



Georgia Obstetrical
and Gynecological
Society, Inc.

APRIL 2023 | VOLUME 17, NUMBER 2

OBGYN NEWS

Promoting Excellence In
Women's Healthcare In Georgia



2023 Legislative Session Wrap Up

**Dr. Winifred Soufi - GOGS Legislative
Committee Co-Chair and Member at Large**

Georgia lawmakers returned to the Georgia Capitol on Tuesday, January 9 to commemorate the 2023 Legislative Session. With new leaders in both chambers, the session started on a historical note. After the resignation and passing of the former Speaker of the House, David Ralston (R-Blue Ridge), Jon Burns (R-Newington) was elected Georgia's 75th Speaker of the House of Representatives. For the first time in memory, the daily legislative schedule was released for the entirety of the session, allowing lobbyists and lawmakers alike to act cohesively upon legislation. The House Health and Human Services Committee was reorganized with Lee Hawkins as Chairman of the Health Committee and Rep. Sharon Cooper was chosen as Chairman of the newly created Public Health Committee. Rep. Butch Parrish (R-Swainsboro) was elected to serve as the House Special Committee on Healthcare Chairman. This committee oversees and coordinates the House's legislative and budgetary healthcare policy. Over the next 40 days, law-makers weighed in on everything from rural physician tax credits and prenatal testing of HIV and syphilis to certificate of need and malpractice reform.

The Georgia OBGyn Society's Legislative Committee utilized the 2023 GOGS legislative priorities to monitor and impact critical pieces of legislation. In partnership with the Patient-

Centered Physician's Coalition, the Society produced advocacy webinars and held our annual Day at the Capitol legislative and networking event.

See below for the GOGS legislative



priorities and a summary of key items. A special thank you to Lauren Pollow and Skin Edge for tracking these bills and advocating for Georgia providers and patients.

GOGS 2023 LEGISLATIVE PRIORITIES

- Increase Medicaid reimbursement rates
- Promote medical liability reform
- Secure access to vital reproductive health services
- Repeal restrictive abortion laws
- Champion enhanced contraceptive service delivery, including new evidence-based models
- Build systems of care that optimize patient access to and foster collaboration between obstetricians and certified nurse midwives/certified midwives
- Ensure that accredited education and professional certification precede licensure for all delivery providers
- Support maternal and perinatal mortality reduction efforts, including enhanced access to lactation support, insurance coverage for doula services, and state funding for AIM bundles
- Improve emergency obstetric transportation in rural areas
- Expand telehealth access by extending broadband internet services to rural communities



Drs. Zertuche, Little, and Grogan -
Legislative Day at the Capitol



Dr. Winnie Soufi, GOGS
Legislative Committee Co-Chair,
addresses group



Updates from our State
Representatives



Representing GOGS: Drs. Grogan,
Wayson, Little, Bonk, Soufi, & Zertuche

Author's Affiliation:

**Winifred Soufi, MD,
PhD, FACOG**

*Co-Chair,
GOGS Legislative
Committee*

*Medical Director of
Unified Women's
Care of Georgia*

✓ PASSED

- H.B. 19
- H.B. 315
- S.B. 46
- S.B. 106
- S.B. 140

✗ DID NOT PASS

- H.B. 470
- H.B. 557
- S.B. 81
- H.B. 496
- H.R. 413
- S.R. 136
- J.B. 75
- H.B. 795
- H.B. 796
- H.B. 1

Click [HERE](#) to view specifics
on each bill listed above

GOGS 2022-2023 Board of Directors

PRESIDENT

Champa Woodham, MD
Augusta

IMMEDIATE PAST PRESIDENT

Cary Perry, MD
Athens

PRESIDENT-ELECT

Gretchen Koontz, MD
Atlanta

SECRETARY/TREASURER

Bunja Rungruang, MD
Augusta

MEMBER AT LARGE

Joy Baker, MD
LaGrange

MEMBER AT LARGE

Winnie Soufi, MD
Atlanta

EXECUTIVE DIRECTOR

Kate Boyenga
Duluth

GA SECTION ACOG REPRESENTATIVES

GA Section ACOG Chair

Cathy Bonk, MD
Decatur

GA Section ACOG Vice-Chair

Adrienne Zertuche, MD
Atlanta

Newsletter Editor:

