

## Maternal and Child Health Access



**Monthly (Virtual) Meeting**  
**Thursday, November 21, 2024 - 10:00 am to 12:00 pm**



### Where?

This is a virtual meeting



**10:00 AM to 12:00 PM**

**Speaker/Topic:**  
(speaker/s TBD)

**NOVEMBER IS:**

**Prematurity Awareness Month, National Diabetes Month, Native American Heritage Month, National Alzheimer's Disease Month**

**Prematurity Prevention and Maternal and Child Health - Updates**

After you register, look for the Zoom link in your registration confirmation email

## Lucy Quacinella, Multiforum Advocacy Solutions

### Health Coverage and Access Updates

**Election Results** - We can't sugarcoat that the forces for good in health – [maternal](#) and otherwise – lost out on Nov. 5. And thus we all lost. For those of you still numb or seeking solace, or who need to know how to talk to your children, see resources at the end of this mailing. I will say what I told my staff – exercise (walk, hike, dance, gym), listen to music, be with family, be in beauty (sunsets are beautiful in the winter!), hug and pet your dog or cat or get one to pet. But by January lift your head and be ready to continue being the helpers, being the activists you are. Don't self-select out. We need you! Your efforts truly make a difference in people's lives. Thank you for all the work you do in communities.



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#### Notes from Monthly Meeting October 17, 2024

[www.mchaccess.org/meetings.htm](http://www.mchaccess.org/meetings.htm)

**Venezia Ramirez**  
Research Coordinator  
USC Division of Environmental Health  
Breast Cancer in Los Angeles - Prevention with *Promotoras*

**Maegan Ortiz, Executive Director**  
IDEPSCA - Instituto de Educacion Popular del Sur de California  
The California Breast Cancer Research Program and Household Workers' Health

Ms. Ramirez discussed the background of breast cancer in Los Angeles and the Breast Health and the Environment among Latinas in Los Angeles study among promotoras. Breast cancer is the most common cancer among women worldwide, with one out of eight women experiencing breast cancer. But it also has a high survival rate, generally designating a five-year time period after which cancer is less likely to recur.

She referenced a background study: Cancer in Los Angeles County: Female Breast Cancer 2000-2017, which noted that low-income women and women of color have a higher risk of death and tend to be diagnosed in the later stages of cancer. Risk of breast cancer increases with longer duration in the US and Latinas born here have two times higher risk than Latinas from other countries.

Ms. Ramirez introduced us to the [California Health Maps](#), an interactive mapping tool of health data for geographies beyond the county level in California. She discussed barriers to care – lack of awareness of what is available, not having health insurance, fear or non-acceptance of diagnosis, and bad experiences in the medical setting, belief in faith as a cure, and differences in language and culture. Her program seeks to identify public health priorities and engage with community members to understand services needed to close health inequity gaps. The BELLA Study was one tool – peer research, focusing on people’s own concerns in their neighborhood and daily lives. With the results (see slides here), participants were invited to workshops and assisted to get health care and make appointments. The workshops helped to interpret results, know what to do after a mammogram and how to report medical mistreatment. The *promotoras* spoke to over 950 women after focus groups to ensure the results were effectively communicated.

The project has incredible [infographics](#) and communication tools on a wide variety of subjects, including [women’s](#) health.

Ms. Ortiz then followed with information about IDEPSCA, their workers’ health program, and the California Breast Cancer Research Program grant they received. IDEPSCA believes that immigrant workers can best solve the problems in their industries through outreach, education, organizing, advocacy, and workforce and leadership development. They have operated day labor centers for over 20 years and currently operates five such centers. The workers’ health program uses a *promotora* model to provide health education and resources and has created curriculum on ten health education topics.

