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Office of Women's Health



Celebrating the Mind, Body, Spirit & Diversity of Women

Volume 2, Issue 2

10th Anniversary Issue

Winter 2008

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OWH Celebrates 10 Year Anniversary



Thursday, November 6th, the Office of Women's Health (OWH) celebrated ten years of service to the community and honored Supervisor Yvonne B. Burke, retiring from public office, with a breakfast ceremony at The California Endowment. The combined celebration was very fitting as Supervisor Burke was the County board member who made the motion to create the OWH in 1998 and has been very instrumental in supporting the Office's programs, chairing numerous events and women's health summits and continuously passionate about the importance of disease prevention and outreach to multicultural, low-income underserved women.

The program featured ABC-TV7's Denise Dador as Mistress of Ceremonies, opening remarks from Director of Public Health, Dr. Jonathan E. Fielding, and Dr. Robert Ross, President and CEO for The California Endowment; and tributes to Yvonne Burke by numerous luminaries in the women's and community health arena. The Office of Women's Health multi-language staff filed onstage with each member thanking Supervisor Burke in their native language.

Susan Berke Fogel, Chair of the 2007 Summit Planning Committee and currently the Summit Implementation Coordinator, gave a presentation on the implementation activities for the recommendations from the 2007 Women's Health Policy Summit: *Building Multicultural Women's Health: Setting an Agenda for Los Angeles*. (See page 8 for implementation project details) ♦

Supervisor Yvonne B. Burke

42 Years of Leadership, Paving the Way for Women and Minorities



Los Angeles County Supervisor and Chair of the Board Yvonne B. Burke has retired after 42 years of public service. As a Supervisor since 1992, her efforts have focused on improving the lives of children, protecting the health of women, encouraging economic development and improving transportation throughout Los Angeles.

Supervisor Burke was instrumental in the creation of the Office of Women's Health and has been very supportive of our campaigns on the importance of prevention and our outreach to low-income underserved women over the last 10 years.

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OWH Mission

To improve the health status of women in Los Angeles County by providing education and promoting resources, programs and policies that are helpful and responsive to women, and increasing access to culturally competent, comprehensive health services.

Supervisor Yvonne Burke cont. from page 1

Throughout her career, Supervisor Burke has been a "Lady of Firsts." Among her many achievements, she was the first African-American woman elected to the U.S. Congress, the first member of Congress to go on maternity leave, and the first African-American and first woman elected to the L.A. County Board of Supervisors. Among her many activities as Supervisor, she spearheaded an effort in the County that resulted in a voluntary program for restaurants to eliminate trans fat. ♦

A Special Interview with Breast Cancer Survivor Eloisa Gonzalez, MD

In 2007, Dr. Eloisa Gonzalez, Director of Physical Activity and Cardiovascular Health for the Los Angeles County Division of Chronic Disease and Injury Prevention, was told she had breast cancer. She was 38 years old and a single mother with one son. Dr. Gonzalez graciously agreed to tell her story because "Others helped me...I'd like to help others."



Dr. Gonzalez, what type and stage breast cancer did you have?

It was Invasive Ductal Carcinoma, stage 1. However, it turned out to be genetic so the treatment was rather different than you would expect for most stage one tumors.

Did you know breast cancer ran in your family?

I knew one of my Aunts on my father's side, had breast cancer, but I hadn't worried about it since she was not on my mother's side and 9 out of 10 breast cancers are spontaneous (not genetic) anyway. I never thought "this might be genetic" until the oncologist asked me about my family's cancer history. When I mentioned my paternal aunt had breast cancer and her sister had ovarian cancer (which is much rarer than breast), he explained that those two specific types of cancers are linked to the same genetic trait, and so he had me tested. The test came out positive for the BRCA1 defect.

What treatments did you undergo?

There was chemotherapy first, but I couldn't finish it. That was followed by bilateral mastectomy and now I'm in the process of reconstruction. As soon as that is done, I'll have to have my ovaries removed...that will probably be in early 2009.

How did you discover you had cancer?

I found a lump when I was showering. It was just 2 weeks after my clinical exam and the doctor had not noticed it. At 37 years old, I was too young for mammograms.

What was your first thought or feeling when you found out you had cancer?

My first feeling was shock and "This can't be right." I was immediately concerned that it might be advanced cancer and I might die young and not be around for my son.

How did your family and friends react?