Jessica Arluck, MD
Atlanta

ADMINISTRATIVE OFFICE

2925 Premiere Parkway | Suite 100
Duluth, Georgia 30097

Phone: 770.904.0719

Fax: 770.904.5251

If you would like to send a letter to the editor,
please email letter to president@gaobgyn.org
or mail it to the Society's office

www.gaobgyn.org

QUICK LINKS



AWARENESS CAMPAIGNS

FOR THE MONTHS OF

April and May

April



BLACK MATERNAL AWARENESS WEEK

Held annually on April 11-17th, BMHW is a week-long campaign founded and led by the Black Mamas Matter Alliance to build awareness, activism, and community-building to amplify the voices, perspectives and lived experiences of Black Mamas and birthing people. The week is intentionally held during National Minority Health Month and begins on April 11th annually to join dozens of global organizations in marking this day as International Day for Maternal Health and Rights – an opportunity to advocate for the elimination of maternal mortality globally. The activities and conversations hosted throughout the week intentionally center the values and traditions of the reproductive and birth justice movements. To learn more, check out their video: <https://youtu.be/IsDkoNf07Mk>



STI AWARENESS MONTH

While the idea of Talk. Test. Treat. is simple, STI prevention and treatment are not one-size-fits-all. Visit CDC, where providers will be encouraged to revisit the many ways that you can empower your patients to take charge of their sexual health. To learn more, visit:

<https://www.cdc.gov/std/saw/talktesttreat/providers.htm>



NATIONAL INFERTILITY AWARENESS WEEK (4/23/23 -4/29/23)

When the community comes together and talks about National Infertility Awareness Week®, it will: 1. Enhance public understanding that infertility needs and deserves attention; 2. Ensure that people trying to build a family know the guidelines for seeing a specialist; 3. Educate lawmakers about how infertility impacts people in their state. To learn more, visit: <https://www.infertilityawareness.org/>

May

PREECLAMPSIA AWARENESS MONTH

Less than half of pregnant women know the signs and symptoms of preeclampsia. And still others may not share their symptoms with their healthcare providers for fear of fear of over-reacting. The Preeclampsia Foundation is working to improve the resources available to all women and their caregivers by providing evidence based educational materials in our Store. We also encourage providers to recommend the trustworthy information on our website to all their patients. To learn more, visit: <https://www.preeclampsia.org/educating-patients>



HEPATITIS AWARENESS MONTH and TESTING DAY (5/19)

The month of May is designated as Hepatitis Awareness Month in the United States, and May 19th is Hepatitis Testing Day. During May, CDC and public health partners work to shed light on the impact of these hidden epidemics by raising awareness of viral hepatitis while encouraging testing and vaccination. Activities help to improve everyone's understanding of viral hepatitis transmission and risk factors and to decrease social stigma against viral hepatitis. To learn more, visit:

<https://www.cdc.gov/hepatitis/awareness/HepatitisAwarenessMonth.htm>



Looking to avoid risk?

WE CAN SHOW YOU THE WAY.

We're taking the mal out of malpractice insurance.

Thanks to our national scope, regional experts, and data-driven insights, we're uniquely positioned to spot trends early. We shine a light on risks that others can't see, letting you focus on caring for patients instead of defending your practice. It's a stronger vision that creates malpractice insurance without the mal.

Join us at thedoctors.com



Exclusively endorsed by



The Doctors Company
TDCGROUP



Q : What year did your residency year begin?

A : 1959

Q : How many residency slots?

A : 16

Q : What are you most proud of about your program?

A : Our invested faculty, our teamwork and our support for work/life balance



Q : Who are the key contacts for your program?

A : Program Director - **Karen Baker, MD**

Associate Program Director - **Stephanie Tootle, MD**

Program Manager - **Toni Garza**

Chair - **Anthony Royek, MD**

For more information, click on icons below or visit on-line:



memorialhealth.com/graduate-medical-education/obstetrics-and-gynecology/



www.instagram.com/savannahobgynresidents/

THREE FUN FACTS ABOUT OUR PROGRAM:

- ① The only program in our hospital who recognizes St. Patrick's Day as a holiday
- ② Early exposure to C-Sections and surgical experience on Day 1 of residency
- ③ Resident driven specialty clinics - PAG, COLPO, LEEP and TeleMed

Reminder

Click or scan below to make your hotel reservations, today:

<https://book.passkey.com/event/50359452/owner/49229302/home>

or call reservations at 888.236.2427 and ask for the Georgia OBGyn Annual Meeting

Georgia Obstetrical and Gynecological Society and Georgia Section ACOG
Jointly Provided with the American College of Obstetricians and Gynecologists

