



Dave Chappelle & Michelle Obama Joke That White People Are 'Not Good' At Being President On Her Podcast

- Page A3



Hoarding Disorder: Causes, Effects & Treatment Explained

- Page A8

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Advocates Rally at State Capitol to Demand More Funding for DV Survivors & Heat Protections for Incarcerated People

By Antonio Ray Harvey
California Black Media

In July 2024, Adrienne Boulware, a 47-year-old mother and grandmother, died from complications related to extreme heat exhaustion while incarcerated at the Central California Women's Facility (CCWF) in Chowchilla, according to her family.

Assemblymember Mike Gipson (D-Carson) hopes his legislation, Assembly Bill (AB) 2499 — also known as the "Adrienne Act" — will help prevent tragedies like Boulware's death in California prisons.

"It is no secret that our state prisons have aging infrastructures that have inadequate ventilation systems," Gipson said. "It should come as no shock that indoor temperatures in these facilities exceed 90 degrees, which means it gets really hot."

On May 4, Gipson spoke at the Survivors Speak California Rally at the State Capitol to advocate for AB 2499, which focuses on heat and health protections in state prisons. The three-day event was organized by Californians for Safety and Justice, a project of the Crime Survivors for Safety and Justice network.

The bill passed the Assembly Public Safety Committee on April 22 with a unanimous 7-0 vote. It was referred to the Assembly Appropriations Committee on May 6 and placed in the Suspense File while lawmakers assess the overall fiscal impact of the legislation.

Boulware's family attended the rally in support of the measure, which would require the California Department of Corrections and Rehabilitation (CDCR) to establish a pilot program addressing

extreme heat by July 1, 2027, in at least three prisons located in different climate zones.

Boulware's daughter, Michela Nelson, said her mother frequently complained about heatwaves during the summer months in prison. CDCR stated that Boulware's death — she was also known as "Twin" — appeared to be related to pre-existing medical conditions rather than extreme heat.

"My mother was not just a mother of four and grandmother of 12. She was a mother to many inside and outside of the prison," said Nelson, the eldest of Boulware's children. "My mother didn't die because she was sentenced to death. She died because she was left in conditions no human being should ever endure."

AB 2499 would formally create the Climate Justice in Prisons Emergency Response Act. The legislation would require CDCR to develop a long-term plan for installing heating, ventilation, and air-conditioning (HVAC) systems and shade structures in existing facilities.

In a letter to the Assembly Appropriations Committee, Gipson wrote that the state has a "responsibility to ensure that every individual in its care is housed in safe and humane conditions" as climate impacts "intensify, dangerously high temperatures and poor air quality in prison facilities."

Gipson also noted that state workers and lawmakers are not expected to work under unsafe conditions.

"These buildings that house state workers have ventilation and have air conditioning," Gipson said at the rally. "Incarcerated individuals should have the same air conditioning, the same ventilation, (and) the same rights as state employees."

The Survivors Speak California Rally coincided with other advocacy events at the Capitol supporting survivors of violent crime.

On May 5, Jazz LedBetter and other advocates rallied nearby to urge lawmakers to include \$100 million in the state budget for domestic violence and sexual assault services.

Assemblymember Pilar Schiavo (D-Chatsworth) and Sen. Susan Rubio (D-Baldwin Park) served as keynote speakers. Both lawmakers have publicly shared their own experiences as survivors of assault.

LedBetter, a survivor of human trafficking, is also an author, activist, and artist who uses her experiences to advocate for human trafficking prevention. She shares her story of survival, addiction, and recovery in her self-published book, "Harlot Heart: Tributes To Triumph."

"Before I say anything, I want everyone here to take a moment and think about someone finally reaching out for help, and there's no one here to answer," LedBetter said during her presentation on the east lawn of the Capitol before a coalition of service providers, lawmakers, and advocates.

Advocates said the funding is needed to



Jazz Ledbetter, a survivor of sex trafficking, urged California lawmakers on May 5, 2026, to increase funding for services supporting domestic violence and sexual assault survivors. Advocates say the funding is needed to help close a gap created by a significant decline in federal Victims of Crime Act (VOCA) funding. CBM photo by Antonio Ray Harvey.

help close a gap caused by a sharp decline in federal Victims of Crime Act (VOCA) funding. Organizations across the state that provide emergency shelter, counseling, and support services for survivors of domestic violence, sexual assault, and child abuse are seeking additional funding to avoid service cuts.

LedBetter said that without adequate funding for shelters and support programs, many victims are forced to remain in dangerous situations. Survivors need trauma-informed care to recover and rebuild their lives.

"I am here because I am proof. Proof of what happens when someone gets support. Don't let this funding (shortfall) be the reason someone doesn't make it out," LedBetter said. "Because the difference between survival and unfortunately common sad stories, is whether or not someone is there (to help) when it matters the most."



Xavier Dillard

Black Streamer Breaks Guinness World Record, Completes 12,412 Pull-Ups in 24 Hours

HARRISONBURG, VA — Xavier Dillard, a 22-year-old black streamer from Virginia, set a new Guinness World Record by completing 12,412 pull-ups in 24 hours. He outperformed the previous mark during a nonstop livestreamed endurance challenge that drew wide nationwide attention.

Dillard, who goes by TaterMaster online, began the attempt at 10 a.m. on Saturday, May 2. He wrapped it up 24 hours later at a CrossFit gym in Harrisonburg, Virginia, while streaming the entire effort on YouTube as witnesses and local media monitored the challenge in real time.

As the hours dragged on, the physical strain became severe. Dillard later described moments where exhaustion took over, but stopping was not an option. "I thought I was dying, but for some reason I said I wanted this record so bad, I just had to keep going," he said, according to HypeFresh.

The challenge traced back to a personal rivalry years earlier. Dillard recalled competing with a friend in a basement gym where pull-ups became the one movement he could not win. While he outperformed his friend in other exercises, pull-ups became a lasting frustration that stuck with him.

That competition pushed him into serious, structured training. He gradually increased his workload, starting with smaller sets like 12 reps and building over time. His training later included high-volume sessions with hundreds of pull-ups completed in timed intervals after regular workouts, eventually reaching around 2,400 reps in peak training days.

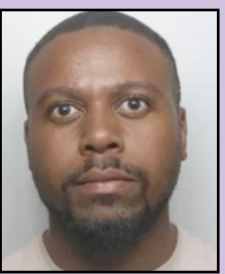
Before his fitness breakthrough, Dillard described himself as far from a natural athlete. In high school cross-country, he often finished among the slowest runners. He said progress came through repetition, discipline, and consistent effort rather than natural talent.

The attempt gained momentum online as it unfolded. Local news stations covered the event on-site, showing Dillard maintaining strict form and steady rhythm on the bar. Clips spread quickly on X, including posts from @KollegeKidd, turning the endurance test into a viral fitness moment.

By the end of the livestream, Dillard pushed past the 12,400 mark and secured the new Guinness World Record. The final count settled at 12,412 pull-ups, setting a new benchmark for 24-hour endurance challenges and placing his name among global record holders.

Man Gets 3 Years in Prison for Secretly Filming Women Using Hidden Cameras

NORTHHAMPTON, ENGLAND — Jean-Pierre Francis, a 33-year-old black man from Northampton, England, has been sentenced for secretly recording multiple women using hidden cameras placed in homes and workplaces over several years. He disguised the devices in everyday objects and recorded victims without consent.



Jean-Pierre Francis

According to Local 12 News, police launched an investigation in May 2024 after a woman discovered a hidden camera inside her bedroom. Officers collected evidence and linked the device to Francis through forensic analysis and digital tracing.

A deeper search of his equipment uncovered a large number of recordings. Investigators found hundreds of images and videos taken between 2015 and 2025. The cameras had been concealed inside common items such as pens, USB flash drives, electrical outlets, and a soap or shower gel bottle.

Authorities confirmed that six women were targeted. The victims were aged between 20 and 60. All were recorded in private spaces where they expected full privacy and security.

Francis was charged with six counts of voyeurism. He pleaded guilty on March 13. On April 17, the court sentenced him to three years and six months in prison.

The court also ordered all devices used in the offenses to be destroyed. Francis received a 10-year sexual harm prevention order and was placed on the sex offenders' register for life.

Investigators said the case required a detailed review of multiple devices over a decade. They added that the evidence showed a long-running pattern of secret surveillance carried out in private settings.

More and More, Black Californians Are Worried About Rising Costs of Housing, Energy, Food and Gas

By Antonio Ray Harvey
California Black Media

Housing, energy, food and gas are four essential household expenses, and their rising costs are forcing residents—especially lower-income households—to make difficult trade-offs, Assemblymember Rhodessa Ransom (D-Stockton) said at a conference on affordability last week in Sacramento.

Ransom, a member of the California Legislative Black Caucus (CLBC), noted a shift in consumer behavior, stating, "Before people used to choose between things that they wanted and things that they needed."

"Now, what we're hearing from constituents is they are prioritizing their needs differently," she said. "Because of the affordability crisis, it's no longer about choosing between other needs. Our constituents are now saying 'what needs to be prioritized?' Gas and food are at the top of the list."

Ransom made the comments about affordability at Capitol Weekly's informational conference titled "Affordability: The Cost of Living in California," which was held on April 30 at the University of California's Student and Policy Center.

Co-hosted with the University of California Student and Policy Center, the political conversations focused on identifying policy solutions to the state's extremely high prices for energy, food, and essentials.

The keynote speakers at the conference were former Assemblymember Lorena Gonzalez, president of the California Federation of Labor Unions, and Mike Madrid, a political strategist, author, and senior fellow at UC Irvine.

Conversations about affordability are taking on greater urgency as the election season kicks in, speakers said.

According to an April 2024 report by the Greenlining Institute, low-income Black Californians are struggling with affordability due to a combination of historical systemic barriers and modern economic pressures. The Greenlining Institute is a California-based policy, research, and advocacy nonprofit founded in 1993 to fight systemic racism and economic injustice.

Black households in California experience the highest levels of rent burden; approximately 65% of Black renters, according to the Greenlining report. Historical "redlining" and ongoing discrimination have restricted homeownership. Black families also

pay 43% more for energy than White households, partly because they are more likely to live in older, less energy-efficient rentals.

In addition, roughly 1 in 3 Black adults (36.5%) reported household food insecurity in late 2025, more than double the rate for White adults. This is often exacerbated by "food deserts" in predominantly Black neighborhoods.

In March, Assembly Minority Leader Heath Flora (R-Ripon) expressed concerns about affordability in California, describing it as a crisis where families are being "pushed to the edge."

Flora criticized the state government for delaying action while living expenses continue to rise. He noted that affordability issues vary by region, but particularly cited gas prices as a major expense draining family budgets in his district.