Turning to household workers (preferred term over ‘domestic’ workers) she noted the roots of such work in the history of slavery and that household workers were historically mostly African or indigenous. Historical exclusions form the basis for much of IDEPSCA’s work currently. Household workers were explicitly excluded from many of the basic labor rights that IDEPSCA and the California Domestic Workers Coalition are fighting to secure. They have successfully passed bills that have then been vetoed by the Governor to include workers in Cal-OSHA protections.

IDEPSCA is planning now for a full research project on the impact of cleaning products and breast cancer on household workers. They have conducted listening sessions, educational sessions and in December are developing strategies for systemic actions to reduce exposure to chemicals in cleaning products. IDEPSCA and MCHA are very much alike in their focus on system interventions for systemic problems. For their grant, IDEPSCA has partnered with the Breast Cancer Prevention Partners, whose motto is, “Exposing the Cause is The Cure”

See their handouts at the end of the slides posted. For more information and to get involved, contact Workers’ Health Program Director Nancy Zuniga MPH [NZuniga@IDEPSCA.org](mailto:NZuniga@IDEPSCA.org) or 213-259-6379 or 213-800-2406.

## Covered CA Update

Liz Ramirez, MCHA Director of Training and Education

**DACA recipients now eligible:** The Centers for Medicare and Medicaid Services (CMS) [published regulations](#) to allow DACA recipients access to the healthcare marketplaces established under the Affordable Care Act (ACA), like Covered California. As a result, DACAmented Californians will be able to purchase health insurance through Covered California during the open enrollment period starting November 1st!

## Kaiser Permanente Community Health Care Program Celia Valdez, MCHA Director of Health Navigation

Ms. Valdez reminded us that this program will begin accepting applications November 1 through Jan. 31, 2025, and that now is the time to make internal lists of people who may be eligible and help them with the application or refer them to people who can help. Unfortunately, most people need help as it is a two-part application. Here is the list of [Enrollment Assistance Organizations](#) that can help – MCHA is one of them. As a reminder, the program is for those who don't have access to/are ineligible for Medi-Cal or Covered CA and don't have employer or other insurance, and whose income is up to 300% of the Federal Poverty Level. The coverage is free and benefits are "Platinum 90" HMO benefits; no dental or vision benefits except to age 19.

## New since last month:

### Native American Heritage Month – from CA's Nutrition and Physical Activity Initiative (NUPA)

November is Native American Heritage Month, a time to honor and celebrate the rich languages, traditions, contributions, and stories of Native American, Alaska Native, Native Hawaiian, and affiliated island communities. **California is home to the largest and most diverse American Indian and Alaskan Native population in the United States.** California currently has 110 federally recognized tribes throughout 34 counties, 62 non-federally recognized tribes, and many more awaiting recognition. California's Native American tribes are the golden thread of California's history, and of our future. We encourage everyone to learn more about California Native communities with the following resources: [Cultural Humility: Basis for working with California Native Americans](#) and [Tribal-State Relations in California](#).

Learn more about the [USDA Indigenous Food Sovereignty Initiative](#).

## March of Dimes Releases Prematurity Report Card - 2024

The March of Dimes has released its 2024 Prematurity Report Card [for the nation](#) and for each state; here is [California's Report Card](#). The data reflect 2023, which saw a slight increase in prematurity from 2022 (from 9.1% to 9.2% prematurity). More to be discussed at the meeting.

## The State of State Ballot Propositions

In October, MCHA hosted speakers on a number of the state ballot propositions. The results are:

**Prop. 2:** Authorizes bonds for school facilities – **Passed**

**Prop. 3:** Repeals same-sex marriage ban – **Passed**

**Prop. 4:** Authorizes bonds for water, wildfire, and land protection – **passed**

**Prop. 5:** Lowers vote needed to approve housing/infrastructure bonds - **did not pass**

**Prop. 6:** Prohibits slavery and involuntary servitude – **did not pass**

**Prop. 32:** Raises the minimum wage – so far did not pass – 94% of vote counted and it's too close to call still.

**Prop. 33:** Repeals ban on local rent control – **did not pass**

**Prop. 34:** Regulates spending by AIDS Healthcare Foundation – is passing, but still too close to call with 94% of vote counted.

