Maine’s Permanent Commission on the Status of Women (MePCSW) is an unfunded, nonpartisan, independent advisory board charged by statute with advising Maine policymakers—including the legislature and Governor—on matters that impact our state’s women and girls.

**ECONOMIC SECURITY**

2060

This is the year that women in Maine (*meaning white women specifically*) would achieve equal pay if current trends continue.

**EDUCATION**

40%

Of eligible children are enrolled in PreK statewide

Support universal PreK access for all districts to ensure all Maine youth can succeed academically.

**UNDERSERVED WOMEN**

We found very little quantitative data at the state level on the needs of underserved women.

Commission and fund a study of the needs of underserved women to include indigenous women, women of color, women with disabilities, elderly, youth, low-income, and New Maine women.

**HEALTH**

$178 billion

Expected cost between 2017 & 2026 on healthcare

Provide no or low cost reproductive, dental and behavioral health services to help Maine women obtain care without fear of cost or resulting debt.

**FREEDOM FROM VIOLENCE**

Almost 21K

Calls to the statewide domestic violence & sexual assault helplines

Sustainable funding is essential. The Legislature must address this issue to ensure survivors have continued, long-term access to needed services across the state.

The commission recognizes the full spectrum of self-identified women in the state of Maine. The report is a snapshot of the needs of self-identified women and girls: where we are now, and steps Maine should take to move them closer to full equality.
Introduction:

Maine’s Permanent Commission on the Status of Women (MePCSW) is an unfunded, nonpartisan, independent advisory board charged by statute with advising Maine policymakers—including the legislature and Governor—on matters that impact our state’s women and girls. Commission members represent a variety of fields, backgrounds and political persuasions. The Commission researches and prepares a biennial report for the legislature that reflects the current status of women and girls in Maine and recommends policy options that will improve their lives.

In 2020, Maine and the nation commemorate the one-hundred year anniversary of most women winning the right to vote through the 19th Amendment to the United States Constitution. The battle for equal suffrage spanned many decades and required much persistence from generations of women and their male allies.

While winning voting rights was an important victory, the fight was not over in 1920. Not all women were enfranchised by the 19th Amendment. The country did not recognize Native Americans as citizens until 1924, and Maine didn’t grant them voting rights until 1954. Jim Crow laws prevented blacks in the south from voting until Congress passed the Voting Rights Act of 1965. Since 1920 women have worked hard to gain access to equal opportunities in economic security, education, and health, to be protected from domestic and sexual violence, and to meet the particular needs of minority women. That work continues today.

The commission recognizes the full spectrum of self-identified women in the state of Maine. This report is a snapshot of the needs of self-identified women and girls: where we are now, and steps Maine should take to move them closer to full equality.
Where we are:

Women in Maine who work full-time, year-round have median annual earnings of $40,000, which is 83.3 cents on the dollar compared with men who work full-time, year round.[1] Black women earn just 65 cents for every dollar earned by White men. If current trends continue, women in Maine will not see equal pay until the year 2060.[2] Additionally, 49.2% of Maine women have experienced sexual harassment in the workplace, which can lead to employment instability.[3]

12.4% of Maine’s women fell below the poverty line in 2018.[4] Across all states Maine ranks 42nd in food insecurity and hunger. Over 14 percent of households were food insecure on average from 2015 to 2017, meaning that at some point during the year, they experienced difficulty providing enough food due to a lack of money or resources.

Nearly two out of every three low-income Mainers have no access to paid sick time. In 2017, Mainers lost $115 million in wages as a result of unpaid sick leave. Paid sick days will put that money back into Mainers’ pockets. When families can afford the necessities without having to sacrifice their health, our whole economy benefits.[5]

Parents throughout Maine struggle to find quality and affordable childcare for infants, and for older children when school is not in session. Maine has expanded the child care subsidy program and the earned income tax credit, but a scarcity of trained and licensed providers continues to limit daycare availability, which hampers women’s ability to work and support their families.

“Economic security is foundational for women’s equality and essential for the support and well being of families. When women achieve economic security we all benefit.”

