



Heather L. Maurer

Message from the CEO

The National Association of Nurse Practitioners in Women's Health (NPWH) sets a standard of excellence by translating and promoting the latest research and evidence-based clinical guidance, providing high-quality continuing education, and advocating for patients, providers, and the Women's Health Nurse Practitioner (WHNP) profession. Our mission includes protecting and promoting a woman's right to make her own choices regarding her health and wellbeing within the context of her lived experience and her personal, religious, cultural, and family beliefs.

This is our mission. And this year, in spite of continued challenges from the Covid-19 pandemic, we will carry that mission forward, supporting WHNPs and other women's and gender-related healthcare providers with resources, clinical education, advocacy support, and opportunities to shape access to the care that is creating a healthier future for women in the United States.

Without a doubt, 2022 will be a year of critical importance to our profession and the patients we care for. I encourage you to pay close attention to the discourse on the national stage, like the Supreme Court cases considering restrictions on reproductive healthcare. As your professional association, you can rely on us to make our voice heard as experts in women's health. NPWH advocates for healthcare policies that support women and the nurse practitioners who care for them. We will continue to uphold our mission and strive for access to all evidence-based healthcare across a woman's life span.

As we step into this year, I want to highlight an important resource for you, the NPWH position statements. These statements reflect the official positions of our organization and offer recommendations and resources for healthcare providers. In 2021, we released three new position statements and reaffirmed three others on some of the most pressing issues in women's health:

Intimate Partner Violence (March 2021)

NPWH endorses a comprehensive multilevel and multisector approach to prevent intimate partner violence (IPV), remove barriers to disclosing IPV and seeking services, promote universal screening to identify individuals who have or are currently experiencing IPV, provide trauma-informed and culturally sensitive care, and ensure the availability and accessibility of immediate and ongoing support services. NPWH recognizes that individuals of all genders may experience IPV and/or be perpetrators of IPV.

Human Sex Trafficking (updated/reaffirmed June 2021)

NPWH affirms the essential role of WHNPs and other advanced practice registered nurses who provide women's and gender-related healthcare for adolescents and adults in identifying, assessing, and responding to the needs of trafficked individuals. Victims of trafficking include all ages and gender identities. However, adolescent and young adult females comprise the majority of trafficked persons in the US and globally, most specifically as victims of sex trafficking.

Cervical Cancer Screening (updated/reaffirmed June 2021)

NPWH supports a concerted effort to continue to improve cervical cancer screening rates and timely, appropriate follow-up and treatment when screening results are abnormal. The goal is to reduce cervical cancer incidence, morbidity, and mortality. NPWH supports ongoing research to ensure that screening and treatment guidelines are based on the best evidence available.

Climate Change, Women's Health, and Environmental Justice (June 2021)

NPWH asserts that climate change has a significant effect on health and wellbeing globally. NPWH believes that nursing organizations and the nursing profession have a responsibility to meaningfully contribute to reducing vulnerability to the harmful effects of climate change (adaptation) and reducing or preventing greenhouse gas emissions (mitigation) for the protection of the health and wellbeing of individuals, communities, and populations. NPWH recognizes that social and environmental justice are inherently connected to reducing harms to health and wellbeing associated with climate change.

(continued on page 31)

19. Nurse Practitioners in Women's Health. The essential role of women's health nurse practitioners. White paper. 2020. <https://www.npwh.org/lms/filebrowser/file?fileName=NPWH%20White%20Paper%20The%20Essential%20Role%20of%20WHNPs%20final%207.13.2020.pdf>.
20. American College of Obstetricians and Gynecologists. Gestational hypertension and preeclampsia. 2020. <https://www.acog.org/clinical/clinical-guidance/practice-bulletin/articles/2020/06/gestational-hypertension-and-preeclampsia>.
21. Triebwasser JE, Janssen MK, Hirshburg A, Srinivas SK. Successful implementation of text-based blood pressure monitoring for postpartum hypertension. *Pregnancy Hypertens.* 2020;22:156-159.
22. Hirshberg A, Mahraj K, Srinivas SK. Heart safe motherhood: applying innovation methodology for improved maternal outcomes. *NEJM Catalyst.* 2019;5(3).
23. Gomez-Pomar E, Blubaugh R. The Baby Friendly Hospital Initiative and the ten steps for successful breastfeeding. A critical review of the literature. *J Perinatol.* 2018;38(6):623-632.
24. Friendly USA. Guidelines and evaluation criteria for facilities seeking baby-friendly designation. 2019. <https://www.babyfriendlyusa.org/for-facilities/practice-guidelines/>.
25. Gemmill A, Lindberg LD. Short interpregnancy intervals in the United States. *Obstet Gynecol.* 2013;122(1):64-71.
26. Aiken LH, Sloane DM, Brom HM, et al. Value of nurse practitioner inpatient hospital staffing. *Med Care.* 2021;59(10):857-863.
27. Centers for Disease Control and Prevention. Pregnant and recently pregnant people. 2021. <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnant-people.html>.
28. Human Resources and Services Administration. Women's health workforce projections. 2021. <https://bhw.hrsa.gov/data-research/projecting-health-workforce-supply-demand/whw-projections-supply-demand>.
29. Klein TA, Kaplan L, Stanik J, et al. Hiring and credentialing of nurse practitioners as hospitalists: a national workforce analysis. *J Nursing Regulation.* 2020;11(3):33-43.
30. Beckmann S. Women's health market trends for 2021. Updated January 20, 2021. <https://www.advisory.com/en/topics/womens/2017/06/womens-services-market-trends>.

(continued from page 20)

Menstrual Equity and Menstrual Health (September 2021)

NPWH asserts that all individuals who menstruate should have adequate access to appropriate menstrual products and to facilities that support privacy, safety, hygiene, and sanitation for changing menstrual products, washing body and hands, and cleaning or disposing of used materials. As well, all individuals who experience menstruation should have access to accurate, timely, and age-appropriate information about the menstrual cycle, expected changes that occur from puberty through menopause, and related self-care and hygiene practices.

Human Papillomavirus Vaccination (updated/reaffirmed October 2021)

NPWH advocates for an intentional and concerted effort to improve human papillomavirus (HPV) vaccination rates, with the goal of ending cancers caused by HPV. The use of strategies that increase parent/patient acceptance, reduce missed opportunities, promote affordability and accessibility for timely receipt, and ensure completion of the vaccination series are imperative.

In 2022, we will be publishing three new position statements on topics including WHNPs as partners in addressing the maternal health crisis, trauma-informed healthcare, and sexual health for adolescents and young adults. We hope these continue to be helpful to you and your practice.

Thank you for your continued support and membership. Your voice matters to us, and we need you to be at the table. I look forward to seeing you at one of our clinical education opportunities in 2022.

With all good wishes,

Heather L. Maurer, MA, CAE
Chief Executive Officer
National Association of Nurse Practitioners in
Women's Health