"Californians should not have to choose between putting food on the table or filling up their car," Flora stated. "We need to cut costs now. Not tomorrow, not next week, not next month. Now."

Cuts to the federal Supplemental Nutrition Assistance Program (SNAP) funding are being driven by the Trump Administration's One Big Beautiful Bill Act (H.R. 1), which is reducing federal spending by approximately \$187 billion through 2034.

Those reductions are putting more pressure on the state to help, Ransom said.

"At the end of the day, we're trying to figure out where we can backfill, and that means we have to make changes to our budget," Ransom said at the conference. "Just like families are choosing what they have to prioritize, as a state, we're asking agencies to figure out what we need to prioritize."

According to the AAA Gas Prices website, as of May 8, California's gasoline prices averaged over \$6 per gallon in some areas, with various locations experiencing spikes of \$7 to \$8 per gallon. In California, fuel prices are driven by refinery maintenance and market volatility, while high food prices are linked to rising transportation costs, experts say.

Last month, Gov. Gavin Newsom announced that the state was stepping in to offer Californians some relief with their energy bills via the California Climate Credit program, which offered over \$1.4 billion in residential credits distributed in April — \$894 million for electricity and \$520 million for natural gas.



The credits are not taxpayer money, but rather a rebate from the state's Cap-and-Invest program, which requires large emitters to pay for their greenhouse gas emissions. The program is managed by the California Air Resources Board.

"Thanks to the Legislature's partnership, the Golden State is delivering on its promise to put money back in Californians' pockets, and we're making it work smarter and harder for households across the state," Newsom stated.

World & Nation



Tom Steyer (back left, in dark suit), the billionaire climate activist running for California governor, pauses for photos with members of the California Nurses Association, a progressive union that endorsed him in part due to his strong support of single-payer healthcare. (Christine Mai-Duc/KFF Health News)



The campaign bus for billionaire activist Tom Steyer, who has made single-payer healthcare a central pillar of his run for governor, in downtown Oakland, California. In 2020, Steyer ran for president opposing single-payer healthcare. (Christine Mai-Duc/KFF Health News)

In California Governor Race, Single-Payer Is a Litmus Test. There's Still No Way To Pay for It.

By Christine Mai-Duc

When Gavin Newsom ran for California governor in 2018, his support for a state-run single-payer healthcare system was considered a risky move and earned him hefty labor endorsements.

Today, leading Democrats in the wide-open race to succeed Newsom have embraced single-payer as a political necessity, an answer to voters fed up with rising premiums and other spiraling healthcare costs.

But with no clear front-runner, they are sparring among themselves in debates and political ads over who is most committed to a government-run model. No candidate has outlined how California would fund comprehensive health coverage for its 40 million residents, leaving voters unable to discern which candidate has a concrete plan for the nation's most populous state.

Healthcare and political experts said the concept of single-payer has shifted from progressive pipe dream a decade ago to today's mainstream talking points in a state where Democrats outnumber Republicans nearly 2 to 1. Democrats have pledged the model as the best way to lower costs in an attempt to woo voters worried about affordability as ballots arrive for the June 2 primary. The top two Republicans, meanwhile, have dismissed government-run healthcare as a "disaster" and "socialism."

"In many ways, single-payer healthcare has become a progressive litmus test," said Larry Levitt, a former White House policy adviser and a healthcare

expert at KFF, a health information nonprofit that includes KFF Health News.

Few voters fully understand the term single-payer, let alone expect the next governor to achieve it, Levitt said. Rather, he added, the term has become more of a signal to voters about a candidate's approach to healthcare reform.

Xavier Becerra, the former U.S. Health and Human Services secretary, who for decades backed single-payer healthcare in Congress, has come under criticism from opponents for a nuanced but clear shift away from single-payer. It came after Becerra secured an endorsement from the California Medical Association, a powerful group representing doctors and a longtime opponent of single-payer healthcare bills in California.

At a May 5 debate put on by CNN, Becerra declared his support for "Medicare for All," a proposal for a federally run system that's been stalled for years, but he declined to say whether he'd pursue a California-led effort. He said his immediate focus would be on mitigating the drastic federal cuts expected to hit low-income and disabled enrollees in Medi-Cal, the state's Medicaid program, which covers more than a third of residents.

Becerra is counting on voters not to distinguish between the often-confused terms single-payer, Medicare for All, and universal coverage, noting during the debate that "Californians don't care what you call it, so long as they have affordable healthcare."

"A lot of people aren't clear what single-payer is, and they need a metaphor to understand it," said Celinda Lake, a Democratic strategist and one of the lead pollsters for former President Joe Biden's 2020 campaign.

Billionaire activist Tom Steyer, who's touted his self-funding as a signal he can't be bought, has emerged as the race's most vocal advocate of single-

payer after opposing it during a short-lived 2020 presidential bid.

As governor, Steyer has said, he would pass legislation backed by the California Nurses Association that has failed to come to fruition under Newsom's tenure. Pressed on how he would cover the estimated \$731.4 billion cost, Steyer told KFF Health News that "God is going to be in the details."

At a forum last year, former U.S. Rep. Katie Porter said she didn't believe achieving such a system was realistic in the near term, but the Orange County Democrat later told party delegates that she would "deliver single-payer." Former Los Angeles Mayor Antonio Villaraigosa and San Jose Mayor Matt Mahan, Democrats who are trailing their competitors in the polls, don't support single-payer. The top two vote-getters — regardless of party — advance to the November general election.

Some of the most seasoned politicians have failed to deliver single-payer. Newsom, who campaigned on the promise of being a "healthcare governor," dialed back his ambitions upon taking office, choosing instead to pursue "universal access" to health coverage under a series of Medi-Cal expansions and efforts to contain healthcare spending.

To enact single-payer, California would need permission from the federal government to redirect billions of dollars from Medicaid, Medicare, and other funding that currently flows to the system — approval not likely to come from the Trump administration.

More than half of adults nationally say healthcare costs will have a major impact on whom they vote for in November, according an April KFF poll.

Danielle Cendejas, a Los Angeles-based

Democratic consultant who works with state legislative candidates, said single-payer healthcare increasingly appears on candidate questionnaires from small-business advocates as well as hyperlocal Democratic clubs, in state legislative races and national union endorsements.

What most California voters want to hear, Cendejas said, is how candidates plan to give them more immediate relief from higher premiums, expensive drug costs, and long waits to access care.

The high price tag doesn't faze Jennifer Easton, a 63-year-old Democrat from Oakland, who said other countries with similar models have proved they can lower costs. She said she supports a single-payer health system because it's clear to her that Americans have reached the limits of working within the existing system. But she isn't expecting any of the current candidates to succeed in implementing one, and she hasn't decided whom to support.

"No one can in four years," she said. Seeing a candidate enthusiastically support the concept gives her a good idea of their philosophy. "It is, if we're lucky, a 20-year, 25-year plan."

Rob Stutzman, a Republican political consultant who advised former Gov. Arnold Schwarzenegger, said while Americans may be supportive of single-payer in polls, focus groups suggest that approval drops quickly when voters realize it could mean losing their current doctor or insurance plan.

At the CNN debate, Steve Hilton, the Republican candidate President Donald Trump has endorsed, said Californians would end up with subpar patient care and "taxes sky high to pay for it," like in his native United Kingdom.

Instead, Hilton suggested the state stop providing "free healthcare for illegal immigrants who shouldn't even be in the country in the first place."

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Why Post-Launch Monitoring is Critical for Long-Term Medical Device Success

By Crista Dyer

Post-launch monitoring enables medical device manufacturers to detect safety issues, track real-world performance, and maintain regulatory compliance after a product reaches the market. Pre-market trials are limited in size and scope and cannot fully account for the diversity of patients and clinical conditions encountered in everyday practice.

Continuous surveillance provides the data needed to respond quickly when problems arise and sustain device effectiveness long term.

According to the FDA, its Medical Device Reporting system logs over two million adverse event reports each year, a volume that reflects how much about a device's real-world behavior remains unknown at launch. Those reports represent real patients and real clinicians encountering issues that no trial protocol could fully anticipate. A device that performs flawlessly under controlled study conditions can behave very differently across varied populations, clinical settings, and years of continuous use. For manufacturers, building strong post-launch surveillance means staying ahead of those variables and having the evidence to act when it matters most. Why Can't Pre-Market Testing Predict Real-World Performance?

Pre-market trials are basically a starting point for understanding how a device behaves. They rely on a fairly small, carefully selected group of patients in controlled conditions, and that means there are real limits to what they can tell you about device effectiveness across diverse populations. Clinical practice is naturally more unpredictable, with patients of varying ages, health histories, and medical complexity. Trials simply cannot replicate that variety. Several real-world factors can actually affect how a device performs after launch: Patients with multiple co-existing conditions that weren't represented in trials

Clinicians with varying levels of training and familiarity with the device

Differences in clinical environments, equipment, and standard procedures

Long-term wear and tear that short-duration studies can't capture

Post-launch analysis is what gives manufacturers a clear picture of how a device performs once it's in the field. Real-world data can surface trends, like a higher-than-expected failure rate, for instance, or a usability problem that only appears in specific patient groups, and catching those trends early really does make a difference. Protecting Patients and Staying Compliant

Regulatory bodies like the U.S. Food and Drug Administration expect manufacturers to keep monitoring their devices after market entry. Medical device monitoring is typically a formal



requirement in most major markets, and the data collected feeds directly into safety decisions and risk management updates. Consistent monitoring gives manufacturers the data they need to act on performance issues before they escalate. Monitoring Strategies That Support Compliance There are several tools manufacturers typically use to stay on top of post-market performance, and each one captures a different type of data. Each approach generates specific findings that help manufacturers spot and respond to emerging issues. Some common monitoring strategies include: Complaint management systems that log issues reported by clinicians and patients

Post-market clinical follow-up studies that track outcomes in real-world patient populations

Device registries that collect long-term performance data across large groups of users

Vigilance reporting systems that flag adverse events to regulators in near real-time

When manufacturers identify a problem, they can use that monitoring data to trigger corrective action: a design change, a manufacturing update, or revised instructions for use. Acting quickly on that data is what keeps devices safe and keeps manufacturers in line with their regulatory obligations. What Does Post-Launch Monitoring Mean for Your Bottom Line?

Manufacturers that invest in strong post-market surveillance tend to see returns that go well beyond regulatory compliance. Long-term medical success depends on a device continuing to perform reliably in practice, and that only happens when manufacturers actively track performance data and act on it. Frankly, the commercial case for monitoring is just as strong as the safety case. Reputation and Product Longevity A device that consistently delivers safe, effective results builds trust with clinicians and the health systems that use it. That trust translates into continued adoption, stronger referrals, and a longer commercial lifespan. Post-market performance data can actually support the marketing of next-generation medical

devices, since real-world evidence is a powerful tool in any commercial strategy. AI-enabled devices really deserve special attention here. These devices learn from data, so their performance can shift as patient populations and clinical environments change over time. Monitoring inputs and outputs on an ongoing basis is the only way to catch that kind of drift before it affects patient outcomes. Frequently Asked Questions

How Long Should Post-Launch Monitoring Continue After a Device Reaches Market?