2023
Annual
Educational
Meeting

August 24 - 27, 2023

The Westin Spa & Resort
Hilton Head Island, South Carolina

Both In-Person and Virtual
Attendance Options Available



Hotel fills quickly, book your room today

Meeting registration begins in May

Check your email in May for more details

Liletta
(levonorgestrel-releasing
intrauterine system) 52 mg



Physicians' Alliance
of America

**LILETTA® IS AVAILABLE
THROUGH PAA!**

Savings for Physicians' Alliance
of America (PAA) Members

PAA is a nonprofit Group Purchasing Organization that uses the purchasing power of more than 10,000 member practices nationwide to negotiate discounts and preferred terms for the products and services practices use every day.

For more information on LILETTA,
call 1.855.LILETTA
or visit LILETTAHCP.com

For more information on PAA,
call 1.866.348.9780
or visit www.Physall.com

Allergan | Medicated 360

© 2019 Allergan and Medicated360. All rights reserved.
Allergan® and its design are trademarks of Allergan, Inc.
Medicated360® and its design are registered trademarks of Medicated360.
LILETTA® and its design are registered trademarks of Cytosine Pharma SPV, an Allergan affiliate.
All other trademarks are the property of their respective owners.
L11200333 02/19

Liletta
(levonorgestrel-releasing
intrauterine system) 52 mg

Breastfeeding Corner: Scientific Summary

Breastfeeding Reduces Mothers' Cardiovascular Disease Risk

Journal of the American Heart Association Report



- In February 2022, the Journal of the American Heart Association published a review article with findings from a meta-analysis of health records of 1.2 million women and the relationship between breastfeeding and the mother's individual cardiovascular risk.
- This study reviewed health information from eight studies conducted between 1986-2009 in Australia, China, Norway, Japan, and the U.S. and one multinational study.
- Compared to women who never breastfeed, women who reported breastfeeding during their lifetime had a 11% decreased risk of developing cardiovascular disease.
- Over an average follow-up period of 10 years, women who breastfeed at some point in their life were 17% less likely to die from cardiovascular disease.
- Women who breastfed for 12 months or longer during their lifetime appeared to be less likely to develop cardiovascular disease than women who did not breastfeed.
- Despite WHO and U.S. CDC recommendations that babies are breastfed exclusively through at least six months of age, in the U.S., only 1 in 4 infants receives only breastmilk for the first six months of life and black infants are less likely than white infants to breastfeed for any length of time.
- Cardiovascular disease is the leading cause of maternal deaths according to the "2021 Maternal Call to Action: Maternal Health and Saving Mothers"
- More efforts to raise awareness regarding the multifaceted benefits of breastfeeding could be particularly helpful to those mothers who are debating breast vs bottle feeding.

"It should be particularly empowering for mother to know that by breastfeeding she is providing the optimal nutrition for her baby while simultaneously lowering her personal risk of heart disease."

SCIENTIFIC SUMMARY PROVIDED BY:

Keisha Callins, MD, MPH
GOGS Board Member
GOGS Breastfeeding Committee Chair
Board Certified General Obstetrician and Gynecologist,
Community Health Care Systems
(Twiggs/Jones County)

To view the complete report from JAHA, click [HERE](#)



BREASTFEEDING RESOURCES

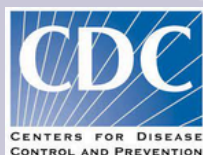
EPIC
educating physicians in their communities

EPIC programs are presented FREE for Georgia physicians and staff when it's most convenient for the practice. We offer a choice of virtual or in person educational presentations. Participants will receive between 1-2 continuing education credit hours.

- Books
- Manuals
- Videos
- COVID-19 & Breastfeeding
- Links to Websites
- Important Phone Numbers

WWW.GAEPIC.ORG

CLICK BELOW TO SEE THE LATEST BREASTFEEDING ON FROM THE CDC



Contraindications to Breastfeeding or Feeding Expressed Breast Milk to Infants
[HTTPS://TINYURL.COM/CDCBFANDEXP](https://tinyurl.com/CDCBFANDEXP)

CLICK BELOW TO SEE THE LATEST INFANT FEEDING & HIV ARTICLE FROM THE CDC



HIV and Perinatal Transmission
[HTTPS://TINYURL.COM/CDCBFHIVTRANS](https://tinyurl.com/CDCBFHIVTRANS)

CLICK BELOW TO SEE THE LATEST RECOMMENDATIONS ON INFANT FEEDING & HIV



Recommendations for the Use of Antiretroviral Drugs During Pregnancy and Interventions to Reduce Perinatal HIV Transmission in the US.

