



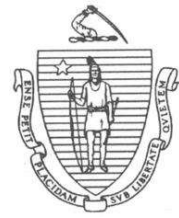
THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN



Virtual Impact on Women's Health
MCSW Public Hearing Summary
Wednesday, November 20, 2024, 6:00 pm – 8:00 pm
Virtual on Zoom



THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN



Purpose

The Commission holds multiple public hearings around the Commonwealth each year. The purpose of our public hearings is to give community stakeholders the opportunity to discuss issues and concerns important to women, as well as the gaps or barriers they have experienced in the provision of services available in Massachusetts. The information collected influences the MCSW's advocacy and legislative priorities. Public Hearings help the MCSW effectively provide a permanent, effective voice for women across MA.

Attendees

State Commissioners

Mary-dith Tuitt, MCSW Chairwoman
Christine Monska, MCSW Vice Chairwoman
Kim Shea, MCSW Secretary
Sarah Glenn-Smith, MCSW Legislative & Public Policy Committee Secretary
Tanisha Arena, MCSW Treasurer and Finance Committee Chairwoman
Guimel DeCarvalho, MCSW Legislative and Public Policy Committee Chairwoman
Audrey Hall, MCSW Finance Committee Secretary
Jean Fox, MCSW Program & Planning Committee Vice-Chairwoman
Sonia Shah, MCSW Legislative & Public Policy Committee Vice-Chairwoman

Regional Commissioners

Bonnie MacCracken, Chair of Franklin-Hampshire County Women's Commission
Elizabeth Arruda, Plymouth County Commission on the Status of Women
Lynne Barbee, Chair of Cape Cod Commission on the Status of Women
Connie Chow, Upper Middlesex County Women's Commission
Michelle Davidson, Plymouth County Commission on the Status of Women

Staff

Shaitia Spruell, Executive Director
Tina Games, Regional Commissions Director
Ellen Moorhouse, Communications & Marketing Director
Shalaya West-MPP, Program & Research Director
Marjorie Bernadeau-Alexandre, Administration & Finance Director
Raven Harris, Executive Assistant & Clerk
Darlene Kelter, Administrative Assistant
Kelechi Eemma, Program and Research Intern
Vina Le, Program and Research Intern

Elected Officials

MA Senator Joan Lovely
MA Representative David Vieira



THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN



About the MCSW

The MCSW is an independent state agency that was legislatively created in 1998 to advance women of the Commonwealth to full equality in all areas of life and to promote their rights and opportunities. The Commission is comprised of 19 diverse members who are appointed by the Governor, Senate President, Speaker of the House of Representatives and the Caucus of Women Legislators. Commissioners serve in a voluntary capacity and the work of the Commission is facilitated by a staff of seven, assisted by year-round interns.

Description of the Public Hearing

This hearing was hosted as a virtual event with 55 participants joining on Zoom. The hearing began with MCSW Commissioners introducing the topic of health impacts. The remainder of the event featured public testimony. Each testifier was allotted three minutes to present to the Commission virtually and encouraged to submit written testimony in addition.

There was a total of 14 people who testified at the hearing. The MCSW sought out testimony from the residents of residents, legislators, and other community stakeholders from all Massachusetts counties on issue areas of concern. We provided several accommodations including, Spanish interpreters and closed captioning services.

Public Testimony Presented by MA Constituents

The Commission exists to provide a permanent, effective voice for women and girls across Massachusetts and recognizes all women, regardless of their age, race, color, creed, abilities, language, socio-economic status, immigration status, sexual orientation, or gender assigned at birth.

We heard public testimony from MA constituents, regional and local leaders. As a public entity we have a responsibility and commitment to hear from all women across the state. These individuals' testimonies are not all reflective of the MCSW's values, but they are a crucial piece of our data collection process to report out on the Status of Women in MA.