Post-launch monitoring typically continues throughout the device's commercial life. Regulatory frameworks in most markets require ongoing surveillance for as long as the device remains available to patients, and some obligations can continue even after a product is withdrawn from sale. Who Is Responsible for Post-Market Surveillance? The manufacturer typically carries the primary responsibility for setting up and running post-market surveillance. Regulators set the requirements and review submitted data, so in practice, it is a shared system with the manufacturer handling day-to-day operations. How Does Post-Launch Monitoring Differ Between the FDA and EU Medical Device Regulation Frameworks? The EU Medical Device Regulation framework, introduced in 2021, places significantly stricter demands on manufacturers than earlier EU rules, including more frequent reporting and written surveillance plans. The U.S. Food and Drug Administration's approach is similarly comprehensive, yet uses different reporting timelines and documentation requirements. Manufacturers operating in both markets need to manage these separately. Can Post-Launch Data Be Used to Support a New Indication or Labeling Update?

Yes, real-world evidence gathered through post-market surveillance can actually support regulatory submissions for expanded indications or updated labelling. Manufacturers often use this data to strengthen their clinical evidence base over time, and regulators in many markets actively encourage this kind of evidence generation. The Foundation of Long-Term Device Success Post-launch monitoring is a strategic function that shapes device safety, performance, and regulatory standing long after market entry. Real-world data surfaces what pre-market testing cannot catch, and manufacturers who invest in robust surveillance are better equipped to act on emerging issues, extend product longevity, and earn trust with clinicians and patients.

From complaint systems to post-market clinical follow-up studies, the right monitoring infrastructure defines a device's lifespan. Visit our website to explore practical guidance and build a monitoring strategy that delivers long-term medical device success.



"There's Nothing Worse" - Kevin Hart on the Reason Why He Stopped Hanging Out With Shaquille O'Neal and Joel Embiid

Kevin Hart has built a reputation for being fearless around NBA stars — constantly joking, teasing, and inserting himself into their world. But the same energy has often made him an easy target for some of the league's biggest personalities, especially seven-foot centers like Shaquille O'Neal and Joel Embiid.

At just 5'4", Hart is already at a massive disadvantage, and when you combine that with his habit of provoking reactions through humor, it creates a perfect setup for playful payback. Unfortunately, that is something Hart doesn't like, especially when O'Neal and Embiid intentionally embarrass him in public.

Hart found himself being troubled by O'Neal and Embiid

During his appearance on "The Big Podcast,"

Kevin admitted that things have reached a point where he has started avoiding hanging out with Shaquille and Joel, as these former MVPs would casually pick him up in public settings, regardless of whether the comedian's own kids were around.

Moreover, Hart emphasized that when the 2023 MVP joined in with the same antic, he didn't take long to realize that what usually starts as harmless banter can quickly turn into moments where he's the punchline in a physical manner.

"He does it all the time. Now he stopped because he's older, so his back can't handle it. His back is the same, but he would pick me up. He does it, and Joel Embiid does it too, so I stopped talking to Joel in public, too. It's not even that they picked me up," Hart recalled. "There's nothing worse than somebody picking you up, but you can't do s—t

about it. Even when I'm like, 'Yo man, chill. No, don't do s—t.' He tries to just let it happen. Shaq used to pick me up and be like, 'Ah, what's up?' Then he'd put me down."

Shaq holds no remorse over embarrassing Kevin

Still, there's no bad blood here. O'Neal made it clear that their decades-long friendship has been built on mutual respect and embracing each other's entertainment value. Thus, they understand how to play off each other's personalities to create memorable, humorous moments for fans everywhere.

"A lot of people don't know we've been friends a long time, but Kevin tried to fight me one time," Shaq said. "He tried to fistfight me because he called me one time and said, 'Hey, I need you to do

this skit for me.' I said, 'What's the skit?' He said, 'Everybody laughs at you being a cop. I need you to pull me over.'"

Safe to say that this dynamic is the real key here. Both Hart and O'Neal are natural entertainers, and whenever they cross paths, something funny is almost guaranteed to happen. But even within that, Kevin has drawn the line — being picked up like a kid in public is one joke he'd rather end.

In the end, this is a classic case of chemistry between two larger-than-life personalities — with a very literal size mismatch that keeps tipping the joke in one direction.

This story was originally published by Basketball Network on May 11, 2026, where it first appeared in the Off The Court section. Add Basketball Network as a Preferred Source by clicking here.

Dave Chappelle & Michelle Obama Joke That White People Are 'Not Good' At Being President On Her Podcast



Michelle Obama is back with another podcast episode that's turning some heads and causing a buzz, especially due to what her guest, Dave Chappelle, had to say.

The famous comedian was recently interviewed on the former first lady's podcast, In My Opinion, where they talked about a variety of subjects, including President Donald Trump's current administration. At one point, as he told a story about his daughter, Dave made a controversial joke about how white people don't make "good" presidents, a bit that ended up garnering some mixed reactions online. Read more about the situation and viral moment below.

Dave Chappelle Jokes About White People Not Being 'Good' Presidents On Michelle Obama's Podcast

Though Barack and Michelle Obama are both well known for a lot of things and many impressive accomplishments, since they departed the White House in 2017, Michelle's podcast has to be one of the biggest things she's done.

Earlier this week, on her podcast, In My Opinion, which she hosts with her brother, Craig Robinson, she sat down with Dave Chappelle, the famous and controversial comedian. The two talked about a variety of subjects, yet focused for a long time on the state of the media, community, shifts in his career, and more. However, things really seemed to heat up when he began talking about President Trump and everything going on with his eventful second term.

At one point, he started talking about how he's trying to help his 16-year-old daughter, who was born under the Obama administration, deal with all the "appalling" headlines of today's political climate, noting he feels it "doesn't seem like it's ever going to end."

"My daughter is 16, so Donald Trump is, like, the first white president she's ever seen," he said, to which Michelle responded while grinning, "I know, right?"

"And my baby's like, 'Oh no — they're not good at it, Daddy,'" he continued while laughing with the host.

Dave Calls The Current Political Climate 'Insufferable'

Though the best-selling author didn't chime in too much while her podcast guest made the insinuating comment about white presidents, mostly laughing at the humor in his words, she did allow him to lean in and vent about his feelings towards what's going on in American politics right now.

At one point, the 52-year-old performer mentioned how much community helps him get through it all, giving listeners advice on how to deal with the stress as well.

"My community coming together and in tough times - our family, we have had tremendous losses recently, people in our family passed away, and the community picked us up," he said. "That made me hopeful. The little things mean so much more now."

Comedian Sinbad Returns to Stand-Up Stage After 2020 Stroke

PASEDNA, CA — Comedian Sinbad returns to the stand-up stage more than five years after a 2020 stroke affected his mobility, announcing new shows in Pasadena. He shares recovery updates and plans to perform alongside his daughter Paige, who opens the set.

Sinbad posted a video on Instagram on April 29 addressing questions about his return to comedy. He said he still cannot walk following the stroke, but plans to perform at the Comedy Ice House in Pasadena on May 10th.

According to People, he described the shows as his way of stepping back into stand-up after years away from the stage. He also said he is looking forward to reconnecting with audiences in person.

"It's just the beginning of me coming back," he said.

Sinbad added that he has new material ready and joked about his return, saying he plans to "be talking more trash than I ever talked" once he is back on stage.

He also confirmed that his daughter Paige will open for him during the Pasadena shows. He said it marks the first time they will perform together as comedians. Paige shared that many comedy clubs are not ADA accessible, which has made it difficult for Sinbad to attend her performances.

Alongside his return to stand-up, Sinbad has also resumed acting work. He appeared in Tyler Perry's film Straw, starring opposite Taraji P. Henson,

marking another step back into entertainment after his health setback.

Sinbad suffered a stroke in October 2020 after a blood clot traveled from his heart to his brain, according to his family. They later shared updates expressing gratitude for public support and credited prayers and encouragement during his recovery.

In 2024, he made his first public appearance since the stroke through a Zoom reunion with the A Different World cast during a tour stop at historically Black colleges and universities in Atlanta. That appearance marked his gradual return to public life before stepping back onto the comedy stage in 2026.



Comedian Sinbad

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FICTITIOUS BUSINESS NAME STATEMENT
FILE NO: 2026 085130
 Doing business as:
WITHFOUND / FOUND COLLECTIVE
 at 8605 SANTA MONICA BLVD #317595, WEST HOLLYWOOD, CA 90069
 Mailing Address: same
 County: Los Angeles
 Full name of registrant(s):
KEYANNA REES INC at 8605 SANTA MONICA BLVD #317595, WEST HOLLYWOOD, CA 90069
 State of incorp. or org.: CA
 The business is conducted by: a Corporation
 SIGNED: **KEYANNA REES, CEO**
 The registrant commenced to transact business under the fictitious business name or names listed above on: 04/2026
 This statement filed with the County Clerk of Los Angeles County on: April 17, 2026
 DEAN C. LOGAN
 Los Angeles County Clerk
 By: Savannah Rodriguez, Deputy
 This fictitious Business Name Statement expires five years from the date it was filed in

the County Clerk's Office. A new fictitious business name statement must be filed before that time. The filing of this statement does not of itself authorize the use in this state of a fictitious business name in violation of the rights of another to a trademark or trade name under federal, state, or common law (see section 14411 ET SEQ., business and professions code). I declare that all information in this Statement is true and correct. (A) Registrant who declares as true information which he or she knows to be false, is guilty of a crime. This statement expires on April 17, 2031
LOS ANGELES NEWS OBSERVER
PUB: Apr 30, May 7, 14, 21, 2026
FICTITIOUS BUSINESS NAME STATEMENT
FILE NO: 2026 086374
 Doing business as:

AVYN UPHOLSTERY CLEANING at 437 Palm Dr Apt A, Glendale, CA 91202
 Mailing Address: same
 County: Los Angeles
 Full name of registrant(s):
YEVHENI AVDOSHYN at 437 Palm Dr Apt A, Glendale, CA 91202
 The business is conducted by: an Individual
 SIGNED: **YEVHENI AVDOSHYN, Owner**
 The registrant commenced to transact business under the fictitious business name or names listed above on: 02/2026
 This statement filed with the County Clerk of Los Angeles County on: April 21, 2026
 DEAN C. LOGAN
 Los Angeles County Clerk
 By: Lorena Valdez, Deputy
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FICTITIOUS BUSINESS NAME STATEMENT
FILE NO: 2026 095969
 Doing business as:
STITCH & ROSE / JUST SAY YESSIE
 at 1809 E 57th Street, Long Beach, CA 90805
 Mailing Address: same
 County: Los Angeles
 Full name of registrant(s):

