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THE FANNIE MAE  
WOMEN'S HEALTH SUMMIT

PHOTOCOPY  
PRESERVATION

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

February 1, 1995

**REMARKS BY FIRST LADY HILLARY RODHAM CLINTON  
AT THE FANNIE MAE WOMEN'S HEALTH SUMMIT**

Thank you very much. Thank you. I am very grateful to be here. I appreciate that much too kind introduction, but if you want a nice introduction, have someone who has been your friend for twenty-five years introduce you.

I am delighted that this is occurring in this museum. I remember very well a number of years ago when Mrs. Holiday had this idea, this dream. But the paintings were still in her home and I visited her there to see these paintings and to talk with her about her vision for this museum. And is always a thrill for me to walk through its doors.

I want to thank all of you for being here at this conference, which is very important to talk about women's health and more than talk to determine what can be done in the public and private sector by individuals and by all of us working together.

I want to thank Fannie Mae for sponsoring this event and also for leading the way in promoting women's health in the work place. I appreciate the companies commitment to the family friendly benefits that it has promoted to diet counseling and exercise programs offered to women with high cholesterol. But I was particularly pleased to learn that Fannie Mae is offering free mammography to employees and I hope other companies will follow this example as they realize how wise this and other investments in preventive health care are.

Even with efforts such as these, however, the unpleasant truth is that the health of American women should be better than it is today. As Dr. Blumenthal made clear when she spoke to you this morning, women historically have not received the proper attention and concern when it comes to their health needs. Symptoms and illnesses specific to women too often have been discounted or ignored. Research and clinical studies have largely have focused on men. And the result is that half of our population for too long has been relegated to the margins of our health care system.

It is perhaps fitting that this conference and these remarks should be made in this museum. Because for years women were also relegated to the margins of art history. Those of you of my vintage who took art history remember the classic textbook of

Jensen's on art history had no pictures that were depicting the artistic work of any woman until a very recent edition. And so it has been with women's health in our country.

I remember how startled I was during my work on health care reform. To read as I was pouring over material late one night that the clinical trials on breast cancer had originally all been done on men. And I thought perhaps with my increasing age and my decreasing eyesight I had misread what was printed -- read it over and over again until I finally called one of the experts in the field who confirmed that indeed that was the case.

Well today we have women artists being recognized and we have women's health needs being recognized, but we have not yet made a commitment to understanding an action that is required. It is significant that we do so. Not only because women function as the primary caregivers for children and aging parents, but also because women now comprise a large percentage of our work force. So if we ignore women's health needs we will witness the kind of problems that we see in families, work places, and in our society that can only be measured in terms of our overall well being.

The good news is that women's health needs are now on the radar screen and we have certainly made progress and come a long way. For the first time we have an office for women's health at the Department of Health and Human Services that under Dr. Blumenthal's leadership brings together the public and the private health interest, consumer and health care groups, businesses and private industry. The power of these kind of public private partnerships cannot be underestimated. Look at what Avon has done for example in conjunction with the Federal Centers for Disease Control and the YWCA and other community groups to help raise awareness about breast cancer. In 1993 Avon launched a breast cancer education campaign in which representatives began selling breast cancer awareness pins for \$2.00 each. The proceeds were used to fund community programs that focus on breast cancer detection and early treatment. And thus far Avon has given a four million dollar grant to expand the YWCA's breast cancer existing education programs.

And other corporations have been in touch with the Office on Women's Health to participate in similar activities around the country. So when you hear about the importance of making government work for people I hope you will now recall the creation of the Office on Women's Health as a prime example of how that is happening. It is in keeping with the President's agenda for reinventing government, but it is not happening by arbitrarily slashing and slicing programs, but by thoughtfully considering how government can make a difference in people's lives and how government and the private sector can work together.

We hear a lot these days about how government is terrible. How government is the culprit for everything that goes wrong in society. And I suppose that is just another example of the historic swing of the pendulum in our country where we often go from one extreme to another. You'll find no disagreement among any of us that government needs to be more effective efficient and smarter. But we also need to inject some perspective into this debate. Government has and must continue to provide vital functions in our country. So when the axes start to fall on the budget block I hope you will remember that government has a role to play and the real challenge for us as the President has said, is to redefine that role. And let us remember then as we attempt to refine that role, that without government we would not have the clean air, clean water, safe foods, safe drugs, safe work places, and greater longevity that spring from the government sponsored medical research in action we have enjoyed for the last decades.