Senator Eloise Vitelli
Assistant Majority Leader

What Maine can do:

- Eliminate the wage gap. In Maine, more than 53,000 family households are headed by women. Eliminating the wage gap would provide much-needed income to women whose wages sustain their households.
- Address the problem of sexual harassment in the workplace by supporting policy that prevents the signing of non-disclosure agreements as term of employment.
- Develop and implement a portable, opt-out retirement program for Maine workers.
- Revamp and adequately fund public safety net programs -- such as Temporary Assistance for Needy Families (TANF), the Supplemental Nutrition Assistance Program (SNAP, or Food Supplement), Medicaid (MaineCare), and General Assistance -- to meet the needs of individuals and families experiencing poverty.
- Provide women with incentives and access to educational and training programs to prepare them for high paying jobs with benefits and without incurring crushing student debt.
• Guarantee access to paid sick days for workers to take care of themselves or their immediate families while also protecting public health.

• Institute incentives for employers to provide paid family and medical leave to support women and families staying in the workforce through experiences like welcoming a new child, caring for aging parents and family members with disabilities, or life’s other challenges.

• Ensure access to comprehensive, accessible, and affordable health care whether through programs like MaineCare, other public health insurance options, or by controlling costs and premiums in the private insurance market.

• Ensure access to quality and affordable child care and family care, including home-based health care as universal options, both to prepare the next generation and to allow parents to stay in the workforce.

2060

This is the year that women in Maine (*meaning white women specifically) would achieve equal pay if current trends continue.

References:
Where we are:

Gender-based violence – including the full range of domestic and sexual abuse, violence victimizations, stalking, and human trafficking – has a profound impact on Maine women and girls of all ages and abilities. Domestic and sexual violence disproportionately affects women and girls. As in the rest of the nation, these crimes carry significant stigma for victims, and are the most underreported violent crimes. Nearly one in five adult Maine residents reports that they have been the victim of rape or attempted rape during their lifetime; 35.7% of female respondents have experienced this devastating crime at some point in their lives.[1] In 2019, advocates from the Maine Coalition to End Domestic Violence (MCEDV) network worked with 13,759 people statewide answering 18,348 helpline calls[2] and the Maine Coalition Against Sexual Assault (MECASA) served 4,895 individuals statewide, with 2,596 conversations through the helpline.[3] In Maine, a domestic violence assault is reported to law enforcement every 2 hours and 5 minutes,[4]. Only about half of all assaults are reported to law enforcement.[5]

Women experiencing violence have an increased risk of homelessness and future assaults. More than a third of domestic abuse survivors report becoming homeless immediately after separating from their abusive partners[6] and in a report conducted by Portland Maine’s Preble Street Resource Center, 44% of women interviewed reported being a victim of sexual assault since becoming homeless.[7] A recent study about the impact of financial abuse in Maine found that 81% of survivors surveyed in Maine cited economic abuse as a barrier to separating, 57% noted that their abusers incurred debt in their names, and 72% reported that abusers lied about paying the bills.[8] Women who experience rape,

stalking, and/or intimate partner violence are significantly more likely to experience asthma, irritable bowel syndrome, diabetes, frequent headaches, chronic pain, difficulty sleeping, activity limitations, poor physical health, and poor mental health than women who have not had such experiences. [9]

Girls are vulnerable to sexual violence as well. One in four girls will experience a sexual assault before age 18.[10] Approximately 18% of girls in Maine schools report that they have been physically forced to have sexual intercourse, and 9% of Maine high schoolers reported that someone they were dating or going out with physically hurt them on purpose at least once.[11] Additionally, over 23% of female high school students report having been the target of offensive sexual comments at school or on the way to or from school in their lifetime.[12] In 2019, Maine’s Network of Children’s Advocacy Centers conducted 1,326 forensic interviews with child victims of sexual abuse.[13]

At the intersection of domestic and sexual violence is human trafficking. Human trafficking involves a trafficker using force, fraud, or coercion to control victims for the purpose of engaging in commercial sex acts or labor services against their will and while it’s common for trafficking to include multiple perpetrators rather than a single abuser, sometimes the trafficker is a person the victim loved and trusted. There are an estimated 300-400 sex trafficking victims per year in Maine [14] and that is
likely an underestimate, based on numbers served by Maine’s safety net programs. It is important to recognize that human trafficking and domestic violence don’t occur in silos – rather, there is a marked overlap in the pattern of behaviors that both abusers and traffickers use to exert power and control over a victim. [15]

What Maine can do:

- **Sustainable funding is essential.** Unfortunately, the first session of the 129th Legislature only allocated critical funding for two years of programming for ongoing victim service needs. The Legislature must address this issue to ensure survivors have continued, long-term access to needed services across the state.