YESENIA MELGAR at 1809 E 57th Street, Long Beach, CA 90805
 The business is conducted by: an Individual
 SIGNED: **YESENIA MELGAR, Owner**
 The registrant commenced to transact business under the fictitious business name or names listed above on: 05/2021
 This statement filed with the County Clerk of Los Angeles County on: May 1, 2026
 DEAN C. LOGAN
 Los Angeles County Clerk
 By: Cortney Maffitt, Deputy
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 License #:
 Date of Sale: **05/21/2026**
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PUB: May 14, 2026

FICTITIOUS BUSINESS NAME STATEMENT
FILE NO: 2026 101547
 Doing business as:
INSTRUMENTS OF GLORY SUPERVISED VISITATION SERVICES / CROSS FAMILY SUPERVISED VISITATION SERVICE PROVIDERS / HEAVENLY WONDERS CHILD SUPERVISION / INSTRUMENTS OF HIS GLORY SERVICES / UNLIMITED TOUCH at 407 N PACIFIC COAST HIGHWAY #1070, REDONDO BEACH, CA 90277
 Mailing Address: same
 County: Los Angeles
 Full name of registrant(s):
NEFERTITI LAFONNE HAYNES at 407 N PACIFIC COAST HIGHWAY #1070, REDONDO BEACH, CA 90277
 The business is conducted by: an Individual
 SIGNED: **NEFERTITI LAFONNE HAYNES, Owner**
 The registrant commenced to transact business under the fictitious business name or names listed above on: N/A
 This statement filed with the County Clerk of Los Angeles County on: May 7, 2026

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 Los Angeles County Clerk
 By: Rosylee Guzman, Deputy
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Features

Bathe Like Rihanna: Discover the Benefits of Walk-In Bathtub Installation

By Billie Pollisotto

Walk-in bathtub installation makes bathing safer, easier, and far more comfortable without sacrificing a polished, high-end feel. It removes the need to step over a tall tub wall, adds built-in support, and turns a routine task into a more relaxing, low-stress experience. For homeowners planning or upgrading for comfort, it is a practical change that delivers immediate impact.

Self-care has evolved into a full lifestyle, shaped by brands like Fenty Beauty and Rihanna's influence, where comfort and confidence go hand in hand. That same thinking is now showing up in how people design their homes, especially in bathrooms.

Walk-in bathtubs are part of that, blending accessibility with a spa-like atmosphere, and replacing awkward, cautious movement with a smooth, confident routine that feels considered from start to finish.

What Makes Walk-In Tubs Different From Standard Bathtubs? Walk-in bathtub installation changes the way a bath feels from the moment you turn the water on. Instead of a low, reclined soak, these tubs are designed for an upright, more controlled experience that keeps everything within easy reach.

A sealed door, a built-in seat, and a deeper basin create a contained space that feels more intentional than a standard tub. Water levels tend to be higher, which gives that full-body soak without needing to stretch out or reposition constantly. The overall vibe leans closer to a personal retreat than a quick rinse. Features like temperature controls, jets, and fast-drain systems bring in that polished, at-home luxury energy. Bathroom Safety Benefits: Can Walk-In Bathtubs Help With Aging In Place? Accessible bathroom solutions can support aging in place by making the bathroom easier to use over time. It focuses on one of the most frequently used spaces in the home and helps reduce the need for future renovations. Planning ahead allows homeowners to stay in familiar surroundings longer. Instead of reacting to sudden changes, this type of upgrade creates a more stable and predictable daily routine. Senior-friendly bathroom design also supports long-term comfort without disrupting the overall look and feel of the home. A well-designed walk-in tub blends into the space while quietly improving how the bathroom functions day to day. What

Features Should Homeowners Look For? The right features during walk-in bathtub installation come down to how the tub feels in real use, not just what looks good on paper. A well-designed model should feel intuitive from the first use, with controls and components placed where they make sense without forcing adjustments. Start with the basics that shape the overall experience. A properly sealed door, a comfortable seat height, and flooring that adds grip all influence how the tub performs day after day. Small details like how quickly the tub fills or how smoothly it drains can also change the rhythm of the routine in noticeable ways. From there, added features can shift the atmosphere. Some homeowners prefer a simple setup that focuses on ease. Others look for options like heated surfaces or jet systems that turn the space into something more restorative. When Is The Right Time To Consider Installation? The right time for walk-in bathtub installation is usually when you are already thinking about improving your bathroom, not when you are forced to. Making the decision early gives you more control over the design, timing, and overall experience instead of rushing into a quick fix. A bathroom renovation is one of the most natural moments to consider a walk-in tub. Since work is already happening, it is easier to incorporate a new tub without adding extra disruption or cost later on. It also makes sense when your home starts to feel like a long-term space rather than a temporary stop. Smaller upgrades that improve daily routines begin to matter more, especially in rooms you use every single day. Some people choose to install one after dealing with repeated inconvenience in the bathroom. When a routine starts to feel less smooth or takes more effort than it used to, that is often a sign the space is ready for a change. Thinking ahead keeps the process calm and intentional. Instead of reacting to a problem, you are shaping a space that continues to work for you over time. Frequently Asked Questions What Is the Average Cost of a Walk-in Bathtub Installation?

The cost of walk-in bathtub installation depends on several moving parts, including: The type of tub

The condition of your existing plumbing
The layout of your bathroom
Any added comfort features

Some projects stay straightforward, while others require adjustments that increase the overall



Shutterstock / NNPA.

scope. Installation tends to be more affordable when the new tub fits into the current space without major changes. Costs can rise when updates are needed behind the walls or when homeowners choose models with added functionality that require more setup. Do Walk-in Bathtubs Increase Home Value? Walk-in bathtubs can increase home value, but the impact depends on the buyer and the market. They tend to appeal most to: Older adults
Multi-generational households
Anyone thinking about long-term accessibility
In many cases, the real value comes from usability rather than price. A walk-in tub can make a home feel more practical and future-ready, which can appeal to the right buyer. Homes that still include a standard tub or shower alongside it usually maintain broader appeal. Do Walk-in Bathtubs Require Plumbing Upgrades? Walk-in bathtubs

do not always require plumbing upgrades, but it depends on your existing setup. Many installations can connect to current plumbing with minor adjustments, especially if the new tub replaces a standard one in the same location. Upgrades may be needed if your home has older pipes, limited water pressure, or a smaller water heater that cannot handle the tub's capacity. The best bathroom remodeling services can assess your system and recommend any changes to ensure the tub fills and drains efficiently. Invest in a Walk-in Bathtub Installation Today
Walk-in bathtub installation can be a great option for many people. Consider your options, and figure out what's right for your needs.

Are you searching for more ways to transform your home? Explore some of our other useful articles.

Retirement Income Planning Mistakes That Leave Seniors Scrambling in Their Golden Years

By Amy Kang

As you enjoy your youth, you should think about retirement income planning. Many retirees face financial suffering because of some planning errors they made in their younger years, such as not considering longevity, ignoring inflation, or claiming Social Security too early. If you aren't too careful, these mistakes can make it hard for you to enjoy your senior years.

Pew Research Center reports that four in ten Americans (40%) aren't confident they'll have enough income to last throughout their retirement years. These fears are common, especially if you don't prioritize senior financial planning early enough. Some common missteps, like skipping contributions, can shrink your nest egg faster as you're older. If you start to plan now, you can avoid desperate struggles in your golden years. What Are the 3 Rs of Retirement? As you think about your retirement years, you should be proactive about retirement income planning. One way you can do that is through the 3 Rs of retirement. Resilience: Helps you adjust your spending habits based on market changes.

Resourcefulness: Shows up when you adopt retirement budget tips and learn how to enjoy life at low costs.

Renaissance: Reflects when you're always willing to find different ways to make money, even as you age.

During your golden years, you should regularly nurture your own resiliency, resourcefulness, and renaissance spirit. It'll help you make the most out of your life. What Are the Retirement Income Planning Mistakes Seniors Make? Retirement income planning is complex. If you make one wrong move, you'll lose a lot of money. Here are some retirement income planning mistakes that can take you many steps backward. Starting Retirement Planning Too Late When you're young, time is your best friend. You should take advantage of compound interest while you're young. However, most people put off saving until they reach their 40s or 50s. If you delay making contributions, it becomes hard to catch up. Starting to let means you can make modest contributions. You'll have to increase your savings rate to meet your retirement lifestyle expectations. Underestimating Medical and Long-Term Care Expenses As per NCOA reports, nearly all seniors (93%) have at least one chronic condition. This statistic shows that a lot of your income may be spent on healthcare when you retire. The expenses you incur are a lot, even if you have Medicare coverage. Unfortunately, most people don't save up for long-term care. Ignoring

Inflation's Impact on Savings A lot of people ignore inflation, yet it will take a huge share of your retirement savings. For example, if inflation is 6% annually, things that cost \$100 today will cost approximately \$179 in ten years. If you don't plan for this situation, your money may not stretch as far into your senior years. Failing to Diversify Investments

Putting all your retirement income in one basket is risky. This strategy can make you lose a lot of money if your investment performs poorly. As part of your retirement income strategies, you should diversify your portfolio. Claiming Social Security Benefits Too Early If you start claiming your Social Security too early, say at 62, you can significantly decrease your lifetime income. This decision can permanently reduce your monthly payments for the rest of your life. Neglecting Tax Implications Tax implications matter. You should know that different accounts have special tax rules. If you fail to consider the tax rules, you'll lose a lot of money in penalties. How Can Seniors Maximize Retirement Income? Once you're aware of the mistakes, the focus goes on how to do things right. So, how can seniors maximize retirement income? Here are retirement savings tips you can implement: Adjust Your Spending and Budget

One of the first steps to increase your retirement income is how you spend your money. Having a budget will give you clarity and control. Here are some retirement budget tips: Focus your spending on necessities like healthcare

Make room for rising costs in your budget
Use digital budgeting tools for efficiency
Control lifestyle creep in retirement

A proactive approach to managing your income helps preserve your retirement savings for a long time. You won't have to worry about going broke. Consider Maximizing Social Security and Making Cost-of-Living Adjustments Social Security is your cornerstone during retirement. Luckily, the government adjusts these benefits each year to keep up with inflation through Cost of Living Adjustments (COLAs). Aside from this, you should delay collecting Social Security benefits. Each year you delay up to age 70, your benefits can grow at about 8%. Frequently Asked Questions What Is the 30-30-30-10 Rule for Retirement?