**Prop. 35:** Managed care tax extended for Medi-Cal increases to certain providers – **passed**

**Prop. 36:** Increases penalties for certain theft and drug crimes – **passed**

## Abortion Initiative Update- From Planned Parenthood Action Fund

California's Constitutional Right to Reproductive Freedom, Proposition 1, passed in 2022. Seven out of 10 initiatives passed to protect the right to an abortion. An eighth, would have passed in Florida but for the high number of votes required (see below) in their initiative process.

- **Voters in Arizona rejected their state's abortion ban**, guaranteeing the right to abortion. The measure makes clear that the state's 15-week ban violates this right and cannot stand. Although the ban currently remains in effect, Planned Parenthood organizations and allies are **working to restore full abortion access** in the state.
- **Missouri voters rejected the state's total abortion ban**, enshrining the right to abortion, birth control, and more. Missouri's two **Planned Parenthood affiliates are now suing the state of Missouri** to ensure it abides by the will of the people, aiming to resume abortion care when the initiative takes effect on December 5. The lawsuit is also challenging Missouri's numerous medically unnecessary restrictions on abortion.
- **People in Colorado, Maryland, Montana, and Nevada also voted for new abortion protections.** Abortion is already broadly legal in these states, and the right to abortion will now be enshrined in the Colorado, Maryland, and Montana' constitutions. (Nevada requires that voters approve this measure again in 2026 before it can go into effect.) Colorado voters also repealed a state constitutional provision prohibiting the use of public funds to pay for abortions.

- **New York has broken new ground** by expanding the New York constitution's equal protection provisions to expressly include pregnancy, pregnancy outcomes, reproductive health care and autonomy, as well as sexual orientation and gender identity.

But unfortunately, not all ballot measures were a success:

- The majority of voters in Florida — 57% — voted for the right to abortion. Unfortunately, the will of a majority of voters is not enough for Florida, which requires a supermajority of 60% for ballot measures to pass. **Florida's 6-week ban remains in place**, despite the fact that most voters in the state supported the right to abortion.
- South Dakota failed to pass a measure that would have potentially allowed some abortion access in the state. **South Dakota's total abortion ban remains in effect.**
- Nebraska also narrowly failed to pass a ballot measure that would expand abortion access, and instead passed a competing measure designed to confuse voters. Passage of the competing measure means that Nebraska will continue restricting abortions to the first trimester. **Abortion is still banned in Nebraska after 12 weeks of pregnancy.**

## **Open Enrollment for Covered CA – for DACA recipients too! Keep enrolling! - From ACA4DACA and NILC**

Thanks to all of you who have kicked off open enrollment! See good media coverage so far, featuring DACA recipients looking to enroll, such as this one in the [Texas Tribune](#), [this for NBC](#), [WUSF in Florida](#), and [this for KBPBS in California](#). We encourage you all to [pitch](#) your local radio, tv and print media about your outreach efforts, including in-language media, and sharing the stories of those benefiting, as one of the most powerful ways to get the word out.

**Some have asked whether they should continue to push for enrollment considering the election results.** The updated [messaging document](#), part of the overall [toolkit](#), includes this: "After the election results, some DACA recipients may wonder if they should still enroll in ACA coverage. **Our emphatic answer is yes!** Access to affordable, comprehensive health care under the ACA, including mental health, is more essential than ever. **There is no policy change at this point**, and any future changes are uncertain and would take significant time. **It is important that we do not let fear or anxiety deter us from accessing the hard-fought health care we fought for.**"

- Those with concerns can consider this NILC resource: [Know Your Rights: Is It Safe to Apply for Health Insurance or Seek Health Care?](#)

## **Great News – Deaths of Black children and infants in Sacramento are on the decline, county report shows**

Congratulations to the [Black Mothers United](#) team at [Her Health First](#) and their partners in Sacramento! SO great to see their continued progress and results!!