[HTTPS://TINYURL.COM/INFANTFEEDINGANDHIV](https://tinyurl.com/infantfeedingandhiv)

Dobbs and the Overturn of Roe v. Wade: Implications for Maternal Health Equity in Georgia

Elizabeth A. Mosley, PhD, MPH



In June 2022, the Supreme Court overturned *Roe v. Wade* and federal protection of abortion in its *Dobbs v. Jackson Women's Health Organization* decision. Swiftly trigger bans and once-injuncted state laws erupted. Today, abortion is completely illegal in 12 states while 12 others (including Georgia) are considered hostile to abortion care (Center for Reproductive Rights, 2023; see Figure 1). Although abortion remains legal in Georgia, HB 481 has been enacted outlawing abortion after embryonic cardiac activity, typically around 6 weeks since last menstrual period (LMP), with limited exceptions for medically futile pregnancy, medical emergency, rape, or incest.

Emory University's Center for Reproductive Health Research in the Southeast (RISE) has been conducting abortion-related research in Georgia since its founding in 2017. This commentary explores some of that research and other existing scientific evidence to answer: what are the implications of *Dobbs* for maternal health equity here in Georgia?

ABORTION RESTRICTIONS ARE HARMFUL TO MATERNAL AND CHILD WELLBEING

restriction was associated with increases in preterm birth and low birthweight (Redd et al., 2021, 2022). Further, she found the effect of abortion restrictions was moderated by race and by education level. Increasing abortion restriction within a state increased the Black-white disparities in preterm birth, while it increased educational disparities in low birthweight.

- Other nationally-representative studies have similarly found that increasing abortion restrictions at the state level are associated with increased rates of infant mortality (Karletsos et al., 2021) and increased maternal morbidity and mortality (Addante et al., 2021; Haddad & Nour, 2009; Jarlenski et al., 2017).
- Georgia's previous 22-week gestational age limit essentially eliminated all abortions after that gestational age (Hall et al., 2020), and it inserted ideological, non-scientific policies into the patient-provider relationship (Hartwig et al., 2020). We also learned it disproportionately impacted Black patients (Mosley et al., 2022).

