Project Description & Background
The woman's annual preventive visit, or the Well-Woman Visit (WWV) is offered to most women at no cost to them through either their insurance or Medicaid. Although it is recommended that each woman receive at least one annual WWV, many women - even those with insurance - do not receive this care. Women without insurance have additional barriers but may be able to obtain well-woman care through community health centers or family planning clinics, although challenges remain. Receiving access to quality preventive care (e.g., age-appropriate screenings, immunizations, health education and promotion) is one factor that impacts a woman's ability to be healthy across her lifespan. However, understanding the contextual factors in women's lives, for example their opportunities for employment or good public transportation, can also help us better understand women's health. This document is based on Listening Sessions that were conducted with 156 women in 8 cities (Boston, Chicago, Detroit, Jackson, Nashville, New Orleans, Oakland, and Omaha) in the Spring of 2016 by the Well-Woman Project, as well as 104 Stories that were shared on a Well-Woman Project website/blog or phone line by women across the United States.

Themes and Recommendations from the Well-Woman Project

**Theme #1: The healthcare delivery system is not woman-friendly.**
- Adopt and promote a Charter which delineates the components of a woman and family friendly health delivery system.
- Engage in dialogue with large health system and Federally Qualified Health Centers (FQHCs) to encourage increased availability of appointments outside of traditional hours, drop-in/walk-in appointments, more time per patient to facilitate patient-provider interaction, and an increase in the availability of on-line phone consultation.

**Theme #2: Women's competing demands and priorities make accessing healthcare difficult.**
- As needed, create a city-wide task force to include key stakeholders to consider adoption of paid sick leave for both public and private employees.
- Develop policy and educational materials focused on city-specific sick and personal leave policies.

**Theme #3: Women weigh costs vs. benefits when deciding to access care.**
- Partner with major health systems, FQHCs, and other key stakeholders to provide women and families with access to insurance navigators on a year round basis.
- Develop a city fund to cover uninsured women and families and/or to help women and families struggling with high deductibles for their privately obtained insurance.
- Partner with major health systems and FQHCs to sponsor “One Day” Medicaid/free care several times a year for all.
Theme #4: Relationships with providers are key to women’s decisions about accessing care.

- Explore approaches to: development of a women-centered, consumer-driven mechanism to enable reviews of provider; enable women to have their health histories available on personal "apps" so that providers can readily access this information.
- Partner with: major health systems to develop and offer training to increase cultural competency/humility of the clinical workforce.

Theme #5: Health and insurance literacy empower women to advocate for themselves and others.

- Partner with health systems and other key stakeholders to support and develop health education campaigns that focus on women’s understanding of the importance of their own health and health care.
- Ensure availability of city-wide Women's Health Hotline as a go-to-resource for up-to-date information on changing health and health care recommendations and guidelines.

Theme #6: Positive mental health is integral to being a healthy woman.

- Work with community partners to ensure the availability of community-based resources for self-care and respite.
- Support increased access to mental health care through initiatives such as psychiatric consultation lines for primary care providers and telemedicine options for patients.

Theme #7: Healthy food, safe environments, and opportunities for physical activity are vital for women.

- Explore "food prescription" approaches and/or community supported agriculture (CSA) programs through partnerships between local farms, providers, and health departments to increase accessibility to fresh fruits and vegetables.
- Work with health systems, FQHCs and other stakeholders, to explore ways to allow women and families to apply for Supplemental Nutrition Assistance Program (SNAP) through their healthcare providers.
- Work with community partners to support the provision of community-based programs focused on how to use and cook healthy foods.
Theme #8: Social support systems facilitate women's willingness and ability to seek care.
- Explore development of a cadre of women's health peer advocates who can be present at women's appointments and advertise their availability through mobile technology.
- Work with health systems, FQHCs, and other stakeholders to increase "group" approaches to care for specific types of care.

Theme #9: Lack of childcare and transportation are major impediments to accessing healthcare.
- Encourage large health systems and FQHCs to explore partnerships with ride-sharing organizations for patient transportation.
- Work with city Department of Transportation to explore and develop plans to provide child-friendly public transportation.
- Work with large health system and FQHCs to encourage: provision of free parking vouchers or free/discounted bus/train cards to attend appointments; development of play areas or supervised childcare facilities in health clinics/provider's offices.

Theme #10: Fear is a pervasive component of many women's healthcare experiences.
- Support the provision of training in trauma-informed care for providers.