

**ADVISORY COMMITTEE ON THE STATUS OF WOMEN
MEETING SUMMARY**

Tuesday March 5th, 2013

Worcester City Hall, Room 401, 4th Floor – 5:30 p.m.

Members Present: Sarah Gruhin, Chantel Bethea, Kathleen Linton, Karen Pelletier, Elizabeth Tomaszewski

Staff: Jayna Turcek, Director of the Office of Human Rights and Disabilities, Caitlin Alcorn, Intern for the Office of Human Rights and Disabilities

Guests: Gina Moretti-MacConnell from the YWCA, Jessica Donovan

1. Call to Order:

There being a quorum the Chair called the meeting to order at 5:30 pm. Members and guests introduced themselves.

2. Approval of January 8, 2013 Minutes:

One edit was made to the minutes. Recommended use of Meetup, the online site, was changed from “good way to connect women to walking groups” to “tool to outreach to more women.” On a motion made by Ms. Pelletier, seconded by Ms. Bethea, the Committee voted to approve the corrected minutes from January 5, 2013 by a vote of 5-0-0.

3. Membership Update:

Ms. Turcek explained that there were no new members to report. However, the Citizen Advisory Council held a special session to review applicants and applicants would be moving through the selection process.

4. YWCA of Central MA – a conversation with Gina Moretti-MacConnell:

Ms. Bethea introduced Ms. Moretti-MacConnell from the YWCA. Ms. Moretti-MacConnell discussed the history of the YWCA and gave an overview of their programs including transitional housing, child care, domestic violence services, advocacy, empowerment, and health and wellness. She discussed upcoming events including: Career Shadow Day for the Young Parents Program on April 18th, Stand Against Racism on April 26th, Tribute to Women Luncheon at Mechanics Hall on May 6th, Women’s Health Week from May 12 – 18th. The YWCA is also looking for tutors and mentors for their Young Parents Program.

5. Women’s Health Education:

A. Massachusetts Commission on the Status of Women

i. Hearing reflection / follow up

Ms. Bethea and Ms. Gruhin spoke about their impressions of the hearing that took place on Wednesday, January 23rd at the YWCA of Central MA. Ms. Gruhin gave testimony about the work currently being developed by the City Advisory Committee on the Status of Women.

ii. *Save the Date:* Legislative Advocacy Day May 15th, 2013

Ms. Bethea reminded the committee to RSVP to the event and provided the contact information for the Massachusetts Commission on the Status of Women. It was decided that next month’s meeting would include discussions on strategies for participation.

B. Division of Public Health Community Health Improvement Plan (CHIP)

Ms. Turchek reviewed the CHIP plan and previous discussions on the committee's chosen focus area of women's health education. Ms. Alcorn reviewed a memo that she prepared for the Committee that highlighted possible opportunities the ACSW could take to align the CHIP plan, the committee's chosen focus area, and the legislative priorities of the Massachusetts Commission on the Status of Women. The possibility of holding public hearings was discussed as a way to receive public testimony on the issue of the paid sick time in Worcester. Additionally, the possibility of working within Worcester Public schools' health curriculum was discussed. Ms. Moretti-MacConnell shared that the YWCA Girls Promoting Safety is a good program that is focused on building resiliency skills and healthy relationships. Professor Laurie Ross has followed the program with longitudinal studies. Ms. Gruhin suggested inviting someone from Planned Parenthood to next month's meeting. Ms. Bethea will outreach to Planned Parenthood to extend an invitation. More specific ideas and plans would be discussed at next month's meeting as well.

6. Community Announcements:

Ms. Bethea brought up the Empowering Women in Business Conference on March 28th at Nichols College. Ms. Pelletier explained that Pathways for Change would be holding events throughout the month of April in recognition of Sexual Assault Awareness Month. She mentioned that on March 20th Clark University will host a White Ribbon event to encourage men's involvement in combating sexual violence. Ms. Tomaszewski announced that the Clothesline Project will participate in Take Back the Night at WPI, date TBA.

7. Adjournment:

On a motion that was duly made and seconded, the meeting adjourned at 7:10 pm.