Women's health is a particular concern of the President's and he has made it a priority in the budget that will be released next week. Keeping women healthy is good for women and it's good for our country. And it is good for businesses. Here's some of the examples of the federal initiatives that have had a positive impact on women's health that have been taken in the last years. Since the President took office, funding for breast cancer research at NIH has increased 65 percent from to \$379,000,000 in 1995. With additional research and training grants funded through the Department of Defense.

And I want to say a special word about that particular element of breast cancer research because I think it shows the new way of thinking that we have to bring to solving problems and using government resources. The Department of Defense, the Central Intelligence Agency, and the Office of Women's Health, are working together to really push the boundaries of imaging. Those of us who remember so well the pictures on our television sets during the Gulf War of missiles that could be directed to go down chimneys, understand how extraordinary the advances have been in technology in our defense research.

But we also know there are civilian uses for such research that we now need to take advantage of. There are dual uses for such defense related research. And many of us believe that the kind of imaging technology that has been so effectively used in our defense work, can now be turned to other ways of benefiting our society. One of the peace dividends, if you will, can be using such imaging, for example, for to advance far beyond our existing state of mammography -- because it does seem common sense to conclude that if we can send missiles down chimneys from thousands of miles away -- we ought to be able to do a better job at detecting lumps in women's breasts. And it's that kind of cooperative new approach toward utilizing what government has already done in the private sector and moving it into a new arena.

After receiving petitions signed by 2.6 million Americans, the President asked Secretary Shalala of the Department of Health and Human Services to convene a national conference on breast cancer. That conference led to a national action plan on breast cancer that will help further the research and the public - private partnerships like the ones I mentioned earlier.

The National Institutes of Health is undertaking the largest research study ever on the major causes of death and disease in older women. In 1993 the Food and Drug Administration revised fifteen year old guidelines to include women in early drug testing, reversing many years of decisions that women were not proper research subjects for drug testing, and finally recognizing that if we are going to be using these drugs we ought to be part of the early testing.

Today all Public Health Service Agencies have established policies to ensure that women are included in research programs sponsored by HHS. And in this year's public health services budget, nearly 2 billion has been set aside for women's health including breast cancer research, family planning program, and research on diseases that primarily affect women, such as osteoporosis, lupus, and others. And maybe some of you noticed the other day on the front page of USA Today, the story about the work that is being done with respect to osteoporosis and the calcification that is often found in arteries. That had two major positive effects, from my personal perspective. One is it demonstrated what the work of the national women's health is already accomplishing. Secondly my daughter picked that front page up and said, "Look Mom, three women doctors doing this research." So I think there is much that we can be proud of in terms of what we are achieving and moving forward toward if we continue to stay the course that has been set on behalf of women's health.

We also know that our crime bill last year had new provisions for domestic violence -- a major source of health problems. We also know how important it is that we aim at work place safety. And the President's new national campaign against teen pregnancy to promote responsible decision making among our teenagers is a very important part of ensuring public health for all.

We have to look carefully at the programs that we already have such as Medicaid, to make sure that they are effective. And Medicare -- that the kind of services that are being delivered will work. The Administration is also committed to strengthening research and education, so that we remain the world leader in medical advances. Not just today and tomorrow, but fifty and one hundred years from now. The best way to ensure that status is to further the partnerships between health care companies, health care institutions, and academic medicine.

I also think we have to continue to look for ways to expand health care coverage for all Americans, but particularly for women. In addition to expanding health care coverage we have to understand the barriers to access that too often prevent women from taking advantage of the programs and benefits that are already available. I have seen that very personally in the last several weeks because one of the issues that I was puzzled by during the work on health care reform is how important preventive health care is but how still, we do not take advantage of diagnostic tests and screening to the extent we should in our country. And I was particularly struck by the discrepancy in the Medicare program where since 1989, I believe, we have had a Medicare benefit for mammography, both screening and diagnostic mammograms, but women over 65 were not taking advantage of that. In fact, only one third of the eligible Medicare recipients would seek mammograms. And so for the last month I've been traveling around the country listening to older women tell me why they did not have mammograms. And I learned a lot about how difficult it is to get across through public education campaigns why preventive health care is important particularly among older Americans.