Read more at: [sacbee.com/news](https://www.sacbee.com/news)

. . . Black Child Legacy Campaign, created in 2013, is a collaboration between Sacramento County Department of Child, Family and Adult Services, Department of Human Assistance, Health Services Department, the First 5 Sacramento Commission and the Sierra Health Foundation. “There is no one person who can do this work alone,” said Kim Pearson, the division manager for the Department of Child, Family and Adult Services, in a news release. “It is a collaborative system.” Since 2013, these organization have spearheaded several programs to reduce deaths caused by sleep-related issues, perinatal conditions and child abuse and neglect. Regarding third-party homicides, the Black Child Legacy Campaign has seen a 38% increase in Sacramento County. The First 5 Sacramento Commission has created the **Black Mothers United** program, which provides pregnant people with a coach. Among the 149 mothers who participated in the program, 91% of their babies were born at a healthy weight. Ninety four percent of mothers delivered their infants to full-term. Last fiscal year, there were no stillbirths from mothers in this program, marking the fourth year in a row where no infant deaths occurred.

MCHA sends a **Big Shout Out** to Her Health First/Black Mothers United and their partners in Sacramento County. We worked with Black Mothers United to maintain CPSP, as a community organization implementing CPSP well, AND electronically collecting the data for evaluation and program use.

### **Focus on Birth Justice – Two state reports are the focus of a lot of attention.**

CA’s Surgeon General in October issued a report, [“California’s Maternal Health Blueprint 2024”](#) with the main goal to reduce maternal deaths by half by 2026. This is an incredible goal and we applaud the intent, but many organizations found the focus is on individual assessment and the omission of racism as a public health threat problematic. One example is the need for additional legislation to enforce legislation already passed that providers even be trained on implicit bias. This omission comes amid growing work and evidence on the impact of stress, the existence of racial disparities in health and birth outcomes despite high income and education, etc. Groups noted that the tool suggested for self-assessment in the blueprint has not been validated as a population health measure. MCHA helped comment on [the report](#) and attended the zoom meeting with Surgeon General Dr. Ramos.

Here is the [letter of concern](#) from doulas, midwives, community and advocacy organizations, and [article in LA Times](#) about the push-back – please let Lynn know if you need a copy/can’t open. It was also picked up by [Yahoo News](#) which features more links to studies and other information.

Secondly, in the state’s focus on supports for most vulnerable populations, pregnant people have had to fit into other categories – i.e. homelessness, substance abuse. Pregnant people weren’t their own category for the support from Enhanced Care Management until January of this year, for Black, Native American and Alaskan, and Pacific Islander pregnancies. The population-wide plan for ALL pregnancies and birth under Medi-Cal is called, “Birthing Pathways”. This plan is supposed to be

released in December. Here is the description from the state's [Birthing Care Pathways website](#):

“In Spring 2023, the California Department of Health Care Services (DHCS) launched the development of a comprehensive Birthing Care Pathway to cover the journey of a Medi-Cal member from conception through 12 months postpartum. The Birthing Care Pathway is for all Medi-Cal members who are pregnant or postpartum. The Birthing Care Pathway is a care model that addresses the physical, behavioral, and health-related social needs for pregnant and postpartum members in Medi-Cal with the goal to reduce maternal morbidity and mortality and address the significant racial and ethnic disparities in maternal health outcomes among Black, American Indian/Alaska Native, and Pacific Islander individuals.”

