

Prospects for Gender Equitable Health under the 45th Presidency

Many groups in the US face uncertainties about what the future holds for their health, given the health policy priorities of newly inaugurated President Donald Trump and the 115th Congress. Women, LGBTQ communities, refugees, undocumented communities, and the elderly are among those who may be most affected by the federal government's health policy initiatives, including those impacting whether these groups will continue to have access to health care and if so, whether that care will be affordable and appropriate.

Even before Trump assumed the Presidency, Republican Congressional members [took initial steps to dismantle](#) the Affordable Care Act (ACA) and called, again, for [defunding](#) Planned Parenthood, this time by wrapping defunding into a potential ACA repeal. Questions remain concerning how legislative action will proceed, but repeal appears to be in process without a replacement plan in sight.

Meanwhile, Democrats have sought [compromise](#), and Senator [Kirsten Gillibrand](#) has sought to defend those parts of the ACA that protect women in particular. The ACA is crucial for gender equity in health in that it prohibits insurers from charging women more than others for insurance, and guarantees maternity coverage, among other measures. Diminishing Planned Parenthood's capacity to provide services will be felt especially among lower income women who rely heavily upon this organization for access to critical health services including cancer screenings and contraception. These women may lack other options for such services, especially given the possible loss of funding for community health centers with a repeal of the ACA.

Abortion at this point remains legal, but many states have made it increasingly difficult to access. Between 2011 and 2015, nine states passed 'targeted regulation of abortion providers', (TRAP) laws, which, for example, require physicians providing abortions to also have hospital admitting privileges. Organizations such as the [American Public Health Association](#) have denounced these laws, citing them as medically unnecessary tools geared specifically towards hobbling physicians' ability to provide safe abortions.

The likelihood that more states in the near future will pass TRAP laws, together with a defunding of Planned Parenthood clinics, will almost certainly mean a rise of less safe, illegal abortion and an increase in unwanted pregnancies particularly among lower income women who cannot afford birth control from primary care providers.

While repeal of the ACA, defunding of Planned Parenthood, and limiting abortion constitute federal health policy priorities, other issues also raise gender equity concerns for health. Potential changes to Medicare may affect access to health care for the elderly, a group that is majority women, due to women's generally greater longevity than men's. Potential changes to Social Security may affect the health status of older Americans in other ways, given potential impact on their to ability to afford necessities such as food and safe housing.

The federal response to the Zika virus will, for better or for worse, affect reproductive health; other implications for affected families will also be relevant, particularly since the demands of caring for disabled children will likely fall disproportionately on women. The threat of increased discrimination against and marginalization of members of LGBTQ communities may have negative health effects, given what we know about the social determinants of health, even beyond the particular health consequences of a possible increase in violence against members of these communities and a potential

rise in the use of “conversion therapy.” Immigration policies may have significant health consequences for immigrants with specific gendered consequences— even those who reside in this country legally.

As the curators of the Health and Reproductive Health areas of the Gender and Policy Report, we will draw on research and scholarship to analyze proposed policies affecting health and what these proposals might mean for various populations. Many of our posts will appear in both the Health and Reproductive Health pages: we provide two platforms, one for those that want to hone into reproductive health matters, and one for those that want a broader view that also includes those gendered aspects of health policies separate from reproductive health.

We will focus our attention on those policies likely to impact the communities mentioned above, given significant and persistent social justice concerns about their health status and meaningful access to health care. These updates will come in many different forms – policy analysis posts, data visualizations, multimedia resources, and recaps of scholars’ and policy experts’ analyses of what particular changes might mean and for whom.

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