

Original post

The nurse practitioner has the opportunity to play a pivotal role in mitigating social impacts on marginalized women and children within the healthcare setting. Three actions the nurse practitioner can focus on are advocacy, improving quality of care, and focusing on care services within the community and beyond the clinic.

The nurse practitioner can work in conjunction with policymakers and advocate for marginalized women and children through policy. Advocating for these policies will help protect women from social discrimination and promote accessibility. An example of inequity is that single mothers have a harder time accessing treatment for mental health than men do (Prodan-Bhalla & Browne, 2019). Nurse practitioners can advocate for this patient population by fighting for policies for equity across patient populations and equal access to care. It is important for nurse practitioners to have an influential voice within policy making.

Additionally, the nurse practitioner can employ actions to improve quality of care for women and children. Improving quality of care can be accomplished through many different ways and looks different for each patient's needs. Improving quality of care can look like identify a primary language and providing interpreter services, or it could look like adjusting clinic hours for a single mother to come after work with her child. Sometimes a patient might need more than the 10-minute timeframe allowed to express concerns and feel heard. By making slight adjustments, if possible, a strong bond is formed with the patient and trust is accomplished. Many marginalized women do not trust healthcare professionals, thus a trusting bond between the patient and healthcare worker provides more quality care (Luongo & Nguyen, 2021).

Lastly, something I learned in nursing school, is to focus on the patient as a whole person, beyond the medical illness. I believe this also applies to mitigating impacts on marginalized women and children. This patient population needs resources and care beyond the clinic walls. A patient might come to the NP and express food insecurity or residing within a food desert. Within the Chicagoland area, there are a number of community refrigerators that are free to community members (The Love Fridge, 2022). The nurse practitioner can provide the patient with a list of food options near her home and may additionally provide information on Women, Infants, and Children (WIC) program (Special Supplemental Nutrition Program, 2022).

There is a role of federal, state, and local health policy in the marginalization of women, children, and childbearing families. The ethical implementation of these parties being involved in these patient populations is a controversial topic and seems to arise during different topics. Throughout the years there has been controversy apparent. Studies have demonstrated that enforced policies have created an unjust structure and a discrimination (Michener & Brower, 2020). This leads to limiting women's access to healthcare and

promotes inequities within the healthcare system. States policies have led to structural racism and inequity in the delivery in social services, which can cause poor quality of care for women and children compared to men in the same social class (Michener & Brower, 2020). I am a pediatric nurse and have seen the inequities through DCFS and social services cases. When women seek help and are failed to be met with dignity and respect by social services and those policies in place to “help”, the women face stressors and feel inferior in their own care.

The article expressed that policies do not promote women to access employment opportunities, which can lead to low income, higher rates of unemployment, and lower rates of education opportunities (Prodan-Bhalla & Browne, 2019). This ties into the importance of nurse practitioners advocating for just policies for marginalized women.

The Affordable Care Act (ACA) can be seen as one of the most important advances in women’s health policy. The ACA is a federal funded policy that positively impacts the marginalized group of women and children. The ACA provides preventive services, like annual mammograms, to women free of charge (Affordable Care Act, 2020). This additionally does not allow women to be denied health insurance for women’s health conditions that are preexisting. The ACA improves women’s health (Affordable Care Act, 2020). The textbook speaks about Bright Futures, which is a national program that promotes health and preventive care for the pediatric population. This is a program that supports the care and preventive screenings for the marginalized group of children (Lee et al., 2020). Both of these programs bridge the gap for marginalized women and children.

Affordable Care Act Improves Women’s Health. (2020, December 17). Office on Women’s Health. <https://www.womenshealth.gov/30-achievements/31>Links to an external site.

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Michener, J & Brower, T M. (2020). What’s Policy Got to Do with It? Race, Gender & Economic Inequality in the United States. An American Academy of Arts and Sciences. (109-117). <https://www.amacad.org/publication/race-gender-economic-inequality-united-states>Links to an external site.

Prodan-Bhalla, N., & Browne, A. J. (2019). Exploring women's health care experiences through an equity lens: Findings from a community clinic serving