The rule suggests that you should put 30% of your income into living expenses. Next, place the other 30% to your investments and another 30% to retirement savings. You'll later remain with 10% for unforeseen financial issues that can come up. If you follow this rule, you can easily create disciplined savings habits. With more savings in

your account, you get to boost your retirement security. How Can I Diversify My Investments? Don't just have one investment; you can diversify into different money-making portfolios. Here's how you can diversify: Get into real estate

Try dividend-paying stocks
Explore alternative assets, such as precious metals like gold

Opt for investments like Treasury Inflation-Protected Securities (TIPS)

Make sure you partner with a trusted financial advisor. They will guide you appropriately, ensuring your investments align with your income goals and risk tolerance. How Can Seniors Be Protected from Financial Scams? As a retiree, make sure you consult an advisor before making any investment or paying a lot of money for an item. Scammers often prey on your desire to save money and your naivety in navigating the financial world. Don't

make investment decisions alone. Additionally, always have a bit of skepticism when it comes to the investments you're told to consider. Do your research first, before you make a choice. Elevate Your Retirement Income Planning Tactics


Retirement income planning will tell you whether you'll have a comfortable or stressful life as you age. If you want comfort, it's important to avoid starting late, using Social Security benefits early, and only using one investment channel. With the help of financial experts, build comprehensive retirement income strategies.

Subscribe to our newsletter to learn more investment tips.

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Features

Q&A With Steven Bradford:

Why He Wants Your Vote for California Insurance Commissioner

By Edward Henderson

California Black Media

As California confronts rising insurance costs, market instability, and growing concerns about access and equity, the race for the state's top insurance regulator is drawing increased attention.

Among the candidates is Steven Bradford, a veteran public servant with more than two decades of experience in government, including eight years in the State Senate and five years in the State Assembly.

Known for his work on issues ranging from energy and public safety to economic development, Bradford has also engaged with insurance policy during his time in the Legislature as a member of the Senate Insurance Committee.

Now, as the June primary approaches, he is making his case to voters for why his background and perspective best position him for the role of California's next insurance commissioner.

California Black Media (CBM) spoke with Bradford about his campaign experiences, key issues he plans to solve if elected, and his vision for the insurance commissioner role.

For readers who may not be familiar, what does the Insurance Commissioner do, and how would you use that role to address issues impacting communities in California?

The Insurance Commissioner is both a regulator and an administrator. The office oversees the entire insurance market—approving companies to operate, licensing agents and brokers, and reviewing rate increases or decreases.

It also has enforcement power to hold companies accountable—whether that's denying claims unfairly or failing to serve communities appropriately.

This role is about oversight and action. The commissioner should be a watchdog, not a bystander, especially in a state like California, which has the third-largest insurance market in the world.

Last year, you shifted your campaign from running for lieutenant governor to the race for insurance commissioner. What spurred that decision and what do you hope to achieve in that role?

Insurance impacts every part of people's lives. You can't buy a home without it—that contributes to the housing crisis. You can't legally drive without it—that affects people's ability to work. And businesses can't operate without it.

For years, insurance has disproportionately impacted low-income communities and people of color. While everyone is feeling the strain now, those communities have long been hit hardest. That's why it's critical that insurance is not just available, but affordable.

What sets you apart from the other candidates in this race?

My record: 26 years of public service. I've shown up, stood up, and spoke up for Californians.

I'm also not using this position as a steppingstone. For decades, people have treated this office as a launchpad for higher office. I'm not doing



Hon. Steve Bradford candidate for California Insurance Commissioner

that. This is about doing the work and delivering results. What's needed right now is someone focused on administration and accountability—not political ambition.

A recent Supreme Court decision impacting the Voting Rights Act has raised concerns about representation, especially from minority communities. What message do you have for voters in California regarding the importance of their vote?

It's alarming. If people think this doesn't affect them, they're mistaken. There's a real effort to roll back decades of progress and silence voters.

Your vote is your most powerful tool, and we

have to use it—every election, not just when it feels urgent. This moment is as critical as the 1960s. We fought hard for the right to vote, and now we're seeing efforts to take it away.

What are you hearing from voters as you campaign across the state?

Affordability and transparency. People are struggling with rising costs, and many don't fully understand what their insurance policies cover.

We saw that clearly in places like Altadena and the Palisades—people had insurance but were underinsured. They didn't realize their

coverage wouldn't meet the cost to rebuild. That's unacceptable.

We need more transparency and a more modern Department of Insurance. Right now, it takes over 300 days to approve rate changes in California—far too long. That delay pushes more people onto the FAIR Plan, which is inadequate.

We also have to acknowledge the inequities in the system. The FAIR Plan has roots in discrimination, and today we still see disparities based on ZIP code and income. We need a more competitive and equitable market where consumers actually have choices.

Breaking the Mental Health Stigma of "What Happens in this house Stays in this House"

By Ms. Wanda

Radio Host, Full Circle KDEE-FM

There are lots of reasons why people don't seek assistance when it comes to mental health, especially in our community and it's time we break those barriers. For far too long, we have had this saying in our community of "What happens in this house stays in this house" and that causes stigma and shame for us not to be able to talk about our mental health needs.

I spoke with Dr. Monica Soni, Covered California Chief Medical Officer, about behavioral health as an integral part of wellness and mental, physical, and spiritual healing being key pillars for a holistic approach to healthcare. In honor of Mental Health Awareness Month, I am sharing parts of our conversation, hoping to make a difference in at least one person's life.

Dr. Soni, mental health, suicide prevention and substance use disorders are some of the key issues affecting Blacks and African Americans. How can we overcome the stigma surrounding behavioral health?

Behavioral health includes mental health and substance use disorders, and it shapes how we think, feel, cope, and connect with one another. Reducing stigma starts with open, respectful conversations, even when those conversations are difficult. It also means acknowledging that discrimination and lack of access to housing, employment, and education can affect mental health and well-being. Overcoming stigma requires us to listen without judgment, lead with compassion, and create communities where seeking help is seen as a sign of strength. And it means breaking the belief that we must keep everything inside "our house" instead of talking openly and supporting one another in getting the care we need.

Initiating a conversation is key, but it is also important that we take care of ourselves to feel strong enough to notice and deal with changes in behavior from those around us. How do you think we can become better prepared to have a conversation about mental health?

Maintaining a healthy relationship with those we love and care for is a daily effort. We must be aware that mental health can affect people at different stages in life, from children to adolescents, young adults, and the elderly. Living in a world where social isolation is a real risk, we can each play a role in helping others feel seen, supported, and connected. We must pay attention to behavioral changes, including mood swings and lack of engagement in social activities.

Acknowledging with empathy and compassion that what you are hearing is serious and important signals that you are truly listening. It is important to note that when we see changes, we must check in and not be fearful to have serious conversations. Part of caring for people and being prepared is also knowing about the mental health supports that



exist in California, including the 988 Lifeline which can be texted or called 24/7, 365 days a week.

Why are coverage and access to resources and services important when we are dealing with trauma, stress and so many other things in our lives?

Everyone deserves access to the wellness and support they need. Taking a preventive approach, rather than waiting until needs become more serious, can help people get care earlier and improve overall health and well-being. Healthcare providers, community-based organizations, and suicide support and prevention hotlines are just a few examples of available resources.

Behavioral health screening is covered by Covered California health plans as a preventive benefit. Strong mental health supports better physical health, and when mental health needs go unaddressed, physical health outcomes can worsen.

As someone dedicated to providing information and empowering our communities, I truly believe that eliminating stigmas surrounding mental health is a conversation worth having. Talking with Dr. Soni reinforces my belief that the overall wellness of our communities should be based on a holistic approach focused on the mind, the body and the soul.

Ms. Wanda is a Sacramento-based radio personality and host of "Ms. Wanda's Full Circle Radio" on 97.5 KDEE FM, focusing on empowerment, spiritual, physical and emotional health. Her show frequently covers topics such as womanhood, local community stories, and features guests aimed at community uplift.

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Political Playback:

California Capitol News You Might Have Missed

By Bo Tefu, Antonio Harvey and Edward Henderson
California Black Media

Asm. Jackson Bill Requiring Anti-Hate Speech Training for Calif. Public Officials Sent to "Suspense File"

After a hearing on May 6, the Assembly Appropriations Committee ordered Assembly Bill (AB) 1578 to the Suspense File, delaying action on legislation that would require California public officials to complete anti-hate speech training.

The bill, authored by Assemblymember Corey Jackson (D-Moreno Valley), would add one hour of anti-hate speech instruction to the sexual harassment prevention training already required for state and local officials. The proposal applies to legislators, constitutional officers, city council members, county supervisors and school board trustees statewide and would take effect in 2028 if approved.

"It's time for us to continue to work on and finally go on the offense when it comes to hate racism and xenophobia to make sure that all people are able to live in the state of California with the dignity and honor that they deserve," said Jackson, who also chairs the Assembly Select Committee on Racism, Hate and Xenophobia.

On April 16, the Assembly Committee on Governmental Organization voted 16-5 to advance the measure to Appropriations. Jackson has said the bill is part of a broader legislative package informed by findings from the Commission on the State of Hate and aimed at addressing hate in public spaces, workplaces and institutions.

In the California Legislature, a bill is placed on the "Suspense File" when it has a significant fiscal impact on the state budget — generally costing the state \$150,000 or more from the General Fund or \$50,000 or more from a special fund. Bills sent to suspense are held by the Assembly or Senate Appropriations Committee and reviewed later in a single batch hearing, where lawmakers decide which measures move forward, are amended, or quietly die without a vote.

Jackson said the training would focus on the real-world consequences of inflammatory rhetoric.

Supporters, including the Alameda County Office of Education, say the training would help elected officials better understand how language can perpetuate bias.

"In the current political climate, where discourse can often become polarized and inflammatory, it is more important than ever for elected officials to receive specialized anti-hate speech training," wrote Lucy Carter, director of policy and governance for the Alameda County Office of Education, in a letter supporting the bill.

Opponents, including the California Family Council, argue the term "hate speech" is too subjective and could suppress political disagreement.

The Ladies of Delta Sigma Theta Hold Day of Advocacy at the Capitol in Sacramento

On May 4, members of the Farwest Region of Delta Sigma Theta Sorority, Inc., convened at the California State Capitol for the organization's 23rd annual Delta Days in Sacramento.

The two-day advocacy event brings together chapters from across California to engage directly in the legislative process, connect with lawmakers, and advocate for policies impacting Black communities.

Members of the sorority were honored on the Senate floor by Sen. Laura Richardson (D-San Pedro), who is also a member of Delta Sigma Theta.

Richardson welcomed the Farwest Region during the presentation of a Senate resolution recognizing outgoing Regional Director Kimberly Usher for her leadership and service.

"In addition to the Far West Region, we are led by a fearless leader, regional director Kimberly Usher. She has now served her full term of what's allowed," Richardson said. "We are going to be having our regional conference, but we wanted to give it to her here, officially recognizing her service."

