MISSION: The National Women’s Health Network strives to improve the health of all women by developing and promoting a critical analysis of health issues in order to affect policy and support consumer decision-making. We aspire to a just health system reflects the needs of all women.
**Raising Women’s Voices (RWV) for the Health Care We Need**

- In 2018, the Trump administration unleashed a barrage of regulatory attacks on public health. Trump’s agencies attacked contraceptive coverage, sought to take millions of taxpayer dollars from real family planning clinics (including Planned Parenthood) and give those funds to religiously affiliated fake clinics, tried to punish private insurance plans that cover abortion, and attempted to block legal immigrants and their U.S. citizen relatives from accessing public health care. They encouraged conservative states to dismantle Medicaid and deny coverage, sought to undermine the ability of people with pre-existing conditions to afford comprehensive insurance, and much more. With the NWHN’s assistance, our 30 state and local regional coordinators in 29 states helped the larger movement to generate a half million public comments opposed to Trump’s policies, raised media awareness about these attacks, helped make health care a major theme of the midterm elections, and advocated for state-based policy responses.

- Southern and conservative states with high numbers of uninsured are a special priority for the NWHN. In 2018, we welcomed the Mississippi Black Women’s Roundtable (MS-BWR) to the RWV regional coordinator network. MS-BWR immediately got to work with us, speaking at our December convening and fighting efforts to gut Medicaid coverage in Mississippi.

- RWV co-founder Byllye Avery and NWHN staff continued to provide financial support and technical assistance for organizational development through the Working Against the Grain project to strengthen the capacity of people of color-led groups. In 2018, we added reproductive justice leader SisterReach in Tennessee as a grantee.

**Challenging Dangerous Drugs and Devices**

- The NWHN remains one of the few women’s health organizations focused on the Food and Drug Administration (FDA) that doesn’t accept funding from drug- or device-makers. That leaves us free to speak up when the FDA is pressured to loosen its safety and efficacy standards for women’s health products. In 2018, we raised concerns about the uterine fibroid drug Esmya and applauded the FDA when it followed our recommendation to refuse to approve it.

- Our biggest victory, however, was the one you may never have heard of: saving the FDA Office of Women’s Health (OWH) when then-FDA Commissioner Scott Gottlieb tried to (illegally) defund, demote, and prevent it from doing its work. The OWH has proven invaluable for responding to consumer concerns and funding critical research. It was codified into law as part of the ACA and can’t be downgraded without congressional authorization. Armed with this knowledge, the NWHN helped organize a successful lightning-speed advocacy campaign to save the OWH, and Gottlieb was forced to back down within a week. Our campaign was covered by online publication Rewire in 2019 following Gottlieb’s resignation announcement.

- We also resisted a pharmaceutical company’s efforts to silence our warnings to women about their ineffective and potentially dangerous product. In the fall of 2018, the makers of flibanserin (brand name: Addyi) threatened to take legal action against the NWHN unless we removed all of our Addyi-related materials. It seems like the company believes that our “Pass on the Pink Pill — or Pass Out” campaign, initiated in 2015, played a role in the drug’s poor sales. We simply wanted women to know that the drug isn’t much better than placebo in improving their sex lives and could come with some serious side effects.

**Securing Sexual and Reproductive Health and Autonomy**

- In 2018, we co-wrote a guide with the National Institute for Reproductive Health (NIRH) for activists responding to state contraceptive policy initiatives. The guide builds on the Statement of Principles we developed with SisterSong in 2016 to address coercion in the provision of long-acting reversible contraceptives (LARCs).

- We have also been speaking up about Natural Cycles, a fertility awareness app cleared by the FDA in 2018. The app promotes itself as being “effective as the Pill,” but the FDA’s own warnings about the app raise questions about the role politics may have played. The app’s clearance fits into a larger pattern from the Trump-Pence administration, which has sought to promote religiously acceptable contraceptive methods like fertility awareness at the expense of more effective methods. We’re proud to say we have the most comprehensive informational materials available online, warning about Natural Cycles’ limitations, effectiveness, privacy vulnerabilities, and potential for abuse.