- **Ensuring Access and Automation of Record Sealing:** Pauline Quirion, a representative from Greater Boston Legal Services and the CORI Reentry Project, testified on behalf of formerly incarcerated women. She asked for the commission to support An Act Supporting Survivors of Trafficking and Abuse ([S.1002](#) / [H.1702](#)), the Clean Slate Bills (An Act Providing Easier & Greater Access to Record (CORI*) Sealing [[S.979](#) / [H.1598](#)] and An Act to Remove Collateral Consequences & Protect the Presumption of Innocence [[S.998](#) / [H.1493](#)]). These bills were all sent to study and will be refiled in next session. An Act Supporting Survivors of Trafficking and Abuse will “allow people who are trafficked, or who are coerced into committing crimes, or pressured, or in that situation, to allow them to immediately seal those records without any kind of waiting period or even expunge them if they choose”. Quirion mentions that the current law is “overly narrow. It's basically low, level drug possession and prostitution. It really doesn't represent the type of victimization that happens, and just the extent and the range of survivors



THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN



who are out there.” Criminal records make it extremely difficult to gain employment, sealing records in a timely manner would ease the lives of many survivors and assist them with reentering society.

- Emergency Contraception Vending Machines for College Students: Claudia Trevor-Wright (CTW), a Natick resident and leader of the Connect for Success Initiative at the American Society for Emergency Contraception, addressed the need for expanded access to sexual and reproductive healthcare (SRH) for community college students. CTW describes the negative impact of SRH disparities on student enrollment, persistence, and academic success and emphasized the benefits of contraception in improving economic well-being. She “urge the Commission to incorporate into its legislative priorities either state funding or direction to institutions of higher education, to provide emergency contraception vending machine access to students.”
- Sustainable Solutions for Vulnerable Communities: Elizabeth Tarrant, Chief Program Officer of Health Imperatives, testified about low-income and vulnerable populations in southeastern MA facing challenges due to rising healthcare and living costs, stagnant state funding, and systemic inequities that particularly affect women and marginalized communities. Health disparities, housing instability, and barriers to quality care reinforce cycles of poverty, worsened by a lack of comprehensive support systems. Many advocacy groups urge a shift from emergency responses to long-term solutions, emphasizing that “Massachusetts must transition from a ‘safety net’ approach to an ‘opportunity springboard’.” This requires reallocating state funding to underserved populations, investing in models like housing programs for trauma survivors, and collaborating across public and private, and philanthropic sectors to create sustainable opportunities that address systemic inequities.
- Expanding Resources for Pregnant Persons-Soraya DosSantos, a representative of the Sacred Birthing Village-Southcoast of New Bedford, a program focused on maternal restoration, testified the need for more resources to be directed towards BIPOC, birth and pregnant people in southeastern MA. “We continue to see a number of... data points that continue to tell us we are not well, and we continuously navigate many different things that pose as threats to our ability to have thriving lives, especially for pregnant and birth individuals.” She asks for more resources for her community that “continues to see a whole level of impoverishment deprivation across the board.”
- Ensuring Medical Equipment Access Across State Lines with Medicare-Judith Gangle is a resident of Massachusetts, but currently is in Ohio due to the death of her husband 8 months ago, after facing several life-threatening health scares, she had issues with her health insurance. Because she paid for a supplement to her Medicare plan, “providers are bound to provide anything for which Medicare gives its approval.” However, because she was in another state certain providers wouldn’t let her have access to “durable medical equipment”. Gangle asks for Medicare to “make sure that every vendor who does business with any of these supplement providers realizes they don't have an option not to provide that which is properly prescribed and approved.”
- Revival of the Sexual Assault Nurse Examiner Program-Stephanie Ellis, a nurse from Barnstable in Cape Cod, talks about the dissolution of sexual assault nurse examiner program. Prior to August 2022, Cape Cod Hospital and Falmouth Hospital provided 24/7 on call in-person certified sexual assault care by a certified and trained SAE nurse. This program was ended in November 2022 with no reason given, although it was assumed that it was due to low attendance and staffing issues. Ellis then congregated a



THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN

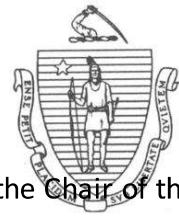


group of nurses, chiefs of police, state reps, and pediatricians who asked the Department of Public Health to delay the elimination. The alternative proposed by the Department of Public Health was a telehealth service where an emergency nurse could connect with a trained nurse on a tablet. This alternative place unnecessary strain on staff due to each case taking 3 to 5 hours, additionally travel nurses are often unfamiliar with these processes. "Cape Cod healthcare should not take on the financial burden of trying to put together a program that neighboring communities have in place in person for sexual assault."

