



Testimony submitted to the Health Equity Task Force in support of
H.102/S.36, H.4622, H.1173/S.678, H.585/S.256, S.1264, H.1265, S.1288/H.775, H.1305/S.797,
H.1948/S.1322, H.1949/S.1334, H.1959/S.1274, H.150/S.76, and H.2434/S.1646
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From its founding more than one hundred years ago, the League of Women Voters has worked for equal rights and social reforms, to secure equal rights and equal opportunity for all, and to promote social and economic justice, and the health and safety of all Americans.

During the 191st session of the Massachusetts legislature, the League of Women Voters of Massachusetts (LWVMA), representing 48 Local Leagues and members from across the Commonwealth, has advocated for or against more than 100 pieces of proposed legislation.

Many of these bills address the disparities experienced by underserved or underrepresented populations which have become even more apparent due to the COVID- 19 pandemic. The League requests that the Health Equity Task Force recommends positive, swift action on the following bills and issues:

Basic Human Needs, Children and Family Issues, Healthcare, and Housing:

- H.102/S.36 An Act to reduce deep poverty among kids
- H.4622 An Act to provide short-term relief for families in deep poverty
- H.1173/S.678 An Act improving public health through a common application for core food, health, and safety-net programs
- H.585/S.256 An Act to promote student nutrition
- S.1264 An Act to further provide a rental arrearage program
- H.1265 An Act to protect families experiencing homelessness from having to sleep in unsafe places
- S.1288/H.775 An Act relative to housing reform
- H.1305/S.797 An Act codifying the Mass. rental voucher program
- H.1948/S.1322 An Act relative to out-of-hospital birth access and safety
- H.1949/S.1334 An Act to reduce racial disparities in maternal health
- H.1959/S.1274 An Act to increase access to disposable menstrual products in prisons, homeless shelters, and public schools
- H.150/S.76 An Act relative to safety, dignity and civil rights of persons experiencing homelessness
- H.2434/S.1646 An Act improving the earned income credit for working families

The Boston Globe on September 15 (“Action sought on homeless families” pp. B1 and B5) reported that 2,886 families are in the state’s emergency assistance system, living in shelters and motels. This does not count the large number of families living with another family (doubling up), or spending time in cars, waiting areas, emergency rooms, or other unsuitable environments. We also know about shelters having to reduce their beds or close entirely due to the pandemic. The impact on the health of homeless individuals, particularly children, has been documented -- long-lasting health problems as well as delayed and missed treatments such as wellness visits, immunizations and screenings.

In addition to necessary relief related to the recent pandemic, we support a rental arrearage program, improvements to the Massachusetts rental voucher program, a bill of rights for people experiencing homelessness, and measures to alleviate the general housing shortage in the Commonwealth to better house all people with low and moderate incomes.

We support bills that address poverty in general, since lack of income is inextricably bound up with food insecurity, housing stress, and inability to maintain health. We support increasing the cash assistance to families under TAFDC and EAEDC, an increase to the state match for the federal the earned income credit, and a common application for all relevant benefits when families apply for one form of assistance

As COVID-19 aggressively spreads from person to person, home births have become a compelling option to many. Hospitals are limiting support for and making changes for those giving birth. Some hospitals are mandating inductions of labor or C-sections, and separating babies from mothers who are suspected to have COVID-19. These changes can lead to an increase of negative outcomes. A 2005 CDC study found that those who give birth at home under the care of certified professional midwives have outcomes equal to those of women who give birth in hospitals, with far fewer costly interventions.

Further, the League supports the creation of a commission that would focus on the unique circumstances surrounding maternal mortality among women of color, identify variables leading to these unequal outcomes, and offer proposals for solutions to address this major public health challenge.

Our policies must effectively account for the full human costs of inequity – costs that are not always visible to the naked eye but have been revealed by the pandemic.

Thank you for your consideration.