

BLACK MATERNAL CHILD **HEALTH GUIDE**



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BELONGING, LOVE, AFFINITY, COMMUNITY, KINSHIP.

Equal opportunity is one of our country's most cherished ideals, and no single factor influences whole-life success as strongly as a healthy birth and early childhood.

Yet today, Fresno's **African American women** and babies disproportionately experience preterm birth — 14.9% compared to 8.4% for white women — and Black babies are over 3 times more likely to die during their first year of life.



BLACK WELLNESS & PROSPERITY CENTER (BWPC)

BLACK Wellness & Prosperity Center (BWPC) is a research-driven social enterprise founded to make policies and programs more equitable and effective. BWPC is a translator for policymakers, scientists, and practitioners that puts academic research to work to serve Black women.

Simultaneously, BWPC turns intelligence from the community into original research to inform and scale up sustainable infrastructure solutions.

An indispensable design cycle partner, BWPC contributes and helps test ideas, understanding that validation from the served community is always critical to the development of successful programs, projects, products, and services.

Our mission is to be a catalyst to improve well-being and prosperity in the Black community with sustained efforts to improve Black Maternal and Child Health outcomes, and effectively unite and elevate the Black voice, and build sustainable infrastructure to strengthen Black capacity.

"BLACK Wellness & Prosperity Center is the first Black Maternal Child Health CBO in Fresno County established to unapologetically serve the unmet needs of African American women and babies."

Shantay R. Davies-Balch

President & CEO

HOW WE BUILD SYSTEMS TRANSFORMATION

COVID-19 & AFRICAN AMERICAN COALITION

OUR VISIONARY

BWPC invested over 300 hours to convene coalition partners, design and develop the
coalition structure, and negotiate contracts to
secure anchor CARES Act funding through
Fresno County and City of Fresno. Special
acknowledgement to Fresno Economic
Opportunity Commission, the coalition's
backbone and fiscal sponsor to ensure the
coalition will exist beyond BWPC's leadership.

AFRICAN AMERICAN COALITION PARTNERS

- Fresno Economic Opportunity
 Commission (FEOC) Fiscal agent and administrative backbone support
- Dr. Venise Curry
- Cultural Brokers, Inc.
- · African American Clergy Task Force





Shantay Davies-Balch
President & CEO
Founding Director, African American Coalition

The coalition is built on the foundational vision of Black-centered public health. In pursuit of that vision, the work of the coalition is dynamic and opportunistic. Recognizing that public health outcomes can intersect with factors such as economic stability, family stability, and racial justice, the coalition may operate in adjacent fields where opportunities arise, from year to year, to contribute to improving health outcomes in the Black community.

- Fresno Metro Black Chamber of Commerce Foundation
- West Fresno Family Resource Center
- Take a Stand Committee



STRATEGIC PLAN

BELONGING.

LOVE.

AFFINITY.

COMMUNITY.

KINSHIP.

THE PROBLEM

Data collected on Black/AA individuals show the inequities Black/AA people experience. Rarely, this data is used to inform programs and policies to solve these inequities. Black Wellness & Prosperity Center exists to promote evidence-to-impact opportunities for decision-makers by taking research and turning it into critical insights for policy and programs. BWPC identifies high-impact, cost-effective, culturally congruent approaches and promotes their scale-up and adoption into policies.

Systemic racism is a shorthand for a whole mass of actual injustices experienced every day by the multitude of black and brown people. We are not talking about an abstract concept but the experiences of real persons backed up by a mountain of data.

BLACK WELLNESS and TROSPERITY CENTER OF SELDNEING. LOVE AFFINITY, COMMUNITY FINSHIP

| NEW TO START | HOTHER |

THE SOLUTION

Black Wellness & Prosperity Center exists to build evidence-to-impact opportunities to improve health and prosperity outcomes for Black/AA women, individuals, and communities.

HOW WE DO THIS:

Evidence.

We take data and turn it into critical insights for policy and programs.

Shared Strategically.

BWPC shares evidence strategically to build evidence-informed decisionmaking cultures with a variety of stakeholders.

Impact Opportunities.

BWPC promotes the adoption and scale-up of effective solutions. BWPC provides technical expertise and support to communities of practice, scaling partners, and policymakers to maximize success and impact.

THEORY OF CHANGE

INPUTS

(O) Expertise Knowledge

Community

οξο Money λλη Network

, Partners

Power Sharing: BWPC works in partnership with Black women leading solutions

WELL-BEING & IMPACT: IMPROVED

BLACK COMMUNITY PROSPERITY IN FRESNO'S

LONGER-TERM OUTCOMES

SYSTEMIC CHANGE

accountability for the adverse outcomes experienced by Black women. Systems Accountability. Greater systems

INSTITUTIONAL CHANGE

individuals in power who have designed systems of inequity or act as gatekeepers Decision-Maker Accountability: Challenge for these institutions.

ENVIRONMENTAL CHANGE

neighborhoods that impact Black people investments in disinvested Prioritizing Investment: Increased

SOCIAL CHANGE

recognition and acknowledgement of the existence and sanctioning of biases Normalizing Blackness: Greater

MEDIUM TERM OUTCOMES

pregnancy and birth racism by Black women during Decreased experiences/perception of

assets Economic mobility/decreased poverty Increased household wealth-building

of person centered maternity care Local and Statewide policies in support

Increased rates of birth-spacing: Increased rates of breastfeeding Decrease in infant mortality.

against blackness in society

Advocate for culturally ADVOCACY

improvements across congruent system the life course

RESEARCH

stakeholders.

Convene coalitions,

decision-making cultures with Build evidence-informed STRATEGIC ECOSYSTEMS

pressing problems faced critical insights for policy Take data and turn it into and programs. Identify

questions and discover formulate key research innovative solutions to interventions work, understand which by Black women

> programs and policies shared strategically to impact networks where evidence is stakeholders, and collaborative

ACTIVITIES

which do not, and why.

CAPACITY BUILDING INFRASTRUCTURE &

opportunities for culturally congruent policies and programs Influence and expand

design, develop and implement to community needs. infrastructure solutions in response Provide technical assistance to

MEALTH SUNDING EMPLOYMENT 300 0139 HORASSER BLE RESEARCH OUTPUTS 22 IN-KIND ASSISTANCE COMMUNITY INSIGHTS F000 & 4 NUTRITION

and policies. More research to





needs met have basic Mothers

Black women

Healthy moms

and healthy

babies.











SHORT TERM OUTCOMES













Black women receive doula and health training.



provided culturally congruent care Black women

power-building Community

4

POWER-SHARING





OBJECTIVE OF THE GUIDANCE

This practical guidance is designed to build **Belonging**, **Love**, **Affinity**, **Community**, and **Kinship** and to share power with Black Girls, Women, Birthing Persons, and Mothers in all decisions, resources, services, policies, and programs that affect them. This guidance is to ensure that power is shared responsibly by taking account of, giving account to, and being held to account by the people most impacted.

SUGGESTED CITATION

Davies-Balch, S. Operational Guidance for Power-Sharing with Black Girls, Women, Birthing Persons, and Mothers. BLACK Wellness & Prosperity Center. 9/08/2021.

The Operational Guidance for Power-Sharing with Black Girls, Women, Birthing Persons, and Mothers was reviewed by the BLACK Wellness & Prosperity Center (BWPC) Advisory Council.

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POWER-SHARING





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TAKING ACCOUNT

Prioritize opportunities for the voices of Black girls, women, birthing persons, and mothers to be heard and shape decision-making at all phases.



GIVING ACCOUNT

Provide information to the community throughout the process, outlining what plans and commitments are, how and why decisions were made, and what the process is/was.



BEING HELD TO ACCOUNT

Provide Black girls, women, birthing persons, and mothers access to meaningfully evaluate the quality of their care, determine the effectiveness of care in addressing their needs, offer solutions to improve their care, and expect that their solutions will be adopted.

All of these dimensions should be informed by a vulnerability and age analysis—because people's visibility, voice, opportunities, and constraints are very much affected by their experiences and age.

