotel. More than 1,500 members from Leagues in all 50 states, Puerto Rico, U.S. Virgin Islands, and the District of Columbia are expected to attend the June 10-15 convention.

All events take place at the Sheraton Washington Hotel unless otherwise noted.

Highlights of the 41st National Convention include:

- **Attorney General Janet Reno**, U.S Department of Justice, and League member since 1971, will give the Keynote Address. (Sat., June 11, 1:15 p.m.)
- Address by **Raul Yzaguirre**, Executive Director of National Council of La Raza. (Mon., June 13, 11 a.m.)
- **Workshop on Health Care Reform** - Panel of experts discuss the impact of health care reform on vulnerable populations. (Mon., June 13, 2:00 -3:30 p.m.)
- **Workshop on the League's Emerging Democracies Program** - Panel of experts discuss citizen education programs in Poland and Hungary. (Mon., June 13, 3:45 - 5:15 p.m.)
- **Leadership Awards Gala** by the League of Women Voters Education Fund - 1994 awardees are: **Hon. Barbara Jordan, Elizabeth Dole, MacNeil/Lehrer NewsHour**, and League member **Willie Campbell**. (Mon., June 13 - Reception 6:30 p.m.)
- **Lobby Day** - Health Care Rally on Capitol Hill. Greeting by **Sen. Tom Daschle** and **Rep. John Dingell**. Delegates meet with members of Congress on health care legislation. (Wed., June 15 - Rally begins at 9 a.m. West Front of the U.S. Capitol)
- Official kick-off of the **League's Diamond Jubilee** - a two-year celebration of the 75th Anniversary culminating in 1996 in Chicago, site of the League's founding.

-MORE-

Founded in 1920, the League of Women Voters is a nonpartisan political organization that encourages the informed and active participation of citizens in government and influences public policy through education and advocacy. Any citizen of voting age, male or female, may become a League member. The League has 200,000 members and supporters throughout the U.S.

NOTE TO MEDIA:

- For advance information, contact: **Bobbie Faul-Zeitler (301) 951-0748; or Carla Bundy (202) 429-1965.**
- Press badges for the Convention will be issued at the League's Convention Press Office in the Sheraton Washington Hotel.
- Please bring official press credentials to ensure entry.
- Access to some events may be limited.

LWV THE LEAGUE OF WOMEN VOTERS®
OF THE UNITED STATES

June 15, 1991

To: Members of the House and Senate

From: Becky Cain, President

Re: Health Care Reform

President
Becky Cain
St. Albans, West Virginia

Vice Presidents
Diane B. Sheridan
Taylor Lake Village, Texas

Peggy Lucas
Minneapolis, Minnesota

Secretary-Treasurer
Robin Seaberg
St. Petersburg, Florida

Directors
Pat Brady
Springfield, Virginia

Marilyn F. Brill
Danville, Pennsylvania

Jane S. Garbacz
Wilton, Connecticut

Bobbie F. Hill
Camden, Arkansas

Debbie Macon
West Bloomfield, Michigan

Beverly K. McKissick
St. Paul, Minnesota

Erica Moscarella
Taos, New Mexico

Nancy Pearson
Tacoma, Washington

Carole Wagner Valliant
Manhattan Beach, California

Kathleen Weiserberg
Atherton, California

Executive Director
Gracia M. Hillman

The League of Women Voters believes that the only solution to the current health care crisis is the enactment of comprehensive health care reform. Congress must pass a health reform bill that provides universal access to quality health care for all U.S. residents regardless of ability to pay. The legislation must also include stringent cost control measures for health care outlays.

Universal coverage is the basic test of the humanity of our health care system. The most advanced nation on earth must be able to assure adequate health care for all. Only through universal coverage can we be sure that children will get the vaccinations they need, that mothers will get the prenatal care they require and that working families won't be left destitute by unexpected medical bills. Only through universal coverage can we stop cost shifting, which unfairly puts the costs of emergency care for the uninsured on the rest of us.

A basic package of quality services must be included in any health care reform package. Benefits should include the prevention of disease, health promotion and education, primary care (including prenatal and reproductive health services), acute care, long-term care and mental health care.

No health reform effort will succeed without a serious effort to contain costs. One of the key problems in this crisis is that health care costs are spiralling out of control. Millions of Americans are losing the battle to keep up with rising health care costs. As a nation, we spend $1 out of every $7 we earn on health care.