I wish all of you could have been with me because some of the stories that have been told by women in their seventies, their eighties, and even in their nineties, not only sent me into hysterical laughter, but taught me a lot about how this issue of breast cancer is being perceived. Because as much work as we have done on it in our country there are still large parts of our population that don't think it applies to them. Who fatalistically believe that early detection won't do any good for them. Or who have other fears that have to be addressed as we attempt to try to make all of our women healthier.

In my last listening session in San Diego last week, I was moved, as I always am, by women talking about their own health. But I was also unfortunately reminded about the work we still have ahead of us as a country. The kind of questions that were raised about mammography were ones that Dr. Blumenthal and the other doctors on the panel were able to answer. And then we turned to the audience. And a woman stood up and said, "I was able to get a free mammogram and the results of that mammogram was that I had a problem and the radiologist who read it said it looked like a very serious problem and I needed to have it treated. But I'm not yet eligible for health care and I don't have health insurance and I don't know what to do." And the woman stood in this audience on the brink of tears as did the rest of us, confronted by what is still one of our biggest unsolved problems. We can talk about health care. We can create partnerships. We can do the medical research that we hope and know will save lives but we have to make sure every American, every woman, every child, every man, then will be able to take advantage of the extraordinary developments that many of you in this room are responsible for making.

So the initiatives we have undertaken in this Administration reflect a commitment to research, a commitment to service, a commitment to education both to women and to health care professionals about women's health concerns and a commitment to guaranteeing health care coverage to everyone. We need all of those commitments working together in order for the work you do and the government does to be as effective as it can be. Anything alone is not sufficient. Anything the government does or any of your corporations do cannot stand alone. We need to cooperate and we need to leverage each others efforts so that we can all promote greater health greater happiness and greater productivity.

So I hope that out of this conference all of you who care so deeply about health and particularly women's health will pay close attention to the decisions that are going to be made on Capital Hill in the next weeks and months and that we will be attentive to what works, what can be made better so that it works better, what we no longer need if we have a better way of meeting the same needs and that we all recognize that we share the same goal -- to improve the health and quality of all Americans. Nothing is more important than pursuing that goal that we share. And nothing would be more imprudent, or in the long run more costly, to turn the clock back now on the improvements we are making on women's health. And I appreciate your commitment to making sure that we move forward together, that we all do what we can to ensure healthy outcomes for women. And that we recognize that by doing that we are making our country healthier and that is a goal that all of us should share and work for in the following year. Thank you very much.

END

ROTFL @ Fannie Mae Women's Health Summit  
February 1, 1995

INTRODUCER:

On behalf of Fannie Mae let me begin our lunch-in by offering my thanks to Wilamina Holiday, the founder of the National Museum of Women in the Arts. Wilamina, your hospitality, cooperation and enthusiasm for the Women's Health Summit, are an exact match to your long standing commitment to this museum and the excellence and spirit of discovery that it represents. Thank you for everything you've done to make this conference a success. Thank you.

