Council on Medical Assistance Program Oversight

Legislative Office Building Room 3000, Hartford CT 06106
(860) 240-0321 Info Line (860) 240-8329 FAX (860) 240-5306
www.cga.ct.gov/med/

MEETING SIGN-IN SHEET

Meeting Women's Health Committee	**Meeting Date:** 9/15/14
Facilitator: Sen Genetama & Amy Gagliardi	**Place/Room** LOB 1A

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Marilyn Lonczak	DPH-WIC	marilyn.lonczak@ct.gov
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ERIN E JONES	MARCH OF DIMES	ejones2@marchofdimes.com
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Morbidity and Mortality Weekly Report (*MMWR*)

Providing Quality Family Planning Services: Recommendations of CDC and the U.S. Office of Population Affairs

Recommendations and Reports
April 25, 2014 / 63(RR04);1-29

Providers are encouraged to present information on potential reversible methods of contraception by using a tiered approach (i.e., presenting information on the most effective methods first, before presenting information on less effective methods) (*38,39*). This information should include an explanation that long-acting reversible contraceptive methods are safe and effective for most women, including those who have never given birth and adolescents (*35*). Information should be tailored and presented to ensure a client-centered approach. It is not appropriate to omit presenting information on a method solely because the method is not available at the service site.

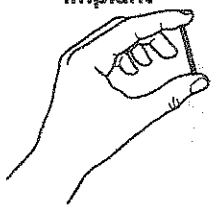
Effectiveness of Family Planning Methods

Most Effective

Less than 1 pregnancy per 100 women in a year

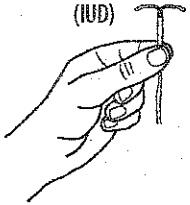
Reversible

Implant



0.05 %*

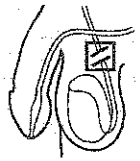
Intrauterine Device (IUD)



LNG - 0.2 % Copper T - 0.8 %

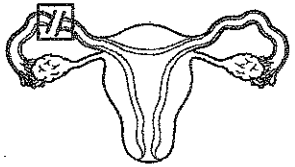
Permanent

Male Sterilization (Vasectomy)



0.15 %

Female Sterilization (Abdominal, Laparoscopic, Hysteroscopic)



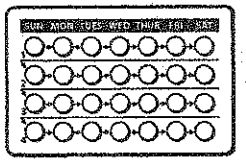
0.5 %

6-12 pregnancies per 100 women in a year

Injectable

6 %

Pill

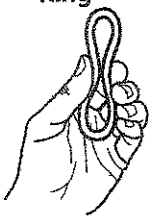


9 %

Patch

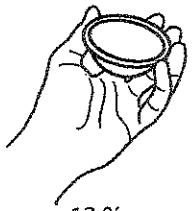
9 %

Ring



9 %

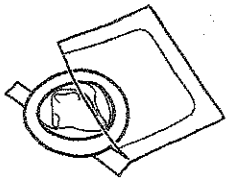
Diaphragm



12 %

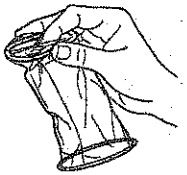
18 or more pregnancies per 100 women in a year

Male Condom



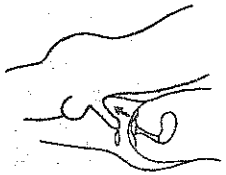
18 %

Female Condom



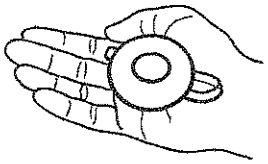
21 %

Withdrawal



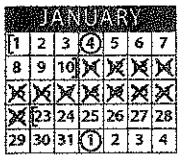
22 %

Sponge



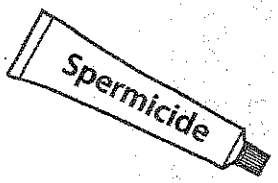
24 % parous women
12 % nulliparous women

Fertility-Awareness Based Methods



24 %

Spermicide



28 %

Least Effective

*The percentages indicate the number out of every 100 women who experienced an unintended pregnancy within the first year of typical use of each contraceptive method.

