

Press Release

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Washington, DC—On Friday, Chronic Illness Advocacy & Awareness Group (CIAAG) released *Violation of a Nation*, a report outlining the federal government’s role in creating and implementing a population-based study on the millions of U.S. citizens diagnosed with complex chronic medical illnesses and/or chronic pain. The report revealed that, beginning in 2010, the U.S. Department of Health & Human Services (HHS) and its Centers for Disease Control (CDC) worked alongside a number of special interest groups and insurers to introduce and incorporate cost-cutting restrictions into the national healthcare delivery system. The government has been discerning the impact of the restrictions by collecting data (from doctors and others in the medical field) on patients across the U.S., who are being studied without their knowledge or consent, and without regard for their health and wellbeing.

In 2010, the National Academies of Science, Engineering & Medicine (established by Congress to “meet the government’s need for an independent advisor on scientific matters”) worked with the National Prevention, Health Promotion and Public Health Council (a committee—headed up by HHS Secretary Kathleen Sebellius—created via executive order under then-President Obama and billed as “An important component of the Affordable Care Act”) to establish the restrictions in patient care. The committee was tasked with developing a study to examine the impact of the restrictions which were formed under the government’s new “Healthy Living” initiative.

The “Healthy Living” initiative promoted “self-care” and activities such as tai chi over medication management. A National Academies’ report entitled *Living Well with Chronic Illness* outlined how the government would study the impact of “Healthy Living” on its identified target populations, which it defined as people who had survived cancer and (among others) those with chronic pain, arthritis, diabetes type 2 and “posttraumatic disabling conditions.” The National Academies’ Institute of Medicine expounded on the population to be studied as ethnic minorities (including Latinos and Blacks) and women with chronic pain. The report stated: “the [National Prevention, Health Promotion and Public Health Council] committee was advised by the sponsors of this study not to focus on the common high-mortality disease but rather consider diseases that have the potential to cause or that actually cause functional limitations and/or disabilities.” The report emphasized that: “the direct costs associated with chronic illnesses have many adverse societal consequences, including that they undermine the public and private health insurance programs.”

CIAAG’s report reveals that the government agencies/committees, along with a number of special interest groups and at least one major insurance company (Kaiser), communicated the healthcare restrictions, as well as the data to collect under the parameters of the study, to healthcare practitioners nationwide (who were expected to comply with the restrictions and the study).

“The government’s harmful and discriminatory policies have resulted in unspeakable pain and even suicide among the millions of people living daily with complex medical conditions,” CIAAG Executive Director Lauren Deluca said. “Patients with mobility issues are being denied medical care by their doctors and instead told to ‘exercise more,’ or ‘see a psychologist’.” Patients with horrible chronic pain—who would be helped by prescription pain medication—are instead forced to file for disability because they’ve being told by their doctors to try meditation! How is this saving the government money? And how is it humane? We never agreed to be a lab rats, and we’re not numbers on the government or an insurer’s balance sheet.”

According to *Living Well with Chronic Illness*, the government was advised that “therapies for chronic illness can have unintended consequences, such as increasing stress of physiological symptoms or even by causing direct harm.”

The U.S. is facing an unprecedented opioid overdose crisis, which has drastically increased in the years since the “Healthy Living” initiative, despite its efforts to reduce prescribing of pain medication. Prescribing of opioid medication is at a 25-year low, yet overdoses are at an all-time high, leading experts and analysts to state that the problem of opioid misuse is not fueled by legally prescribed opioid medication, but is instead the result of the illicit fentanyl, carfentanil and heroin now flooding the streets.

The Chronic Illness Advocacy & Awareness Group (CIAAG) envisions a world where those with disabilities and chronic illnesses are guaranteed palliative care and access to prescription life sustaining medications without stigma, fear or push-back, particularly from the medical community. We shape social narratives to promote inclusion of disabled rights and individualized patient-centered care. We lobby against political agendas and misinformation campaigns that interfere with patient's access to vital medications and palliative care.

CIAAG is a national 501c-3 Non-Profit Organization. We support patient populations with the following:

Chronic Pancreatitis	Chiari Malformation	Adrenal Insufficiency
Sarcoidosis	Gastroparesis	Lyme Disease
Ehlers-Danlos Syndrome	Veteran Wounds/Injuries	Median Acute Ligament
Myositis	Endometriosis	Syndrome (MALS)
Superior Mesenteric Artery	Complex Regional Pain	Medullary Sponge Kidney
Syndrome (SMAS)	Syndrome (CRPS)	Disease
Failed Spinal Surgery	Fibromyalgia	CFS/ME
Multiple Sclerosis	Interstitial Cystitis	Encephalomyelitis
Degenerative Disk Disease	Crohn's / Colitis	Spinal Fusions
Sickle Cell Anemia	Lupus	Epidermolysis Bullos
HIV/AIDS	Trigeminal Neuralgia	Cranio Cervical Instability
Cancer/Post-Cancer Pain	Kidney Dysplasia	