Massachusetts Commission on the Status of Women – Community Health Improvement Plan

The Massachusetts Commission on the Status of Women (MCSW) has laid out its priority legislation for the 2013-2014 legislative session. These include: HD968 An Act to Further Define Comparable Work, SD861/HD504 An Act Establishing Earned Paid Sick Time, SD338/HD1269 An Act Providing for Equitable coverage in Disability Policies, and SD94 An Act Establishing a Worcester County Commission on the Status of Women.

The City of Worcester Advisory Committee on the Status of Women could focus its attention on assessing the local need for paid sick time as well as raising local awareness and support for SD861/HD504 An Act Establishing Earned Paid Sick Time and its potential benefits to the Worcester community. Passage of this bill would allow for progress on many of the goals and objectives listed in the City of Worcester Community Health Improvement Plan (CHIP). This enables the Commission to align itself with priorities at the state level while addressing issues at the local level. The following are the most relevant CHIP priorities and how they align with this potential focus of The City of Worcester Advisory Committee on the Status of Women.

Priority Area 5: Health Equity/Health Disparities has for one of its objectives to “Ensure that each public health priority area in the CHIP identifies strategies to address oppression and the social determinants of health.” Progress towards this objective can be made through the Commission’s focused attention on paid sick leave. According to the Institute for Women’s Policy Research, among private sector workers over the age of 18 living in Massachusetts, 48.6% of Hispanics and 37.6% of Blacks are without access to paid sick days, compared to 34.6% of Whites. This issue of earned paid sick time is especially important for low-income workers, as 67.2% of workers earning below \$24,000 a year are currently without paid sick days. This institutional discrimination limits access to, and use of, healthcare services to a specific group of community members, creating greater health disparities among residents. Garnering local awareness and support for SD861/HD504 An Act Establishing Earned Paid Sick Time and its potential benefits to the Worcester community would be a good use of the Commission’s time and efforts. Passage of this bill would enable progress on two outcome indicators

within this priority area: “Percent of adults (from racial/ethnic minority groups) in fair or poor health” and “Percent of individuals who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medicines.” While there is not a great deal of disparity between men and women in regards to access to paid sick days in Massachusetts, support for such legislation is much higher among women nationally. According to a poll conducted by the Public Welfare Foundation, 86% of women identified paid sick days as “Very Important” among labor standards, compared to 66% of men. Part of the work of the Commission could be an awareness campaign, consisting of raising women’s awareness of the benefits of paid sick time and ways to get involved in advocating for the passage of SD861/HD504.

Priority Area 3: Primary Care/Wellness has as a goal to “Create a respectful and culturally responsive environment which fosters prevention, wellness, and access to quality comprehensive care for all.” According to the Institute for Women’s Policy Research, paid sick time enables workers and their families to lower personal health care expenditures and allows for savings for the community at large due to the decreased spread of infectious diseases as workers stay home rather than going to work contagious. Allowing employees time to stay home while sick without the possibility of losing their employment in the process would foster this environment of prevention and wellness. It is also expected that workers using this time to care for ill family members will result in more efficient utilization of health care services, including decreased use of emergency room services. Number of emergency room (ER) visits is one outcome indicator established by the Greater Worcester CHIP within this priority area. So again, by sponsoring a campaign to raise awareness of the benefits of paid sick time, the Commission could support MCSW’s priorities while addressing local priorities as well.

Priority Area 4: Violence/Injury Prevention has as one of its objectives to “reduce physical assaults and violence as they pertain to domestic abuse, child neglect, bullying, and gang violence by x% by 2015.” SD861/HD504 allows employees to use paid sick time to seek support to escape or recover from domestic violence. In Section 2, subsection (c), “(4) an employee to address the psychological, physical or legal effects of domestic violence as defined in subsection (g 1/2) of section 1 of chapter 151A.” Giving survivors of domestic violence time to seek assistance allows them to escape dangerous

situations and prevent further abuse. Many victims of abuse often stay with their abuser because of financial dependency. Allowing them time to seek help without the possibility of losing their employment in the process would address this issue. Once again, by raising awareness of the need for paid sick time, the Commission could support MCSW's priorities while addressing local issues as well. In addition to supporting the passage of this bill, there are other opportunities for the Commission to align itself within the CHIP.