- **Pursue policies that are survivor focused** by centralizing survivor safety and perpetrator accountability, as well as expanding access to safe and affordable housing for survivors.

- **Continue to work on sexual assault statutes of limitation reform** to ensure access to justice for victims. This includes expansion of the current statute of limitations for adult victims and a time-limited opportunity for civil remedies in currently time-barred cases.

- **Support access to Maine’s safety net services and programs** that are essential for survivors’ safety such as food assistance, TANF, MaineCare, and general assistance. Because so many survivors cannot “provide proof” of the abuse, it is critical that we create a safety net that is available to all people who need help; in so doing, we create systems that serve the most vulnerable and marginalized survivors in our state.

- **Support access to paid time off for survivors of domestic abuse and sexual violence.**

- **Support rural survivors of violence by supporting expansion of public transportation systems and access to broadband** and other technologies that are essential for success in the 21st century.

- **Maintain and expand access to a full range of reproductive and sexual health care.** The ability to control whether or not one becomes pregnant and whether or not one carries a pregnancy to term is a key safety planning tool for survivors who face reproductive and sexual coercion and assault.

- **Support statewide resources and implementation strategies for gender based violence prevention education** that address vulnerable populations in the state, especially youth, and engage the whole community. Gender based violence is not just a women’s issue.

“We cannot wait any longer to ensure that victims and survivors throughout Maine have access to the critical services they deserve.”

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Sen. Erin Herbig
References:
Where we are:

In Maine, it is a local decision to develop a public preschool (PreK). Almost 80% of Maine school districts offer at least one public preschool classroom and approximately 40% of all eligible children are enrolled in Pre K statewide.[1] Access and participation in high quality PreK is an indicator of future academic success. Maine does not have an equitable approach to PreK education and significant increases in support are needed to ensure all children start school on equal footing regardless of where in the State they grow up.

At the national level girls and boys do not significantly differ in their abilities in mathematics and science, but do differ in their interest and confidence in science, technology, engineering, and math (STEM) subjects.[2]

At the national level girls are under-represented in participation of high-level engineering and computer science courses: in Maine these trends are even more drastic.[3] In 2019, 333 Maine students took the AP Computer science exam - Only 23% of those students were female (19% for AP CS A and 26% for AP CSP). Only 35% of Maine students who took the Physics AP exam were female.[4]

Women remain underrepresented in the science and engineering workforce, with the greatest disparities occurring in engineering and computer sciences. Women constitute 47% of the overall workforce and 28% of the combined sciences & engineering workforce.[5]

The combination of Maine’s high student debt -- the 8th highest nationally -- and a persistent wage gap makes it harder for women to finance their college education.

Comprehensive, evidence-based health education, including sex education and education about sexual harassment and sexual assault, is lacking in many Maine schools. This education is critical to promoting health and preventing abuse for all students.

College graduates develop important skills and knowledge and earn more during their lifetimes than non-degree earners. Maine college attainment is the lowest in New England. State appropriations now cover less than half the cost of tuition at University of Maine, shifting costs to students and parents.

Maine college debt is high. Over six in ten who graduated college in Maine in 2018 had $32,676 in student debt, almost $3500 above the national average. The combination of Maine’s high student debt -- the 8th highest nationally -- and a persistent wage gap makes it harder for women to finance their college education.

The Opportunity Maine program, which provides tax credits for STEM and non-STEM college graduates, is less generous to non-STEM students and could be better publicized and utilized.
Research indicates that Maine’s Parents as Scholars Program improves welfare recipients’ chances of moving out of poverty. However, recent utilization is currently quite low.

What Maine can do:

- Support universal PreK access for all districts to ensure all Maine youth can succeed academically. This initial investment in our children will pay dividends in advancing academic, civic engagement, and workforce development outcomes for our state.

