

“Improving Women’s Health”: Section 3509 of the Affordable Care Act of 2010

In 2010, US Congress enacted section 3509 of the Patient Protection and Affordable Care Act or ACA, to target issues relating to women’s health. The ACA, signed into law by US President Barack Obama, aimed to increase people’s access to high-quality healthcare in the United States. Section 3509, titled “Improving Women’s Health,” established the Office on Women’s Health within the US Department of Health and Human Services and in four of its agencies, the Agency for Healthcare Research and Quality, the Center for Disease Control and Prevention, the Food and Drug Administration, and the Health Resources and Services Administration. Section 3509 of the ACA exemplified a federal effort to improve women’s health in the US by increasing the amount of research and programs focused on the health concerns of American women.

In the 1990s, many US Department of Health and Human Services, or HHS, agencies began creating Offices on Women’s Health to improve the health and well-being of women through a better understanding of women’s unique health needs. Women are more likely to suffer from chronic illnesses and be victims of sexual violence. In addition, women on average use more healthcare services than men throughout their lifetime. Women also face more social and economic barriers to accessing health care. Among those economic barriers, women are more likely to live in poverty, be underemployed, and be covered under insurance as dependents and thus vulnerable to loss of coverage. Women also face sex and gender-based disparities in healthcare and in the American pharmaceutical industry. In the American pharmaceutical industry, gender-based discrimination referred to the exclusion of women in pharmaceutical drug tests and clinical trials, which according to the Food and Drug Administration or FDA, led to the creation of drugs intended for men and potentially ineffective or dangerous for women. According to the FDA, a key goal of the Office of Women’s Health included increasing the participation of women in clinical trials for pharmaceutical drugs to address gaps in the knowledge of women’s health and to create more effective drugs for women.

On 23 March 2010, President Obama signed into law the Patient Protection and Affordable Care Act, or ACA. The law, according to the US Department of Health and Human Services, aimed to improve the US healthcare system by increasing the number of insured US citizens, lowering the overall price of US health insurance, and improving the quality of US healthcare. The ACA included several provisions that intended to improve the health of women. Section 3509, titled “Improving Women’s Health,” focused on improving women’s health through the legal establishment of Offices on Women’s Health within various HHS agencies.

Section 3509 of the ACA codified the establishment of an Office on Women’s Health within five departments of the US government: the Department of Health and Human Services, the Agency for Healthcare Research and Quality, the Center for Disease Control and Prevention, the Food and Drug Administration, and the Health Resources and Services Administration. Although each of these agencies already had an Office of Women’s Health in place, originally created in the 1990s, Section 3509 gave them new authority, legal designation, and protection from termination or reorganization without Congressional approval.

Section 3509 also created two senior level positions related to women’s health within two other HHS agencies. Section 3509 of the ACA required that the Director within the Office of Research on Women’s Health at the National Institutes of Health, or NIH, report directly to the Director of the NIH. In addition, it required that the Substance Abuse and Mental Health Services Administration

appoint an Associate Administrator for Women's Services that would report to the Administrator of the Substance Abuse and Mental Health Services Administration.

Along with the establishment of the various Offices on Women's Health, Section 3509 required each office to establish short and long term goals related to the specific agency's focus area. Those goals were related to health promotion, disease prevention, research, health service delivery, and professional education for issues related to women's health. Section 3509 also required that the Offices coordinate activities between each other and provide consultation on the legal, ethical, and policy concerns that impact women's health.

Section 3509 of the ACA did not provide specific deadlines for those requirements, and did not appropriate any additional funding to complete those requirements. However, it did require that the Secretary of the HHS, through the HHS Office on Women's Health, issue a report to Congress every two years describing the activities carried out by the Office.

Section 3509 also codified the establishment of the HHS Coordinating Committee on Women's Health. The HHS Coordinating Committee on Women's Health was originally created in 1983 to advise HHS agencies on approaches to improve the well-being of all US women. The ACA required that the HHS Office on Women's Health establish and oversee the HHS Coordinating Committee on Women's Health. By codifying its establishment, Section 3509 of the ACA gave the Committee clout and protection from dissolution without approval from Congress. Under the ACA, the Committee was required to establish women's health related objectives, conduct or support women's health projects, and consult with women's health professionals and groups on policies related to women's health. The ACA required that the Committee be comprised of senior-level representatives from each of the HHS agencies Offices on Women's Health.

The ACA "Improving Women's Health" section also required that the HHS Office on Women's Health launch the National Women's Health Information Center. The ACA expected the National Women's Health Information Center to circulate information regarding women's health, support research related to women's health needs, coordinate efforts to promote women's health programs, and guide policies in the private sector.

According to Alina Salganicoff, the Director of Women's Health for The Henry J. Kaiser Family Foundation headquartered in Menlo Park, California, the passage of the ACA exemplified a new beginning for women's healthcare in the US. The provisions of the ACA, as Salganicoff and supporters of the ACA argued, brought necessary attention to issues specific to women's health and encouraged research into the health and wellness of women within the United States. By focusing on the specific health issues affecting women, government agencies, according to the ACA's writers, would find ways to provide better care.

Sources

1. Chilet-Rosell, Elisa. "Gender Bias in Clinical Research, Pharmaceutical Marketing, and the Prescription of Drugs." *Global Health Action* 7 (2014): 25484. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4262757/> (Accessed December 17, 2017).
2. "FDA Research, Policy, and Workshops on Women in Clinical Trials." US Food and Drug Administration. <http://www.fda.gov/ScienceResearch/SpecialTopics/WomensHealthResearch/ucm131731.htm> (Accessed December 17, 2017).
3. Salganicoff, Alina, and Laurie Sobel. "Women, Private Health Insurance, and the Affordable Care Act." *Women's Health Issues*. 26 (2016): 2-5 [http://www.whijournal.com/article/S1049-3867\(15\)00165-6/pdf](http://www.whijournal.com/article/S1049-3867(15)00165-6/pdf) (Accessed December 20, 2017).
4. Sebelius, Kathleen. "Report on Activities Related to "Improving Women's Health" As Required by the Affordable Care Act." Report to Congress. March 23, 2011 <https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/women03252011a.pdf> (Accessed December 18, 2017).
5. The Patient Protection and Affordable Care Act of 2010, 42 U.S.C Section 18001 (2010) <https://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf#page=413> (Accessed December 17, 2017).