How to make your method most effective

After procedure, little or nothing to do or remember.

Vasectomy and hysteroscopic sterilization: Use another method for first 3 months.

Injectable: Get repeat injections on time.

Pills: Take a pill each day.

Patch, Ring: Keep in place, change on time.

Diaphragm: Use correctly every time you have sex.

Condoms, sponge, withdrawal, spermicides: Use correctly every time you have sex.

Fertility awareness-based methods: Abstain or use condoms on fertile days. Newest methods (Standard Days Method and TwoDay Method) may be the easiest to use and consequently more effective.

CS 242797

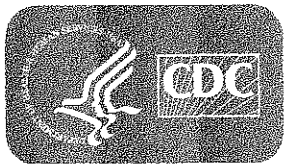
CONDOMS SHOULD ALWAYS BE USED TO REDUCE THE RISK OF SEXUALLY TRANSMITTED INFECTIONS.

Other Methods of Contraception

Lactational Amenorrhea Method: LAM is a highly effective, temporary method of contraception.

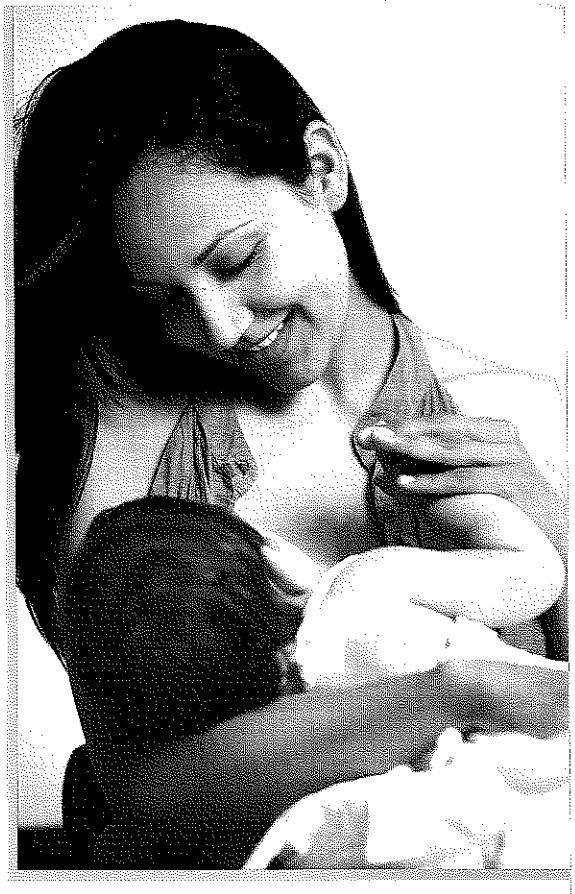
Emergency Contraception: Emergency contraceptive pills or a copper IUD after unprotected intercourse substantially reduces risk of pregnancy.

Adapted from World Health Organization (WHO) Department of Reproductive Health and Research, Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs (CCP). Knowledge for health project. Family planning: a global handbook for providers (2011 update). Baltimore, MD; Geneva, Switzerland: CCP and WHO; 2011; and Trussell J. Contraceptive failure in the United States. Contraception 2011:83:397–404.



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

Amamantando a su bebé en Connecticut ¿Cuáles son sus derechos?



Tiene el derecho de amamantar a su bebé en público.

Las leyes de Connecticut* protegen el derecho de amamantar a su niño en cualquier lugar público en el que se le permita estar. Esto significa que nadie puede limitar su derecho a amamantar a su bebé. Es contrario a la ley no permitirle amamantar a su bebé o pedirle que se retire o se cubra.

Si piensa que se ha violado su derecho a amamantar en público: comuníquese con la Comisión de Derechos Humanos y Oportunidades (CHRO, por sus siglas en inglés).

Llame al 1-800-477-5737 o visite el sitio web en www.ct.gov/chro

Tiene el derecho de amamantar o extraer la leche en el trabajo.

La ley de Connecticut sobre amamantamiento en el trabajo establece que el empleador debe permitirle amamantar o extraer la leche en el trabajo. También existe una ley federal acerca del amamantamiento en el trabajo.

