

Maternal and Child Health Access



Monthly Virtual Meeting

Thursday, June 17, 2021 10:00 am to 12:00 pm

Where?

This is a virtual meeting
Do Not come to our location!

10:00 AM to 12:00 PM

After you register (at RSVP below) look for the Zoom link in your registration confirmation email



Speaker/Topic:

Pina Hernandez, Outreach Manager, PHFE WIC
Summer Increase in Fruits and Vegetables for WIC, other updates

UCLA School of Dentistry Oral Health Collaborative - Oral Health – Update on County DPH
[Community Oral Health Improvement Plan](#)

Additional Updates

MCHA shared the [LA Times editorial](#) supporting Senate Bill 65 (“M omnibus”).

Marcela Marquez, MCHA CalFresh Coordinator discussed **CalFresh Awareness Month** and the changes and improvements made in the program during the pandemic. See posted [DSS All County Welfare Directors Letter](#) outlining Emergency Allotments, allowing for verbal attestation, elimination of interview, 15% increase, exclusion of pandemic unemployment compensation, and expansion of student eligibility.

Meeting Notes – Thursday, May 20, 2021

Guest Speaker: Lucy Quacinella, Multiforum Advocacy Solutions
“The Governor’s Proposed State Budget – May Revise 2021 Edition”

Lucy Quacinella outlined the context for the Governor’s proposals:

The pandemic exposed the disproportionate health and economic burdens that low-wage workers and other low-income families, especially those of color, bear. It also highlighted our inadequate social safety net.

An historic surplus makes new initiatives possible and foundation for a robust safety net. Why the surplus? Significant wealth gained and taxes on that wealth, and federal funds coming into the state for the pandemic. State law caps spending even when there is a great budget year/funds, and for the first time in 40 years, CA has exceeded this limit. So families earning less than \$75,000/year received a CA stimulus refund.

Much of the program funding is proposed as one-time expenditures or in terms of having to vote annually for appropriations – the state’s Finance Dept. believes we will see deficit once federal pandemic funding goes away. But we heard that last year about this year, and no cuts made.

The Western Center on Law and Poverty and other groups conclude the May Revise fails to address the depth of post-pandemic needs with the resources currently [available](#):

Lucy went into great detail about MCHA’s and other’s work on continuing Medi-Cal coverage 12 months post-pregnancy and the questions that still remain. Much work is being done on this in a state workgroup on how Medi-Cal renewals will roll out next year. Please note that the coverage is post-pregnancy (i.e. includes after miscarriage and abortion) as well as pregnancies that are carried to term.

Please remember that all Medi-Cal should continue now until the end of the Public Health Emergency (currently end of Dec., 2021) unless someone dies, moves out of state or requests that their Medi-Cal be ended.

Lucy also talked about Accelerated Enrollment for adults that will soon (around first week July) be applied for applications through Covered CA’s portal, CalHEERs. MCHA may provide a webinar just on this topic; stay tuned.

Starting not until July 2022 is another benefit of interest in the MCH world – a new Dyadic Services Benefit in Medi-Cal which is based on the Healthy Steps model of care. It includes integrated physical and behavioral health screening and services to the whole family and social determinants of health interventions, such as to address food insecurity and housing instability. Very importantly, it includes the need for follow-up to ensure that families have received the services to which they’ve been referred is required.

See [Lucy’s outline](#) posted on MCHA’s webpage for more!

New Since Meeting:

Pregnancy problems may predict heart health decades later

This work is especially important for MCHA's and others' work with access to blood pressure cuffs, and health care, see the article: [Pregnancy problems may predict heart health decades later](#)

Anticipating the arrival of a new baby can warm a woman's heart. But pregnancy can affect her heart in other ways, too. In fact, the heart pumps about 50% more blood than usual during pregnancy. And growing evidence confirms that women who experience health complications while pregnant — including high blood pressure and gestational diabetes — face a higher risk of cardiovascular disease later in life, according to a recent [scientific statement](#) from the American Heart Association (AHA).

California's New Baby Bust

California has lost population for the first time in state history, according to the most recent [population estimates](#). This decline is a product of many short-term forces, including more people moving to other states and the pandemic's effect on births, deaths, and immigration. Although birth rates have been falling for years, they reached new lows in 2021. The estimated number of children a woman will have in her lifetime is at the lowest level since records have been kept, and well below the number needed to replace the population. And while birth rates dropped during the pandemic, the uncertainties of COVID-19 do not explain the longer-term decline. Birth rates are not just falling in California: since 2007, the fertility rate across the country has fallen from 2.1 to 1.6. But the California rate fell faster, from 2.2 to about 1.5, and spanned race and ethnicity. Notably, Latina women had the largest decline in California and now also have birth rates below replacement. And teen birth rates are the lowest on record. Read More [Here](#)...

