

Mission:

To build a network of international workforce, mobilizing communities to be self-sufficient, executing effective and efficient assessments, feasibility studies, and implementing projects for the complete physical, mental and social wellbeing of all.
—Optimal Wellbeing.

What do we do?

A-Kins Analysts and Project Managers, a minority woman owned community based small business, is a specialty provider of Health Consulting Services including:

- Health Care Advisory & Support Services
- Health Care Strategic Plans/Project Management
- Business Plan Development/Financial Resource Planning/Analysis

.....Health Care Systems Development; Research; Analytics; and community based social determinants of health - Economics

"Successfully implementing challenging projects in challenging places"

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US —Health Care in Reform.....continued



WOMEN'S HEALTH

The constitution encourages the separation of church and state, hence, the right of every American to worship whichever God they wish, in whichever way they so please. When it comes to women's health care, however, the choice to seek help and the right to stay clear of help, is controlled by the government. Women are the carriers of the future of America, therefore, the government



ance, but the number of times a woman and her children have to see the doctor is more than any other in the American household, because of the "bearer of the American child status". The amount of co-pay mounts-up, hence, the cost of premiums and out of pocket expenditure for 20 out of 100 women in US, is more than 10% of the total family income (see graphs below, 2006-2014).

A change effect that is accountable to the people, by the people, for the people.

looks to their health, so they can bear healthy American children. The overseeing power of the government, however, has become overly burdensome. Women now feel policed when looked upon as the bearers of the future of America. This is a huge burden. Women who are pregnant do not need any other stressor factors placed on their shoulders. **Women should be able to choose their health care, without the Government looking over their shoulders**, no matter how much the government puts down in payment to aid the care of women, for the sake of the unborn American child. We believe this is the definition of separation of Church and State.

The disparities in women's health care in United States of America (US) is too glaring to overlook.

The health outcomes of certain races and ethnic groups are comparable to European counterparts, while others do not mirror the genetic composition from which they are from. For example, the African American woman birth outcome in US does not mirror the birth outcomes of their genetic counterparts in Africa, when all environmental factors including infections and access to health care, are "*held constant*". **Most call these disparities inequities, I call this "man-made barrier".**

There is a slow but sure progress in the number of women under age 65, who have health insur-

Women are asked to get add-on insurance and pay more if they intend having children, this is "systemic gender discrimination" that has slipped into the general acceptance category of US population. Men pay less than women when it comes to health care insurance. This systemic discrimination of women leads to women being dropped from their health care insurance, if they ever get pregnant; or women are asked to buy add-ons for the American child they carry. **This gender disparity in insurance costs should be address by the policy makers and the government. Women should not be punished for being the bearers of the future of America, -the children!**



US Women's Health Care System

.....Where we are.

