Policy Updates

In November, three states voted on issues relating to abortion. In South Dakota, abortion opponents succeeded in once again placing an abortion ban on the ballot. This was the state’s second attempt to pass an abortion ban since 2006, when an all-encompassing abortion ban was proposed and ultimately failed. This most recent initiative differs from previous proposals in that the ban would have applied to all abortions but would have had exceptions in instances of life endangerment, rape, and incest, and a limited health exception. The initiative was defeated by a margin of 55 percent to 45 percent.

In California, voters considered Proposition 4, which would have limited a young woman’s access to abortion by preventing a pregnant minor from obtaining an abortion until 48 hours after the provider notified the minor’s parents of the procedure. Although the law included exceptions for emancipated minors, medical emergencies, and parental waiver, it was clear that the real intent and effect of the initiative would have been to create barriers to reproductive health care for California teens. Proposition 4 failed by a margin of 52 percent to 48 percent, marking the third time California voters have voted against parental notification limitations.

Finally, in Colorado, the deceptively named "Human Life Amendment" would have changed the Colorado constitution to state that life begins at conception, and would have effectively placed a ban on abortion. The amendment would have also had broad consequences for other aspects of a woman’s health, including potential investigations of miscarriages, bans on in vitro fertilization, and criminalization of procedures like chemotherapy that would save the mother but might harm the fetus. The amendment also threatened access to oral contraception and IUDs. Colorado voters overwhelmingly voted against the ban by a margin of 73 percent to 27 percent.

Upcoming Conferences

Progressive Practice: Clinical, Professional, and Regulatory Competencies in Abortion Care for Nurse Practitioners, Physician Assistants, and Certified Nurse-Midwives

Please join us for a day-long workshop next spring as we explore issues surrounding clinical, professional, and regulatory competencies in abortion care. Nurse practitioners, physician assistants, certified nurse-midwives, advocates, and students are welcome to attend! To learn more
about this conference, including its date and location, please contact the Training and Education Coordinator at meetings@prochoice.org.

Patient Story
The abuse started after she moved from halfway across the country - after she and her six-year-old daughter left their life and family behind. At 27, Ruth went willingly with her boyfriend to a new state, but not willingly into a new life of being abused. At one point the beatings were so bad that she miscarried, and when she conceived again, Ruth decided to terminate the pregnancy. A witness to the abuse and a controller herself, Ruth's boyfriend's mother told Ruth that if she called the police on him, they would take her to jail instead because she wanted to "kill her baby."

In the middle of the night on a hot Saturday in mid-summer, scared, broke, and with her daughter, Ruth was finally able to escape from her controlling and abusive relationship. She left the house and, defying the lies she was starting to believe, called the police. The police took Ruth and her daughter to a shelter, and the next morning, traumatized yet determined, she started to rebuild her life.

Ruth called the National Abortion Federation's Hotline and spoke to a Hotline staffer who elevated her case to a Case Manager. Kendra, a NAF Hotline Case Manager, listened as Ruth, in her quiet Southern accent, recounted her story and explained the details of her financial circumstances. With no money and no family members able or willing to help her finance her abortion, her situation was dire.

Kendra provided Ruth with the phone number to the closest NAF-approved clinic, an hour’s drive from where Ruth was staying, so she could schedule her appointment. After the appointment was scheduled, Kendra contacted the clinic to advocate for clinic-based assistance due to Ruth’s financial circumstances. The nurse practitioner with whom she spoke was sensitive to Ruth’s situation and was determined to do what he could for her. Due to his advocacy, the clinic was able to provide Ruth with a discount, but not able to provide her with the necessary bus ticket to get her to her appointment.

As 87% of counties in the U.S. have no identifiable abortion provider1, it is not rare that women like Ruth must travel great distances to receive their abortions. Without a car or simply the money for a bus ticket, the distance between Ruth and the clinic was threatening to inhibit her from accessing her choice to terminate her pregnancy. Fortunately, she was able to find a free ride to the clinic’s town and made her appointment.

NAF’s Case Managers and Hotline staffers are a special kind of human being. They listen with the utmost kindness and empathy, day after day, to stories from women all over the country and all walks of life that have called the Hotline to receive non-biased options counseling, clinic referrals, and limited financial assistance. It is this direct service - the direct connection between individuals - that is the Hotline’s greatest strength, and gift to women.

NAF Hotline:

Call toll-free 1-800-772-9100
Weekdays: 7:00 A.M.–10:00 P.M. Eastern time
Saturdays: 9:00 A.M.–5:00 P.M.
Sundays: 9:00 A.M.–5:00 P.M.