Racial and Ethnic Disparities in Breastfeeding Initiation — United States, 2019

Weekly / May 28, 2021 / 70(21);769–774

Katelyn V. Chiang, MPH^{1,2}; Ruowei Li, MD¹; Erica H. Anstey, PhD¹; Cria G. Perrine, PhD¹ ([View author affiliations](#))

Breastfeeding is the optimal source of nutrition for most infants (1). Although breastfeeding rates in the United States have increased during the past decade, racial/ethnic disparities persist (2). Breastfeeding surveillance typically focuses on

disparities at the national level, because small sample sizes limit examination of disparities at the state or territorial level. However, birth certificate data allow for assessment of breastfeeding initiation among nearly all newborn infants in the United States both nationally and at the state and territorial levels. To describe breastfeeding initiation by maternal race/ethnicity,* CDC analyzed 2019 National Vital Statistics System (NVSS) birth certificate data for 3,129,646 births from 48 of the 50 states (all except California and Michigan[†]), the District of Columbia (DC), and three U.S. territories (Guam, Northern Mariana Islands, and Puerto Rico). The prevalence of breastfeeding initiation was 84.1% overall and varied by maternal race/ethnicity, ranging from 90.3% among infants of Asian mothers to 73.6% among infants of Black mothers, a difference of 16.7 percentage points.

Read more [here](#)...

Consumer Reports helps remove unsafe sleep products off the market; learn what they are

If you've ever wondered if those petitions you sign, and emails you send, really make a difference, consider this:

The Consumer Product Safety Commission just voted 3-1 to get dangerous infant sleep products off the market — and the chairman cited the 30,000 of you who signed our petition in support as motivation. Congratulations!

This victory is so important for families. It will keep unsafe infant sleep products off the market, and ensure all infant sleep products meet minimum safety standards before being sold.

Tens of thousands of you joined Consumer Reports in calling for these safety standards after our 2019 investigation uncovered dozens of infant deaths linked to inclined sleepers. You joined with devastated parents who lost children in these products by pushing manufacturers to stop selling them, and calling on federal regulators to take action. [Read more about the Commission vote and the new safety rules for infant sleepers.](#)

In Latest “On the Record” Column, State Epidemiologist Highlights Expanded COVID-19 Vaccine Eligibility to Protect Kids 12 and Up, Vax for the Win Giveaway

California State Epidemiologist Dr. Erica Pan pens column as guest author in Governor's “On the Record” series, which is translated into multiple languages and published online and in print by ethnic media outlets

The California Department of Public Health (CDPH) today released the latest “On the Record” ethnic media column, in which California State Epidemiologist Dr. Erica Pan encourages California families to vaccinate their 12 to 15-year-olds against COVID-19 – an age group comprising about 2.1 million Californians. Protecting adolescents with vaccinations will help move the state closer to ending the pandemic and ease its toll on their mental health and social-emotional wellbeing.

“The past year has been hard on all of us, but especially difficult for our teens who have had to put their lives on hold. Now that eligibility has expanded, we can confidently give our kids a shot at being kids again with the comfort of knowing they are protected from COVID-19,” wrote Dr. Pan in the column. “When more Californians become vaccinated, we can feel safer as restrictions are lifted and life begins to return to a sense of normalcy. When 12 to 15-year-olds are vaccinated, families can be safer as they venture out more, go on vacations and get back to doing the things they love.” The latest column can be found [here](#).

California [expanded eligibility](#) for the Pfizer-BioNTech COVID-19 vaccine to 12 to 15-year-olds last month after the Centers for Disease Control and Prevention’s (CDC) vaccine safety review panel and the Western States Scientific Safety Review Workgroup recommended that the vaccine is safe and effective in protecting this age group against severe illness, hospitalization and death. In the weeks since the eligibility expansion, approximately 27.5 percent of 12 to 15-year-olds have received at least one dose. In the column, Dr. Pan addresses potential questions and concerns teens and their parents or guardians may have about the vaccine. Dr. Pan explains that clinical trials have proven the vaccine to be safe and effective for youth in this age group, and that the technology used to make the vaccine has been developed over the last 20 years. Vaccinated individuals may experience mild side effects such as a sore arm, fever or fatigue.