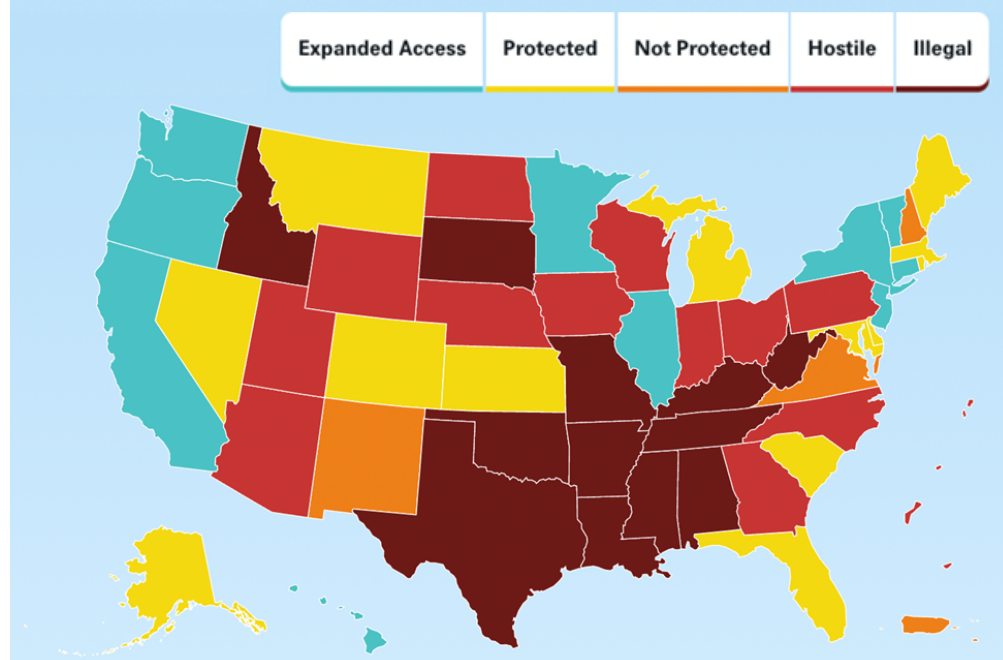


FORESHADOWING SHOWS HB 481 WILL OUTLAW THE VAST MAJORITY OF ABORTIONS IN GEORGIA AND LIKELY INCREASE MATERNAL MORTALITY

- Dr. Redd and team (Forthcoming) calculated that 88% of abortions performed in Georgia in 2016-2017 would no longer meet the embryonic cardiac gestational age limit. That figure is higher for Black (compared to White) people, for younger (compared to older) people, or those with less than a college education (compared to some college education).
- Building on this, I simulated impacts on maternal mortality in Georgia (see Table 1). I calculated the number of additional maternal deaths we would expect if all abortions 6 weeks or later were outlawed and those pregnancies were carried to term. I estimate there would be 8 additional maternal deaths annually, a 19% increase compared to 2014. Using CDC abortion data, I estimate there would be 11 additional maternal deaths, or a

- The Turnaway Study is a landmark abortion investigation—over 10 years with 1,000 abortion-seeking patients nationally— that has documented the negative impacts of being denied abortion care (Advancing New Standards in Reproductive Health, 2020). They found that people denied an abortion were more likely to try and self-manage an abortion later, experience maternal morbidity or mortality, have poorer physical health, have lower satisfaction with life, subsequently be living in and raising their children in poverty, and be trapped in a violent relationship. Moreover, those negative consequences of abortion denial were more likely for patients who were younger and unemployed.
- RISE researcher Dr. Redd conducted a national study creating a state-level abortion restriction index and found that increasing abortion

FIGURE 1. STATE LAWS ON ABORTION AS OF FEBRUARY 14, 2023



Click graphic for pdf

Source: Center for Reproductive Rights. (2022). After Roe Fell. After Roe Fell. <https://reproductiverights.org/maps/what-if-roe-fell/>

TABLE 1. PROJECTED MATERNAL MORTALITY FOLLOWING HB 481

Georgia's embryonic cardiac activity gestational age limit for abortion using Centers for Disease Control, Georgia Department of Health, and Georgia Maternal Review Committee* abortion data.

*Note: these analyses were conducted using 2014 Georgia maternal mortality data prior to the release of more recent data. These analyses are being updated with the 218-2020 now before journal publication

ITOPS Abortion Data ¹	2014 maternal deaths ²	Additional estimated maternal deaths annually with HB 481	Estimated percent increase in MM compared to 2014
White	12	1	8%
Black	21	7	33%
Overall	43	8	19%
CDC Abortion Data ³	2014 maternal deaths	Additional estimated maternal deaths annually with HB 481	Estimated percent increase in MM compared to 2014
White	12	1	8%
Black	21	10	48%
Overall	43	11	26%

1 Georgia Department of Public Health. (2020). Induced Terminations of Pregnancy Web Query. Online Analytical Statistical Information System. <https://oasis.state.ga.us/oasis/webquery/grj/ITOP.aspx>

2 Department of Public Health Maternal Mortality Review Committee. (2019). Maternal Mortality Report 2014. Department of Public Health. <https://dph.georgia.gov/document/publication/maternal-mortality-2014-case-review/download>

3 Kortsmat, K. (2021). Abortion Surveillance—United States, 2019. MMWR. Surveillance Summaries, 70. <https://doi.org/10.15585/mmwr.ss7009a1>

Click graphic for pdf



- 26% increase since 2014. Nearly all of those additional deaths would occur among Black pregnant people: there could be 7 additional Black maternal deaths following HB 481, a 33% increase since 2014.