- Highlight and share Maine’s female role models, leaders, and scholars in K-12 education and in the Maine Learning Results to build a common understanding of women’s experiences and contributions throughout history, in all fields.

- Redesign learning experiences in high-level engineering and computer science courses. Educators need support in revising teaching methods and content to align with best practices for addressing the learning styles and interests of girls and women.

- Require evidence-based health education in public schools through the Maine Legislature. Health education standards should be regularly reviewed and updated to ensure best practices are recommended. Remind schools that comprehensive sexuality education is a requirement in Maine.

- Support higher education for low-income mothers. The steps outlined in LD1774 and the accompanying work group should be implemented to increase enrollment and completion rates in the Parents as Scholars program.

- Improve programs that promote college affordability. Better publicize the Opportunity Maine program and make the website easier to use. Equalize the Opportunity Maine program for STEM and non-STEM students. Connect low-income students and their families to TRIO programs, Jobs for Maine’s Graduates, and other resources meant to assist them.

- Examine and revise the process of awarding financial aid by Maine’s institutions of higher education to address the reduction of financial aid awards when outside scholarships are awarded.
MAINE WOMEN & EDUCATION

References:
Where we are:

Maine expanded Medicaid eligibility in 2019 to individuals with incomes less than 138% of the Federal Poverty Level. This has substantially increased access to health care for women and girls; however, the rising costs of health insurance, health care, and prescription drugs continue to outstrip the means of many low- and middle-income Mainers.

Health care spending continues to rise faster than the cost of living, increasingly putting low- and middle-income people in the position of choosing between healthcare and other household expenses. Between 2017 and 2026 Mainers are expected to spend almost $178 billion on health care. In 2026 alone, the cost of health care is expected to reach $16,000 per capita. Health care has gone from being 17% of Maine’s economy in 2001, to 25% in 2019, and is projected to increase to 27% by 2026.[1]

Medicaid expansion is helping Maine address our serious opioid crisis. Between 2017 and 2019 drug deaths increased 102% from 12.1 to 24.5 deaths per 100,000 females ages 15-44.[2] Maine has one of the highest rates in the country of infants born drug-affected – peaking at 1,013 during 2015, a 77% increase from 2010, and 904 babies in 2018.[3] This is a significant public health issue for both mothers and their newborns.

Too old for pediatric care and too young to pay for or provide their own transportation to medical care, adolescents remain an underserved population. There are only 16 school-based health centers in Maine, which significantly improve the rate at which adolescents access health care.

Maine has the oldest population by median age in the country and the highest concentration of baby boomers per capita. Many of these individuals struggle with access to affordable services that would enable them to “age in place” in their homes, together with managing the skyrocketing prices of prescription drugs. Women lack access to care regarding age-related conditions such as menopause or breast and cervical cancer screenings.

What Maine can do:

- Continue to search for ways to provide no or low cost reproductive, dental and behavioral health services to help Maine women throughout the state obtain care without fear of cost or resulting debt.

- Support the expansion of school-based health centers to more school systems over the next 3-4 years in order to strengthen health care for adolescents.

$178 BILLION EXPECTED COST BETWEEN 2017 & 2026 ON HEALTHCARE
• Replace lost federal funds with state funds and sustain Maine’s existing family planning network, thereby ensuring access to affordable, non-judgmental sexual and reproductive health care in local communities.

• Support implementation of the Maternal Opioid Misuse (MOM) grant Maine DHHS was awarded in late 2019 by the Center for Medicare and Medicaid Innovation, designed to strengthen the system of care for pregnant and post-partum women addicted to opioids.

• Support new mothers with pre- and postnatal care, including paid maternity leave, sick time, and home health care nurses, thus decreasing the maternal mortality rate, and increasing access to supports for postpartum mental health.

• Provide programs that help older Mainers stay at home in their communities, such as the Medicare Savings Program (MSP) and the Drugs for the Elderly Program (DEL).