I was surprised at the huge outpouring of support I received. Even as a physician I had a hard time navigating the medical and insurance mine field. Luckily I had one remarkable friend, Michelle, that went with me to all my doctor's appointments and really served as my memory

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Breast "Self Awareness" and Mammogram Guidelines

Old Breast Self Exam Teaching

We all remember being taught to examine our breasts monthly in the shower. The latest news that's creating a stir among breast cancer survivors is the result of several studies quoted in the Cochrane Review that found no decrease in mortality among women doing regular self breast exams. To make it even more confusing, they found there may even be disadvantages to teaching women self-exams. Women doing regular self breast exams were found to be twice as likely to undergo biopsy yet most of the breast abnormalities were not cancer.

The New Guidelines

Breast Self Awareness is being recognized as a way for women to know how their breasts normally feel and to notice any changes. Touch your breasts regularly and get to know what's normal for you. Doing a complete, systematic self exam is not as crucial as just regular touching and awareness. Some women may find a tumor not detected by mammogram but mammogram still remains the best way to detect breast cancer.

When to Get a Mammogram

Current recommendations are that a woman begin receiving an annual mammograms at the age of 40. Women who are at high risk for developing breast cancer may need to obtain mammograms earlier than these recommendations and at more frequent intervals. Most health insurance plans will not cover mammograms until age 40 but some doctors may suggest one baseline screening between ages 35 and 39. ♦

Ask The Doctor...

What should I do if I find a lump in my breast?

Although finding a breast lump can be worrying, remember that 4 out of 5 breast lumps that are biopsied are benign (not cancerous), so it is important to seek medical attention to confirm that the lump is not cancer.

At the doctor's office, you will be asked several questions about your symptoms so please make a note about the following: When did you first notice the lump? Has it changed in size? Is it painful? Is the pain or changes in size associated with menstrual cycles? Do you have any nipple discharge? Have there been any skin changes? In addition, you will be asked about your family history and previous personal history of breast abnormalities.

The next steps in diagnosing the breast lump will depend on the answers to these questions and the findings of a clinical breast exam conducted by your health care provider. They could include any of the following: a diagnostic mammogram, breast ultrasound, fine needle aspiration, or biopsy of the lump. In some cases, you and the health care provider may decide to watch and monitor the lump.

Once the evaluation of the breast lump is completed and all is well, it is important to continue to be aware of your breasts and to report to your doctor any further changes or new areas of concern that are found. If cancer is found, remember that 75% of breast cancers are curable if treated early so immediate follow-up is necessary. ♦



Rita Singhal, MD, MPH
OWH Medical Director

*If you have a question for
Ask the Doctor,
please submit it to
jstjohn@ph.lacounty.gov*

Ecstasy is the energy of spirit. When life flows, ecstasy is natural.
—Deepak Chopra



Spotlight on our Community Partners

Los Angeles County Commission for Women



The Los Angeles County Commission for Women was established on March 13, 1975 by the Los Angeles County Board of Supervisors. This 15 member commission was created to represent the special interests and concerns of women of all races, ethnic and social backgrounds, religious convictions, sexual orientation and social circumstances. Each Supervisor appoints three Commissioners so that membership is representative of varied segments of the women's community.



Reiko Duba,
President

The Commission's motto is to empower, influence and assist women to forge ahead. For the past two years, the Commission has focused its attention on issues concerning access to healthcare and safety for women. The Commission also monitors gender equity issues and encourages women to strive for more positions of influence. The Commission meets with international visitors to exchange and share information. To stay connected and learn the needs of women in the County, community meetings are held in each supervisorial district.

Each March, the Commission recognizes outstanding women at their *Women of the Year* Awards Luncheon, and proceeds from their annual Run for Health and Wellness Expo provide scholarships to girls at risk.

In 1997, the Commission for Women, with the Board of Supervisors, sponsored the first Los Angeles County Women's Health Policy Summit, attended by 200 women's health leaders and stakeholders to make recommendations to improve the health status of women. One of the recommendations was to establish a county Office of Women's Health which became a reality in 1998. ♦

November - Lung Cancer Awareness Month

Although more women get breast cancer, lung cancer is the leading cause of cancer death for women nationally and in Los Angeles County. Among women in the county, it is the leading cause of cancer death among all racial/ethnic groups except Latinas, for whom the disease is the number two killer after breast cancer. National data indicates that the average lifetime chance for developing lung cancer is 1 in 16 for women.