The resolution was co-authored by Richardson and fellow members of the California Legislative Black Caucus (CLBC) and Delta Sigma Theta, Sen. Akilah Weber Pierson (D-San Diego) and Assemblymember Rhodesia Ransom (D-Stockton).

Usher has served in the leadership role since 2022.

A member of the "Divine Nine," Delta Sigma Theta Sorority, Inc., was founded on Jan. 13, 1913, at Howard University in Washington, D.C. The organization was established by 22 women who sought to shift the group's focus from social activities to public service, academic excellence, and



social activism.

"We are founded on sisterhood that is deeply rooted in scholarship, service, and social action," said Weber Pierson, a member of the Gamma Alpha chapter of Delta Sigma Theta Sorority.

"Today, we continue a legacy of empowering communities and upholding the high cultural, intellectual, and moral standards established by our founders over a century ago," she added.

California Black Health Network Is Hosting Virtual Conference on Black Mental Health Crisis

As rates of stress, suicide, and cognitive decline rise within Black communities, the California Black Health Network (CBHN) is convening experts and community leaders for a statewide virtual conference aimed at confronting what organizers describe as a growing public health crisis.

The Behavioral and Mental Health Conference, scheduled for May 13 from 8 a.m. to 1 p.m., will focus on the intersection of mental health, chronic stress, and brain health in Black communities.

CBHN Executive Director Rhonda Smith said the conference was driven by alarming data and firsthand accounts from healthcare practitioners across the state.

"We've seen an increase in suicide rates among Black teens, particularly Black boys," Smith said, pointing to research showing a sharp rise over recent years. "COVID only exacerbated that isolation and stress."

According to the Kaiser Family Foundation, suicide rates among Black youth have risen significantly over the past decade, while data from the University of California, Los Angeles California Health Interview Survey shows that nearly 1 in 5 Black Californians have seriously considered suicide.

The conference will also address disparities in brain health. Black Americans are nearly twice as likely to be diagnosed with Alzheimer's or dementia compared to White Americans, a trend experts link to chronic stress and systemic inequities.

Smith said the selection of topics to be covered during the event was shaped directly by CBHN's statewide network of nearly 1,000 health professionals, particularly its mental and behavioral health peer group.

"They are the eyes and ears on the ground," she said. "They helped identify what's happening in our communities and what we need to address right now."

The virtual format is designed to increase accessibility while connecting attendees with culturally competent experts who understand the lived experiences of Black communities.

Sessions will also examine policy impacts, including how federal legislation like H.R. 1 could affect access to care and the future diversity of the healthcare workforce.

Held during Mental Health Awareness Month, the conference aims to provide practical tools, community-driven solutions, and a space for open

dialogue.

"This is about raising awareness, but also about action," Smith said. "We want people to leave with strategies for healing, resilience, and long-term change."

Registration for the May 13 conference is still open.

California Launches Free Diaper Program for Newborns Statewide

Gov. Gavin Newsom announced Friday that California will launch a first-in-the-nation program providing free diapers to families with newborns, part of a broader effort to lower costs for parents and improve infant health outcomes.

The initiative, called Golden State Start, will provide 400 free diapers to every newborn delivered at participating California hospitals beginning this summer. The state is partnering with Baby2Baby, a California-based nonprofit that distributes essential items to children in need nationwide.

State officials said hospitals participating in the program will give families the diapers when they are discharged after birth, helping parents leave with an immediate supply of newborn essentials.

"Every baby born in California deserves a healthy start in life," Newsom said in a statement. He said the program is part of California's broader affordability efforts, which also include free school meals, universal preschool for four-year-olds and expanded after-school programs.

The announcement comes ahead of Mother's Day and is tied to the administration's broader CalRx initiative, which aims to reduce costs for essential products and medications. State officials said California is also exploring ways to lower diaper prices by challenging high costs from major brands.

The first year of the program will prioritize hospitals serving large numbers of Medi-Cal patients, with plans to expand to additional hospitals and birthing centers over time. Officials said the effort is intended to reduce financial pressure on low-income families and improve infant and maternal health by ensuring parents have access to clean diapers.

"California families deserve to feel supported during one of life's more exciting, yet vulnerable transitions," First Partner Jennifer Siebel Newsom said in a statement. She said the program would allow parents to focus on caring for their newborns instead of worrying about basic supplies.

According to Baby2Baby, one in two families in the United States struggles to afford diapers. The organization has distributed more than half a billion items to children over the past 15 years through partnerships with shelters, hospitals, foster care programs and schools.

State officials said Baby2Baby will oversee diaper purchasing, warehousing and distribution through its existing hospital and community partnerships across California.

Rep. Kamlager-Dove Introduces Bill to Protect Women in Custody After Reports Detailing Miscarriages and Neglect

Congresswoman Sydney Kamlager-Dove (D-CA-37) on May 7, reintroduced updated legislation aimed at strengthening protections and healthcare standards for pregnant and postpartum women held in federal custody, including in immigration detention facilities.

The Pregnant Women in Custody Act would expand safeguards beyond the federal prison system to include women detained by U.S. Immigration and Customs Enforcement, U.S. Customs and Border Protection and the Office of Refugee Resettlement. The proposal follows reports of pregnant women being shackled, denied medical care and suffering miscarriages while in immigration detention.

The legislation builds on a bipartisan version previously passed by the House during the 117th Congress. The updated bill includes new standards for healthcare access, mental health and substance use treatment, high-risk pregnancy care, family unity protections and increased federal oversight.

"Proper pregnancy care is a human right, regardless of your immigration or incarceration status," Kamlager-Dove said in a statement. "It's unacceptable that there are virtually no legal safeguards for pregnant women in federal custody."

The bill would also limit the use of restraints and restrictive housing for pregnant women, improve data collection on maternal health in custody and require additional staff training and enforcement measures.

Supporters of the measure said the legislation is intended to address long-standing concerns about maternal healthcare and safety in detention settings, particularly for Black women and low-income women who are disproportionately impacted by incarceration and health disparities.

"Pregnant women in custody should never be subjected to dangerous and inhumane treatment that threatens their health, dignity, or the well-being of their babies," said Patrice Willoughby, chief of policy and legislative affairs for the NAACP and a longtime public policy and government affairs strategist, in a statement.

A 2021 report estimated there are about 58,000 admissions of pregnant women into U.S. jails and prisons each year. Kamlager's statement also cited a recent investigation by NBC News and Bloomberg Law that identified allegations of severe mistreatment or medical neglect involving at least 54 pregnant women or families in county jails between 2017 and 2024.

Federal policy under the Department of Homeland Security restricts the detention of pregnant, postpartum and nursing immigrants except in extreme cases. However, the agency reported that ICE deported 363 pregnant, postpartum or nursing women between January 2025 and February 2026, including 16 recorded miscarriages during that period.

The bill is cosponsored by several House Democrats and backed by organizations including the NAACP and the Vera Institute of Justice.

How Is AI Affecting California? The State Wants You to Share Your Story

Gov. Gavin Newsom announced May 7 that California is expanding its Engaged California digital democracy initiative statewide, inviting residents to help shape future state policies on artificial intelligence (AI) and its impact on jobs and the economy.

The program marks the first time the state has opened the platform to all Californians. State officials said the effort is designed to give residents a direct role in discussions about how AI should be regulated and used as the technology rapidly expands across industries.

"We've got to be clear-eyed about this moment: AI is moving fast, bringing enormous opportunity, but also real risks," Newsom said in a statement. "Californians deserve a seat at the table as we shape what's to come."

The initiative will roll out in two phases. Beginning immediately, Californians can sign up online to share how AI is affecting their work and communities and provide ideas for possible government action. Later this summer, a smaller group reflecting the state's workforce demographics will participate in live discussions focused on developing policy recommendations.

State officials said the goal is to identify areas of agreement among Californians and provide policymakers with public feedback as the state develops future AI regulations and workforce strategies.

Engaged California is modeled after digital democracy programs used in Taiwan and is intended to encourage structured public discussion rather than social media-style debate. Officials described the effort as a form of "deliberative democracy" aimed at helping residents engage directly in state decision-making.

"The more Californians are engaged in the democratic process, the better able we'll be to confront the challenges we face together," said Nick Maduros, California Secretary of Government Operations, in a statement.

The statewide launch builds on two earlier pilot programs. One pilot gathered public input following the Los Angeles wildfires to help guide recovery efforts, while another collected ideas from state employees about improving government operations.

California has positioned itself as a national leader in AI policy and development. Since 2023, the Newsom administration has introduced initiatives focused on responsible AI use in government, cybersecurity protections, workforce training and regulations targeting risks such as deepfakes and AI-generated robocalls.

The state has also partnered with companies in Silicon Valley -- including NVIDIA, Google, Adobe, IBM and Microsoft -- to expand AI education and workforce training programs across California schools and universities.



Sen. Laura Richardson (D-San Pedro) presents a Senate resolution to the Delta Theta Sigma Sorority Farwest Region at the State Capitol on May 4. Photo courtesy of the Senate Rules Committee.



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Angels' Problem Is in the Pen

By Earl Heath

Contributing Sports Writer

The Los Angeles Angels have spent the first weeks of the 2026 season searching for stability on the mound.

At press time, the Angels were 16-28, last in the American League West and 6 1/2 games out of first place. Their problems have not been limited to one area, but the bullpen has become the most visible concern during a difficult stretch.

The Angels' relievers entered mid-May with a 5.34 ERA, a 1.53 WHIP and just five saves, ranking near the bottom of Major League Baseball. The trouble has come in several forms: walks, hard contact, uncertain roles and too few dependable late-inning options.

One of the clearest signs of the team's bullpen issues came when the club designated closer Jordan Romano for assignment in late April. Romano, a former All-Star, was 0-2 with a 10.13 ERA after several rough outings. Angels manager Kurt Suzuki called the move difficult but said the club needed to make a change with its pitching staff.

The Angels have continued to shuffle arms in search of answers. Left-hander Drew Pomeranz was placed on the 15-day injured list Wednesday because of left elbow inflammation. Pomeranz was 0-3 with a 7.20 ERA in 15 innings, adding another



Angels Pitcher Jose Soriano Named American League Pitcher Of The Month For April

setback for a bullpen already under pressure.

There has been at least one major bright spot. Starting pitcher José Soriano was named the American League Pitcher of the Month for March/April after going 5-1 with a 0.84 ERA and 49 strikeouts over 42 2/3 innings. He became the first Angels pitcher to win the honor since Matt Shoemaker in August 2014.

Soriano's early dominance has helped give the Angels a chance on his days, but the larger pitching picture remains unsettled. Even strong starts have not always been enough when the late innings become difficult to manage.

