

## **Contraceptive Coverage: CLUW Leads the Way for Labor**

In 1990 a group of union feminists asked the AFL-CIO Executive Council to take a position in support of abortion. They did not get what they wanted. The resolution adopted on July 30, 1990 said, “The AFL-CIO ...adopts a carefully considered policy of deferring to individual judgments of its affiliates and their members on reproductive issues.”

The Coalition of Labor Union Women (CLUW), quickly responded by creating the Reproductive Rights Project to educate union women on the issue and provide an avenue for union women to work with other feminist women and feminist organizations to support women’s freedom to choose to have an abortion.

As the 1990s progressed, preventing pregnancy by using contraceptives became increasingly common for women of reproductive age. The majority of women in the United States between the ages of fifteen and forty-four were using some form of contraception, and nine in ten sexually active women said they did not wish to become pregnant. (Women need contraception for a good part of their lifetime: women who wish to have only two children generally use contraceptives for at least twenty years.) It became clear, therefore, that contraception was a significant expense for millions of American women and their families.

For all these reasons, the feminist movement began to advocate for insurance to cover contraceptives. Additionally, data proved that coverage improves access to contraceptives; in doing so it can more effectively prevent unplanned pregnancies and sexually transmitted diseases, ensure that women and families can control the number and spacing of their children, and provide women with contraceptives that are often necessary for their health.

In the mid-1990s the feminist movement advocated for “contraceptive equity,” that is, the inclusion of contraceptive prescriptions and devices in employer-provided health insurance plans – on the grounds that other preventive health prescriptions and devices (ie. for preventing diabetes, heart disease) were covered. And in 1997, CLUW adopted a resolution in support of contraceptive equity.

In 2001, CLUW created the Contraceptive Equity Project to make sure unions knew about contraceptive equity and were aware that they had the right to demand contraceptive equity – citing federal decisions (that year) of the Equal Employment Opportunity Commission and the Federal District Court in Seattle that ruled if a health plan generally covered preventive prescriptions and devices and did not include contraceptive prescriptions and devices – or specifically excluded any FDA-approved contraceptive prescription or device – that it was a violation of Title VII of the Civil Rights Act of 1964, as amended by the Pregnancy Discrimination Act of 1978.

Under the leadership of then CLUW President Gloria Johnson, CLUW created the Contraceptive Equity Project. During that time, Johnson was also serving on the AFL-CIO Executive Council. With her assistance, CLUW was able to persuade the United Food and Commercial Workers to submit a resolution in support of contraceptive equity to the AFL-CIO Convention. Thanks to some diligent and strategic work, on Dec. 6, 2001, the AFL-CIO passed a resolution in support of contraceptive equity, which was an exceptionally helpful step in getting unions to take action.

When the Contraceptive Equity Project shut its doors in early 2004, it had succeeded in assisting millions of union families secure contraceptive equity in their health plans. Even one union with a 94 percent male membership, the Masters, Mates and Pilots Union, realized that this was a “family issue” and successfully secured coverage.

In the 2012 wake of a Republican-induced controversy over contraceptive rights and health care (the furor was over an Obama administration decision that institutions – though not churches – run by religious organizations must nonetheless provide contraceptive coverage to women through the institutions’ health care plans), the AFL-CIO stepped forward to defend women’s equal access to contraception “regardless of where they work.” An updated statement, pushed by CLUW, added that “denial of contraceptive coverage is seen as discrimination against women and an attack on workers’ right to basic health coverage” under the new health care law.