PRINCIPLES OF ENGAGEMENT

1. CENTER BLACK VOICES

Generate meaningful and relevant results and outcomes for Black girls, women, birthing persons and mothers—in accordance with their specific needs, priorities, and preferences.

2. RESPECT THEIR RIGHTS

Work in ways to **protect**, **facilitate**, and **enable** Black girls, women, birthing persons, and mothers to exercise their rights, including the right to high quality care, equitable access to services and resources, and **respect** their right to share their views and opinions about services, policies, and/or decisions that affect them.

3. BUILD TRUST

Build relationships of trust based on mutual respect, transparency, power-sharing, and two-way communication.

4. END-TO-END PARTICIPATION

End-to-end participation requires both integrating Black perspectives into the **content** of policies, services, and programs, and **representation** of Black people in the decision-making process.

BLACK Wellness &
Prosperity Center
(BWPC) is a research
driven social enterprise
founded to make
equitable policies and
programs more effective.

We are a catalyst to lift the well-being and prosperity in the Black community.



POWER-SHARING





IMPLEMENTATION GUIDANCE

BWPC developed this implementation strategy for engaging Black girls, women, birthing persons, and mothers—understanding that participation from the served community is always critical to the design of successful programs, projects, products, and services.

MINIMUM STANDARDS CHECKLIST

- Black girls, women, birthing persons, and mothers have been consulted and engaged in the needs assessment, intervention priorities, selection criteria and design of activities and/or other data reflecting their views and perspectives.
- There are strategies and approaches to promote participation, facilitate trust, and two-way communication and transparency throughout the initiative, project, decision process, or activity.
- There is a plan to mitigate barriers and bottlenecks faced by Black people exercising their right to information and respectful care and services.

- People are provided with accessible and understandable key information on 1) objectives and activities, 2) their rights and entitlements and 3) how to participate in and share in decisions that affect them.
- There are accountability measures to mitigate anti-Black racism at the individual and organizational level, and training and capacity-building for those who serve Black people.
- Systems are developed and/or coordinated to ensure programs, care and services are culturally concordant and respond respectfully and holistically to diverse needs and priorities.

These minimum standards are developed with the recognition & acknowledgement of the existence and sanctioning of biases against Blackness in society. Great intentionality must be developed to counteract these biases.

OPERATIONAL CONSIDERATIONS

- **1**. **A budget is allocated** to compensate participation of Black girls, women, birthing persons, and mothers as *experts for what they need*.
- **2.** There are resources dedicated to building capacity for Black-led community partners, representatives, and leaders.
- **3. There is a plan to hire, invest in**, procure from, and/or work with Black-owned businesses.
- **4. Existing knowledge, capacities, and investments** are respected in the planning and allocation of resources.





PREGNANCY & COVID-19 VACCINES

Getting a COVID-19 vaccine during pregnancy can protect you from severe illness from COVID-19. Speak with your doctor if you have concerns.

<u>The American College of Obstetricians and</u> <u>Gynecologists (ACOG) recommends pregnant</u> <u>women get a vaccine.</u>

Recent reports have shown that people who have received COVID-19 mRNA vaccines during pregnancy (mostly during their third trimester) have passed antibodies to their babies, which could help protect them after birth.

Pregnant and recently Pregnant Persons are at increased risk for severe illness from COVID-19. If you are pregnant, you *should* receive a COVID-19 vaccine.



HERE'S WHAT YOU SHOULD KNOW

- Pregnant women are more vulnerable to illness.
 Contracting COVID-19 during pregnancy increases risk of severe illness, complications and death compared to non-pregnant women.
- Many Black women suffer from pre-existing medical conditions, such as high blood pressure, diabetes, and asthma, which further increases risk of severe illness and death from COVID-1g.
- Pregnant persons with COVID-19 are at increased risk of preterm birth and might be at increased risk of other adverse pregnancy outcomes compared with pregnant women without COVID-19.

- Preliminary studies do not indicate any adverse effects on reproduction or fetal development.
- Current data on the safety of vaccines for pregnant and breastfeeding persons indicates there are no increased risks of miscarriage or other adverse outcomes. CDC recommends pregnant and breastfeeding persons receive a COVID-19 vaccine.



COVID-19 VACCINES DO NOT GIVE YOU COVID-19



Moderna and Pfizer:

The Moderna and Pfizer-BioNTech vaccines are **mRNA** vaccines that *do not contain the live virus that causes COVID-19 and therefore, cannot give someone COVID-19.* Additionally, mRNA vaccines do not interact with a person's DNA or cause genetic changes because the mRNA does not enter the nucleus of the cell, which is where our DNA is kept.[iii]



J&J/Jannsen:

The J&J/Janssen COVID-19 Vaccine is a **Viral Vector** vaccine, meaning it uses a modified version of a different virus (the vector) to deliver important instructions to our cells. Vaccines that use the same viral vector have been given to pregnant people in all trimesters of pregnancy, including in a large-scale Ebola vaccination trial.

No adverse pregnancy-related outcomes, including adverse outcomes that affected the infant, were associated with vaccination in these trials. [iii]



Resources:

Register in the v-safe pregnancy registry!

A **v-safe pregnancy registry** has been established to gather information on the health of pregnant people who have received a COVID-19 vaccine. Learn more about pregnancy registry: www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafepregnancyregistry.html

MotherToBaby

MotherToBaby experts are available to answer questions about receiving the vaccine while pregnant. The free and confidential service is available Monday-Friday 8am-5pm (local time).

To reach MotherToBaby:

- · Website | mothertobaby.org
- Phone | 866.626.6847 toll free
- Text | 855.999.3525 (standard messaging rates may apply)

BLACK Wellness & Prosperity Center agrees with and supports the recommendations of the Advisory Committee on Immunization Practices, the American College of Obstetricians and Gynecologists (ACOG) and the Society for Maternal-Fetal Medicine (SMFM).

References:

i, ii, iii :

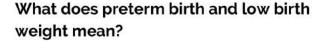
https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/pregnancy.html



AIR POLLUTION AND

PRETERM BIRTH

"Protect Yourself and Your Baby"



Babies born too early (preterm birth)- delivered before 37 weeks and babies born too small (low birth weight) 5.5 lbs are more likely to die before their first birthday. Exposure to air pollution has been identified as a significant cause of both preterm birth and low birth weight.



What Black pregnant mamas need to know about air pollution and preterm birth.

Air pollution is linked to experiencing preterm birth and delivering a low birth weight baby. Every year, air pollution attributes to about 16,000 babies born too early in the U.S. [1]

WHAT IS AIR POLLUTION?

WHAT

Air pollution is the presence of harmful substances in the atmosphere that can cause damage to humans, other living beings, and the environment.

INDOORS

- House dust / Animal dander
- · Viruses & bacteria
- · Cleaning products
- Mold
- · Carbon monoxide

WHERE

Particulate matter (PM2.5) is solid and liquid particles floating in the air.

TYPES

Common types of air pollution are gases, particulates, and biological pollutants

OUTSIDE

- · Smoke from fires & charcoal BBQ pits
- Car emissions/exhaust
- Gasoline
- Emissions from processing plants



How does air pollution increase the risk of preterm birth?

Increased levels of toxic chemicals in the blood can cause immune system stress, weakening the placenta surrounding the baby and potentially leading to preterm birth. [2]

Pollutants and particulate matter contribute to the risk for preterm birth by altering the gestational age at birth. [3]



Why are Black women at the highest risk of exposure to air pollution?

Air pollution is a serious global threat for all of us. However, pregnant Black women are at especially high risk. Black women are more likely to live in unfinished neighborhoods with less green space and trees and within heavy traffic zones and nearby manufacturing. Unprotected exposure to high levels of concentrated pollution makes Black women and families more vulnerable. [4]

Unfinished neighborhoods are also more likely to have higher levels of PM2.5 in the air. You can tell when PM2.5 levels are especially high---the particles in the air reduce visibility and cause the air to appear hazy when levels are elevated. All Black women are predicted to experience a heavier burden of direct human pollution of the air through exposure to secondhand cigarette smoke. Smoking in Black communities is the second highest amongst all race/ethnic groups.