**Almost half of young infants were not protected from RSV last season because they didn't get RSV antibodies and their mom didn't get maternal vaccination**

ACIP recommends either:

- Maternal RSV vaccination (32-36 weeks); or
- Nirsevimab for young infants

**We are entering RSV season. Clinicians, talk to pregnant patients and new parents about protecting young babies from RSV**

bit.ly/mm7338a2  
SEPTEMBER 26, 2024

\* Internet survey of 2,263 current and recently pregnant women – 2023-24 RSV season

**MMWR**

Respiratory syncytial virus (RSV) is the most common cause of hospitalization among U.S. infants. Receipt of either a maternal RSV vaccine or administration of RSV antibody (nirsevimab) to infants was first recommended during the 2023–24 RSV season. Enhanced measures to implement provider RSV immunization recommendations are needed to protect infants from severe RSV disease. Read more [HERE](#).

## **Good News!! Paid family leave benefits increase in January**

If a new baby is coming into your life in 2025, here's some good news: **Starting in January, [California will increase leave payments](#) for workers caring for a new child or a sick family member.**

Currently, most workers get 60% of their income replaced through the state's disability insurance program. That will increase to 90% of income for workers making up to \$60,000 a year; workers who make more than that will receive up to 70%.

The change is part of a new law intended to make it less difficult for low-income earners to take leave.

Read more [HERE](#).

## Ending Inequities in Health Care

The United States spends more on health care than any other high-income country, yet we have some of the worst population health outcomes. Our health care system is designed in such a way that racial and ethnic disparities are inevitable, and the differences are extreme: the life expectancy difference between white women and black men is over a decade. How can we fix the system to ensure health care equity for all? A new National Academies report called [\*\*Ending Unequal Treatment: Strategies to Achieve Equitable Health Care and Optimal Health for All\*\*](#) tackles this question. Building on a 2003 report on racial and ethnic disparities in health care, the new report finds that little progress has been made in closing those equity gaps over the past two decades.

A new episode of [\*\*The Ongoing Transformation podcast\*\*](#) features an interview with Georges Benjamin, executive director of the American Public Health Association, who discusses racial and ethnic health care inequities in the U.S. and the recommendations of the report. Benjamin served as co-chair of the report's study committee.

## Resources

Sharing a few resources that may be useful (from the Equity & Inclusion Team at Center for Budget and Policy Priorities)

- Boston University's [\*\*Election Stress Toolkit\*\*](#) (with several practical tips and resource links)
- The Trauma Stewardship Institute's [\*\*Tiny Self-Care Guide\*\*](#) and [\*\*Map for Managing One's Day\*\*](#)
- [\*\*List of recorded audio practices\*\*](#) to build self-compassion and manage difficult emotions (from leading self-compassion researcher and author Dr. Kristin Neff)
- [\*\*Healers of Color on Why Self-Care is Not Self-Indulgence\*\*](#)
- [\*\*Short audio practice on +2 breathing\*\*](#) (a go-to practice for calming the nervous system)
- TEDx Talk: [\*\*Rhonda Magee on the Inner Work of Racial Justice\*\*](#)
- Dr. Thema Bryant's Homecoming Podcast: [\*\*Grounding and Soothing Yourself\*\*](#)

ACLU SoCal is excited to share **three newly launched Know Your Rights (KYR) resources related to family policing**. These resources are available on ACLU SoCal's website at the links below and they can also be accessed through the ACLU's website's KYR tab:

1. [\*\*California "Child Welfare" Investigations 101\*\*](#) – A resource outlining how "child welfare" investigations work in California and an overview of the basic rights of parents during such investigations
2. [\*\*California Mandatory Reporting Laws\*\*](#) – An overview of CA mandatory reporting laws and what they require
3. [\*\*Child Abuse Central Index\*\*](#) – A resource explaining basic rights relating to the California Child Abuse Central Index

The materials are available in both English and Spanish (click the Esta "Pagina en Espanol" button in the top right-hand corner for Spanish). We welcome folks to share

these resources with any other partners and/or community members who may find them helpful, and please don't hesitate to reach out with any questions. Thanks!

