

## COUNCIL ON WOMEN & GIRLS- SUBCOMMITTEE ON HEALTH & SAFETY

**DATE: Wednesday, August 21, 2019**

**TIME/ LOCATION: 10:00am - 12:00 pm/ Legislative Office Building, Room 1B**

Members/Designees/Attendees: **Beth Bye** (Subcommittee Tri-Chair, Office of Early Childhood); **Miriam Delphin-Rittmon** (Subcommittee Tri-Chair, Dept. Mental Health & Addiction Services); **Vannessa Dorantes** (Subcommittee Tri-Chair, Dept. of Children & Families); **Cherie Phoenix-Sharpe** (Office of the Lt. Gov); **Heather Aaron** (DPH); **Karin Bent**, (OEC); **Brian Foley** (Dept Emergency Services/Pubic Protection); **Kim Martone** (Office Health Strategy); **Theresa Govert**, (SDO); **Eliza Fink** (SDO); **Astread Ferron-Poole**, (Dept. of Social Services), **Patrice Olson** (Dept. of Veteran’s Affairs), **Colette Anderson**, (CT Women’s Consortium); **Jordana Frost**, (March of Dimes, CT, RI); **Mary Rich Cooper**, MD, (CHA); **Jennifer Kellie** (Women & Families Center); **Donna Palomba** (Jane Doe No More); **Melissa Kane** (CAGV); **Elise Sinha** (Hartford HealthCare); **Ashley Starr Frechette** (CCADV); **Lucy Nolan** (CT Alliance to End Sexual Violence); **Margaret Lloyd** (UConn); **Hilary Felton Reid** (Robinson Cole); **Candace Barriteau-Phaire** (CCSU); **Kathy Flaherty** (CLRP); **Adria Giordano** (Chrysalis Center); **Karen DuBois-Walton** (Elm City Communities/Housing Authority); **Janet Alfano** (The Diaper Bank); **Gretchen Raffa** (Planned Parenthood), **Farie F. Spivey** (SEET Consultants, LLC); **Shelby Henderson** (Women Against Mass Incarceration); **Sarah Croucher** (NARAL Pro-Choice CT); **Annmarie Boulay** (The Underground); **Nancy Bernstein** (Women’s Health CT); **Althea Bates** (Project Resiliency Movement).

Visitors/Presenters:

Jessica Zarnik, Health Teacher, Students, (Joy Ren, Tiffany Ling), Middlebrook School, Wilton, CT

Recorder:

Enid Valle (Department of Mental Health & Addiction Services)

### MINUTES

Topic	Discussion	Action
<b>Welcome and Introductions</b>	Commissioner Delphin-Rittmon welcomed the group at 10:06 AM. All committee members and attendees introduced themselves. There were over 30 attendees in addition to subcommittee members representing a wide array of agencies.	
<b>Overview of Minutes from Last Meeting</b>	Commissioner Delphin-Rittmon asked that members forgo approval of the minutes. Minutes will be sent to attendees for review.	Minutes will be sent electronically to committee members and attendees.

Topic	Discussion	Action
<p><b>Presentation: Women’s Access to Feminine Hygiene Products –</b></p>	<p>Students (Ms. Ren and Ms. Ling) conducted a presentation on their experiences and research related to lack of access to feminine hygiene products. The students are advocating for “menstrual equity,” stating that this is a national and international issue. Many girls and women struggle every month to pay for “period products” and low income parents are particularly affected by this challenge. Because the cost can be prohibitive, some girls and women have to rely on dirty/unsanitary rags or reuse products. Insufficient access and reliance on unsanitary measures can expose girls and women to vaginal infections. Some girls/women have to ration products. For girls/women who are experiencing homelessness this practice can make one feel more embarrassed or ashamed.</p> <ul style="list-style-type: none"> <li>• School attendance can be significantly affected when girls miss class or don’t attend school because of a lack of products. 1 in 5 girls have missed school or left early due to not having feminine hygiene products. Lack of access affects quality of the students’ education and potentially their futures.</li> <li>• <i>Tackle Stigma</i> - Many girls are uncomfortable or embarrassed to talk about periods. Advocate for “menstrual equity for all – populations include those who are incarcerated, those in emergency shelter programs, those partaking in other federally funded programs.</li> <li>• Bring awareness of the need for products to all students</li> <li>• Teach students how to stay healthy during menses. This newfound knowledge may boost their self-image.</li> <li>• Bring forward legislative solutions. New York legislator introduced topic of mandate to “period supplies.” New York City passed the first legislative package in the United States to ensure access to menstrual products in public schools, shelters and corrections facilities.</li> </ul> <p>Commissioner Dorantes reminded the subcommittee members of the need to be attentive to the fiscal note – how to offset costs.</p> <p>Cherie Phoenix-Sharpe reminded subcommittee members of their charge of working to develop bi-partisan legislation addressing issues related to the health and safety of women and girls.</p> <p><i>Potential solutions –</i></p> <ul style="list-style-type: none"> <li>• Initiate a “period product” drive in schools, and other community agencies that serve girls and women. Make sure that feminine hygiene products are a visible resource in our communities. More emphasis in health curriculums in public schools.</li> </ul> <p>Include boys as well as girls in education initiatives.</p> <p>All 3 Commissioner’s thanked the students for their presentation and let them know</p>	<p>Subcommittee will continue to pursue this topic –</p> <p>Conduct additional research – Consider public health lens. Pursue potential bi-partisan legislation. Explore possibility of curriculum being a part of health education courses currently offered in schools.</p> <p>Continue to educate and engage hospitals, FQHC’s, local health departments, community colleges on menstrual equity.</p>