Fresno has some of the highest levels of pollution burden as determined by Calenviroscreen 4.0. This puts all Black pregnant mothers at risk. The highest levels of PM2.5 in Fresno is in the 93706 zip code. [5]

WHAT CAN YOU DO TO PROTECT YOURSELF AND YOUR BABY?

- 1. Try to plan your next pregnancy! Wait at least 18 months (birth spacing) before getting pregnant again. Waiting can improve the health outcomes of your baby. Additionally, longer birth spacing allows for the mother's body to adequately heal, detox from previous pollution exposure, and prepare for future pregnancies.
- 2. Wear your mask! Wearing a mask helps to protect you from COVID-19. It can also protect you from air pollution. Wearing a mask is the norm these days, so continuing to wear a mask is another way to protect yourself and your baby from harmful pollutants.
- 3. Get the help you need to stop smoking. Avoid secondhand smoke. Smoking among Black folks is the second highest rate among all race/ethnic groups, and Black women have the highest rates of smoking while pregnant. Smoking is harmful to pregnant women, their babies, and the neighborhood air. [6]
- 4. Spending time with friends and exercising are alternate ways to reduce stress. Walking is great if you feel safe in your neighborhood. Or try a followalong yoga video on YouTube!

- 5. Try to use natural products to clean your home, such as vinegar and baking soda. Common harmful household products include bleach and oven cleaner. If possible, ask someone else to do heavy cleaning. If not, take protective measures such as opening the doors/windows and wearing gloves and a face mask. while cleaning your home.
- **6. Prioritize civic engagement.** Support local efforts to protect your neighborhood from additional industrial and manufacturing sites
- 7. Vote! Register to vote and commit to vote in every election. People that vote have healthier outcomes.
- 8. Monitor the air quality: The purple air monitoring table has guidelines for avoiding bad air. The best air days are when the readings are in the green level, and worst air days are when readings reach the red levels. Sign up for notifications at: https://map.purpleair.com/



Reminder: Remember to check your iron status with your doctor. All women of child-bearing age should take 400mg of folic acid every day---even if they don't plan to get pregnant! It's one of the easiest ways to prevent birth defects if taken early in pregnancy!

One way to to get folic acid is to eat broccoli, eggs, greens or beans. **Go to your local WIC** to get help with covering your folic acid intake.

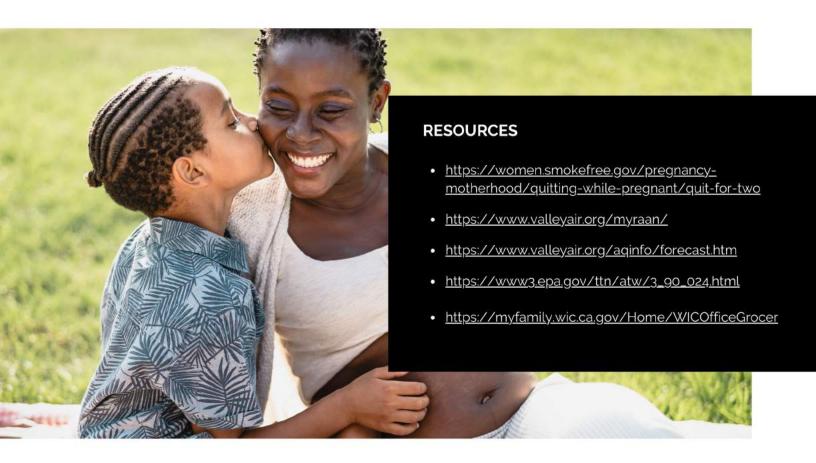


Air Quality Index	Who Needs to be Concerned?	What Should I Do?
Good 0-50	ļt	's a great day to be active outside.
Moderate 51-100	Some people who may be unusually sensitive to particle pollution.	Unusually sensitive people: Consider reducing prolonged or heavy exertion. Watch for symptoms such as coughing or shortness of breath. These are signs to take it easier. Everyone else: It's a good day to be active outside.
Unhealthy for Sensitive Groups 101-150	Sensitive groups include people with heart or lung disease, older adults, children and teenagers.	Sensitive groups: Reduce prolonged or heavy exertion. It's OK to be active outside, but take more breaks and do less intense activities. Watch for symptoms such as coughing or shortness of breath.
		People with asthma should follow their asthma action plans and keep quick relief medicine handy.
		If you have heart disease: Symptoms such as palpitations, shortness of breath, or unusual fatigue may indicate a serious problem. If you have any of these, contact your heath care provider.
Unhealthy 151 to 200	Everyone	Sensitive groups: Avoid prolonged or heavy exertion. Move activities indoors or reschedule to a time when the air quality is better.
		Everyone else: Reduce prolonged or heavy exertion. Take more breaks during all outdoor activities.
Very Unhealthy 201-300	Everyone	Sensitive groups: Avoid all physical activity outdoors. Move activities indoors or reschedule to a time when air quality is better.
		Everyone else: Avoid prolonged or heavy exertion. Consider moving activities indoors or rescheduling to a time when air quality is better.
Hazardous 301-500	Everyone	Everyone: Avoid all physical activity outdoors.
		Sensitive groups: Remain indoors and keep activity levels low. Follow tips for keeping particle levels low indoors.

PARTNERS

This community health brief was developed in partnership with: Venise Curry, MD | Co-chair, Fresno GROWS Best Babies Zone (BBZ)





REFERENCES

[1,2,3] "Air Pollution & Preterm Births in the United States." NYU Langone Health, med.nyu.edu/departments-institutes/pediatrics/divisions/environmental-pediatrics/research/policy-initiatives/air-pollution-preterm-births.

[4] Sohrabi, Soheil, Zietsman and Khreis Hanneen. The burden of diseases assessment of ambient air pollution and premature mortality in urban areas: the role of socioeconomic status and transportation." International Journal of Environmental research and public health. Pp. 1-18. 2020

[5] "Fresno Air Quality Index (AQI) and California Air Pollution: AirVisual." Fresno Air Quality Index (AQI) and California Air Pollution | AirVisual, www.iqair.com/us/usa/california/fresno.

[6] "Tobacco Use in Racial and Ethnic Populations." American Lung Association, www.lung.org/quit-smoking/smoking-facts/impact-of-tobacco-use/tobacco-use-racial-and-ethnic.

IT'S GETTING HOT!

Protect Yourself and Baby

What Black pregnant Mamas need to know about hot weather. Exposure to high temperatures is linked to experiencing a preterm birth and having a low birth weight baby.

What is Preterm Birth/Delivery?

Exposure to extremely hot weather is linked to preterm birth and low birth weight. Preterm birth is when a baby is born early--37 weeks or sooner. Babies born too early and babies with low birth weights are more likely to die in their first year of life.

All Black women experience the highest rates of preterm birth, low birth weight babies, and infant mortality than any other racial/ethnic group in Fresno.



WHY ARE BLACK WOMEN AT THE HIGHEST RISK DURING HOT WEATHER?

Studies have found that **pregnant Black women** and women of color are more impacted by heat exposure than white women. One study found that pregnant Black women are hospitalized more than other women due to heat exposure. [1]

Black women are more likely to live in lower quality housing with less air-conditioning coverage. They are also more likely to live in unfinished neighborhoods with less green space and more asphalt. Concrete asphalt such as pavement and buildings absorb and re-emit heat more than natural landscapes. In both rural and urban areas, these structures can become "heat islands" with higher temperature than their surrounding areas.



HOW IS REALLY HOT WEATHER LINKED TO PRETERM BIRTH?

Pregnant people are more vulnerable to heat illness and infants experience difficulty regulating their temperature. [2] Heat exposure can also impair your baby's growth by reducing uterine blood flow and altering placental-fetal exchange. [3]

In extreme heat it is easy to get very dehydrated. Constant dehydration during pregnancy may trigger complications that lead to premature birth. [4] Remember to drink at least 8 to 12 cups (64 to 96 ounces) of water every day and two to three cups of water per hour, or more if you're sweating heavily.