APPLAUSE

It's a special pleasure for me to be able to welcome the First Lady of the United States, Hillary Rodham Clinton. We first met some twenty-five years ago, and over those years we've had many occasions to work together on common goals. We have both been fortunate with a strong interest in public policy which continues to shape our lives. This is the diamond jubilee year of the ratification of the Nineteenth Amendment, one of the great landmarks in the history of equal rights in our country. A year after the amendment was ratified, Congress passed the Sheperd Towner Act, a major called "one of the first results of women's suffrage." The law provided states with matching funds to set up prenatal and child health centers to help prevent infant and maternal mortality. Consistent with the act, the state of Arkansas established a Bureau of Child Hygiene headed by a woman physician. That was in 1921. It was an excellent beginning but over the years, the American record on infant mortality has remained a source of great concern. That explains why this very serious issue continues to draw the attention of some of our country's finest leadership. If true that the first lady of Arkansas to head the Governor's Rural Health Advisory Committee. If truer that the Children's Defense Fund, which she chaired from 1987 to 1992. An abiding concern for the health and well-being of children eventually led to her founding teh Arkansas Advocates for Children and Families and to service on the board of the Arkansas Children's Hospital. Hillary Rodham Clinton has spent much of her adult life as an advocate for health care and she has brought to that work a pattern of skill and achievement that marks virtually everything that she does. A graduate of Yale Law School, she served on the staff of the House Judiciary Committee during the Watergate investigation. She also served on the law faculty at the University of Arkansas before entering private practice. Beyond that she is unversally acknowledged as a remarkable public speaker with an extraordinary intellect. It is these gifts and this background, that she brought to her responsibilities as head of the President's task force on National Health Care Reform. When she testified before the Ways and Means Committee in September of 1993 she said she was there as a mother, a wife, a daughter, a sister and a woman. And it is in each of these roles and all of her involvements, that make her

the ideal person to give our keynote address today. What an enormous difference her focus on health care has made in our country in the last two years. The idea of reliance on each other, of caring about each other, of finding the balance among family, career and public service distinguished this very gifted woman's life. Ladies and Gentlemen, the First Lady of the United States, Hillary Rodham Clinton.

#### APPLAUSE

#### FIRST LADY:

Thank you Jim. That was great. I really appreciate that. Thank you. Thank you. Thank you very much. Thank you.

Thank you so much. I am very grateful to be here. I appreciate that much too kind introduction but if you want a nice introduction have someone whose been your friend for twenty-five years introduce you. I am delighted that this is occurring in this museum. I remember very well a number of years ago when Mrs. Holiday had this idea, this dream, but the paintings were still in her home and I visited her there to see these paintings and to talk with her about her vision for this museum. And it is always a thrill for me to walk through its doors. I want to thank all of you for being here at this conference which is very important, to talk about women's health, and more than talk, but to determine what can be done in the public and private sector by individuals and by all of us working together. I want to thank Fannie Mae for sponsoring this event, and also for leading the way in promoting women's health in the workplace. I appreciate the company's commitment to the family friendly benefits that it has promoted to diet counseling and exercise programs offered to women with high cholesterol. But I was particularly pleased to learn that Fannie Mae is offering free mammograms to its employees. And I hope that other companies will follow this example as they realize how wise this and other investments in other preventive health care are.

Even with efforts such as these however, the unpleasant truth is that the health of American women should be better than it is today. As Dr. Blumenthal made clear, when she spoke with you this morning, women historically have not received the proper attention or concern when it comes to their health needs. Symptoms and illnesses specific to women too often have been discounted or ignored. Research and clinical studies largely have focused on men. And the result is that half of our population for too long has been relegated to the margins of our health care system. It is perhaps fitting that this conference and these remarks should be made in this museum because for years women were also relegated to the margins of art history. Those of you who have my vintage, who've took art history remember, the classic textbook of Jensen's on art history had no pictures that were depicting the artistic work of any woman until a very recent edition. And so it has been with women's health in our country. I remember how startled I was doing my work on health care reform, to read as I was pouring over material late one night, that the clinical trials on breast cancer, had originally all been done on