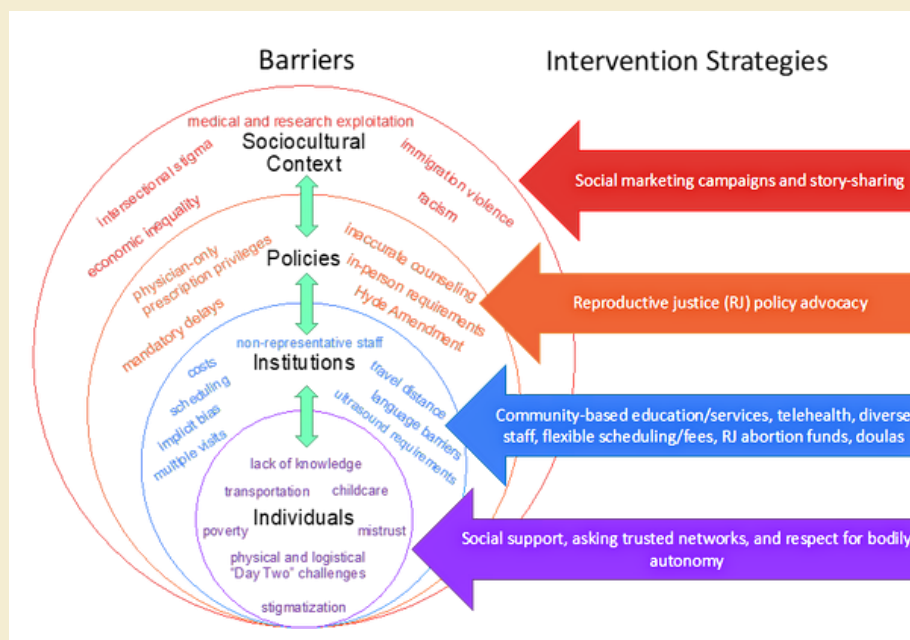
GEORGIA MEDICATION ABORTION (GAMA) LED BY SISTERLOVE

- Reproductive justice organization SisterLove leads the Georgia Medication Abortion project investigating medication abortion perspectives and experiences among Black and Latinx women in metro-Atlanta. We conducted 20 key informant interviews with abortion providers and community organization leaders serving Black and Latinx women, and 32 in-depth interviews and 6 focus groups with Black and Latinx women.
- Thematic analysis revealed a number of intersectional barriers to medication abortion for Black and Latinx women from the individual to institutional, policy, and social levels (see Figure 2).
- At the same time, study participants suggested solutions and interventions that could facilitate more equitable access to patient-centered medication abortion care (see Figure 2).



FIGURE 2. STATE LAWS ON ABORTION AS OF FEBRUARY 14, 2023

Figure 2. Barriers to and intervention strategies for medication abortion among Black and Latinx women in Georgia across the socio-ecological model from SisterLove's Georgia Medication Abortion project



Click graphic for pdf



Source: Mosley, E. A., Ayala, S., Jah, Z., Hailstorks, T., Hairston, I., Rice, W. S., Hernandez, N., Jackson, K., Scales, M., Gutierrez, M., Goode, B., Filippa, S., Strader, S., Umbria, M., Watson, A., Faruque, J., Raji, A., Dunkley, J., Rogers, P., ... Hall, K. S. (2022). "I don't regret it at all. It's just I wish the process had a bit more humanity to it ... a bit more holistic": A qualitative, community-led medication abortion study with Black and Latinx Women in Georgia, USA. *Sexual and Reproductive Health Matters*, 30(1), 2129686. <https://doi.org/10.1080/26410397.2022.2129686>

In conclusion, there is strong scientific evidence to suggest abortion restrictions like HB 481 in Georgia will be detrimental to maternal and child health, and will exacerbate racial/ethnic, socioeconomic, and age disparities. As Georgia obstetricians/gynecologists, this audience must prepare for these increased pregnancy-related risks. Partnering with community-based advocacy organizations and community-engaged reproductive health researchers will be key for optimizing maternal-child health and equity in Georgia.

AUTHOR'S AFFILIATION

Elizabeth A. Mosley, PhD MPH -
Affiliated Faculty Member
Center for Reproductive Health Research in the
Southeast (RISE)
Emory University Rollins School of Public Health

Assistant Professor of Medicine
University of Pittsburgh (remote from Atlanta)
Division of General Internal Medicine
Center for Innovative Research on Gender Health
Equity (CONVERGE)

Twitter accounts: @EmoryRISE @eliz_mosley
Email: eamosle@emory.edu

Click [HERE](#) for references cited in this article

*PDFs of graphics for this article are available
by clicking on the specific graphic



City of
Hope®



Ruchi Garg, M.D.
National Program Director
Gynecologic Oncology



More Cancer Expertise. More Hope.

City of Hope is one of the nation's leading cancer care and research networks. By combining groundbreaking research with precision medicine technologies, we strive to provide you the comprehensive, personalized care you deserve.