- Our sexual and reproductive health advocacy work appeared in a range of publications, from the New York Times to online-only publications like Bustle, geared to young women.

“The Network represents one of the best things about women’s movements in the United States. There is a very strong ethical center. It isn’t just the science. It’s the ethics. It’s the understanding of the economic factors and facts.” — MW, MADISON, WI
Having independent groups, like the NWHN that are not in the corporate pocket and are rooted in science and facts are so vital in today's climate. 
— AH, BURKE, VA

Board

The National Women's Health Network is governed by a committed and talented board of directors that is elected to a four year term. The following individuals served on the board in 2018.

An asterisk indicates that a board member's term ended mid year due to a board election

Chair
Mia Kim Sullivan
Administrative Vice Chair
Kira S. Jones
Action Vice Chair
Dipti Singh*
Secretary
Nadiah Mohajir
Treasurer
Tiffany Reed

Victoria Albina*
Erin Armstrong*
Mae-Gilene Begay
Dazón Dixon Diallo
Joy Eckert
Meredith P. Field
Anu Manchikanti Gomez
Kentina Washington-Leaphert
Kara Loewenthal*
Ziptly Mendoza*
Charlea Massion*
Ndidiama Amutah
Onukagho
Kimberly Robinson
Karen A. Scott
Francine Thompson

EX OFFICIO
Cynthia Pearson

Staff

The following individuals worked at the National Women's Health Network in 2018.

Executive Director
Cynthia Pearson
Digital Marketing and Communications Manager
Evita Almassi
Policy Advocacy Director
Sarah Christopherson
Office Manager
Erin Evans
Policy Associate
Alyssa Llamas
Development Director
Michelle M. Lockwood
RWV Regional Field Manager
Kalena Murphy

Helen Rodriguez-Trias
and Eunice Corfman Interns
Communications Interns:
Sarah Acs
Negar Esfandiari
Abigail Miller
Lily O'Connor Coates

Development Interns:
Hannah Camp
Afua Nyame Mireku
Julia Vitale

Policy Fellows:
Eliana Kosova
Tessa Ruff

Policy Interns:
Olivia Lyman
Madelyn McKeague

NWHN Founders
Barbara Seaman
Phyllis Chesler, Ph.D
Belita Cowan
Alice J. Wolfson, J.D
Mary Howell, M.D

11th ANNUAL
BARBARA SEAMAN AWARDS FOR
ACTIVISM IN WOMEN'S HEALTH

In 2018, we celebrated activists and accomplishments in women's health at the 11th Annual Barbara Seaman Awards for Activism in Women's Health. We honored awardees, Beverly Whipple, Co-founder of Cedar River Clinics and Sameera Qureshi, Director of Sexuality Education & Training at HEART Women & Girls, and listened to an impassioned message from our guest speaker, Silvia Henriquez, Co-director of All* Above All.

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Twitter: @THENWHN, @RWV4HEALTHCARE

2018 FINANCIAL STATEMENT

Total Income .................................. $1,201,274
Total Expense ................................ $1,225,440
Beginning Net Assets ...................... $800,538
Change in Net Assets ....................... ($24,166)
Ending Net Assets ........................ $776,372

INCOME

Grants $473,333
Membership $319,370
Donations $284,273
Annual Event $43,332
Google Adwords In Kind $37,084
Fiscal Sponsor Fees $26,141
Other Income $17,741

EXPENSES

Raising Women's Voices $323,780
Member Services $316,428
Health Policy $248,023
Communications $192,613
Fundraising $83,954
Board $31,828
Administration $28,814

PRELIMINARY STATEMENT. Audited statements will be available at www.nwhn.org.

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“You touched my heart and reminded me why I donated to the NWHN long ago. It was a 8 1/2 x 11-inch pamphlet in a community college library. It explained about breast lumps and most were benign. That gave me confidence & I never forgot to donate since then.”

— NWHN MEMBER

“The NWHN is both a moral and scientific center for women’s health.”

— CK, PROVIDENCE, RI

We are building the future we want to see. Take a look at where we are going and check out our Strategic Plan: Prioritizing Women’s Health: Fighting for Equitable Health Futures.