men and I thought perhaps with my increasing age and decreasing eyesight, I had misread what was printed, read it over and over again, and finally called one of the experts in the field who confirmed that, indeed, that was the case. Well today, we have women artists being recognized, and we have women's health needs being recognized, but we have not yet made the commitment to understanding an action that is required. It is significant that we do so, not only because women usually function as the primary caregivers for children and aging parents, but also because women now comprise a large percentage of our workforce. So if we ignore women's health needs, we will witness the kind of problems that we see in families, workplaces, and in our society that can only be measured in terms of our overall well-being. The good news is that women's health needs are now on the radar screen. And we have certainly made progress and come a long way. For the first time we have an office on women's health at the Department of Health and Human Services that under Dr. Blumenthal's leadership, brings together the public and private health interests, consumer and health care groups, businesses and private industry. The power of these kinds of public-private partnerships cannot be underestimated. Look at what Avon has done, for example, in conjunction with the Federal Centers for Disease Control, and the YWCA and other community groups to help raise awareness about breast cancer. In 1993, Avon launched a breast cancer education campaign, in which representatives began selling breast cancer awareness pins for \$2 each. The proceeds were used to fund community programs that focus on breast cancer detection and early treatment. And thus far, Avon has given a \$4 million grant to expand YWCA existing breast cancer education programs. And other corporations have been in touch with the office on women's health to participate in similar activities around the country. So when you hear about the importance of making government work for the people, I hope you will now recall the creation of the Office on Women's Health as the prime example of how that is happening. It is in keeping with the President's agenda for reinventing government, but it is not happening by arbitrarily slashing and slicing programs, but by thoughtfully considering how government can make a difference in people's lives and how government and the private sector can work together. We hear a lot these days about how government is terrible, how government is the culprit for everything that goes wrong in society. And I suppose that it is just another example of the historic swing in the pendulum in our country of how we often go from one extreme to the other. You'll find no disagreement among any of us, that government needs to be more effective, efficient, and smarter. But we also need to inject some perspective into this debate. Government has and must continue to perform vital functions in our country. So when the axes start to fall on the budget block, I hope we will remember that government has a role to play and the real challenge for us as the President has said is to redefine that role. And let us remember then as we attempt to redefine that role, that without government, we would not have the clean air, clean water, safe food, safe drugs, safe workplaces, and greater longevity that spring from the government

sponsored medical research and action that we have enjoyed for the last decades. Women's health is a particular concern of the President's and he has made it a priority in the budget that will be released next week. Keeping women healthy is good for women and it is good for our country and it is good for businesses. Here are some of the examples of the federal initiatives that have had a positive impact on women's health and have been taken in the last years. Since the President took office, funding for breast cancer research at NIH has increased 65% to \$379 million in 1995 with additional research and training grants funded through the Department of Defense. And I want to say a special word about that particular element of breast cancer research because I think it shows the new way of thinking that we have to bring to solving problems and using government resources. The Department of Defense, Central Intelligence Agency, and the Office of Women's Health are working together to really push the boundaries of imaging. Those of us who remember so well, the pictures on our television sets during the Gulf War of missiles that could be directed to go down chimneys, understand how extraordinary the advances have been and technology in our defense research. But we also know that there are civilian uses for such research that we now need to take advantage of. There are dual uses for such defense related research and many of us believe that the kind of imaging technology that has been so effectively used in our defense work can be turned to other ways of benefitting our society. One of the peace dividends if you will, can be using such imaging, for example, to advance far beyond our existing state of mammography because it does seem common sense to conclude that if we can send missiles down chimneys from thousands of miles away, we ought to be able to do a better job at detecting lumps in women's breasts. And it is that kind of cooperative new approach toward utilizing what government has already done with the private sector and moving it into a new arena. After receiving petitions signed by 2.6 million Americans, the President asked Secretary Shalala of the Department of Health and Human Services, to convene a national conference on breast cancer. That conference led to a national action plan on breast cancer that will help further the research and the public-private partnerships like the ones I mentioned earlier. The National Institute of Health is undertaking the largest research study ever on the major causes of death and disease in older women. In 1993, the Food and Drug Administration revised fifteen year old guidelines to include women in early drug testing, reversing many years of decisions that women were not proper research subjects for drug testing and finally recognizing that if we going to be using these drugs we ought to be part of the early testing. Today all public health service agencies have established policies to ensure that women are included in research programs sponsored by HHS. And in this year's public health services budget, nearly \$2 billion has been set aside for women's health including breast cancer research, family planning programs, and research on diseases that primarily afflict women, like osteoporosis, lupus and others, and maybe some of you noticed the other day on the front page of USA Today,