855-939-HOPE | cancercenter.com

©2023 City of Hope

ATTENTION: PHYSICIANS, PRACTICE MGRS, CODERS & BILLERS

REGISTER NOW

EARLY BIRD PRICING ENDS 4/24/23; REGISTRATION ENDS 5/8/23

2023
TO REGISTER, SCAN QR CODE
BELOW OR ON-LINE AT:
[HTTPS://TINYURL.COM/GOGSG2023](https://tinyurl.com/gogsg2023)
SPRINGCPT

CURRENT PROCEDURAL TERMINOLOGY
CPT
CODING WEBINAR

4.5 CEU
(NEW) CREDITS
AVAILABLE

SPRING SESSION
MAY 12, 2023
9 AM - 12 PM

Georgia OBGyn
GEORGIA OBSTETRICAL AND GYNECOLOGICAL SOCIETY

SCAN HERE
TO REGISTER



REGISTRATION
ENDS 05.08.2023

AN EXPERIENCED FIRM, FOCUSED ON HEALTHCARE

We are conducting our annual **Southeast Physician Practice Salary Survey**. This is just one way we offer guidance to medical practices, ensuring they are profitable, efficient and compliant. In the end, we're a resource so our physician clients can get back to taking care of the most important things in life.



The survey is now open. Please scan this QR code to participate. All who submit a response by May 15, 2023, will receive a complimentary report of results.

Warren Averett
CPAs AND ADVISORS

Forbes 2023
AMERICA'S BEST
ACCOUNTING
FIRMS
POWERED BY DATA

Georgia | Alabama | Florida | www.warrenaverett.com

'Mom's Heart Matters' Initiative Launches in Hinesville

On Saturday, February 11, 2023, Liberty Regional Medical Center launched a new initiative with a mission to improve the heart health of mothers who just gave birth. The program called, 'Mom's Heart Matters', empowers mothers to manage their health during the time they need it most and it can potentially save more lives. New mothers, meeting specific criteria are sent home with a goodie bag and a blood pressure cuff. This allow providers to see their patient's blood pressure through an app in real time. While the program will not replace them going to their physician and doing their appropriate follow-up, this allows providers to pay close attention to moms immediately after they deliver, which



Community leaders come out
in support of the launch of
Mom's Heart Matter Program



Dr. Callins delivers a
heartfelt message about
the program



Dr. Borquaye and Dr. Callins,
GOGS Members and OBGyns at
Liberty Regional Hospital



For more information visit:
[HTTPS://TINYURL.COM/MOMS
HEARTMATTERSINFO](https://tinyurl.com/momsheartmattersinfo)

Click [HERE](#) to view WTOP's
news video from event



Always a strong supporter of
Maternal Morbidity and Mortality
in Georgia, State Rep. Dr. Dean
Burke continues to show
commitment to this issue

is when many issues occur. "We do an average of about 35 deliveries a month, and we're seeing that some of the patients, because they are poor or of low income, are developing hypertensive disease of pregnancy, which can later, after delivery, lead to heart attack or heart problems, says Dr. Borquaye who along with GOGS Advisory Council member, Keisha Callins, MD helped to create the MHM program. This is a preventative approach to the many heart conditions doctors say mothers can develop during and after pregnancy.



Do you have recent news you would like
shared with membership? Please submit
by clicking or using link below:
<https://tinyurl.com/4m5439kz>



Georgia STOMP is a nonpartisan coalition of over 30 advocacy, service, and professional organizations joined by the common goal of bringing menstrual equity to government policies and daily life in our state, and by the desire to eliminate period poverty in Georgia. Period poverty is often considered a problem of low-income countries, but the stigma surrounding menstruation, a general lack of public conversation about menstruation, and the inherent challenges of poverty have caused many Georgians to experience period poverty and a lack of access to these basic medical necessities. Some low-income Georgians face the painstaking choice between period supplies and other household necessities, including food. In 2021, it was reported that 2 out of every 5 adult American menstruators have experienced period poverty (U by Kotex, 2021). As providers of obstetric and gynecologic care in our state, you may have encountered patients in your own practice who are struggling to obtain safe, affordable products so they can work, study and manage their periods with dignity. These challenges often relate directly to the social and political determinants of health.

The needs of menstruators have historically not been taken into account when public policies were written and laws developed, an oversight that has led to persistent barriers to accessing menstrual products. For example, while groceries and some non-prescription goods (e.g., insulin syringes, blood glucose test strips) are exempt from the 4% state sales tax, Georgians are charged this tax on the medically necessary, unavoidable items they need to manage their periods with dignity. Menstrual equity is achieved when barriers such as these are eliminated in all facets of public life. Most recently, Georgia STOMP has been mobilizing advocates in support of S.B.51/H.B.123, which would eliminate the 'tampon tax' in our state (introduced January 2023). But the work of Georgia STOMP dates back to 2017, when we began successfully working with bipartisan state leadership to address various

legal and administrative inequities in Georgia, like the tax.