Here's what you can do to protect yourself and baby:

- · Staying cool inside an air-conditioned place
- Limiting outdoor activities to when it's coolest (morning and evening)
- Drinking plenty of water
- Checking your local news for extreme heat alerts and to find the nearest cooling shelter in your area

More Tips!



 Dress in light-colored and loose fitting clothing made of cotton



 Use a microwave or toaster oven to prepare meals instead of a traditional oven, which can make your home hot



Wet a clean cloth and freeze it to use as a cooling compress

WAYS TO COOL YOUR SPACE: RECOMMENDATIONS FROM COLUMBIA CLIMATE SCHOOL

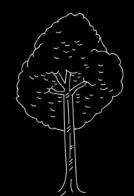


- Use fans strategically; set your ceiling fan to counterclockwise at high speed.
- Keep your blinds or curtains closed, which helps decrease the heat from entering through your windows.
- Unplug gadgets and small appliances.

- If possible, dry clothes outside instead of using your dryer.
- Replace your incandescent bulbs which waste 90% of their energy as heat, with fluorescent or LED bulbs..

HOW LANDLORDS CAN HELP:

- · Paint exterior walls light colors.
- Install improved insulation.
- Plant deciduous trees (such as maple or ash).



Trees provide shade to help with staying cool on hot days.

Adding trees and other vegetation to the neighborhood can also help improve the air quality and can improve mental health. [5]

POLICY RECOMMENDATIONS

- Plant trees and other vegetation in unfinished neighborhoods, with priority in the 93706 zip code where Black women experience the highest burden of preterm births, low birth weight babies, and infant mortality.
- Pregnant women should be treated as a highrisk group.
- Help raise awareness about the dangers of high temperatures for pregnant persons.

- Make sure pregnant persons are included in local city heatwave plans.
- Increase access to safe spaces during extreme weather by making sure pregnant women know where cooling centers are.
- Have transportation, and can access energy assistance and tax rebate programs.

"Microclimates": Researchers across the US are finding that in poorer urban neighborhoods, often where ethnically marginalized groups live, temperatures are higher because, for example, there are fewer trees that provide shade and more buildings and roads that capture heat.

One study found that land surface temperatures in redlined areas (neighborhoods adversely impacted by the racially discriminatory government policy of redlining) are on average, 2.6 degrees C warmer

than in non-redlined areas and in some cities, as high as 7 degrees C warmer.

In some cities, neighborhoods with higher temperatures already have high rates of preterm birth and low birth weight. Despite this, pregnant people's needs, and pregnant people as a group, are often not included in city heat plans." Source-Fact Sheet: Increasing Temperatures Because of the Climate Change Crisis is a Reproductive Justice Issue in the United States, 2020

Partners

This community health brief was developed in partnership with BLACK Wellness & Prosperity Center, Dr. Venise Curry: Fresno GROWS Best Babies Zone (BBZ), Curry Environmental Justice Fellows, and the Fresno Metro Black Chamber Foundation: Growing Opportunities in West Fresno through Sustainability (GROWS).

Resource List:

PG&E CARE & FERA Program Enrollment https://bit.ly/33WoKRa







DR. VENISE CURRY

References

[1,2] Fact Sheet: Increasing Temperatures Because of the Climate Change Crisis is a Reproductive Justice Issue in the United States, 2020. Human Rights Watch, Black Women's Health Imperative, a better balance, the work and family legal center, Latina Institute for Reproductive Justice Florida, and National Birth Equity Collaborative

[3,4] Bekkar B, Pacheco S, Basu R, DeNicola N. Association of Air Pollution and Heat Exposure With Preterm Birth, Low Birth Weight, and Stillbirth in the US: A Systematic Review. JAMA Netw Open. 2020;3(6):e208243. doi:10.1001/jamanetworkopen.2020.8243

[5] Climate Change and Mental Health - C-CHANGE | Harvard T.H. Chan School of Public Health. Urban green spaces and health. Copenhagen: WHO Regional Office for Europe, 2016



BLACK DOULA NETWORK

THE PROBLEM - INEQUITY

Fresno is facing a Black Maternal and Child health and a healthcare infrastructure crisis.

Black women in Fresno experience preterm birth at a rate of 67.5% higher than white women. Black women are six times more likely to die from a preventable pregnancy related cause compared to white women. Black babies die at more than three times the rate of white babies.

"The doctor did not come up with a plan. That resulted in 7 days of life support, baby being delivered in an emergency room via C-section, without anesthesia, and the baby going to Valley Children's Hospital, and ultimately in 7 and 10 days later baby passing away as well."

Mother in Fresno, who lost both her daughter and grandchild from preventable pregnancy complications.

Black women in Fresno are more likely to live in unfinished neighborhoods and experience higher rates of comorbidities. Increased access to doulas may result in positive birthing experiences, more full-term pregnancies, and healthier babies.

THE MOMENTUM/IMPETUS

Recently passed California legislation (SB 65 Momnibus), has the potential to be a game-changer in transforming birth outcomes of Black communities, as it provides reimbursement of doula services for Medi-Cal patients. Nevertheless, viewing its potential through the lens of Fresno's Black birthing community, the promises of SB 65 can only be maximized, if the prerequisites, namely, a culturally concordant doula workforce, an equitable, doula/patient informed high-quality doula training, and a supportive infrastructure also exist.

OUR SOLUTION

THE BLACK DOULA NETWORK

The BLACK Doula Network (BDN) is a social enterprise designed to address the doula provider deficit, build the missing backbone infrastructure needed to support and sustain doulas, and provide birthing persons with access to healthcare services demonstrated to decrease health disparities.

The BLACK Doula Network is a multi-faceted approach, which includes development of a culturally respectful, high-quality, doula and patient-informed

network, that will function similar to an Independent Provider Association (IPA), ensuring that doulas have the legal and administrative support they need and birthing persons have access to high-quality full spectrum support. As a flagship initiative for race equity, the Network will lead to system changes and serve as a model for measurable outcomes and effective public policies.

training curriculum, a plan to integrate trained doulas

into the hospital and healthcare system to ensure

continuity of care, and an administrative backbone

The BDN will advance racial justice and birth-and social-equity in Fresno. Broader impact includes creating a sustainable and scalable solution beyond Fresno that demonstrates how to center race in health equity and improve health outcomes and patient experiences.

1-5 YEAR RESULTS

- BLACK Doula Network Training workforce development opportunities for Black women through partnering with Fresno City College
- BLACK Doula Infrastructure backbone support - Clearinghouse
- Improved birth outcomes for Black birthing persons and babies





A doula is a trained non-clinical birth professional that provides individualized support to pregnant persons and their families during pregnancy, birth, and during the postpartum (after delivery) period.

Doulas go through specialized training to gain the knowledge and practical experience necessary to support you. Their undivided attention to you and your values make them a core member of your care team.

Doulas are non-medical care providers and they do not replace medical staff such as OBs or nurses.

YOUR DOULA PLACES YOUR NEEDS

AT THE CENTER OF YOUR CARE

Doula support can make a significant difference in your pregnancy and birth experience! Women, especially Black women with culturally appropriate doula support:

- Experience lower rates of unnecessary C-sections
- · Deliver healthier newborns
- Experience lower rates of postpartum depression
- Are more likely to receive recommended postpartum care from their provider
- Experience lower rates of delivering preterm.
 Preterm birth is when a baby is born early--37 weeks or sooner. Babies born too early are more likely to die before their first birthday
- Initiate breastfeeding at higher rates and breastfeed their babies longer

BLACK Doula Network

BLACK Wellness & Prosperity Center's goal is to improve well-being and prosperity in the Black community by serving the unmet needs of Black mothers and babies. The BLACK Doula Network builds Fresno's missing doula infrastructure needed to support Fresno's Black birthing community, and those who would like to become doulas.

DOULA with US!