The team's recent offensive struggles have only magnified the pressure on the pitching staff. The Angels were swept by the Cleveland Guardians this week and have lost 18 of 23 games since April 18. They also led the majors with 21 games scoring two runs or fewer, including all three games in the Cleveland series.

For the Angels to climb out of the AL West cellar, the bullpen must become more reliable. Soriano has given the club a front-line performance at the top of the rotation, but Los Angeles needs more than one starter to steady the season.

Until the Angels find consistent answers in the pen, close games will remain a problem.

Betts Returns to Dodgers After Five-Week Absence



Los Angeles Dodgers' Mookie Betts in action during a baseball game against the Washington Nationals, April 4, 2026, in Washington. Nick Wass - FR67404 AP

By Earl Heath

Contributing Sports Writer

Mookie Betts returned to the Los Angeles Dodgers' lineup Monday night, giving the club back one of baseball's most accomplished players after a five-week absence caused by a right oblique strain.

The Dodgers activated Betts from the injured list before their series opener against the San Francisco Giants and placed him back in his familiar No. 2 spot in the batting order, between Shohei Ohtani and Freddie Freeman. Betts had been sidelined since April 5 and played two rehab games with Triple-A Oklahoma City before rejoining the big-league club.

The Dodgers hoped Betts' return could help revive an offense that has struggled through stretches in May. Betts, however, made it clear that one player will not solve everything.

"I'm not the hero," Betts said before the game. "It's going to take us all."

Betts went 1 for 5 in his return, but the Dodgers' offense remained quiet in a 9-3 loss to the Giants at Dodger Stadium. San Francisco pulled away late, scoring three runs in the seventh inning and three more in the ninth. Rafael Devers helped lead the Giants with two hits, two RBIs and three runs.

The loss dropped the Dodgers to 24-17, leaving them a half-game behind the San Diego Padres in the National League West at the time. Los Angeles has struggled to generate consistent offense, scoring three runs or fewer in several recent games. Key hitters, including Ohtani, Will Smith and Teoscar Hernández, have been trying to find a rhythm this month.

Betts, 33, opened the season 5 for 28 before the injury. Dodgers manager Dave Roberts said before

Monday's game that the club would monitor Betts as he worked his way back into regular action.

"I think with Mookie, you just don't know," Roberts said. "So, the hope is that he can kind of hit the ground running."

To make room for Betts, the Dodgers optioned infield prospect Alex Freeland to Triple-A Oklahoma City. Roberts called the move "a tough one," noting that Hyesong Kim had played well enough to stay on the roster. Kim, a left-handed hitter, gives the Dodgers another option at second base alongside right-handed-hitting Miguel Rojas. Veteran Santiago Espinal, who is out of minor league options, remains in a reserve role.

Betts is expected to ease back into everyday duty as the Dodgers look to steady their lineup and regain momentum in the division race.

Bruins' Grant Sets NCAA Softball Home Run Record

By Earl Heath

Contributing Sports Writer

UCLA slugger Megan Grant made NCAA softball history Saturday, blasting her 38th home run of the season to set the Division I single-season record.

Grant drove an 0-2 pitch from Nebraska's Jordy Frahm deep to left-center field for a solo home run in the third inning of the Big Ten championship game, giving the Bruins a 2-0 lead. The homer broke the record she had shared for one day with Arizona's Laura Espinoza, who hit 37 home runs in 72 games in 1995. Grant reached No. 38 in her 55th game.

The milestone came in a 7-2 loss to Nebraska, which rallied to win the Big Ten tournament title. Still, Grant's record-setting swing stood as one of the biggest moments of the college softball season.

The chance to write her name into the record books as one of the sport's best is what Grant wanted when she came to college.

"To be able to do that, it's just, it's surreal," Grant said. "I'm just so grateful for the opportunity I was blessed with, and just to follow the people that were before me, it's just an honor."

Grant said she knew the ball had a chance once she heard the crowd react.

"The pitch was up, and I had a feeling it was out once I heard the crowd cheering," Grant said. "I kind of usually just put my head down and run as hard as I can to first base, and then I think right when I touched first I knew."

After the game, Grant had the record-setting ball in her backpack and said she planned to give it to her grandmother.



Megan Grant hit her 38th home run of the season on Saturday. (Chris Bernacchi/Big Ten/University Images via Getty Images)

LeBron's Brilliance Wasn't Enough: Lakers Fall to Thunder in a Season That Showed Promise — and Limits

L.A. finishes 53-29, wins the Pacific Division, then meets a buzzsaw in OKC

By OGNCS Sports Staff

LOS ANGELES — May 13, 2026. The 2025-26 Los Angeles Lakers season had all the hallmarks of a serious championship contender — a 53-win regular season, a second consecutive Pacific Division title, and a first-round playoff win. But when the lights got brightest, the defending champion Oklahoma City Thunder reminded the basketball world that there is still a wide gap between where this Lakers team is and where it wants to be.

A Strong Regular Season

Los Angeles put together one of its most consistent regular seasons in years, finishing 53-29 — an improvement over last year's 50-32 record — and earning home-court advantage in the first round for the second straight year. It marked the first time the franchise had won 50 or more games in back-to-back seasons since the Kobe Bryant and Pau Gasol era of 2009-10 and 2010-11.

The team's core — LeBron James, Luka Dončić, Austin Reaves, Rui Hachimura, and veteran point guard Marcus Smart — gave head coach JJ Redick one of the deepest rosters he's worked with. Their defense ranked among the league's elite, and Reaves emerged as one of the more reliable two-way guards in the Western Conference.

The Injury That Changed Everything

The season's trajectory shifted on April 2, when Dončić — who had transformed the Lakers offense since arriving via trade — suffered a left hamstring strain against Oklahoma City. He would not play another game the rest of the regular season, and his status for the playoffs remained uncertain throughout.

Still, the Lakers closed the regular season on a high note, finishing 4th in the West and heading

into the postseason with momentum — and cautious optimism about Dončić's return.

First Round: Getting Past Houston
In a rematch of the 2020 NBA Playoffs — when the Lakers dispatched Houston in five games en route to their 17th championship — Los Angeles took care of the Rockets in six games. It wasn't always pretty. The Lakers were held under 100 points in three of the six games, and Houston's Alperen Sengun gave the frontcourt serious problems throughout.

But LeBron James — at 41 years old — was the story of the series. In the Lakers' four victories, he averaged 26.0 points, 9.0 rebounds, and 8.5 assists, shooting an impressive 42.9 percent from three-point range. In the series-clinching Game 6, he put up 28 points, eight assists, and seven rebounds, reminding the league that Father Time has had a harder time with him than with anyone in NBA history.

Second Round: A Sweep at the Hands of OKC
Without Dončić and facing the No. 1-ranked defense in the league, the Lakers had no answers for the Oklahoma City Thunder. OKC swept Los Angeles in four games, with Shai Gilgeous-Alexander, Chet Holmgren, and an emerging Ajay Mitchell proving to be simply too much.

In the final game, Holmgren made a go-ahead dunk with 32.5 seconds left to seal the series. LeBron finished with 24 points and 12 rebounds, and Austin Reaves — still rounding into form after his oblique injury — scored 27, but missed a potential game-tying three in the closing seconds.

The Lakers were outscored in the fourth quarter in three of the four losses, a recurring issue that speaks to the team's need for a reliable playmaker

alongside LeBron once Dončić was unavailable.

What's Next

The big question hanging over L.A. now is LeBron's future. The King has not announced whether he will return for a 24th NBA season, and speculation about his retirement has reached a fever pitch. Dončić, when healthy, gives this team a genuine co-star capable of carrying a playoff series.

And with Reaves, Hachimura, and Smart still under contract, the foundation is there for another deep run.

For Lakers fans, the 2025-26 season was a reminder of both how far this franchise has come — and how much further it still needs to go.



Los Angeles Lakers forward LeBron James stands on the court in the closing minutes of Game 4 in a second-round NBA basketball playoffs series against the Oklahoma City Thunder, Monday, May 11, 2026, in Los Angeles. (AP Photo/Mark J. Terrill) ASSOCIATED PRESS / Mark J. Terrill

Local

Mastering the Art of Home Downsizing: Strategies and Tips

By Billie Pollisotto

More people are home downsizing to simplify their lives, cut ongoing costs, and move into spaces that feel easier to manage day to day. Success comes from planning ahead, decluttering with intention, and choosing a home that matches current priorities instead of past habits.

Families are trading square footage for flexibility, empty nesters are letting go of unused rooms, and even younger buyers are choosing smaller homes to stay financially agile.

A couple lists their long-time house after realizing half of it sits untouched, while a first-time buyer skips the oversized starter home and goes straight to something efficient. Downsizing has moved from a last resort to a smart, proactive decision that reflects how people want to live now. Benefits of Moving to a Smaller Home Moving to a smaller home often leads to immediate financial relief. Lower mortgage payments, reduced utility bills, and fewer maintenance costs can free up income for savings or travel. Daily life also becomes easier to manage. Cleaning takes less time, repairs are more straightforward, and there are fewer spaces competing for attention, which can reduce stress and create a more organized routine. A smaller home can shift how you use your space in a positive way. Rooms tend to feel more intentional, and it becomes easier to focus on what you actually use instead of maintaining areas that sit empty. There is also a lifestyle advantage. Many people find that downsizing creates more time for: Hobbies

Social activities
Personal goals
Family
Volunteering

How Do You Know It Is Time To Downsize? One clear sign is how often parts of the home go unused. Empty rooms and spaces that no longer serve a purpose can signal that the home is larger than necessary. Maintenance demands can also shift your perspective. Ongoing repairs, time-consuming cleaning routines, seasonal upkeep, and rising service costs can turn a home into a source of stress instead of comfort. Financial pressure is another factor that becomes harder to ignore over time. Higher utility bills, increasing property taxes, insurance costs, and unexpected repairs can limit flexibility and make a smaller home feel like a smarter long-term choice. Lifestyle changes often bring the decision into focus. A job relocation, children moving out, retirement planning, health considerations, and a desire for a simpler routine can all point toward the benefits of



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downsizing. Downsizing Tips for Seniors Starting early makes a noticeable difference when you're trying to declutter and organize your home. Working through one room at a time keeps decisions clear and prevents the process from becoming overwhelming, especially when sorting through items collected over many years. Prioritize items used regularly, important documents, meaningful keepsakes, furniture that fits the new space, and anything tied to health or mobility needs, while letting go of what no longer serves a purpose. Safety and accessibility should guide each choice. A smaller home works best when it reduces fall risks and allows for easier movement throughout the space. Support can also ease the transition. Family members, friends, or professionals who handle residential moving in Nashville can assist with packing, organization, and logistics, helping seniors move at a pace that feels comfortable and controlled. What Mistakes Should

You Avoid When Downsizing? One of the biggest missteps is rushing decisions. Sorting too quickly can lead to regret, especially when meaningful items are donated or discarded without enough thought. Holding onto too much can also create problems later. Bringing excess furniture, clothing, storage bins, decorative pieces, and rarely used items into a smaller home can make the new space feel cramped and harder to organize. Another issue comes from underestimating how the new layout will function. A smaller home requires careful planning, and overlooking storage, room flow, accessibility, and lighting can lead to daily frustration. Some homeowners focus only on the purchase price and overlook other costs. Moving expenses, minor renovations, utility changes, insurance updates, and temporary storage fees can add up and affect the overall financial benefit. Emotional Aspects of Downsizing

Hoarding Disorder: Causes, Effects & Treatment Explained

Hoarding disorder is a mental health condition where persistent difficulty discarding items leads to overwhelming clutter, unsafe living conditions, and emotional distress. It is driven by a mix of anxiety, attachment to possessions, and decision-making challenges, though it can be treated through targeted therapy and gradual behavior change.