- Increasing Patient Autonomy for Elders-Ellie Martins, a member of the Southcoast Women's Fund, recounts her negative experience where a medical professional overruled her wishes to die in her home. Growing up, Martins experienced a wide variety of health issues despite that she maintained that she lived a good life. These last few months she experienced an infusion that left her temporarily paralyzed and in immense pain. Due to her age, she was refused higher anesthetics to alleviate her pain, as a result, she unsafely took a dosage of "6 nitroglycerin pills and 2 squirts". When told that this could be a potentially fatal choice, she stated that "I choose to die at home." Against her wishes, the medical professional called an ambulance and forced her to receive care. Martins asks for medical professionals to respect the wishes of their patients, stating that "I'm 75 years old, I said. Our society is so bloody, greedy, everybody wants more life. My life has been excruciatingly painful. I said, 'I've lived a good life with what I've had.'"
- Increasing Patient Autonomy-Shawnee, a member of the Southcoast Women's Fund and from the New Bedford area, testified as a Certified Medical Assistant and as a person who has experienced a lot of medical traumas. She asks that she "be able to pick the doctors I want in the hospital. I want to get surgeries". Testifying that she has been through enough and wants to have her medical wishes respected.
- Increasing Post Partum Awareness and Research-Marjorie Bernadeau-Alexandre (MBA) brings her experience as community and criminal analyst and as woman of color who has struggled with post partum care. She asks for more collaboration between the department of health, doctors, and government officials to follow up on post partum care after the passing of the maternal health bill. MBA notices that "whole idea of making it as if women of color are aggressive and not really viewing the issue that's going on with postpartum...it is neglect, and it is something that says... 'you can take care of it.'" The other issue addressed by MBA is filicide by mothers, through her research she has noticed that many of these deaths are attributable to post partum depression and that more awareness is needed.
- Revival of the Sexual Assault Nurse Examiner Program- Nurse Julie Sturtevant emphasizes how detrimental the removal of a SANE program is to Cape Cod hospital as both a nurse and as a mother of a survivor. "One of my own daughters was sexually assaulted, and I had to bring her in for a rape kit, and I will say that I can't imagine having done that with my 18-year-old child...I can't imagine doing that and having a tablet telling this person how to do this evidence collection that could potentially go to court to be the make or break of a case convicting this person who had assaulted her. I'm grateful that it happened when we had SAE nurses at our hospital." She asks for the SANE program to continue to exist for the Cape Cod community.



THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN



• Increasing Healthcare Access for Post Partum Individuals and Youth- Lynne Barbee, the Chair of the Cape Cod Commission on the Status of Women, reiterates her support for the revival of the SANE program and her hopes for proper implementation of the Doula Bill. For the Doula Bill, she asks for insurance to cover the costs and mentions that this bill would assist in the post partum care issue. LB also highlights her concern for the upcoming administration reducing the Affordable Care Act and removing healthcare for young adults still on their parent's plans.

- Improving Abortion Access-Susan Lee (SL), from Bristol County and New Bedford, brings up how women in southeastern Massachusetts have very little access to in person abortion services. She credits Health Imperatives for improving access to medicated abortions but notes that, "there's no hospital in southeastern Massachusetts offering in clinic surgical abortion services. So, women have to go to Boston. They have to go to Attleboro. They have to go to Providence, and that's a long way to go, especially if someone doesn't have a car." SL asks for the commission to advocate for better in person abortion services whether it's in the form of hospitals, clinics, or free-standing clinics.
- Continue Support of Social Determinants of Health-Aaliyah Bannister-Batie, the Vice President of Government Relations and External Affairs, and Chief Diversity Officer for Wayside Youth and Family, asks for the commission to encourage legislators to continue supporting Social Determinants of Health (SDOH) especially in light of the new administration. ABB expresses her concerns about how the new administration will hurt black and brown communities with respect to SDOH and post partum maternal care.