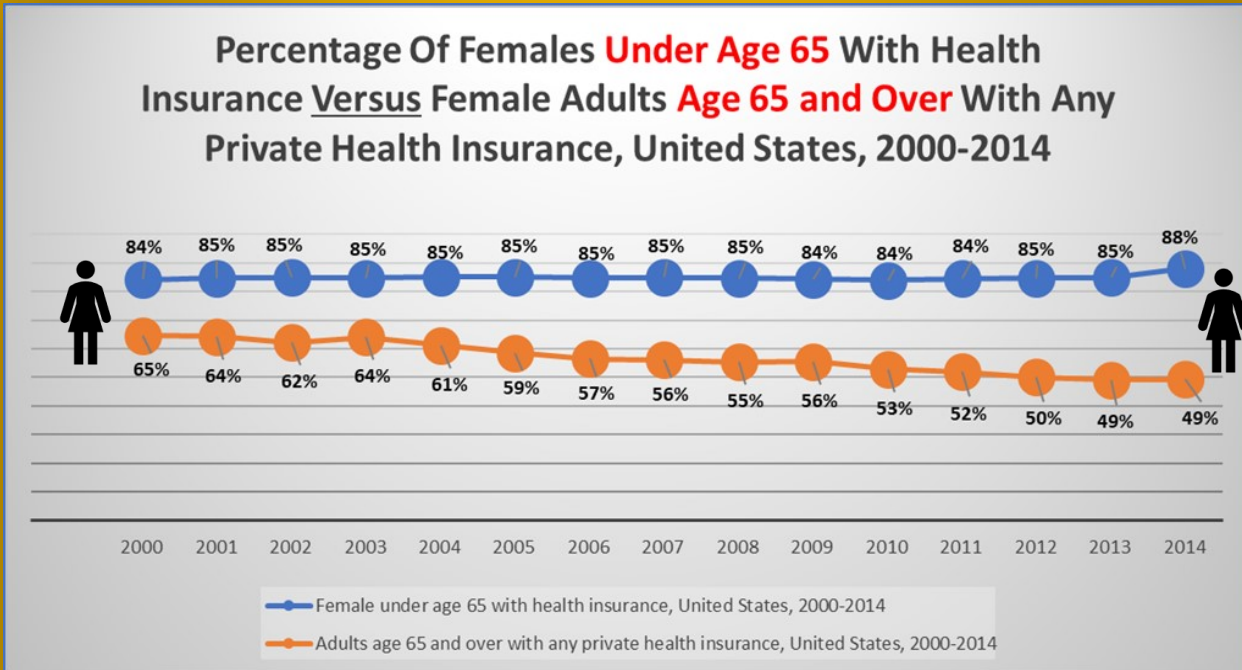
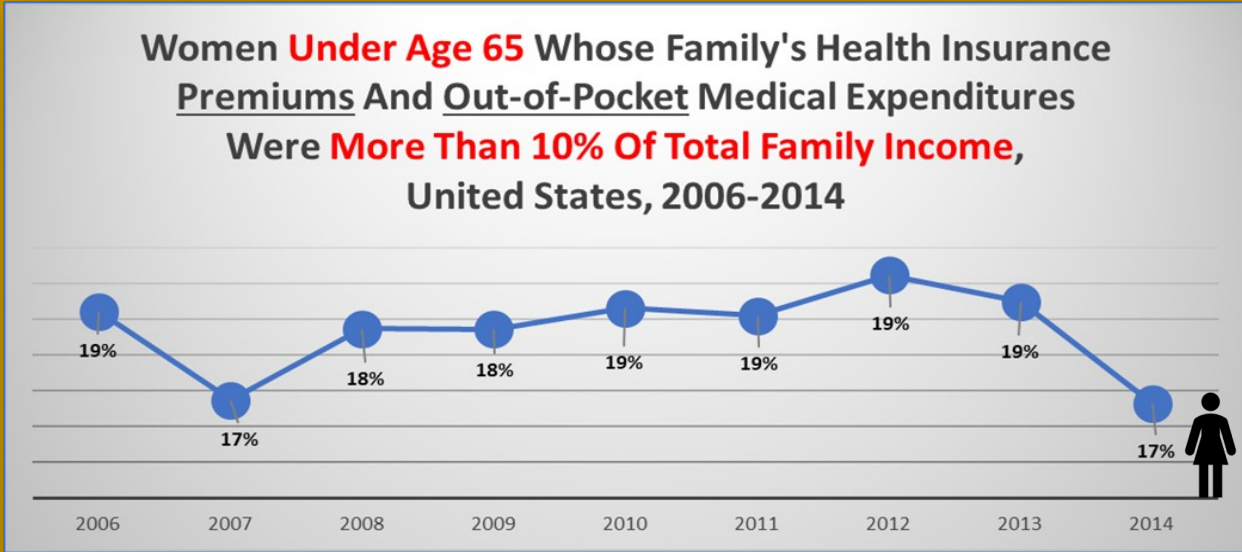
Major Functions of the Health Care System	The People	The Government	Health Care Regulatory Agencies	Health Care Market	Government Administrative Agencies
Power	X	✓	✓	✓	X
Policy	X	✓	✓	✓	X
Funds	X	✓	X	X	✓
Market	X	X	X	✓	X
Price	X	✓	X	✓	✓
Cost Savings	X	X	X	X	✓
Health Care Status	✓	✓	✓	X	X
Customer Selection	X	X	X	✓	X