The key risk factor for lung cancer is tobacco smoke, from smoking cigarettes, hookah, and also from secondhand smoke exposure. The smoke from tobacco contains carcinogens, or cancer-causing agents, that are inhaled and thus put women at risk for developing cancer. About 87% of lung cancer deaths are thought to occur from tobacco smoke. Other risks include asbestos, radioactive materials or chemicals (especially radon), radiation therapy to the lungs, personal or familial history of lung cancer, air pollution, and perhaps marijuana smoke.

There are many ways to prevent lung cancer. The most obvious way is to never smoke and limit exposure to those who are smoking. However, even for those who have smoked for a long period of time, quitting is still an effective way to reduce the risk of cancer. It has been shown that lung tissue gradually starts to repair itself after the cessation of smoking. Those under 50 years of age who stop smoking cut their likelihood of dying from lung cancer in the next 15 years by half. Other potential ways to help prevent lung cancer include increasing intake of fruits and vegetables that contain antioxidants and supporting clean air regulations. ♦

Celebrating Ten Years of the Los Angeles County Office of Women's Health

In 1997, the Los Angeles County Commission for Women, with the support of the Board of Supervisors, convened the first L.A. County Women's Health Policy Summit. 200 stakeholders developed recommendations to improve the health status of women including a recommendation to establish a county Office of Women's Health (OWH), one of the first in the country. In October 1998, upon a motion by Supervisor Yvonne Burke and unanimously approved by the Board of Supervisors, the OWH was created.

Our Mission - To improve the health status of women in Los Angeles County by:

- serving as the focal point for strategic planning
- promoting comprehensive and effective approaches to improving women's health
- Reducing health disparities
- increasing access to culturally competent, comprehensive health services



Mobile Clinic Outreach Program

Our Mobile Clinic works with community partners to travel 1-3 times a week to various locations throughout the County providing free screenings to low income, high risk women. Services include clinical breast exams, gynecological exams and screenings for hypertension, cholesterol, diabetes and cervical cancer, plus a Body Mass Index (BMI) calculation.

At the heart of the program are the multi-language hotline operators who speak English, Spanish, Armenian, Korean, Mandarin, Cantonese and Vietnamese. They serve as community liaisons for Mobile Clinic appointments or appointments to community clinics, and offer heart disease risk assessments to all callers. Since its inception in May 2002 to December 2008, 4,550 women have been served at 230 events.

OWH Speakers' Bureau

Providing our community partners with speakers on women's health issues for large or small audiences.

Women's Health: Knowledge Is Power!

~

Contact

Elizabeth Stillwell, RN
626-569-3818 or
estillwell@ph.lacounty.gov

Appointment Hotline
1-800-793-8090.

HEALTH FAIRS

The OWH participates in Health Fairs across the county regularly educating women about heart disease, diabetes, breast and cervical cancer and all the lifestyle choices they can make to reduce their risk. We reach hundreds of women each month with valuable education and resources.



Hotline operators respond to women with health needs in 7 languages

Phone-based

Heart Disease

Risk Assessments



TEN YEARS OF WOMEN'S HEALTH



May 1999: 2nd Women's Health Policy Summit and 1st L.A. County Women's Health Research Conference



L-R: Supervisor Zev Yaroslavsky, Women's Health Policy Council Chair Dr. Debra Judelson, Supervisor Don Knabe, OWH Founding Director Kathleen Torres, 2002 launch of Cervical Cancer Prevention & Education Initiative



May 2002: Multicultural Women's Health Festival and launch of mobile clinic program



Dr. Jonathan Fielding, Director of Public Health, & OWH Director Ellen Eidem receive award for the mobile clinic program at the 2006 LA County Quality & Productivity Awards.



Supervisors Yvonne Burke & Gloria Molina declare a Year of Prevention



June 2004—launch of *Prevention Matters!* campaign with a series of community dialogues on heart health.



Healthy cooking demonstration at the African-American Community Dialogue, 2005



"Lift Off" exercise and wellness program at the Latina Community Dialogue, 2006



MC Denise Dador at presentation on Human Trafficking 2007



Spokesperson Lauren Hutton at presentation on mid-life and menopause 2000



Dr. Susan Wood, Former Director of FDA Office of Women's Health, on emergency contraception 2006



2007 Women's Health Policy Summit

Interview With Dr. Eloisa Gonzalez con't from page 2

and extra brain. She took the lead and asked questions I hadn't thought of and reminded doctors of relevant medical history.