References:
There are about 14,000 reported cases of elder abuse in Maine annually (though it is believed to be significantly underreported).[1] In a recent study, Maine victims of financial exploitation were found to be more likely to be older (over 75), female, and widowed, single or divorced.[2] Most abuse is committed by family members.[3]

In a study of elder female sexual abuse victims, 81% of the abuse was perpetrated by the victim’s primary caregiver.[4]

Women with intellectual and/or developmental disabilities (ID/DD) face many barriers to accessing quality healthcare in Maine, particularly reproductive healthcare. For example, they are less likely than women without ID/DD to have had cervical and breast cancer screenings or to have ever visited a gynecologist. They often face stigma around being sexually active. In addition, difficulties in communication and past experiences of trauma or neglect can affect these patients’ abilities to describe their symptoms, submit to exams, and receive the treatment they need and deserve.[5]

We found very little quantitative data at the state level on the needs of underserved women, including Native Americans, women of color, those with immigrant/refugee status, women with disabilities, and transgendered women. This limits our ability to identify women’s unique needs and recommend solutions. In the section below, we have identified issues to the best of our ability, but believe Maine should improve collection and analysis of data related to underserved women.

Where we are:

- There are about 14,000 reported cases of elder abuse in Maine annually (though it is believed to be significantly underreported).[1] In a recent study, Maine victims of financial exploitation were found to be more likely to be older (over 75), female, and widowed, single or divorced.[2] Most abuse is committed by family members.[3]

- In a study of elder female sexual abuse victims, 81% of the abuse was perpetrated by the victim’s primary caregiver.[4]

- Women (and men) with intellectual disabilities have shortened life expectancy and experience multiple health disparities. They are more likely to live with complex health conditions and/or have poorly managed chronic conditions, to be obese, to use psychotropic medications, to miss cancer screenings, and to have undetected poor vision. They are less likely than individuals without ID/DD to access dental care, have hearing screenings or to receive timely vaccines.

What Maine can do:

- Commission and fund a study of the needs of underserved women to include indigenous women, women of color, women with disabilities, elderly, youth, low-income, and New Maine women.

- Request that data gathered by the DOL, DHHS, DOE and other Maine state agencies include a breakdown of race, age, income, ethnicity, and gender.

- Reserve a seat on the commission for populations that are not currently represented.
• Train providers to understand how people with developmental disabilities communicate when they are in pain. The Maine Developmental Disabilities Council has collected a number of resources for providers on this topic, which can be found at this website: https://maineddc.org/index.php/for-caregivers/for-practitioners/23-dd-health-resources

Commission and fund a study of the needs of underserved women to include indigenous women, women of color, women with disabilities, elderly, youth, low-income, and New Maine women.

References:
Conclusion:

We can point with pride to many significant gains for women. Yet, a century after the 19th Amendment was ratified we are still celebrating women’s “firsts”- as an example, in 2018 Maine finally elected our first ever woman Governor, Janet Mills.

We are grateful for the leadership shown by Governor Mills and the 129th Legislature in approving Medicaid expansion, paid leave, protections from domestic abuse and sexual violence, and a salary history ban supporting progress towards pay equity. These benefit all Maine people.

But as this report shows, Maine women still disproportionately struggle for economic security, experience domestic and sexual violence, and lack access to health care. School history classes neglect women’s achievements and our historic struggle for equality. And women of color trail white women in many categories, from pay equity to achieving high level jobs, appointments, or elected office. This report identifies concrete steps Maine can and should take to strengthen women’s equality. Critical to our understanding of the needs of all Maine women is to commission a study of those who are underserved; Native American, women of color, women with disabilities, elderly, youth, low-income, and New Maine women.

Finally, a century after winning suffrage the only constitutionally protected right women have is the right to vote. Permanent Commission members are united in believing that, in 2020, it is time for Maine’s Constitution to prohibit discrimination on the basis of sex. The legislature should pass LD 433 this session and send it to the voters to decide at referendum in November 2020.

Commissioners must be a resident of the state who has knowledge of the problems facing women in the state, has experience in advocacy relating to women's issues, and provides leadership in programs of activities that improve opportunities for women.