Así funciona la ley de Connecticut:

Usted puede extraer la leche o amamantar a su bebé en el trabajo durante su hora de almuerzo o su tiempo de descanso. No es necesario que su empleador le pague durante ese tiempo a menos que usted esté utilizando su tiempo de descanso habitual. Deben proporcionarle un cuarto u otro espacio que esté cerca de su área de trabajo. Si su empleador no le proporciona un tiempo de descanso, no está obligado a hacerlo según la ley de Connecticut. El espacio no puede ser un cuarto de baño o el cubículo de un baño y debe tener privacidad. Esta ley es para todos los empleadores de Connecticut.

Si piensa que se han violado sus derechos de amamantar en el trabajo: comuníquese con el Departamento de Trabajo de Connecticut.

Llame al 1-860-263-6791 o visite el sitio web en www.ctdol.state.ct.us/wgwkstnd/forms/DOL-80.doc.

Así funciona la ley federal:

Si trabaja para una compañía que tiene más de 50 empleados y a usted le pagan por hora, entonces su empleador debe proporcionarle tiempos de descanso flexibles que serán diferentes para todas las mujeres. También debe proporcionarle un lugar con privacidad para extraer la leche. No es necesario que le paguen si usted está utilizando tiempo que no es su tiempo de descanso habitual.

También puede presentar una queja ante el Departamento de Trabajo (DOL, por sus siglas en inglés) de EE. UU. Para obtener información sobre presentar una queja, visite el sitio web de DOL de EE. UU.: www.dol.gov/wecanhelp/howtofilecomplaint.htm.

No puede perder su trabajo por extraer la leche o amamantar a su bebé en el trabajo.

Es contrario a la ley discriminar, disciplinar o tomar cualquier acción en su contra por ejercer sus derechos conforme a estas leyes.

Hable con su empleador acerca del trabajo y el amamantar.

Cuéntele sus planes para amamantar lo antes posible. Las mujeres necesitan extraer su leche o amamantar para continuar produciendo leche para sus bebés. El amamantar tiene como resultado mujeres y niños más saludables y gastos médicos más bajos. El hecho de que las mujeres y niños sean más saludables significa que las madres faltan con menor frecuencia al trabajo porque son más saludables y también sus bebés. Las mujeres que pueden combinar el trabajo y el amamantar están más satisfechas con sus trabajos y no dejan sus empleos con tanta frecuencia. ¡Todos ganan con el amamantamiento! Más información en: www.breastfeedingct.org

Usted tiene derechos si le llaman para prestar servicio como jurado.

La Administración del Deber de Jurado debe tener información en su sitio web para mujeres que amamantan acerca de las opciones para el servicio como jurado https://www.jud.ct.gov/jury/faq.htm# 9. Debe capacitar a su personal acerca de las necesidades de jurados que están amamantando. Para más información sobre la postergación del deber de prestar servicio como jurado o para pedir al personal del tribunal que trabaje con usted para satisfacer las necesidades de amamantamiento suyas y del bebé mientras está cumpliendo su deber como jurado, llame al 1-800-842-8175 de 8a.m. a 8p.m. de lunes a viernes, o vaya a la página de inicio de Jurado en https://www.jud.ct.gov/jury/default.htm.