Summary of Themes Heard:

- **Access and Automation of Record Sealing:** Advocates call for immediate sealing or expungement of criminal records for trafficked or coerced individuals without a waiting period to help improve their employment opportunities.
- **Emergency Contraception Vending Machines for College Students:** Proposes state funding for emergency contraception vending machines to address sexual and reproductive health disparities affecting academic success.
- **Sustainable Solutions for Vulnerable Communities:** Encourages a shift from emergency safety net responses to long-term solutions for systemic inequities in healthcare, housing, and support systems.
- **Expanding Resources for Pregnant Persons:** Highlights the need for increased resources for BIPOC pregnant and birthing individuals.
- **Medical Equipment Access with Medicare:** Encourages Medicare policies include state-to-state access to durable medical equipment for approved and prescribed needs.
- **Dissolution of the Sexual Assault Nurse Examiner (SANE) Program:** Many are disappointed with the replacement of Cape Cod's in-person SANE program with an inadequate telehealth alternative.
- **Patient Autonomy:** Patients want to be able to have an influence in their treatment plan.

- **Post Partum Awareness and Research:** Research and create ways to reduce BIPOC experiences with Post Partum Depression while also including post partum care in the doula bill.



THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN



Improving Abortion Access: Provide more abortion services in the form of clinics, hospitals, or free-standing clinics.

Recommendations

This legislative hearing provided a platform for public testimony on pressing issues affecting the health and wellness of women and their communities across the Commonwealth. Advocates and stakeholders shared their insights, emphasizing themes of equity, access, and systemic change. The testimony received informed actionable recommendations for lawmakers to advance policies that address these challenges. The MCSW recommends the following:

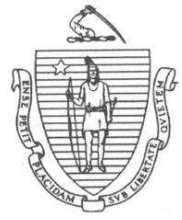
1. **Promote Comprehensive Postpartum Care:** Advocate for policies that ensure postpartum individuals have access to free or affordable mental health screenings and support services for up to one year after childbirth. Pediatricians should be empowered to provide such screenings, helping to identify and address postpartum depression early.
2. **Streamline Criminal Record Sealing:** Support the automation of sealing eligible criminal records to facilitate reintegration, reduce stigma, and increase access to employment, housing, and education opportunities for individuals with prior convictions.
3. **Invest in Economic Revitalization and Housing:** Prioritize funding for housing development, infrastructure improvement, and community programs aimed at creating jobs, stimulating the economy, and addressing urgent community needs.
4. **Support Survivors of Trafficking and Abuse:** Advocate for streamlined processes to seal or expunge criminal records of individuals whose offenses are directly tied to their experiences of trafficking or abuse. Eliminate waiting periods and provide pathways to nullify convictions linked to exploitation.
5. **Protect the Presumption of Innocence:** Encourage the automatic sealing of records for charges that did not result in conviction, protecting individuals from undue harm caused by the existence of non-conviction records.
6. **Expand Access to Post-Pregnancy Mental Health Care:** Ensure post-pregnancy mental health services are accessible to all individuals, including those who have experienced miscarriages. These services should be exempt from deductibles, co-insurance, or co-payments to eliminate financial barriers to care.
7. **Enhance Access to Abortion Care:** Support reforms to reduce restrictive regulations on abortion clinics, promote inclusive reproductive health care, and expand public education on abortion access. Additionally, revise outdated language regarding providers to ensure clarity and inclusivity.

This hearing underscored the importance of creating equitable policies that center on community needs and lived experiences. Lawmakers are urged to act on these recommendations to promote justice, health, and opportunity across the Commonwealth.

Approved for Distribution on: January 28, 2025



THE COMMONWEALTH OF MASSACHUSETTS
COMMISSION ON THE STATUS OF WOMEN



Approved by: MCSW Full Commission