The Doula Training will be available at no-cost for Black women from Fresno –Learn more at our website here: www.blackwpc.org/black-doula-network

COMMUNICATION ADVOCATE

Doulas listen to you and advocate for your voice in health care settings. Doulas help you navigate questions, routine procedures, concerns and more to ensure that you and your provider will decide your care plan together.

BIRTH PLAN

You and your doula will work together to develop a birth plan centered around your needs and values and help you communicate your desires for your birthing experience to your provider.

PAIN MANAGEMENT

Doulas can help you manage labor and delivery pain through non-medical pain relief such as meditation, massage, and exercises.

AFTER DELIVERY

Your doula will be there to support you in caring for yourself and your newborn. Doulas help keep babies safe by educating on safe sleep practices, and supporting you with breastfeeding.

If needed, your doula can help identify special needs, such as postpartum depression symptoms.

Your doula can even help you coordinate your postpartum visit and help identify other community resources that may benefit your health and wellbeing such as transportation or healthy food.





Your patient - Black Birthing Persons:

We are mothers, women, and birthing persons with unique needs and experiences. We are valuable human beings, and our needs matter.

While providing care please be mindful:

- I might be showing signs and symptoms of high-risk pregnancy and preterm labor.
- I am not just another case.
- Not all birthing experiences will be the same. A previously used technique may not work for me.
- Disrespectful and suboptimal care can traumatize me and affect me throughout my life course.
- I need your help to prevent complications, including preterm birth.

"This is My Body, I Live Here."

- Nia Hodge, Public Health Advocate

Fresno's BLACK Birth Plan

"They want to know who your spouse is, what they are like. They ask: " - What do you do for extracurricular activities?" They ask you about your sexual life. They ask you about everything, and for you to have so much information on me, but not to help me. It doesn't feel good. It feels like you're interrogating me. But for what reason? Are you going to use this information against me? Are you using it to help me?"

- Mother in Fresno who had an emergency C-section

This birth plan is based on a compilation of experiences, lessons learned, and desires voiced by Black mothers and women in Fresno.

This plan is about standards and treating Black birthing persons with the dignity and respect they deserve, but have not traditionally received.

- "Angry Black Woman" is a negative stereotype. Sometimes it is hard for Black women to advocate for themselves, as it is not received well when we do. Please consider that if I elevate my voice, it may be because I fear that otherwise I will not be heard.
- It means a lot to me to be treated with good care, dignity, and respect.
- I want to be heard and respected, especially when I say that something is not right with my body.
- My body belongs to me, it is not a medical teaching tool, nor is it a domain for trial and errors.
- I might choose to decorate my body and express who I am in a way that may be new to you. Do not allow this to interfere with the quality of care I receive.

My delivery is planned as:

 Vaginal delivery. No C-SECTION, unless medically necessary.

I would like to have multiple supports present before AND/OR during labor:

- Educate and explain pregnancy standard procedures.
- Share information about the benefits of delaying cutting the umbilical cord and if cord banking is right for us.
- Allow me to shower with a support person to ensure my safety.
- · Inform me if something is not going well.
- Allow my support persons to look after me and be my voice before and during labor, so I can feel comfortable.

During labor and postpartum, I would like:

- Equipment in room to properly work.
- Communication between staff and providers, and with us.
- As few interruptions as possible when sleeping.
- As few vaginal exams as possible.
- Assistance with non-medical pain relief based on my preference (use of birthing ball, back massager, and showers when desired).
- Introduce me to other providers on your team.
- To eat and drink as approved by my doctor as soon as possible.
- If I or someone from my support team has a concern, check on my well-being.



I would like to spend the first stage of labor:

- Freedom of movement no bed-restriction during labor, unless there is a medical reason.
- Continuous fetal movement monitoring.
- Anyone who enters my room should introduce themselves and explain their role.
- If you are a resident, please ask my permission to have my birth be a part of your learning journey.



I am not interested in:

- · Unneeded wired monitors.
- Any internal monitors except what is medically necessary.
- Insertion of an IV based on "routine procedures" if it is not medically necessary.
- Receiving medical interventions and medical pain relief without explanation on the harms it may cause to me or my baby.
- Wearing a hospital gown. Allow me to use my own gown if I choose to.

Birth pushing:

- · Follow the urge to push.
- Coached pushing that way I do not tear from pushing too early.
- Allow me to push in a position that is safe and comfortable to me.
- Please do not tell me how to breathe. Offer suggestions.

Moment of birth:

- Delay wiping the baby off after delivery.
- I would like skin to skin immediately after birth.

Feeding:

- If I prefer my baby to be breastfed. I would like immediate help in postpartum from a lactation counselor. If my baby cannot latch on immediately, support me with hand expression and/or a breastpump and show me how to use it.
- Support me to keep breastfeeding even if the baby is in NICU.
- Do not delay in prescribing human breastmilk for my baby.
- If needed, order human breastmilk from the milk bank for my baby.
- Check up on feeding concerns when brought to attention.

Postpartum unit:

- Adequate accommodation for support persons so they can be comfortable.
- Be mindful of my time and needs. Discuss and individualize discharge plans. Inform me of changes as soon as possible.

The birth plan was developed under the leadership of **Amya Brooks**. This birth plan was informed by her birth experience and the real experiences of other mothers in the community. Reviewed by the BWPC Community Advisory Council January 2022.

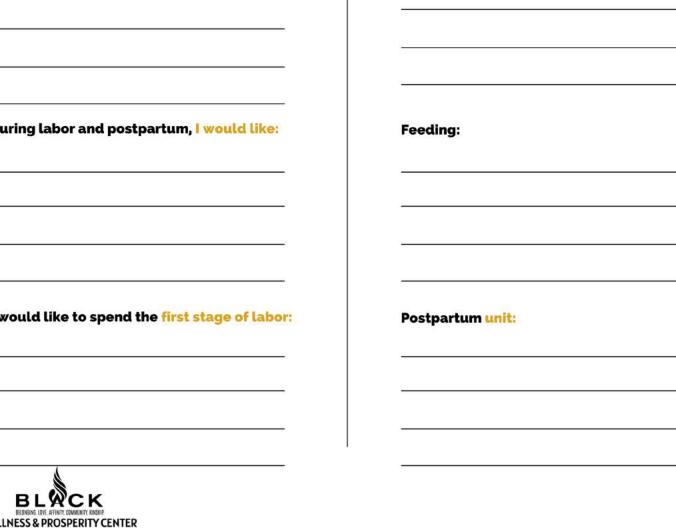
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My Birth Plan

hile providing care please be mindful that:	I am not interested in:
delivery is planned as:	Birth pushing:
ould like to have multiple supports present	Moment of birth:
fore AND/OR during labor:	
ing labor and postpartum, I would like:	Feeding:
ould like to spend the first stage of labor:	Postpartum unit:

Hospital name:





BLACK Wellness & Prosperity Center Supports the Black Birthing Bill of Rights Developed by the National Association to Advance Black Birth