Connecticut Breastfeeding Coalition

Connecticut Department of Public Health
www.ct.gov/dph

CONNECTICUT DEPARTMENT OF LABOR
Partner of the American Job Center Network

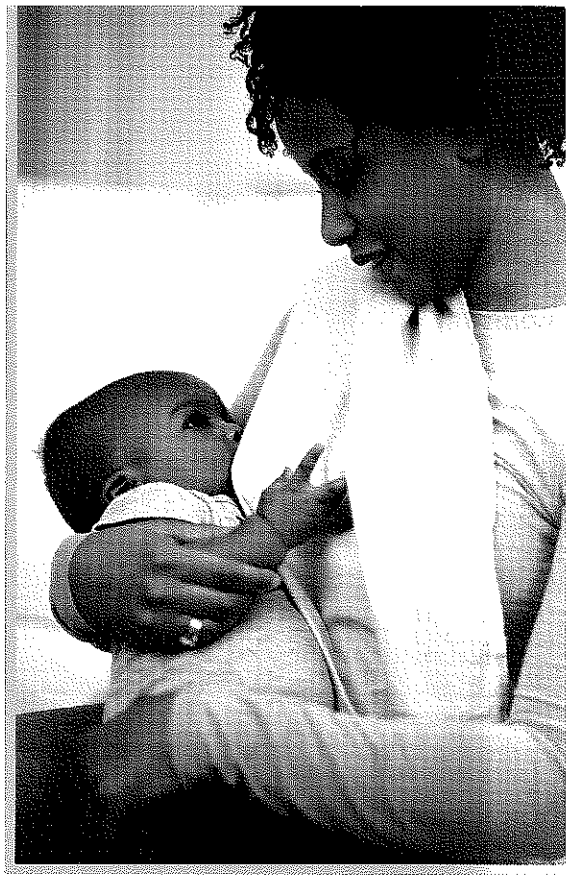
Commission on Human Rights and Opportunities CHRO Established 1949

Una publicación realizada en colaboración entre el Departamento de Salud Pública de Connecticut y la Coalición pro Lactancia de Connecticut

- Leyes de Connecticut* (Capítulo 939, Sección 53-34b y Capítulo 814c, Sección 46a-64) Amamantamiento en público
- Ley de Connecticut (Estatutos Generales de Connecticut, Sección 31-40w), Amamantamiento en el Lugar de Trabajo
- La ley pública 12-51 aborda el deber de prestar servicio como jurado

Rev. 5/2014 Esta revisión fue posible gracias a fondos provenientes del subsidio 1305 de CDC

Breastfeeding in Connecticut: What are your Rights?



You have a right to breastfeed in public.

Connecticut laws* protect your right to breastfeed your child in any public place that you are allowed to be. This means that no one can limit your right to breastfeed your baby. It is against the law to not let you breastfeed or to ask you to move or cover up.

If you think your right to breastfeed in public has been violated: contact the Commission on Human Rights and Opportunities (CHRO).

Call 1-800-477-5737 or visit their website at www.ct.gov/chro

You have a right to breastfeed or pump at work.

The Connecticut law on breastfeeding at work states that your employer must allow you to breastfeed or pump breast milk at work. There is also a federal law about breastfeeding at work.

Here is how the Connecticut law works:

You may pump or breastfeed your baby at work during your meal or break time. Your employer does not have to pay you during that time unless you are using your regular break time. They must provide a room or other space that is close to your work area. If your employer doesn't provide break time, it doesn't have to do so under Connecticut's law. The space cannot be a toilet or bathroom stall and it must be private. This law is for all Connecticut employers.

If you think that your breastfeeding rights at work have been violated: contact the Connecticut Department of Labor.

Call 1-860-263-6791 or visit their website at www.ctdol.state.ct.us/wgwkstnd/forms/DOL-80.doc.

Here is how the federal law works:

If you work for a company that has more than 50 employees and you are paid hourly, then your employer must provide you with flexible break times that will be different for all women. They must also give you a private place to pump your milk. They do not need to pay you if you are using time that is not your regular break time.

You can also file a complaint with the U.S. Department of Labor. For information on filing a complaint, visit the U.S. DOL website: www.dol.gov/wecanhelp/howtofilecomplaint.htm.

You cannot lose your job for pumping or breastfeeding at work.

It is against the law to discriminate, discipline or take any action against you for exercising your rights under these laws.

Talk with your employer about working and breastfeeding.

Tell them about your breastfeeding plans as soon as possible. Women need to pump or breastfeed to continue making milk for their babies. Breastfeeding results in healthier women and children and lower health care costs. Healthier women and children mean that mothers don't have to miss work as often because they are healthier and so are their babies. Women who are able to combine work and breastfeeding are more satisfied with their jobs and don't quit as often. Everybody wins with breastfeeding! More information at: www.breastfeedingct.org

You have rights if you are called for jury duty.