Ideally, the League favors a national health insurance plan financed through general taxes -- a so-called "single-payer" plan. Short of that, the League believes that it is essential that an employer mandate be included in health care reform.

Because health care is a traditional form of compensation, and because it assures a healthy and productive workforce, it is appropriate for employers to continue to pay for health care. Those employers who do not now provide health care gain a competitive advantage. This is unfair.

The health care crisis affects everyone. It is critical that you listen to the concerns of your constituents so that the health care bill passed by Congress provides real solutions to a very real problems.

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Printed on recycled paper

THE LEAGUE
OF WOMEN VOTERS
NATIONAL OFFICE

NEWS RELEASE

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EMBARGOED UNTIL:
9:30 PM EST
September 22, 1993

PRESIDENT'S PLAN IS EFFECTIVE BLUEPRINT FOR HEALTH CARE REFORM

Statement by Becky Cain, President
The League of Women Voters of the United States

The President's health care reform package marks a critical step forward. It will fix fundamental flaws in our nation's health care system.

This is real reform. The plan provides for universal access and for stringent cost control measures -- the two most important criteria set forth by League members after more than three years of studying the health care crisis.

Under the plan, Americans will be covered no matter where they live, where they work or how much they earn. The plan's basic benefits package will be a boon to people's health, especially for women. For the first time, all Americans will be guaranteed coverage for preventive, primary and acute care; and reproductive health services, including abortion, are in the plan. Mental health services and long-term care are also included, but are limited to keep costs down.

Among the plan's most critical features are its built-in cost control mechanisms. Millions of Americans are losing the battle to keep up with rising health care costs and millions more cannot even afford the most basic health care coverage. Health care costs have doubled since 1980 and will double again by the year 2000 unless strong action is taken. By standardizing forms, introducing new competitive structures and limiting spending, the plan has effective ways of cutting waste and reducing costs.

The President's health care plan is not perfect, but it is fair. It will need some fine-tuning in the legislative process. For example, citizen participation must be included in all aspects of the plan's implementation to ensure that government-sponsored programs are responsive to citizens' needs. In addition, there will be heavy pressure to weaken the plan's proposed tax on cigarettes. The Administration must not buckle under. Sin taxes make sense.

Health care reform will need bipartisan support. The League is encouraged that many of the goals for reform are now shared by key members of both political parties on Capitol Hill. Congress must not lose sight of the costs of inaction on this critical issue. There will be no perfect solution to this crisis. We need a viable plan that gives all Americans a more humane health care system. The President's plan is an effective blueprint for reform.

Founded in 1920, the League of Women Voters is a nonpartisan political organization that encourages the informed and active participation of citizens in government and influences public policy through education and advocacy. It is a unique activist network that derives its strength from the energy and commitment of more than a hundred thousand members and supporters nationwide. The League knows first-hand the value of citizens organized for change.

The League ambitiously pursues its dual mission:

- To encourage the active and informed participation of citizens in government and to increase understanding of major public policy issues.
- To secure public policies that promote League goals reached through member participation and agreement.

The League is strictly nonpartisan; it neither supports nor opposes candidates for office at any level of government. At the same time, the League is wholeheartedly political—working to influence public policy through education and advocacy. It is the original grassroots citizen network, directed by the consensus of its members across the country.

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GRASSROOTS STRENGTH

The League of Women Voters works at the local, state and national levels, paralleling the levels of American government. Most people know us through the local League of Women Voters in their community. The League is organized in more than a thousand communities, in all 50 states as well as the District of Columbia, Puerto Rico and the Virgin Islands.

THE LEAGUE OF WOMEN VOTERS EDUCATION FUND

The membership and political advocacy of the League of Women Voters of the United States is complemented by the citizen education and research activities of the League of Women Voters Education Fund (LWVEF). Founded in 1957, the LWVEF provides local and state Leagues, as well as the wider public, with information and educational services on elections and on current public policy issues. The League of Woman Voters Education Fund is renowned for its ability to make complex and controversial issues accessible to the nonexpert citizen in a balanced, evenhanded way. And the LWVEF is an experienced trainer of community leaders and activists.

Of course, a special and familiar focus of the League's educational work is voting and elections. Leagues in communities across the nation are known for providing voters with factual, nonpartisan information on candidates and ballot issues, whether through voter's guides, candidate forums, town meetings or debates. Much of the League's campaign to Take Back the System for American voters is spearheaded by the League of Women Voters Education Fund.

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The organization's name, like its mission, derives from the proud legacy of the women's suffrage movement. Today's mem-