A hallway narrows to a single path, unopened mail stacks into towers, and everyday items start to feel impossible to part with. What looks like clutter on the surface is often tied to deeper patterns of fear, loss, and control that build over time.

Hoarding disorder affects roughly 2% of Americans and rises to about 6% among people older than 70, making it more common than many realize. Recognizing what drives it is often the turning point toward restoring space and a sense of control at home. What Causes Hoarding Disorder? Emotional attachment is one of the strongest drivers of mental health and hoarding. Items often carry meaning tied to identity, memory, or security. Something as simple as an old receipt or broken object can feel important because it represents a sense of control. Cognitive challenges also play a role. Many people with a hoarding disorder struggle with:

Decision-making
Organization
Prioritization
Attention and focus
Memory and categorization
Processing information efficiently

Sorting through items can quickly become overwhelming, which leads to avoidance. Over time, that avoidance allows clutter to build and reinforces the impact of hoarding disorder. Life events often act as triggers. Some experiences can increase the urge to hold onto things. These include: Grief

Financial hardship
Major transitions
Periods of instability

In these moments, possessions may offer comfort or a sense of preparedness for the future. Family and learned behavior can influence it as well. Growing up in an environment where saving everything was common can normalize those habits. How To Fix Hoarding Disorder? Cognitive behavioral therapy is the most widely used of the hoarding disorder treatment options. It helps people: Understand why they hold onto items

Challenge beliefs about needing to save things
Build practical skills for sorting and decision-making
Develop organization and categorization systems

Practice gradual exposure to letting items go
Large, rushed cleanouts rarely last because they do not address the underlying behavior. A slower approach, focused on one area at a time, allows people to build confidence and reduce anxiety tied to letting things go. Involving family members or trained professionals creates accountability and reduces isolation. Encouragement from others can help maintain momentum when progress feels slow. In some cases, medication may be recommended, especially if anxiety or depression is also present. Treatment plans vary, though they are most effective when guided by a qualified mental health professional. What Are the Biggest Mistakes People Make When Trying To Help Someone Who Hoards? One of the most common mistakes is forcing a cleanout. Removing items without consent may seem like a quick solution, though it often creates distress and breaks trust. The person may respond by shutting down or quickly rebuilding the clutter afterward. Another misstep is focusing only on the mess. Hoarding disorder is not just about clutter, so treating it like a simple cleaning problem misses the root cause. Without addressing the emotional attachment and decision-making challenges behind the behavior, any progress tends to be temporary. Using judgmental language can also backfire when



supporting hoarding disorder patients. Words that imply laziness or irresponsibility can deepen shame and make someone less likely to accept help. A supportive tone is far more effective. While it may feel helpful to organize or discard items on someone's behalf, it removes their sense of control. Recovery depends on the individual learning how to make decisions about their belongings, even if that process is slow. Hoarding Disorder Prevention Early awareness and understanding of hoarding behavior, along with consistent routines, can reduce the risk of behaviors becoming severe over time. One of the most effective strategies is managing what comes into the home. Creating simple rules around new items, such as deciding their purpose immediately or limiting impulse purchases, helps prevent unnecessary accumulation. Building decision-making skills also matters. Difficulty choosing what to keep or discard is a common challenge, so practicing small, low-pressure decisions can strengthen confidence. Sorting the following keeps this skill active and prevents overwhelm: Mail

Clothing
Everyday items
Paperwork and documents
Duplicates

Keeping living spaces functional and easy to maintain encourages regular upkeep. When surfaces stay clear and storage is manageable, it becomes easier to notice when clutter starts to return. Support should not be overlooked. Open conversations with family or trusted individuals can create accountability and reduce stigma. In some cases, early guidance from a mental health professional can help address habits before they escalate. Frequently Asked Questions Who Is the Most Famous Hoarder? One of the most well-known cases is the story of the Collyer brothers, Homer Collyer and Langley Collyer. In the 1940s, their Harlem home became so filled with clutter that it drew widespread media attention after both men were found inside under extreme conditions. What Is a Nicer Word for a Hoarder? Softer, everyday terms like "saver," "collector," or even "pack rat" are often used in casual conversation. That said, these words can downplay the seriousness of the hoarding disorder. In more sensitive or accurate contexts, it is usually better to say "a person who struggles with hoarding" to keep the tone respectful and clear. How Can Someone Prevent Hoarding Behaviors From Returning After Treatment? Stay consistent with simple habits after getting everything in order with help from experts like Bio1. Sort items as they come in, keep daily spaces clear, and set regular times to review what you own before clutter builds again. Keep support in place. Check-ins with a therapist, group, or trusted person help catch small slip-ups early and keep progress on track. Watch for triggers. Stress or big life changes can bring old habits back. Having a plan, like using coping tools or asking for help, makes it easier to stay in control. Focus on steady routines instead of big cleanouts. Small actions done regularly are what keep spaces manageable long-term. Treat Hoarding Disorder Today Hoarding disorder can be stressful for the sufferer and their family. With this guide, you should be on the path to healing.

Medical Office Design Mistakes That Cost New Practice Owners Before They See a Patient

Medical office design mistakes that can drain a new practice's budget include suboptimal space planning, non-compliance with codes and standards, and poor patient flow. These errors push back launch dates, pile on change orders, and impact how patients feel from the moment they enter your facility to the time they leave.

Per a recent Research and Markets report, the global healthcare building market, growing at a CAGR of 2.7%, is projected to reach \$307.69 billion in 2026, up from \$299.48 billion in 2025. From licensing to financing and hiring, you can spend lots of time and resources building your medical practice, only to stumble at the buildout. New private practitioners often find out that a clinic is not just walls and a sign: it comprises everything from lighting, sound, and traffic flow. Spotting errors before signing the lease can be an excellent way to start things off on the right foot. What Are the Most Common Medical Office Design Mistakes? Your medical building is an important clinical tool. The biggest mistake you can make is treating it as a finishing detail. Cheap leases are a compelling proposition for many medical office project owners. After all, it allows them to save money on operating



costs for their practice. However, cheap deals can lead to costly mistakes. For example, you may not notice obvious errors such as: Columns sitting in the wrong places

Plumbing risers running where the lab needs to go

The waiting room cannot hold the chairs infection control requires

Cramped exam rooms are another frequent error. Some owners shrink rooms to squeeze in a fifth or sixth bay, and staff bump into carts mid-visit. Exam rooms smaller than 100 square feet, according to the American Medical Association reports, often lead to slow appointments, which leave both patients and clinicians frustrated. Lighting is the third trap. Many owners choose fixtures based on price and disregard the need for color rendering. Poor lighting can result in many problems, such as: Doctors then struggle to read skin tones

Charts look washed out
The office tends to feel cold even in warm weather

Good lighting is cheaper to plan than to replace. How Much Does Medical Office Construction Really Cost? Medical office buildouts typically cost about \$150 to \$300 per square foot, according to Matthews estimates. Figures vary based on factors such as: Location

Design complexity
The infrastructure needs of the facility
The factors with the most impact on the total cost are equipment and technology. Equipment and technology costs usually start from \$1,000 and can exceed \$20,000. Hiring Arminco design build construction services, a company specializing in healthcare environments, can pay off handsomely. Their approach will keep decisions tied to your goals and budget rather than burdening you with them. Why Is Patient Flow Just as Important as Square Footage? Patient flow influences daily experiences

at your practice. A well-planned floor plan keeps the waiting room organized and the back hallway efficient. The CDC recommends a clear separation between clean and soiled work areas to reduce the risk of infection. A bad flow can show up in the schedule in different ways: Visits drag

Exam rooms back up
The front desk fields complaints by mid-morning

Most of these problems stem from the reception or check-in desk. Place it too close to the door and the lobby bottlenecks. Place it too far back and patients wander. Owners opening in dense urban markets, including many Black-owned practices serving historically underserved neighborhoods, face an extra wrinkle. Older buildings often have load-bearing walls in awkward spots. A design-build contractor experienced in healthcare facility design knows how to work around those walls without losing room count. Frequently Asked Questions How Long Does Dental Office Construction Take? Timelines are project-specific, but most ground-up medical offices take 12 to 18 months from design to opening day. Tenant buildouts in existing shells run shorter, usually six to nine months, since the structure already exists. Timelines vary depending on location. In major markets, standard timelines can extend by up to four months. Medical practice owners who want to begin operations sooner sometimes split the project into stages. For example, they may build exam rooms first and add specialty spaces later. This approach allows you to open the doors to your practice sooner than expected. However, it requires careful planning to prevent later work from disrupting workflows. What Is the Difference Between a General Contractor and a Design-Build Contractor? A general contractor works with drawings from a separate architect or building designer. Here's how it works: The owner hires the architect

The architect produces plans
The contractor follows them

The owners are responsible for solving any conflict that may arise between the design and the field. A design-build contractor, on the other hand, handles both sides of that line. Architects, engineers, and the construction crew all answer to the same firm. This means issues get resolved without sending emails between multiple offices. For new practice owners, having a single point of contact can help avoid delayed launches and loss of revenue. Do New Medical Offices Need Special HVAC and Air Filtration Systems? Yes, healthcare facilities must follow strict room temperature and indoor air quality standards to ensure the health and safety of both staff and patients. Overlooking these design requirements can have serious consequences, including failing inspections and major rework. A practice that ignores an HVAC audit may later learn that the existing system cannot meet code. This error can mean investing in a new rooftop unit, which can take several days (or even weeks) to ship for and install. Design Your Medical Practice for the Long Run Opening a dental practice or a medical clinic is hard enough without fighting the building itself. Owners who avoid these mistakes treat medical office design as part of the practice plan, and not an afterthought.

An experienced healthcare facility design and build contractor can help you understand what your project will cost, how long it will take, and how patients will perceive your facility when they visit.

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