While this bill is an important piece of legislation with the potential to make a major difference in the lives of Worcester residents, it is not perfect. It is gender blind in its designation of benefits. While it specifically includes recovery from domestic violence and care of a sick child as acceptable uses of paid sick time, it ignores the fact that these predominantly affect women more than men by not designating additional paid sick time for women. According to a 2003 report by the Kaiser Family Foundation, "approximately 80% of all mothers are responsible for selecting their child's doctor, taking children to doctor's appointments, and follow-up care." Additionally, two-thirds of all mothers with children under 18 years of age are part of the nation's workforce. Given their central role in children's health care decisions and responsibilities, working mothers often must miss work to care for a sick child. According to the report, in 2001, half of working mothers ages 18 to 64 reported having to miss work when a child is sick due to lack of other resources, compared to 30% of working fathers. The legislation uses the term "employee," and explains that "Earned sick time shall accrue at the rate of 1 hour for every 30 hours worked, commencing with the date of hire" for all. The Commission could potentially play a role by making recommendations for ways to improve this legislation to better address the realities of working women.

The City of Worcester Advisory Committee on the Status of Women has chosen Women's Health Education as its primary area of focus this year. In addition to the links established through the MCSW's priorities, there are goals and objectives within the CHIP that align with this focus and allow for collaboration and input from the Commission.

Priority Area 3: Primary Care/Wellness has as one of its objectives to "Introduce two new/amended policy initiatives by 2015 to improve sexual health, and reduce the

rates of unintended pregnancy, teen pregnancy and Sexually Transmitted Infections (STI's)." This is a clear path for the Commission to align its focus of Women's Health Education within the CHIP. The three strategies drafted for this objective all include improving existing or developing new health education programs and materials. The Commission could be instrumental in enhancing health literacy education in K-12 schools by ensuring there is a component that addresses the particular needs of women and girls. This could include topics of physical and mental health, including the prevention of dating violence and sexually transmitted diseases and the advancement of reproductive health. The Commission could work with already identified partners such as Planned Parenthood and the YWCA to develop this curriculum or at least monitor its progress. The Commission could also play a role in the development of "a mass media education campaign to increase knowledge about risky sexual behaviors, HIV and HIV testing, and Sexually Transmitted Infections (STI's)" as listed in one of the draft strategies in Priority Area 3. The Commission's role could be that of bringing identified partners together to develop the campaign, monitoring its progress, and raising awareness of the campaign and existing resources within the community. The Commission could also play a role in advocating for and advising school policy on reproductive health education.

This objective appears to offer the clearest opportunity for the Commission to align its focus of Women's Health Education with the CHIP. By including topics of dating violence and domestic violence prevention in these educational programs, the Commission also addresses the objective of Priority Area 4, to "reduce physical assaults and violence as they pertain to domestic abuse, child neglect, bullying, and gang violence by x% by 2015."

Possible Action Areas for the City of Worcester Advisory Committee on the Status of Women

1. Gather and assess information on local statistics on the issue of paid sick time, including local testimony in support of the bill. Work in collaboration with partners to raise local awareness and support for SD861/HD504 An Act Establishing Earned Paid Sick Time.

- a. Addresses 3 priority areas within the CHIP and is aligned with state level priorities.
- b. letter to Worcester Telegram from a school nurse in Worcester stressing importance of earned paid sick time legislation.

2. Focus on the strategies identified under Objective 3.2 of the CHIP including, improving health literacy education in K-12 schools, developing an education campaign about sexual health, and recommending improvements in policies regarding school-based reproductive health education. Start by reviewing current health curriculum in Worcester Public Schools.

- a. Worcester Public Schools Comprehensive Health Education Curriculum
 - i. 3 major focus areas: Health Literacy, Healthy Self-Management (including pregnancy and sexually transmitted diseases), and Health Promotion and Advocacy (including conflict resolution and violence prevention).

Miller, Kevin. "Race/ethnicity/gender/personal earnings and access to paid sick days in Massachusetts." Institute for Women's Policy Research. October 5, 2011.

Miller, Kevin and Claudia Williams. "Valuing Good Health in Massachusetts: The Costs and Benefits of Paid Sick Days." Briefing Paper #305. Institute for Women's Policy Research. May 2012.

Smith, Tom. "Paid Sick Days: A Basic Labor Standard for the 21st Century." Public Welfare Foundation. August 2008.

Wyn et al. "Women, Work, and Family Health: A Balancing Act." Issue Brief. The Kaiser Family Foundation. April 2003.