Stories from the Field
By Joyce Cappiello

I overhear the conversation of a staff member explaining to a woman on the phone about what to expect during her abortion appointment. She is giving routine information about bleeding, cramping and then I hear her words, "and you will see picketers." I hope that this woman is able to roll up her car windows and look the other way as she drives into the clinic parking lot. I think back to an incident I had with a picketer - a person who still pickets outside our office some 20 years later. At
the time, my daughter was a five year old pre-schooler. Her school was closed that day for some reason, so a staff member at the health center invited my daughter for a play date with her children at her home. At the end of the day, she brought my daughter to the health center. My daughter had been to the center a few times before; her experiences there were like that at a comfortable old house with friendly women doting over her. It was a cold November day in New England, when darkness comes as early as 5 pm. As my co-worker and I, along with three children walked out the door, a group of picketers surrounded the five of us. They specifically directed their comments to the children, "Your mommies kill babies! Did you know that?" They repeated their rhetoric over and over, "Did you know your mommies kill babies at this health center?" These small children, ages 5-7, were totally bewildered and scared, as they just looked up at us. The look in their eyes spoke volumes - "Who are these people? Why are they so close to us? Why are they saying these things?"

I consider myself a nonviolent person, and I was certainly tested to the limit at that moment. I did my best to contain myself as I provided verbal reassurances to the children while quickly steering them beyond the presence of the picketers. It was a difficult situation to explain to young children, but they seemed to accept our reassurances. However, I was furious as I thought, "How dare the picketers use small children as pawns in their opposition to legal, safe abortion?" I was also left with an empty sense of powerlessness, as I could not really do anything about the situation. It reminded me of the vulnerability of women, and the harassment they have to face as they walk through the picket line to make their abortion appointments. The other thought was of how difficult it must be for our physician providers, who are not only heckled personally but have their homes picketed and their children followed to school. Staff members were often harassed while doing their grocery shopping by a store employee who also happened to be a picketer.

Since this incident, our clinic has moved to a new and better location. It is no longer on the first floor, located right off the sidewalk, where picketers could put their mouths right up against the windows.

The new building is now set back from the street with a private parking lot. Management at the grocery store has stopped its employees from any further harassment. Through the years, zoning and court cases have better defined where picketers may or may not stand on the street outside the healthcare center. However, I think it cannot be easy for women to drive by the graphic posters and heckling. And my daughter? She is now a wonderful young woman in her twenties, who has no recollection of the incident. The picketers didn't make a lasting impression on her and I still continue my work at the health center. Today, I take this opportunity to thank all of the dedicated professionals who walk through picket lines and listen to heckling, but continue to come to work each day with pride and dedication. Thank you.

Joyce Cappiello RN, MS, FNP is the ROE Director at the Abortion Access Project and a member of the Advisory Committee for Clinicians for Choice.

APC Toolkit

The Abortion Access Project (AAP), Advancing New Standards in Reproductive Health (ANSIRH), and the National Abortion Federation (NAF) are pleased to announce the development of

The Professional Toolkit for Advanced Practice Clinician Abortion Providers

We recognize that if women can access abortion care from their primary care providers, they will benefit from greater continuity of care and will receive services with fewer delays than if they have to seek care from another provider or facility.

Many nurse-midwives, nurse practitioners, and physician assistants (often referred to collectively as Advanced Practice Clinicians, or APCs) across the country have incorporated early abortion services into their scope of practice. In recent years, some individuals have been challenged by both regulatory and/or legislative bodies for providing these services to their patients. The Professional Toolkit for Advanced Practice Clinician (APC) Abortion Providers is being developed to prepare other clinicians to respond as successfully to these challenges, and to engage in proactive strategies to further establish early abortion care within the APC scope.

Written for clinicians, administrators, and advocates, the Toolkit is a professional "how to" manual with background information, resources, and guidelines for present and future APC abortion
providers. It will guide APCs in the development of necessary documentation to support the integration of early abortion care as an essential part of their comprehensive reproductive health care practice.

The goal of the toolkit is to reframe abortion as a scope of practice issue. The Toolkit is pro-professional and pro-choice: it acknowledges the political nature of abortion while encouraging a focus on the needs of patients and the abilities of professionals to meet those needs rather than on politics.

At its core, the Toolkit will guide advanced practice clinicians through how to develop a professional portfolio documenting:

- professional credentials (abilities and education);
- abortion knowledge and training; and
- the standards and clinical guidelines for safe abortion care.

The Toolkit includes:

- Essential information and statistics about:
  - the role of CNMs, NPs and PAs to increase access to safe abortion care;
  - the importance of professional credentialing: licensing, standards and competencies; and
  - the roles of state licensing boards and professional organizations.
- Case studies of successful approaches to establishing abortion as within advanced practice nursing (CNM and NP) and physician assistant scope of practice.

For more information about the Toolkit, please contact Grayson Dempsey, Project Director, Abortion Access Project, at gd@abortionaccess.org.