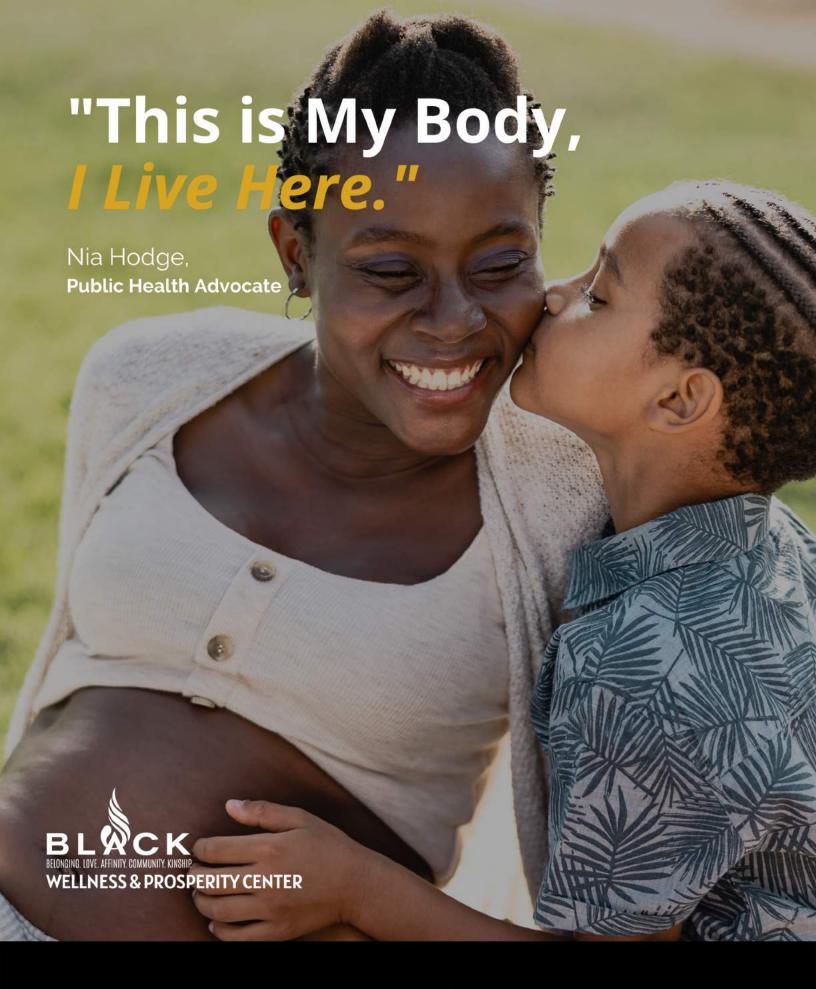
Black Birthing Bill of Rights

At NAABB we believe that all Black women and persons are entitled to equitable, comprehensive, and quality pre - and postpartum care in order to achieve their full birthing potential and thrive during the childbearing years. The Black Birthing Bill of Rights serves as a resource for individuals to become knowledgeable of their rights as a Black person in need of maternal care. It also serves as guidance to engage hospitals, health providers, government health agencies and others to change/improve their ethic, policies, and delivery approach to serving Black women and persons throughout the birthing process

- 1. I have the right to be listened to and heard.
- 2. I have the right to have my humanity recognized and acknowledged.
- I have the right to be respected and to receive respectful care.
- 4. I have the right to be believed and acknowledged that my experiences are valid.
- 5. I have the right to be informed of all available options for pain relief.
- **6.** I have the right to choose how I want to nourish my child and to have my choice be supported.
- 7. I have the right to early postpartum visits and individualized postpartum care.
- **8.** I have the right to restorative justice and mediation to address obstetric violence, neglect, or other injustices.
- **9.** I have the right to choose the family and friends that are present during my pregnancy, birth and postpartum care.
- **10.** I have the right to receive accurate information that will allow me to give informed consent or refusal.







CONGRATULATIONS ON HAVING YOUR BABY!

AFTER YOU HAVE THE BABY

Three Ways to Stay Safe & Healthy





Six-week postpartum checkup is important!

If you haven't already, schedule your six-week postpartum checkup with your provider. Your postpartum visit provides an opportunity to assess how your body is healing and discuss any concerns you have. Also, you can finalize your family planning (birth control/choice) options, and help ensure you're healthy! Taking care of yourself is the first step to caring for your baby.

Plan your family size!

Did you know? It's best to wait at least 18 months after giving birth before getting pregnant again. Having babies close together increases the risk of pregnancy complications and delivering preterm (birth before 37 weeks). Preterm birth is the leading cause of infant death in the U.S. before baby's first birthday. Your postpartum checkup is a great time to finalize your family planning (birth control/choice) options.

Mental health & wellbeing.

Sometimes, new mothers do not feel well after they deliver. That's okay! It's important to recognize the signs and symptoms of postpartum depression. It's okay to ask for help! Your partner, friends, family, and support network should also be aware of the following signs, so they can help if needed.

Signs & Symptoms of Postpartum Depression

Symptoms are most common in the first few weeks after birth, but they can occur anytime within the first year.

- · Feeling of sadness and anxiety
- · Sleeping a lot or too less
- · Eating too less or too much
- · Unexplained aches, pain or illness
- · Anxiety, irritation or anger for no reason
- Sudden mood changes
- · Poor concentration
- Difficulty in remembering things
- Feelings of worthlessness, guilt and hopelessness
- · Recurrent thoughts of death and suicide
- Lack of pleasure in things that were earlier enjoyable
- · Feeling disconnected with the baby



In case you need help, contact:

- 1. Your provider
- Your insurance/health plan for a referral to a postpartum specialist
- 3. California Health Collaborative in your county: www.HealthCollaborative.org/programs/mentalhealth or Phone: (559) 221-6315

SAFE SLEEP

Congratulations on giving birth to your wonderful baby!

We know that you and other family members want what is best for your baby! We also understand that taking care of your baby might pose certain questions.



Here are some very important steps to keep your baby safe:

- Always place the baby on their back to sleep because that is the safest sleep position.
- Close but separate Keep your baby's sleep area close to you but separate from where you and others sleep.
- Firm mattress and alone remove all soft surfaces, such as toys, pillows, and wedges from the crib. Please ask others not to place any loose items in the baby's crib.

Why do we ask you and other caretakers to remember these points?

Because infant sleep-related deaths are the leading cause of deaths in an infant before 1 year old. The term we use to describe these sudden and unexpected deaths is called sudden unexpected infant death (SUID). These deaths often happen during sleep or in the baby's sleep area.

Sudden unexpected infant deaths include sudden infant death syndrome (SIDS), accidental suffocation in a sleeping environment, and other deaths from unknown causes.

What to do if you do not have a crib?

Contact BWPC, we will assist you – **contact us at info@black-enterprises.com**.

This is just a brief guide to help you remember safe sleep practices. If you would like to learn more information and become a safe sleep ambassador, please visit: bit.ly/safesleeptrain





Keep Your Baby Healthy & Safe

Take the Steps During the COVID-19
Pandemic

⊘ Get Vaccinated

- COVID-19 vaccines reduce the risk of getting COVID-19 and can also reduce the risk of spreading it.
- Be sure to get everyone in your family who is 5 or older vaccinated against COVID-19.
- Everyone who is 12 and older should also get a Pfizer booster shot.



- Children younger than two should not wear masks or face shields.
- Babies move frequently. Their movement may cause the plastic face shield or mask to block their nose and mouth, cause strangulation or increase the risk of Sudden Infant Death syndrome (SIDS).





Limit visitors

The birth of a new baby typically brings families together to celebrate. **Before allowing visitors into your home:**

- Consider the risk of COVID-19 infection. Ask that all family members and friends be fully vaccinated before visiting.
- Consider the risks of COVID-19 to you and your baby before you decide whether to go out for activities other than healthcare visits or child care.
- Ask your child care program about the plans they have in place to protect your baby, family and their staff.

Keep 6 feet between your baby and others.

- Bringing people into your home can increase the risk of spreading COVID-19.
- Some people without symptoms can spread the virus.
- Consider other options, like celebrating virtually, for people who want to see your new baby.





Mantenga s su bebé sano y seguro

tome las medidas necesarias durante la pandemia de COVID-19

⊘ Vacunense

- La vacuna COVID-19 reduce el riesgo de contraer
 COVID-19 y tambien puede reducir el riesgo de propagarlo
- Asegúrese de vacunar contra el COVID-19 a todos los miembros de sus familiares que tengan cinco años o más.
- Todas las personas mayores de 12 años también deben obtener el Pfizer booster vacuna

No le ponga una mascara o careta a sus bebé:

- Los niños mas pequenos de dos años no deben usar mascaras o protectores faciales
- Los bebés se mueven con frecuencia. Su movimiento puede hacer que el protector facial de plástico o la máscara bloqueen su nariz y boca, o provoquen estrangulamiento.
- Ponerle un protector facial o una mácara a su bebé pondría aumentar el riesgo de síndrome de muerte súbita del lactante o podría estrangular o asfixiar a su bebé





Limitar Visitantes

El nacimiento de un nuevo bebe generalmente reune a las familias para celebrar. **Antes de permitir que los visitantes entren a su hogar**

- Considere el riesgo de infección por COVID-19.
 Pida que todos los miembros de la familia y amigos estén completamente vacunados antes de visitar.
- Considere los riesgos de COVID-19 para usted y su bebé antes de decidir salir a realizar actividades que no sean visitas de atención médica o cuidado de niños.
- Pregúntele a su programa de cuidado infantil sobre los planes que tienen para proteger su bebé, su familia y su personal

Mantenga 6 pies entre su bebé y los demás

- Traendo personas a su hogar puede aumentar el riesgo de propagar COVID-19.
- Algunas personas sin síntomas pueden propargar el virus.
- Considere otras opciones, como celebrar virtualmente, para las personas que quieren ver a su nuevo bebé.