A parent of two eligible adolescents, Dr. Pan discusses the stress and isolation youth have experienced due to the pandemic, and how getting vaccinated is a critical step to getting back to our normal lives, including more opportunities to safely spend time with friends and family.

Dr. Pan also highlights the state’s new \$116.5 million [Vax for the Win](#) incentive program, in which all Californians who have had at least one COVID-19 dose – including youth – are eligible to receive \$50 prepaid or grocery cards and are entered into randomized cash prize drawings. A total of 30 winners will receive \$50,000, and on June 15, 10 will win \$1.5 million as the state fully reopens. \$750,000 has already been awarded in the first round of cash prize drawings last week, and the next 15 winners will be selected this Friday.

Dr. Pan underscores the state’s work to ensure equitable access to the vaccine, including partnerships with local health departments, community-based organizations and school districts to reach underserved youth in foster care or those experiencing homelessness, as well as efforts to improve access in rural communities through mobile clinics, free transportation and more. Vaccines are free, including for those who don’t have health insurance and regardless of immigration status.

To promote easy access, the Administration established a [portal](#) where schools and other community sites can request support to set up mobile and pop-up clinics. Schools – especially larger districts – can also become providers by following the steps outlined [here](#) and in a school-specific [recorded webinar](#). For resources to support outreach, schools and other community organizations can access the messaging [toolkit](#). Parents, legal guardians or emancipated young people can check vaccine availability and book an appointment at [MyTurn.ca.gov](#) or by calling California's COVID-19 Hotline at 1-833-422-4255. They can also contact their family doctor, local community health clinic or public health office for more information.

More information on the Vax for the Win program can be found [here](#). If you encounter a possible vaccine incentive scam, please email to rumors@cdph.ca.gov or call the Vax for the Win incentives hotline at 1-833-993-3873.

Resources

Please help spread the word.

Women, Pregnancy, COVID-19, and COVID-19 Vaccines – Infographic in THIRTEEN languages

The Los Angeles County Office of Women's Health is pleased to share with you our new infographic on women, pregnancy, COVID-19, and the COVID-19 vaccines.

Please see the infographics in the these languages: [Arabic](#), [Armenian](#), [Cambodian](#), [Traditional Chinese](#), [Simplified Chinese](#), [English](#), [Farsi](#), [Japanese](#), [Korean](#), [Russian](#), [Spanish](#), [Tagalog](#), [Vietnamese](#)!

Los Angeles County has achieved high vaccination rates for adults ages 65+, with 84% having received at least one dose as of May 16th. However, our vaccination rate among females ages 16 and older was 64% as of May 16th. We have a long way to go to vaccinate enough people to make our neighborhoods safe for everyone, especially in communities that have been most impacted by the virus.

Now in several languages, we hope you will find this a useful informational tool for your community members and colleagues.

We look forward to continuing to connect with you virtually as well as in person as we all embark on our journey of re-opening. Please let us know if you have any comments or questions: 626-293-2626 – work; 626-293-2600 - main number

From Mental Health Advocacy Services:

Fair Housing, Domestic Violence and Sexual Harassment during COVID-19

[English PDF](#) | [Español PDF](#)

Tenant: "I rent an apartment using a Section 8 voucher, and I live with my two children. I broke up with my abusive ex-boyfriend last year, and have serious PTSD from that

relationship. Because of COVID-19, I've been home a lot more with my kids, and my ex-boyfriend comes here and harasses me. I've repeatedly told him not to come to the apartment, but he won't listen. He bangs on my door and threatens me. My neighbors are also home more often because of the pandemic, and they have complained to the landlord, who has threatened to evict me. The landlord also makes me feel uncomfortable with his comments about my body, and he says I 'could do better' than my ex-boyfriend. He even said he'd promise not to evict me if I go out with him. I want my landlord to stop bothering me, and I want to feel safe in my home. What can I do?"

See the answer [HERE](#)

Medication Abortion

Thanks to the National Health Law Program and ANSIRH.

As the public health emergency continues and *Roe v Wade* wends its way in the Supreme Court, medication abortion becomes more important. In 2017, 39% of abortions nationally were via medication, but in one study during the pandemic, 87% of surveyed clinics reported shifts in their protocols toward telehealth. Medication abortion typically involves taking two medications with intervals of 24-48 hours between medications.