Apportion Values Clarification Workshop

NAF is pleased to offer a Values Clarification workshop. This free 90-minute workshop, facilitated by NAF-trained faculty, encourages medical professionals and students to examine their own values surrounding abortion. Examining values helps health care providers make well-informed decisions about which aspects of abortion care they feel comfortable incorporating into their professional practice (e.g., referrals, pregnancy options counseling and education, surgical and/or medical abortion at varying stages of pregnancy). If you’re interested in hosting a Values Clarification workshop at your institution, please contact the NAF Training Coordinator at naf@prochoice.org or 202-667-5881.

Employment Opportunities

Director of Training and Education

The National Abortion Federation (NAF), the leading pro-choice organization representing abortion providers and their patients, has an immediate full-time opening for the position of Director of Training and Education.

NAF is the professional association of abortion providers in the United States and Canada. Our members include the physicians, nurses, counselors, administrators, and other staff at 400 clinics and physicians’ offices in the United States and Canada. NAF is a 501(c)(3) organization dedicated to ensuring that abortion is safe, legal, and accessible. Our dynamic and innovative programs span a wide range of services designed to meet the unique needs of abortion providers and the women they serve.

The Director of Training and Education is responsible for one of NAF’s most important and visible programs. The Director:

- supervises all aspects of the design, development, and presentation of NAF’s two annual ACCME-accredited, abortion-specific educational conferences, including planning their
educational content, selecting and contracting with faculty, site selection and contract
negotiations, conference logistics, registration, exhibits, conference publications, and
promotional materials;
• oversees abortion values clarification workshops and residency training programs, and
develops webinars and other educational and training programs;
• develops and edits educational materials, curricula, and syllabi; and
• is responsible for the day-to-day supervision of two staff.

This is a senior-level position. The Director of Training and Education works closely with the
President and CEO and other senior-level staff. This position requires frequent interaction with the
Medical Education Committee of the Board, NAF membership, and leaders in the medical
community. A high energy level and a strong commitment to women's health and abortion rights
are essential. The ideal candidate will be experienced/knowledgeable about issues involving
abortion care delivery, reproductive health, professional/medical education and accreditation,
program evaluation, and conference planning.

Qualifications: The successful candidate will have:

• a minimum of seven years of related professional experience;
• familiarity with abortion care delivery;
• the demonstrated ability to plan, manage, and prioritize diverse and detailed tasks;
• strong writing, editing, and communication skills;
• interpersonal skills to work effectively with diverse groups; and
• resourcefulness, flexibility, and the ability to adapt to meet the unique needs of our
  membership.

A master's degree in a related field preferred. Salary is commensurate with qualifications and
experience. Excellent benefits. Office located in Washington, DC. NAF is an equal opportunity
employer.

How to apply:

Please send a letter of interest and a resume to NAF; 1660 L Street NW; Suite 450; Washington,
DC, 20036; or fax to (202) 667-5890; or email to careers@prochoice.org with the subject line
Director of Training and Education position.

Clinical Quality Assurance Specialist

The National Abortion Federation (NAF), the leading pro-choice organization representing abortion
providers and their patients, has an immediate full-time opening for the position of Clinical Quality
Assurance Specialist.

NAF is the professional association of abortion providers in the United States and Canada. Our
members include the physicians, nurses, counselors, administrators, and other staff at 400 clinics
and physicians' offices in the United States and Canada. NAF is a 501(c)(3) organization dedicated
to ensuring that abortion is safe, legal, and accessible. Our dynamic and innovative programs span
a wide range of services designed to meet the unique needs of abortion providers and the women
they serve.

Duties of the Clinical Quality Assurance Specialist include:

• Playing an integral role in establishing a consistent level of safe abortion care in North
  America through existing member improvement and recruiting new members into a culture
  of excellence.

• Conducting quality site inspections of the new member facilities including: planning site
  visits; conducting the site visit and exit interviews; communicating findings and providing
technical/clinical assistance to member facilities located throughout the U.S. and Canada.

- Assisting in actively recruiting new member clinics in the United States.
- Managing clinical outcome indicators and a complication statistics database. Ensuring receipt of quarterly reports from members; reviewing reports for outliers or opportunities for improvement; entering data and preparing annual reports for members.
- Coordinating with Director, Associate Director and other NAF staff in carrying out duties and responsibilities.

Qualifications: A successful candidate will have:

- a clinical degree (RN, NP, CNM, PA);
- must be able to travel (30%);
- direct experience working in an abortion facility preferred;
- knowledge of health care quality practices;
- strong commitment to a woman’s right to choose abortion;
- excellent organizational, written, and verbal communication skills; and
- experience in database management preferred.

Salary is commensurate with qualifications and experience. Excellent benefits. Office and position located in Washington, DC.

How to apply:

Please send a letter of interest and a resume to careers@prochoice.org with the subject line "Clinical Services Coordinator position," fax to 202-667-5890, or mail to:

Director of Clinical Services
1660 L Street, NW, Suite 450
Washington, DC 20036

Staff Updates

NAF is pleased to welcome Laura Galloway, MS, WHNP-BC, as the new Director of Clinical Services.