My first oncologist wanted to continue with chemotherapy even though my white count was dropping to 0 and I had to be hospitalized repeatedly. Michelle insisted we see another oncologist for a second opinion. Luckily that doctor discovered I had something wrong with my bone marrow and agreed I should stop the chemo before it killed me. I credit Michelle with helping to save my life.

Do you have advice for other women facing breast cancer you would like to pass on?

When you're facing cancer, it is really hard to think straight or even realize just how overwhelmed you really are. You want to think you've got it all under control, or at least I

wanted to believe that I did. Have a friend or, if possible, a professional health advocate to help you think. Join a support group for help. The group I joined helped me with questions about my health and rights that I didn't know I had.

At first I was reluctant to join a group. I felt if I stayed away from the support group, I could deny I was "one of them." But when I discovered it was genetic, I needed more information. I learned from the group about complex issues such as recent legislation passed into law in May 2008 making it illegal for employers and health insurance companies to discriminate against employees based on any genetic test. We still need to fight for our rights as patients. Women should not need to fight for basic support services such as wigs and a health care advocate.

How has cancer changed your outlook on life?

Having breast cancer has really changed my view of human nature. Before I was cynical and doubted other people's motives but I have discovered there are many really wonderful people in the world that genuinely want to help others. That's one gift that cancer has given me. ♦

I Won

The "disease to please"
Had been "killing me softly."
Rejection plunged my immunity
Into a downward spiral.
When Mama died,
Something in me died too.

*Then cancer seized the day,
Spreading its toxic tentacles
Through my pain-riddled breast.
The lump appeared
Sounding its ominous death knell,
Shocking me
Out of my self-pitying stupor,
Propelling me
To life-affirming action.*

Aiming my prayers heavenward
To muster faith and courage,
I seized the day.
Reclaiming my personal power,
I fought for hope, for healing and joy.
In living, I won!

Joy E. Walker Steward

*For more information on GINA-Genetic Information Nondiscrimination Act
<http://www.genome.gov/10002328#3>

~ OWH Staff ~

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Update: Women's Health Policy Summit

Building Multi-Cultural Women's Health: Setting an Agenda for Los Angeles

The May 2007 Women's Health Policy Summit convened by the Office of Women's Health (OWH) and collaborating organizations, brought together over 400 women's health leaders who developed policy recommendations in 10 topic areas to eliminate health disparities and improve the health status of women in Los Angeles County. The OWH, together with internal and external partners, began the implementation phase of the 48 recommendations in the Fall of 2007.

Summit Activities to Date

An immediate outcome of the Summit was a published "**Executive Report and Recommendations**," a community-wide action agenda to implement the Summit Recommendations. **A Summit Leadership Task Force**, composed of Summit planning committee members, workgroup leaders and additional women's health stakeholders, is working with the Office of Women's Health and a set of concrete objectives for implementation over the next two years has been agreed upon.

Our overarching focus is to:

- identify gaps in existing policy and service delivery;
- be a catalyst for collaboration between organizations and entities who are best able to address the issue;
- support our partnering organizations in leveraging material and human resources.

After formal research and interviews with key stakeholders, priority issues, resources and materials were identified. A grant was received from Kaiser Permanente for a **Summit Implementation Coordinator, Susan Berke Fogel, JD** who, with key OWH staff, takes leadership on the committee work. **There are now seven active working groups:** Data Committee, Education and Training, Worksite Wellness, Access and Disability, Sexual Orientation and Gender Identity, Reproductive Health and the Environment, and Violence and Human Trafficking.

We have engaged in over 30 interviews with directors and other experts within the LA County Departments of Public Health and Health Services, and with academics, researchers, medical associations, and community-based leaders **and established partnerships**. For example, OWH has developed a partnership with the **UCLA Center for Excellence in Women's Health** on reproductive health and the environment, human trafficking, and adolescent sexuality.

A Funders Forum was held on September 15th in partnership with The California Endowment for regional funders to increase their awareness about the pressing women's health issues in Los Angeles County and to highlight the funding gaps in addressing these concerns.

As we progress towards our goals, our mission and vision are serving as blueprints for other urban areas. Summit Implementation Coordinator Susan Fogel presented a workshop on the Summit and its implementation process at the Urban Initiative for Reproductive Health Conference in New York City and the Summit was highlighted in a national webinar.

We invite our County and Community Partners to join us in this implementation process. For more information, please contact Jessica St. John (jstjohn@ph.lacounty.gov) ♦