In 2019, the Georgia Emergency Management and Homeland Security Agency (GEMA) and Georgia Department of Corrections (DOC) adopted new policies to ensure menstrual product availability following natural disasters and in state prisons, respectively. Additionally, to date, Georgia STOMP has secured \$4.38 million for the Georgia Department of Education (DOE) to fund menstrual products in Georgia's schools, and \$800,000 for the Georgia Department of Public Health (DPH) to fund products in community health departments (CHDs). Georgia STOMP continues to advocate for the allocation of funds for those purposes, and regularly partners with leadership within each department to support the equitable and non-stigmatized distribution of period products to those who need them. In the 2023 Legislative Session, advocates supported an increase of funds for products in CHDs from \$200,000 to \$500,000 annually, which would enable DPH to more sustainably provide products to those in need.

There are many reasons to be hopeful about progress in this space. Personally, I am encouraged by the health care providers who are leading the charge in championing research that accounts for the needs and health of menstruators, or supporting menstrual health education in schools. Today's youth are also inspiring our work with how comfortably they share their experiences with their periods,

IT'S TIME FOR
GEORGIA TO
AX THE
TAMPON TAX

Georgia
STOMP
Stop Tax On Menstrual Products

2023 LEGISLATIVE PRIORITY: #1
ELIMINATE
THE 4%
STATE
SALES TAX ON
MENSTRUAL
PRODUCTS

MAINTAIN FUNDING
FOR GA DEPARTMENT
OF EDUCATION



2023 LEGISLATIVE PRIORITY: #2



changing cultures that have historically stigmatized conversations about periods.

WHAT SHOULD YOU KNOW, AND HOW CAN THE WORK OF GEORGIA STOMP HELP YOUR PATIENTS?

- Know: School districts across the state receive funds annually from DOE to purchase and provide 'feminine hygiene' products to students, grades 5-12.
- Act: Ensure that children and families know that these products are available for free.
- Act: Reach out to your local CHD to understand how period products are distributed on a local level.
- Know: More support is needed to eliminate the tax on menstrual products like S.B. 51/H.B. 123, which were not passed during the 2023 legislative session.
- Act: Let elected officials know the importance of menstrual equity and addressing period poverty, and the impacts that each have on your patients. Georgia STOMP offers easy actions through our website at: <https://georgiastomp.org/take-action/>
- Know: Georgia STOMP welcomes your thoughts, questions, concerns and ideas.
- Act: Reach out via the contact form on our website at: <https://georgiastomp.org/contact/> or via email, at vice-chair@georgiastomp.com.

Click [HERE](#) for references cited in this article

AUTHOR'S AFFILIATION

Adele Stewart, MPH
Vice-Chair,
Georgia STOMP
www.georgiastomp.org

Georgia STOMP 2022 in Review

Georgia
STOMP

17 meetings
with elected officials

**14 webinars
and meetings**
with GaDOE and Children's
Healthcare of Atlanta
facilitating period product
distribution by school nurses

2 summits
with member organizations

\$4.38 million
to date for the purchase
of period products in
Georgia public schools

6 trainings
for menstrual equity
education and advocacy

\$880,000
to date for purchase of
products by the Georgia
Department of Public
Health



REMINDER

RENEW YOUR 2023 DUES!

<http://tinyurl.com/GOGS2023Dues>



In the February 2023 issue of the OBGYN News, the final reference located on the bottom of page 9 of the March of Dimes (MOD) Maternal Health Report card, had inadvertently referenced that the MMRC does not review deaths up to a year after pregnancy ends.

The reference should have stated that the MMRC **does** review deaths up to a year after pregnancy ends.



Georgia Obstetrical and
Gynecological Society, Inc.

ADMINISTRATIVE OFFICE

2925 Premiere Parkway
Suite 100
Duluth, Georgia 30097

Phone: 770.904.0719
Fax: 770.904.5251

If you would like to send a letter to the editor,
please email letter to president@gaobgyn.org
or mail it to the Society's office

www.gaobgyn.org

FOLLOW US!



Hold tight

Aetna Better Health® Supports
Georgia Chapter of AAP and the
Georgia OBGYN Society

Contact ABHNetwork@aetna.com
if you have questions

Aetna.com

©2022 Aetna Inc.
2020297



Aetna Better Health® of Georgia