Jury Duty Administration must have information on their website for breastfeeding women about options for their jury service, https://www.jud.ct.gov/jury/faq.htm#9. They must train their staff about the needs of breastfeeding jurors. For more information on postponement of jury duty or to ask the court staff to work with you to meet you and your baby's breastfeeding needs while on jury duty, call 1-800-842-8175 8a.m. to 8p.m. Monday through Friday, or go to the Jury home page at https://www.jud.ct.gov/jury/default.htm.

Connecticut Breastfeeding Coalition

DPH Connecticut Department of Public Health www.ct.gov/dph

CONNECTICUT DEPARTMENT OF LABOR — Partner of the American Job Center Network

Commission on Human Rights and Opportunities CHRO Established 1946

A collaborative publication between the Connecticut Department of Public Health and Connecticut Breastfeeding Coalition

* Connecticut laws* (Chapter 939, Section 53-34b and Chapter 814c, Section 46a-64) Breastfeeding in public

† Connecticut law (Connecticut General Statutes, Section 31-40w) Breastfeeding in the workplace

‡ Public Act 12-51 Addresses Jury Duty

Rev. 5/2014 This revision made possible with funds from CDC 1305 grant

Hartford Healthy Start Initiative: Eliminating Disparities in Perinatal Health

HRSA-14-121: Level 1 Funding: Community-based Healthy Start

Project Title:	**Hartford Healthy Start Program (HHS)**
Applicant Name:	**State of Connecticut, Department of Public Health**
Address:	**410 Capitol Avenue, PO Box 340308, Hartford CT 06134**
Project Director:	**Margie Hudson, RN, BSN, MPH**
Contact Numbers:	**(860) 509-8074 (phone), (860) 509-7720 (fax)**
Email:	**margie.hudson@ct.gov**
Website:	**www.ct.gov/dph**

The State of Connecticut Department of Public Health (DPH) will address racial and ethnic perinatal health disparities in the city of Hartford, which is an urban community, by continuing the Hartford Healthy Start Program. The DPH is applying for the Level 1: Community-based Healthy Start which is funded at $ 562,500 for Year 1(9 months) and $750,000 each year for Years 2-5. Connecticut is among the wealthiest states in the U.S. and fares better overall in terms of perinatal health and birth outcomes compared to the nation. However, significant disparities persist for various segments of Connecticut's population. Infant mortality is one of the many perinatal outcomes for which marked disparities exist among non-Hispanic Black/African Americans statewide. Infant mortality disparity is more pronounced in urban areas of the state, including the target community of Hartford. Hartford's infant mortality rate (10.0 per 1,000 live births) was almost double the statewide rate (5.6 per 1,000 live births) and 1.5 times higher than the U.S. rate (6.6 per 1,000 live births) in 2007-2009, and Hartford residents comprised the largest percentage of all Connecticut resident infant deaths that occurred from 2007-2009 (9.5%). Non-Hispanic Black/African American women have the most significant disparities and represent the target population for the Hartford Healthy Start Program which serves low income pregnant and parenting women who live in Hartford until their child reaches two years of age. The majority of low-income women served by the Program, 2009 to present, are African-American and Hispanic. Goals of the Program are: 1) improve women's health, 2) promote quality services, 3) strengthen family resilience, 4) achieve collective impact, and 5) increase accountability through quality improvement, performance monitoring, and evaluation. The Program will 1) increase the number of low income, Black-African American pregnant women who enter prenatal care early and receive adequate prenatal care services, 2) increase interconception care among program participants,3) increase the number of women who are screened for perinatal depression,4) increase outreach and enrollment in health coverage under the Affordable Care Act, and (5)increase the number of program participants who have a medical home. The Program will provide 1) targeted outreach to low-income Black/African-American women who live in Hartford 2)direct services including case management: linking participants to resources for insurance, health and behavioral health care, child care, housing and basic needs, 3) client assessment, health promotion and education about maternal and child health; health, behavioral health, and family issues 4) support trauma-informed care. The Community Action Network will include partners, participants and consumers who will work across sectors to identify and resolve factors impacting perinatal health disparities among low-income women who live in the City of Hartford, Connecticut.