- Mifepristone: Blocks progesterone which is a hormone needed for a pregnancy to continue developing
 - Misoprostol: Causes cervical softening and the uterus to empty through contractions
- Please note that the FDA's Risk Evaluation and Mitigation Strategy (REMS) states that the Prescribing provider must be certified in the mifepristone AND that the medication must be dispensed in a specified health setting or under supervision of a certified provider and patient must sign and provider must obtain FDA-approved form. This is the ONLY medication that the FDS requires in-person pick-up!! However, the FDA announced it will use enforcement discretion during the remainder of the Public Health Emergency for the in-person and mail requirements.

Advancing New Standards in Reproductive Health (ANSIRH) just published a new brief summarizing the evidence on the safety of medication abortion. You can find the new brief on their website [here](#):

If you're looking for more information on medication abortion, here's their broader resource page on the [topic](#):

Vaccine Confidence

The HHS [We Can Do This](#) campaign is a national initiative working hand in hand with trusted leaders and community organizations to continue to build confidence in COVID-19 vaccines and get more people vaccinated. This campaign offers tailored resources and toolkits for stakeholders to use to provide COVID-19 vaccine information to at-risk populations.

The Centers for Medicare & Medicaid Services (CMS) is partnering with the campaign to offer several webinars to walk through each toolkit and its resources and train community organizations, local voices and trusted leaders to use the campaign tools for vaccine outreach efforts to diverse communities.

Webinar dates and registration links are below:

- Tuesday, June 15th, 1:00-1:30 pm ET: General Populations Toolkit - [Register here](#)
- Thursday, June 17th, 1:00-1:30 pm ET: Rural Toolkit - [Register here](#)
- Tuesday, June 22nd, 1:00-1:30 pm ET: Spanish Language Toolkits - Registration TBD*
- Thursday June 24th, 1:00-1:30 pm ET: Healthcare workers Toolkit - Registration TBD
- Tuesday, June 29th, 1:00-1:30 pm ET: Faith-Based Toolkits - Registration TBD
- Thursday, July 1st, 1:00-2:00 pm ET: Toolkits for Racial and Ethnic Minority Communities -

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Registration TBD

- Thursday, July 8th, 1:00-1:30 pm ET: Older Adults Toolkit - Registration TBD

*This

*This webinar will be offered in Spanish. *Se ofrecen estas presentaciones en español

\$5.41 million grant for undocumented entrepreneurs in California

[Through the state of California's SEED Grant program, Immigrants Rising is now leading a coalition of eight partner organizations serving various constituencies across the state and will be making microgrants totaling \\$4.06 million to over 650 undocumented entrepreneurs in California.](#)

The program and the application will open for eligible entrepreneurs starting in July 2021. Immigrants Rising and the partner organizations will share out the application details in the following days. Visit immigrantsrising.org/spark to get the latest updates about the initiative.

Save the Date

Monday, June 21, 202, Noon to 1 p.m. [Join us via Zoom](#)
UCLA Center for Health Policy Research - Disparities in Oral Health and Access of Low-Income Californians

Monday, June 21 11-12:30 Pacific Time *Produce Prescription Programs Then & Now: Implications for Health & Systems Improvement*

Come join an interactive webinar, *Produce Prescription Programs Then & Now: Implications for Health & Systems Improvement*, to learn first-ever findings and recommendations on research of U.S. produce prescription programs from 2010 - 2020. This new report and interactive maps were commissioned by [Wholesome Wave](#) and prepared by [DAISA Enterprises](#) to further the evidence-base and policy-change potential for investment in food & health systems through the produce prescription

model. In addition to research highlights, invited speakers will share context, field evolution, and opportunities to advance equity, program, and policy aims.

[Executive Summary](#)

Registration Link: [Registration Page](#)

If you are unable to attend this webinar but would like a recording afterward, please contact: communications@wholesomewave.org

Wednesday, June 23, 10-11 Pacific Time, Public Health Communications Collaborative: [COVID-19 Vaccination and Children - Answering Parents' Questions](#)

Job opportunities available!

Please click on the job title you are interested in to view the full job description and the application process. And provide a cover letter and current resume with your application that specifically outlines your employment history experience and educational background for which you're applying.

MCHA is an Equal Opportunity Employer; women and people of color are strongly encouraged to apply.

- [P-EBT and CalFresh Specialist – Bilingual, Spanish](#)
- [IT Support Technician](#)
- [Health Programs and Benefits Trainer](#)
- [Coordinator Oral Health Advocacy for Children and Pregnancy](#)
- [Parent Coach / S6 - Welcome Baby Program](#)

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