The **Power** is in the **Market & Government**



US Health Care in Reform

Health Care Status of Women

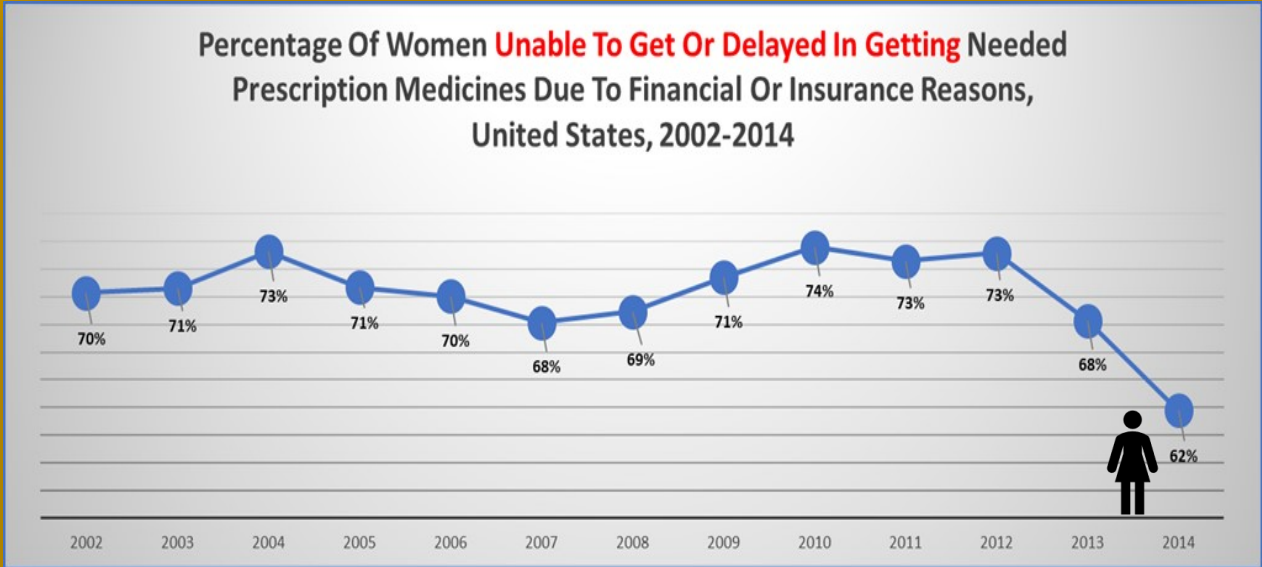


Source: Agency for Healthcare Research and Quality, Center for Financing, Access, and Cost Trends, Medical Expenditure Panel Survey
<https://nhqrnet.ahrq.gov/inhqrdr/data/query>



US Health Care in Reform

Health Care Status of Women



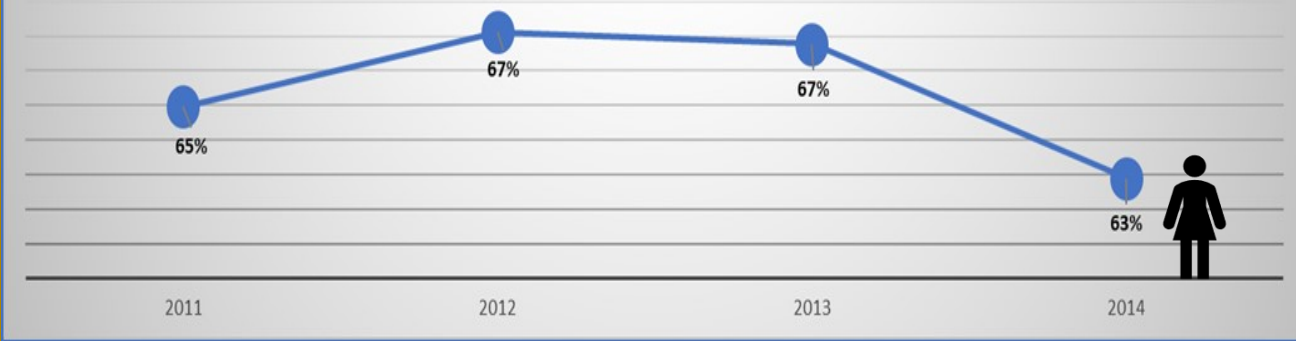
Source: Agency for Healthcare Research and Quality, Center for Financing, Access, and Cost Trends, Medical Expenditure Panel Survey
<https://nhqrnet.ahrq.gov/inhqrdr/data/query>