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	<p>they would like to continue to include them in further discussions. Commissioner Bye extended a special thank you to Ms. Zarnick, their teacher and to the many contributions of teachers in CT.</p>	
<p><b>Priority Setting Breakout Group Exercise</b></p>	<p>Subcommittee members and attendees were provided with an overview of the breakout groups by Commissioner Bye. A list of the 8 potential topics for focus for the subcommittees' future work was distributed. All members and attendees broke into six self-selected small groups (approximately 8 people per group, intentional diversity of small group membership). Commissioner Bye introduced her staff that she worked with to guide them in terms of group facilitation. Each group met for approximately 50 minutes to identify their topics. Each group had a designee to report out their list. OEC staff then compiled a list which consolidated the cross-cutting areas of focus for member and attendee voting. Each person received 3 dots equating to 3 votes – and were able to put more than one dot on a topic.</p> <p>Group 1</p> <ul style="list-style-type: none"> <li>• Health equity and disparity in care</li> <li>• Mental health and SU supports</li> <li>• Feminine hygiene needs</li> <li>• Caregiver supports- Early childcare to elder care</li> <li>• Transitional services- incarceration re-entry</li> </ul> <p>Group 2</p> <ul style="list-style-type: none"> <li>• Sexual violence as umbrella concept- internet, bathroom, IPV, trafficking</li> <li>• Racism- bias and implicit bias – track health disparities</li> <li>• Stress through trauma-bullying-access to care- trauma informed care</li> <li>• Access to feminine hygiene – diapers, prenatal care</li> </ul> <p>Group 3</p> <ul style="list-style-type: none"> <li>• Maternal health – access – mortality</li> <li>• Mental health- access and equity issues- LGBTQ, women of color women in recovery</li> <li>• Bias in healthcare- health education starting very early up to medical education</li> <li>• Safety- for all women</li> <li>• Responding to federal changes that impact women's health and safety in CT</li> </ul> <p>Group 4</p> <ul style="list-style-type: none"> <li>• Women and girls shaming- MH, SU, lack of resources, screening tools</li> <li>• Access to reproductive services, where have services been reduced?</li> </ul>	

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	<ul style="list-style-type: none"> <li>• IPV- fear of deportation</li> <li>• Mental Health and SU treatment- access, equity-</li> <li>• Screening Tools needed- IPV,</li> <li>• 2 gen resources for all women- nutrition, early childhood supports</li> </ul> <p>Group 5</p> <ul style="list-style-type: none"> <li>• Trauma –help them feel they are not re-traumatized</li> <li>• Discrimination in healthcare- racism, disabilities, elders, HIV</li> <li>• Screening and prevention – IPV, trafficking, caregiver burnout how to safely document’</li> <li>• Health equity- LGBTQ</li> <li>• Basic Needs – housing, contraception counseling,</li> </ul> <p>Group 6</p> <ul style="list-style-type: none"> <li>• Safe childcare- home and center based, training, licensure, oversight</li> <li>• Trauma informed education- First Responders, EBP, toxicology screening, implementation oversight – sexual safety</li> <li>• Teen health education revamping- mandatory, cyber tech training, vaping</li> <li>• Parent Education – category- then how do we get them to the experience</li> </ul> <p>EMBED DATA IN ALL CATEGORIES</p>	<p>Results of voting will be tallied and reported at next sub-committee meeting.</p>
<b>Adjournment</b>	The meeting adjourned at noon.	<p>Future Subcommittee Meetings  October 7th, 9-11 am, LOB, Room TBD  December 3rd, 9-11 am, LOB, Room TBD  Next Governor’s Women and Girls Council Meeting – September 10, 2019</p>