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### Public Health Nutrition and Lactation Scholarships Available

Committed to expanding equitable access to health care for all Californians and ensuring every community has the health workforce they need is just part of the mission of the [Department of Health Care Access and Information](#) (HCAI). As part of a larger strategy to support the public health workforce, HCAI provides [loan repayment, grants and scholarships](#). Individuals completing the requirements to be Registered Dietitian Nutritionist, Degreed Nutritionist, and now this year an **IBCLC**, are eligible to apply for the [Allied Health Scholarships](#). Applications are being accepted Nov. 1- Dec. 13, 2024. [Register for an info webinar on Nov. 7.](#)

The California WIC Association advocated for the addition of scholarships for **International Board Certified Lactation Consultants (IBCLCs)** by providing to HCAI for consideration, a cost analysis and workforce overview available here [IBCLC Workforce Overview: August 2023 - California WIC Association \(calwic.org\)](#). Becoming an IBCLC can be achieved through several pathways, the requirements are extensive and the costs can be in the many thousands of dollars. Thanks to the many IBCLCs and lactation specialists who contributed to the development of the analysis.

### Save the Date

**Tuesday, Nov. 19 at 12 noon Pacific (CA) time: Health insurance for DACA recipients.** You are invited to a 30-minute webinar from the National Immigration Law Center, United We Dream, and Young Invincibles! Participants will learn about how DACA recipients are now eligible for Affordable Care Act coverage and get answers to common questions about health insurance for DACA. Register [here](#).

**Tuesday, November 19, 2024, 1-3 PM. California Victims Compensation Fund Overview and Required Documentation.** eligibility, qualifying crimes, how to access benefits and services, and what is required to receive compensation. Register [HERE](#). Did you know that alternative medicine and dental care for affected teeth may be available after a crime? See more about the categories of help and services available [HERE](#).

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### Two midwifery webinars coming up in the State of Midwifery in California Webinar Series, presented by [Midwifery Access California](#). [Dec 5<sup>th</sup>, 1pm-2:15pm: Midwifery for Legislative Staff, Advocates, and Policy Makers](#)

- o History of midwifery in California
- o Why midwifery is a strategy for the double crises of poor maternity care access and racism-based disparities in birth outcomes
- o The importance of midwifery integration and how it can be achieved via legislative and regulatory changes
- o Why the "patient safety" argument against midwifery practice is a myth
- o Future legislative proposals that could lead to better integration of midwives and thus better access and outcomes for birthing people

**Dec 9<sup>th</sup>, 12p-1:15pm: Midwives and Doulas: What's the difference?** Presented in partnership with Western Center on Law & Poverty.

- o Types of midwives in CA & what midwives do
- o What the research says about midwives and improved outcomes for birthing people
- o Beyond labor support: The essential role of doulas and what the research says about better birth outcomes
- o What Medi-Cal covers for midwives and doulas
- o Midwives and doulas working together as an integrated team and why both roles are essential

**You can register for both here: [www.midwiferyaccessca.org/webinars](http://www.midwiferyaccessca.org/webinars)**

A webinar on January 15<sup>th</sup> entitled, "Black & Indigenous & Pacific Islander midwives in California: The importance of culturally concordant care & midwifery to address racism-based disparities" will be presented in partnership with the California Coalition for Black Birth Justice. Watch for more information in the near future.

**Weds Dec. 4, 8 AM (breakfast) to 3 PM: Women's Health and the Environment Free Conference**

**[Click Here to Register](#)**

- Learn about the impact of environmental toxins on women's health and how to reduce exposure.
- Find out how you can mobilize advocates in promoting toxic-free environments at home, at work, and in the community.

Please share this conference information with your networks. If you have questions, please feel free to contact Tania Maguina at [tmaguina@worksitewellnessla.org](mailto:tmaguina@worksitewellnessla.org) or Arlyn Sanchez at [asanchezmembreno@mednet.ucla.edu](mailto:asanchezmembreno@mednet.ucla.edu)

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