US Health Care in Reform

Health Care Status of Women

Percentage of Adult Women With Obesity Who **Do Not Now** Spend Half An Hour Or More In Moderate Or Vigorous Physical Activity At Least Five Times a Week, United States, 2011-2014



Source: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey; and National Center for Health Statistics, National Vital Statistics system - Natality.
<https://nhqrnet.ahrq.gov/inhqrdr/data/query>

2 in 10 Women Who Completed a Pregnancy in the Last 12 Months Received Early and Adequate Prenatal Care in US, 2014



1 in 10 Live Born Infants Were Born at Low Birth Weight (Less than 2,500g) in US, 2007-2014



Of what good is it to see one's doctor and not be able to afford medications prescribed? Seven (7) out of 100 women who need medical care, tests or treatment within the past 12 months, were unable to or delayed in getting these services due to financial reasons (see graph above, 2008). A significant decline from nine (9) out of 100, 2014, thanks to Obama Care. However, in 2014, 62 out of a 100 women are still unable to get, or delay prescrip-



same, hence, the “copy-cat psychosocial behavior” of girls and their nurturing and caring nature. I would say, the burden of feeding American households lies mostly with the women. Not to be too judgmental, but truly, **the American Household becomes whatever is fed to them**, more often than not by women. This is a huge responsibility for women to bear, so teaching the American household to cook and feed their families healthy food is a good program to

Of what good is it to see one's doctor and not be able to afford medication prescribed?

tion medication due to financial or insurance reasons; compared to 70%, in 2002 (see graphs above, 2002-2014). Poor health outcomes can be seen to correlate with price of medication and lack of full insurance coverage of medications. **Therefore, reducing the price of medication and full insurance coverage of all medications is a good start in this continuous continuum of improvement process.....**

About two (2) out of 10 women in US received early and adequate prenatal care, that is about 15 out of 100 women (2014). All being said, the birth outcome of the American child is still found wanting, as one out of ten (10)

and eight (8) out of 100 children born in US are low birth weight. Low birth weight costs the family, the insurance companies, and the government a ton of money. **One could say that the funds it takes to give birth to 9 normal weight children is being spent by the one (out of ten) who is born low birth weight. In effect, one pays twice the price to have nine (9) normal weight child and one low birth weight child.**

Women, apart from being the bearers of the future of America, are also the head of the **“care of the American household”**. The inbred composition of women steers them to care for their household, and train the future women in the household to do the

enroll American in. **Thanks to Food Networks, we are seeing more American households try to cook healthy fresh home-cooked food for their families.** This is not however true when it comes to physical activities.....which we will leave to the Men of the American household.

More women who are obese are trying to spend half an hour in moderate or vigorous physical activity at least once a week, but only about four (4) out of 10 obese women are engaged in physical activities that are moderate or vigorous at least five times a week, in US (see graphs above, 2011-2014).



US Women's Health Care System

.....Where we should be.

Major Functions of the Health Care System	The People	The Government	Health Care Regulatory Agencies	Health Care Market	Government Administrative Agencies
Power	✓	X	✓	X	X
Policy	✓	X	✓	X	X
Funds	✓	✓	X	X	X
Market	✓	X	X	X	X
Price	✓	X	X	X	✓
Cost Savings	X	✓	X	X	✓
Health Care Status	✓	✓	✓	X	X
Customer Selection	✓	X	X	X	X

Giving the **Power** Back to the **People**



The Best of Two Worlds: Bar Beach, on the Island, Lagos Nigeria



Author: Folorunso Akintan MD MPH MBA

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"Successfully implementing impossible projects in impossible places"

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