- Fatuma Hussein, Representing the experiences of minority women
- Jill Randall, a the experiences of elderly women
- Vacant, Representing the experiences of low-income women
- Vacant, Representing the experiences of disabled women
- Samantha Lott Hale, Representing the experiences of young women
- Rebecca Austin*, Representing the experiences of victims of domestic abuse and violence
- Vacant, Representing the experiences of federally recognized tribal women
- Kate Elmes, At-Large
- Amy Fried, At-Large
- Muriel Mosher, At-Large
- Jennifer Wilkey, At-Large
- Darylen Cote, At-Large
- Hon. Meredith Strang Burgess, At-Large
- Susan Mackey Andrews, At-Large
- Ruth Kermish-Allen, PhD, At-Large
- Bonnie Porta, At-Large
- Anne B. Gass, At-Large
- Kelly Bentley, At-Large

*(pending approval)
RESOURCES & FURTHER READING

Economic Security:
- Maine Women’s Lobby: mainewomen.org
- Building a Prosperous Maine: A Roadmap to Economic Security for Women and their Families - MWL Educational Fund
- Maine Can Do: maineCanDo.org
- Talk Poverty: talkpoverty.org
- Status of Women in the States: statusofwomendata.org

Freedom From Violence:
- Maine Coalition Against Sexual Assault: mecasa.org
- Maine Coalition to End Domestic Violence: mcedv.org
- "The Sexual Assault Epidemic No One Talks About" - NPR
- Maine's Network of Children's Advocacy Centers: cacmaine.org
- Maine Sex Trafficking and Exploitation Network: mainesten.org
- Children's Safety Partnership: childrenssafetypartnership.org

Health:
- Maine Family Planning: mainefamilyplanning.org
- Office of Women's Health: womenshealth.gov
- Medline Plus: medlineplus.gov
- Eunice Kennedy Shriver National Institute on Child Health and Human Development: Women's Health

Education:
- Children's Safety Partnership: childrenssafetypartnership.org
- Diversity Gaps in Computer Science: Exploring the Underrepresentation of Girls, Blacks and Hispanics - Google for Education
- STEM Classroom to Career: Opportunities to Close the Gap - Educational Research Center of America
- Science and Engineering Indicators 2018 - National Science Foundation

Underserved Women:
- MaineTransNet: mainetransnet.org
- Wabanaki Women's Coalition: wabanakiwomenscoalition.org
- Disability Rights Maine: drme.org
- Immigrant Resource Center of Maine: ircofmaine.org
- Maine Council for Elder Abuse Prevention: elderabuseprevention.info
- Violence Against American Indian and Alaska Native Women and Men 2010 Findings From the National Intimate Partner and Sexual Violence Survey - National Institute of Justice Research Report
By Candace Kanes & Anne Gass

1840  Married women gain rights to their dowry, contracts, & commerce equal to unmarried women.
1844  Married women gain some property rights – expanded in 1852.
1854  First known instance of Maine legislature being asked to consider suffrage.
1857  Suffragists petition Maine legislature for suffrage.
1869  Maine Legislature considers first woman suffrage bill.
1873  Congress passes the Comstock Act making it illegal to advertise or sell birth control.
1876  Married women gain right to prosecute and defend lawsuits apart from husbands.
1881  Women gain right to serve as superintendent or supervisor of schools.
1887  Age of "Protection" for girls from rape/sexual assault raised from 10 to 13; raised to 14 in 1889; 16 in 1897.
1899  Women gain right to practice of law; control their bank accounts; serve as registrars of probate.
1907  Married women 21+ gain right to act as guardians without husband's consent.
1917  Married woman/widows gain right to dispose of property by will.
1920  Most women win voting rights through ratification of the 19th Amendment.
       The Maine Supreme Judicial Court rules women may be elected to any office.
1923  Federal Equal Rights Amendment (ERA) first introduced into Congress.
1960  FDA approves oral contraceptives.
1963  Congress passes Equal Pay Act, promising equal pay regardless of race, color, religion, national origin, or sex of the worker.
1965  US Supreme Court rules in Griswold v. Connecticut that birth control cannot be withheld from married couples.
1972  Congress passes Title IX, Prohibition of Sex Discrimination
       US Supreme Court rules birth control cannot be withheld from unmarried couples.
1973  US Supreme Court Roe v. Wade decision legalizes abortion
       Supreme Court bans sex-segregated "help wanted" ads.
1980  Maine voters defeat a Maine Equal Rights Amendment (this is still not ratified).
2018  Maine elects first woman Governor, Janet Mills.

Note: This is a very high-level timeline that is intended to illustrate how long it took for women to win voting and other rights in Maine, through either state or federal action.