Katrina washes away reproductive health care



by Kirsten Sherk

n the days immediately after Hurricane Katrina, the United States watched as Gulf Coast residents were forced to flee their homes, taking only what they could carry. A disaster on a scale the United States had not faced since the San Francisco earthquake of 1906, Katrina's devastation evoked images reminiscent of developing countries, not the world's only superpower. As storm victims worked to rebuild their lives in strange cities, evacuees discovered something else in common with people in developing countries: the challenge of meeting their basic reproductive health needs.

For women facing an uncertain future, preventing unwanted pregnancies is more important than before; many feel they must focus their energies on protecting the families they have and rebuilding their lives. However, emergency health services in New Orleans and throughout the Gulf

Coast were unprepared to deliver reproductive health services.

"During these calamities, sometimes you don't bring your [birth control] pills with you because you're trying to get out of there in one piece," said Peter Durkin, President and CEO of Planned Parenthood of Houston and Southeast Texas. PPHSET provided free birth control pills and emergency contraception to evacuees. Houston absorbed more evacuees than any other U.S. city, taking in more than 200,000 people. Within a few days, they began arriving at Planned Parenthood health centers.

"They need their contraception," said PPHSET Clinical Services Director Dyann Santos, "and they will find a way to get it."

As the storm rolled in at the end of August 2005, Santos was overseeing the closing and evacuation of Planned Parenthood health centers in New Orleans and Homes flooded by floodwaters from Hurricane Katrina sit near downtown New Orleans.

Baton Rouge. She remembers receiving calls from relief agencies requesting basic reproductive health training on the fly. "They called asking for information about birth control, Pap smears, even [labor and] delivery," she said.

The health center in Baton Rouge was back open within 10 days, absorbing the staff from the nowclosed Planned Parenthood New Orleans. But even with the extra staff, the health center struggled to keep up with the huge increase in Baton Rouge's population.

Uncertain futures lead to new decisions for women

Health centers also began to see an increase in requests for abortion services. For many women who might have welcomed a pregnancy before the storm, their uncertain circumstances brought

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fear that they were not bringing children into a healthy or stable environment

Santos recalls: "Women had rashes all over from the chemicals in the water, and they were worried about their health. They worried about getting the kids they have a place to sleep at night."

Neither the Baton Rouge nor the New Orleans health centers provide abortion services. The other abortion providers that had been operating in New Orleans were wiped out. In Baton Rouge, there was only one provider for the whole city.

Women seeking abortions were also wiped out financially, or did not have access to their bank accounts. Because Medicaid does not cover abortion services for poor women, Planned Parenthood in Texas maintains a "Justice Fund" for women who cannot afford to pay for abortions. Gratefully, the fund received a significant increase in donations after Katrina, providing abortion services to evacuees in Houston and in Louisiana.

Disaster brings changes to "normal" operations

Although New Orleans is no longer daily front-page news, the city continues to struggle back from disaster. Parts of the city remain abandoned, without phone or even electrical services, and the streets are littered with abandoned cars.

"It's like the frontier," Melaney Linton, PPHSET Senior Vice President of Medical Services, said of New Orleans more than six months after the storm. "Only a third of residents are back in the community, but by March, our New Orleans health center [client load] had returned to pre-Katrina levels."

According to Linton, one reason



for the increased patient load is the loss of other providers. Many clinics have not been able to reopen, either because they could not afford to rebuild or because they permanently relocated to other cities. Planned Parenthood was fortunate that its 100-year old building did not suffer any severe damage. There was no flooding, so computers and patient records were all intact. As soon as the electricity and water were back on in their neighborhood in late October, the New Orleans health center was up and running. But after sitting in 95 degree heat for several weeks, their stock of pharmaceuticals, including hundreds of cycles of birth control pills and the injectable Depo-Provera, had to be destroyed.

The only abortion clinics in New Orleans remain closed, and no one is likely to replace them. The prospect of starting a clinic in a state that has a history of hostility toward abortion rights is daunting. Not only are current abortion laws restrictive, but Louisiana joins South Dakota as the second state to pass an abortion ban should *Roe v. Wade* be overturned.

In the last several months, many evacuees have either returned home or have settled where they are. The immediate crisis has eased, but health centers like Planned Parenthood have yet to return to normal. In Houston, staff is still reaching out to evacuees to be sure they are getting regular sexual and reproductive health care, and staff in Louisiana is confronting a different patient population — a large post-Katrina influx of Latin immigrants seeking jobs.

For months now, reports have been coming from various quarters about shortcomings of the emergency response to the disaster along the Gulf Coast. None of them, however, mentioned that health care services were unprepared to meet the needs of the hundreds of thousands of adolescent and adult women for whom reproductive health care is basic health care. Planned Parenthood quickly became an expert, reaching out to displaced populations and working with relief agencies to be sure that women could get the health care they needed.

Resources:

Planned Parenthood of Louisiana and the Mississippi Delta. http://www. plannedparenthoodlouisiana.org/ Planned Prenthood of Houston and Southeast Texas. http://www.pphouston. org/site/PageServer