BREASTFEEDING AND COVID-19

Current evidence suggests that breast milk is unlikely to spread the virus to babies.



COVID-19 vaccination is recommended for people who are pregnant, breastfeeding, or trying to get pregnant.

In addition, everyone who is eligible, including those who are pregnant, breastfeeding, or trying to get pregnant, is **encouraged to get a booster shot**.

Please always wash your hands with soap and water for at least 20 seconds before breastfeeding or expressing breast milk, even if you don't have COVID-19.

If soap and water are not available, use a hand sanitizer with at least 60% alcohol.

If you have COVID-19 and choose to breastfeed:

- Wash your hands before breastfeeding.
- Wear a N95, KN95, or a KF94 mask while breastfeeding and whenever you are within 6 feet of your baby.



If you have COVID-19 and choose to express breast milk:

- Use your own breast pump/attachments that are not shared with others.
- Wear a N95, KN95, or a KF94 mask as you express breast milk.
- Wash your hands with soap and water for at least 20 seconds before touching any pump or bottle parts, and before expressing breast milk.
- Follow recommendations for proper pump cleaning after each use. Clean all parts of the pump.

Consider having a fully vaccinated caregiver feed the expressed breast milk to the baby.



People who have come into close contact with someone with COVID-19 should be tested to check for infection:

- Fully vaccinated people should be tested
 5-7 days after their last exposure.
- People who are not fully vaccinated should get tested immediately when they find out they have been exposed. If their test result is negative, they should get tested again 5-7 days after their last exposure, or immediately if symptoms develop.
- Self-tests are one of several options for COVID-19.
- Ask your healthcare provider or your local health department if you need help interpreting your test results.

Fully vaccinated caregivers should consider wearing a N95, KN95, or a KF94 mask while feeding the baby.

Visit <u>myturn.ca.gov</u>
to find a walk-in
clinic or make an
appointment for your
COVID vaccination.











Amamantanto y COVID-19

Evidencia actual sugiere que es poco probable que la leche materna transmita el virus a los bebés



Se recomienda la vacunación contra el COVID-19 para las personas embarazadas que amamantan o intentan quedar embarazadas.

Además, se alienta a todas las personas elegibles, incluidas las que están embarazadas, amamantando o tratando de quedar embarazadas ,son animadas a garrar el Booster tambien Por Favor lávese siempre las manos con agua y jabón durante 20 segundos antes de amamantar o extraerse la leche materna, incluso si no tiene COVID-19.

Si no hay agua y jabón disponibles, use un disinfectante de manos con al menos 60% de alcohol

Si tienes COVID-19 y eliges amamantar

- Lavarse las manos antes de amamantar.
- Use una N95, KN95, o KF94 máscara mientras amamanta y siempre que esté a menos de 6 pies de su bebé



Si tienes COVID-19 y elige extraer leche materna

- Use su propio extractor de leche/accesorios que no se comparten con otros.
- use una máscara de N95, KN95, or a KF94 mientras extrae la leche materna
- Lávese las manos can agua y jabón durante al menos 20 segundos antes de tocar cualquier extractor o pieza del modelo, y antes de extraerse la leche materna
- Siga las recomendaciones para la limpieza adecuada de la bomba después de cada uso. Limpie todas las partes de bomba.

Considere tener un cuidador completamente vacunado que alimente al bebé con la leche manterna extraída



Las personas que han estado en contacto cercano con alguien con COVID-19 deben hacerse la prueba para detectar una infección

- Las personas completamente vacunadas deben ser tratadas entre 5-7 dias después de su última exposición
- Las personas que no están completamente vacunadas deben hacerse la prueba immediatemente cuando se entran de que han estado expuestas. Si los resultados de la prueba son negativos deben volver a hacerse la prueba 5-7 días después de su ultima exposición, o immediatamente si se desarrollan síntomas
- Las autopreuebas son una de varias opciones para COVID-19
- Pregúntele a su proveedor de atención médica o al departamento de salud local si necesita ayuda para interpretar los resultados de su prueba

Los cuidadores completamente vacunados deben considerar usuar una máscara N95,KN95, o KF94 mientras alimentan al bebé

Vesita <u>myturn.ca.gov</u>
Para encontrar un
ambulatorio o hacer
una cita para su
vacunación contra el
COVID-19













UPRGRADE YOUR MASK

Consider Fit, Filtration and Comfort.

GOOD



Surgical mask

BETTER



BEST



N95

OK/FAIR



If you choose a cloth mask, make sure it fits properly and has at least 3 layers. A cloth mask is better than no mask.

MEJORA SU MÁSCARA

Considere el ajuste, la filtración y la comodidad.

BUENIA



Surgical mask

MEJOR



KF94/KN95

LA MEJOR



N95

OK/JUSTA



Si elige una máscara de tela, asegúrese de que le quede bien y tenga al menos 3 capas. Una máscara de tela es mejor que ninguna máscara.

BLACK PROVIDER LIST

Black **Provider List** - Fresno - if you are a Black health care professional/provider, and would like to be added on this list, email: **info@black-enterprises.com**



	NAME	PHONE	ADRESS
CARDIAC SURGERY			
	Godfred Kwame Yankey, MD	559-450-7455	1510 E Herndon Ave, Suite 210 Fresno, California 93720
CHILD & ADOLESCENT PSYCHIATRY SPECIALIST	SPECIALIST		
	Joseph Alimasuya, MD	(559) 261-2999	6777 N Willow Ave, Fresno. CA 93710
CLINICAL COUNSELOR			
	Truvette M Hollinquest	(559) 234-3053	Fresno, CA 93704 / Online
CLINICAL PSYCHOLOGIST			
	Reshale Thomas, PsyD	(559) 721-2960	2900 Fresno St STE 108, Fresno, CA 93721
CLINICAL SOCIAL WORK/THERAPIST			
	Constance Leger, LCSW Derric Devon Brown Ron Steele	(559) 234-0730 (559) 586-6801 (559) 574-5444	Fresno, CA 93720 5588 North Palm Avenue Fresno, CA 93704 5150 N Sixth #169, Fresno, CA 93710
CLINICAL SOCIAL WORKER			
		8 6	

Denise Lancaster Young

(559) 237-8337

2550 West Clinton Avenue Fresno, CA 93705

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	NAME	PHONE	ADDRESS
COSMETIC, PLASTIC & RECONSTRUCTIVE SURGERY	TIVE SURGERY		
	Terry Gillian, MD	(559) 448-8980	1193 E Herndon Ave Ste 106 Fresno, CA 93720
DENTIST			
	Cheryl Whisenhunt, DDS Sam Akande, DDS Sidney Jackson, DDS	(559) 432-0622 (559) 228-3000 (559) 447-3003	3920 N Cedar Ave Fresno, CA 93726 1902 E Ashlan Ave, Fresno, CA 93726 7433 N 1st St Ste 101 Fresno, CA 93720
FAMILY MEDICINE / SPORTS MEDICINE	NE.		
	Erik Greene, MD Tony Alando Reid, MD	(559) 797 <u>-</u> 4315 (559) 297 <u>-</u> 7563	2021 Herndon Ave # 101, Clovis, CA 93611 2151 Herndon Ave Ste 105, Clovis, CA, 93611
FAMILY THERAPIST AND MENTAL HEALTH COUNSELOR			
	Gidai Maaza, LMFT	(559) 779 <u>-4201</u>	5588 N Palm Ave, Suite 106 Fresno, CA 93704
FAMILY, CHILD & ADOLESCENT THERAPIST			
	Celeste Simmons	(559) 212-3324	Fresno, CA 93704
GENERAL FAMILY MEDICINE			
	Barbara Morlan, MD	(559) 365-7147	2151 Herndon Ave Ste 105, Clovis, CA 93611