the story about the work that is being done with respect to osteoporosis and the calcification that is often found in arteries. That had two major positive effects from my personal perspective. One is, is demonstrated what the work of the national women's health initiative is already accomplishing. Secondly, my daughter picked that front page up and said, "Look Mom, three women doctors are doing this research". So, I think there is much that we can be proud of in terms of what we are achieving and moving forward toward if we continue to stay the course that has been set for women's health. We also know that our crime bill last year had new provisions for domestic violence, a major source of health problems. We also know how important it is that we aim at workplace safety and the President's new national campaign against teen pregnancy to promote responsible decision making among our teenagers is a very important part of ensuring public health for all. We have to look carefully at the programs we already have, such as Medicaid, to make sure that they are effective. And Medicare, that the kinds of services that are being delivered will work. The administration is also committed to strengthening research and education so that we remain the world leader in medical advances, not just today and tomorrow, but fifty and one hundred years from now. The best way to ensure that status is to further the partnerships between health care companies, health care institutions and academic medicine. I also think that we have to continue to look for ways to expand health care coverage for all Americans but particularly for women. In addition, to expanding health care coverage, we have to understand the barriers to access that too often prevent women from taking advantage of the program and benefits that are already available. I have seen that, very personally, in the last several weeks because one of the issues that I was puzzled by, during the work on health care reform is how important preventive health care is, but how still we do not take advantage of preventive health care diagnostic tests and screening to the extent we should in our country. And I was particularly struck by the discrepancy in the Medicare program, where since 1989, I believe, we have had a Medicare benefit for mammography, both screening and diagnostic mammograms, but women over 65 were not taking advantage of that. In fact, only one third of the eligible Medicare recipients would seek mammograms and so for the last month, I've been traveling around the country listening to older women tell me why they did not have mammograms. And I've learned a lot about how difficult it is to get across through public education campaigns why preventive health care is important particularly among older Americans. I wish all of you could have been with me because some of the stories that have been told by women in their 70s, 80s and their 90s, not only set me into hysterical laughter but taught me a lot about how this issue of breast cancer is being perceived. Because as much work that we have done on it, there are still large parts of our population that don't think it applies to them or who fatalistically believe that early detection won't do any good for them or who have other fears that have to be addressed as we attempt to try to make all of our women healthier. In my

last listening session in San Diego, last week, I was moved as I always am by the women talking about their own health, but I was also unfortunately reminded about the work we still have ahead of us as a country. The kinds of questions that were raised about mammography, were ones that Dr. Blumenthal and the other doctors on the panel were able to answer. Then we turned to the audience and a woman stood up and said, "I was able to get a free mammogram and the result of that mammogram was that I had a problem and the radiologist who read it said that it looked like a very serious problem and I needed to have it treated but I'm not yet eligible for Medicare and I don't have any health insurance and I don't know what to do." And the women stood in this audience on the brink of tears as did the rest of us confronted by what is still one of our biggest unsolved problems. We can talk about health care and we can create partnerships, we can do the medical research that we hope and know will save lives, but we have to make sure that every American, every woman, every child, every man, then will be able to take advantage of the extraordinary developments that many of you in this room are responsible for making. So the initiatives that we have undertaken in this administration reflect a commitment to research, a commitment to service, a commitment to education both of women and health professionals about women's health concerns and a commitment to guaranteeing health care coverage to everyone. We need all of those commitments working together in order for the work you do and the government does to be as effective as it can be. Anything alone is not sufficient. Anything the government does or any of your corporations do cannot stand alone. We need to cooperate and we need to leverage each other's efforts so that we can all promote greater health, greater happiness and greater productivity. So I hope that out of this conference, all of you who care so deeply about health and particularly women's health will pay close attention to the decisions that are going to be made on Capital Hill in the next weeks and months and that we will be attentive to what works, what can be made better so that it works better. What we no longer need if we have a better way of meeting the same needs. And that we will all recognize that we share the same goal, to improve the health and quality of life of Americans. Nothing is more important than pursuing that goal that we share and nothing would be more intruding, or in the long run more costly, than to turn the clock back now on the advances we are making in women's health. And I appreciate your commitment to making sure that we move forward together. That we all do what we can to ensure healthy outcomes for women and that we recognize by doing that, we are making our country healthier and that is a goal that all of us should share and work for in the following year. Thank you very much.

APPLAUSE

INTRODUCER:

I'd like to say thank you on behalf of all of us here. Your intelligence and your personal commitment. You really are an

inspiration to all of us and it makes an enormous difference by joining us here today. Thank you very much. I think we have a good program this afternoon, outstanding panels, and I thank once again to all of you for being here. Thank you.

APPLAUSE