Rachel Yankey, MD
Robert (Bob) Mitchell, MD

559-450-4000 (559) 457-5700

1111 E Spruce Ave #431 Fresno, California 93720

302 Fresno St, Fresno, CA 93706

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	NAME	PHONE	ADDRESS
GENERAL SURGERY			
	lbironke Adelaja, MD	(559) 459-3770	290 N Wayte Ln Ste 2200, Fresno, CA 93701
GERONTOLOGY NURSE PRACTITIONER			
	Keiosha Townsend, DNP		Video visits: UCSF Health Affiliate
INTERNAL MEDICINE			
	Claudia Monteiro Fontes, MD Desmond Paul-Coker, DO Fabian Nwadei, MD Gail Ajanaku, MD Latanya Carey-Ledford, MD Markos H. Zemede, MD Ramona Walker, MD Victoria Annaliese Green, MD	(559) 499-6556 559-450-6310 (559) 228-4222 (559) 459-4390 (559) 603-7300 (559) 603-7300 (559) 499-6500	155 N Fresno St, Fresno, CA 93701 4770 W Herndon Ave., Suite 107, Fresno, California 93722 45 River Park Pl West Ste 507, Fresno. CA 93720 2823 Fresno St. Fresno, CA 93721 45 River Park Pl West Ste 507. Fresno. CA 93720 1221 E Spruce Ave., Fresno, CA 93720 45 River Park Pl West Ste 507, Fresno, CA 93720 155 N Fresno St, Fresno, CA 93701
INTERNAL MEDICINE / PEDIATRICS			
	Tyra Reece, MD	(559) 499-6400	155 N Fresno St Fresno CA 93701
MARRIAGE & FAMILY THERAPIST			
	Alexandra Addo-Boateng Antionette Brookins Daniel Moultrie Gwendolyn Tyson Jessica Criner Johnny Dell Simmons Kelly Baker Kyrah Dickens	(559) 221-8874 (559) 234-4677 (559) 205-7195 (559) 543-5431 (559) 325-8600 (323) 642-6703 (559) 236-5889 (559) 338-5617	1357 W Shaw Ave, Ste 100, Fresno, CA, 61695mo, CA 93711 550 W. Alluvial Avenue Fresno, CA 93711 Fresno, CA 93705 7080 N Whitney Ave Suite 102, Fresno, CA 93720 2190 North Winery Avenue Fresno, CA 93703 619 N. Irwin St Hanford, CA 93230 Fresno, CA 93703

PROVIDER MAP

Black **Provider List** - Fresno - if you are a Black health care professional/provider, and would like to be added on this list, email: **info@black-enterprises.com**



	NAME	PHONE	ADDRESS
MENTAL HEALTH COUNSELOR			
	Cheneena R. Knoxx-Ward Gidai Maaza, LMFT	(559) 248-1548 (559) 779-4201	4411 N Cedar Ave, Suite 108 Fresno, CA 93726 5588 N Palm Ave, Suite 106 Fresno, CA 93704
NEUROSURGERY			
	lan Johnson, MD	(559) 451-3687	7257 N Fresno St. Fresno. CA 93720
NURSE			
	Joy Alexander Rhonda Quinones Sabrina Bear	cvbna2017@yahoo.com (559) 324- 4819 cvbna2017@yahoo.com	PO Box 28113, Fresno, CA 93720 2755 Herndon Ave, Clovis, CA 93611 PO Box 28113, Fresno, CA 93721
OBSTETRICS & GYNECOLOGY			
	Adanna Ikedilo, MD Beni Adenji, MD William Lee Brown Jr., MD Denard Fobbs, MD Gail Mallard-Warren, MD	(559) 981-2600 (559) 485-8330 (559) 265-4444 (559) 225-7600 (559) 432-5697	1374 E Alluvial Ave, Fresno, CA 93720 1504 N Wishon Ave, Fresno, CA 93728 6225 N. Fresno St. Suite 104, Fresno, CA 93710 7455 N Fresno St, Fresno, CA, 93720 7455 N Fresno St, Fresno, CA, 93720
	Gail Mallard-Warren, MD Janice Stain, MD Sharon Kopactz, MD	(559) 432-5697 (559) 457-5400 (559) 322-2900	7455 N Fresno St, Fresno, CA, 93720 1350 S. Orange Avenue, Fresno, CA 93702 726 N Medical Center Dr E Ste 221 Clovis, CA 93611
OTOLARYNGOLOGY (ENT)			
	Allen M. Evans, MD	(559) 432-3303	1351 E Spruce Ave, Fresno. CA

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email: info@black-enterprises.com professional/provider, and would like to be added on this list. Black Provider List - Fresno - if you are a Black health care



	NAME	PHONE	ADDRESS
PAIN MANAGEMENT, ANESTHESIOLOGY			
	Thomas Jacques, MD	(559) 272-1295	7111 N Fresno St Ste 100, Fresno, CA 93720
PEDIATRICS			
	Hana Kahin, MD Maila Baker, MD Sylvester Bryant, MD W. Eugene Egerton, MD	(559) 499-6556 (559) 448-4947 (559) 459-4300 (559) 450-7098	155 N Fresno St, Fresno CA 93701 4785 N 1st St, Fresno, CA 93726 290 N Wayte Ln STE 1300, Fresno, CA 1303 E Herndon Avenue, Fresno, CA 93720
PEDIATRICS, PEDIATRIC HOSPITALIST			
	Veronica Ramirez, MD	(559) 437-7338	1570 E Herndon Ave, Fresno, CA 93720
PHYSICAL MEDICINE & REHABILITATION AND PAIN MEDICINE			
	Marsa Moody White, MD	(559) 448-4500	7300 N Fresno St., Fresno, CA, 93720
PHYSICIAN / HOSPITALIST			
	Uchechi Ndoh, MD	(559) 499-6400	155 N Fresno St Fresno. CA 93701
PHYSICIAN ASSISTANT			
	Kiara Swanier, PA Lucy Wallang, PA Sarah Winston, PA	Video visits online scheduling Video visits online scheduling Video visits online scheduling	
PODIATRY			
	Emmy Oji, DPM	(559) 436-4820	6145 N Thesta Street, Fresno, CA 93710

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	NAME	PHONE	ADDRESS
PSYCHOLOGIST			
	Erene Soliman Nnenna Ndika Rashella Avalos-Senteno Ryecobie Brooks-Gordon Sheila Thomas	(559) 549-9615 (559) 927-7007 (559) 234-0693 (559) 245-7381 (559) 338-6841	Fresno, CA 93704 / Online 1463 West Shaw Ave., Fresno, CA 93711 Visalia, CA 93292 / Online Fresno, CA 93755 / Online 1300 E. Shaw Ave, st 109, Fresno, CA 93710
RESIDENT			
	Jasmine Nudanu, MD Melody Adesuyan, MD Uzoma Ezeuko, MD	(559) 499-6500 (559) 499-6500 (559) 499-6500	155 N Fresno St, Fresno, CA 93701 155 N Fresno St, Fresno, CA 93701 155 N Fresno St, Fresno, CA 93701
VASCULAR SURGERY, GENERAL SURGERY			
	Kamell Eckroth-Bernard, MD	(559) 431-6226	1247 E Alluvial Ave Ste 101, Fresno, CA 93720

Contact us today to have **your name** added on this provider list! info@black-enterprises.com



No Black woman will die from a preventable childbirth related death.

No Black woman will deliver a preventable premature birth.

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