

**Official Podcast Transcript**

**Title:** The Intersection of Environmental Health and Reproductive Justice

**Speaker:** Katie Huffling, DNP, RN, CNM

**Duration:** 00:25:33

**Katherine Atcheson (**[**00:05**](https://www.rev.com/transcript-editor/Edit?token=hpTNUsGbbKl18fjIu7AcVWxYydVP0-rAp8UWrCcbBvrNWLO_zLXJvhHcggi8JWlpal1DNe6ICoLsIPZIqLhMDnja4yA&loadFrom=DocumentDeeplink&ts=5.01)**):**

Hello and welcome to the Family Planning Files, a podcast from the National Clinical Training Center for Family Planning. I'm your host, Katherine Atcheson. On today's podcast, part of our ongoing series on reproductive justice, we'll be discussing environmental health and exposures within the reproductive justice framework. Our guest today is Katie Huffling, DNP, RN, CNM, FAAN. Dr. Huffling is the executive director for the Alliance of Nurses for Healthy Environments and has written and organized extensively on the intersection of health and environmental issues such as climate change and chemical policy. Welcome to the podcast, Dr. Huffling. We're so excited to speak with you today.

**Dr. Katie Huffling (**[**00:50**](https://www.rev.com/transcript-editor/Edit?token=D3n5afEBu3MNQr5UfiHbCOdn2yPqfRJGNcWRzma587jCmigGwpFMak3v_LZZmpNjtydTwdEZ4suT0PvUNqcAhnOd80A&loadFrom=DocumentDeeplink&ts=50.19)**):**

Thanks so much for having me. It's a thrill to be here.

**Katherine Atcheson (**[**00:54**](https://www.rev.com/transcript-editor/Edit?token=xIcpxIEVvu_SBD4cdiQCE1HdVUzbykyn02dbF0HKs35N8V_pNf1NB-_M3HqhRl6SFWUCvPbc0QlhBq1Wg8o3-zMzrNU&loadFrom=DocumentDeeplink&ts=54.18)**):**

Early in our reproductive justice series, we defined what exactly reproductive justice is, but how do you and your organization define environmental health and how do you all see it fitting in within the reproductive justice framework?

**Dr. Katie Huffling (**[**01:11**](https://www.rev.com/transcript-editor/Edit?token=DtCeu3hHxLlGQ7mkQrLzrQDobcq-jkbRNA97YytgBJfch6DTLZ38odM-rJTh1jszMzHvD77SuTjNi7RZ7au7m57414A&loadFrom=DocumentDeeplink&ts=71.61)**):**

Yeah, so we have a very broad view of environmental health. It, the environment is anywhere where we live, work, play, worship. It's the air we breathe, the water we drink, the soil that we walk upon, and we think of the pregnant person as the fetus's first environment. So, it's anywhere that you could come in contact with some type of environmental exposure. And I view environmental health as a key component to reproductive justice. When a person makes the decision to have a child, they have the right to be able to raise that child in an environment that helps support that child to be healthy and to thrive. And so, looking at the environment is a key component to that.

**Katherine Atcheson (**[**02:06**](https://www.rev.com/transcript-editor/Edit?token=hgV-3ryLixNObwWt4CQATn6PF_e4Po7WAPPkghP9AoLboj_PrG3hOls9wd_GHpu0DJwx5DBGP5se18FZkkoJP0uwzQc&loadFrom=DocumentDeeplink&ts=126.51)**):**

Thank you for defining that. And what are some current examples of environmental health issues or exposures or problems that are kind of going on in the US today? And how exactly do these environmental health factors influence sexual reproductive health?

**Dr. Katie Huffling (**[**02:27**](https://www.rev.com/transcript-editor/Edit?token=VJx6QAxEqYEppOu45T5566aDeja1rFHTJ5EGBOxpBMarYZKeWZdMj8OUOl628yaVKK2SRZqSFZpcVLeTMMSur9zKK9M&loadFrom=DocumentDeeplink&ts=147.12)**):**

I'd say the biggest issue that we're facing here today, both in the United States and globally, is climate change. And I think for many folks they'd be like, "Well, how does climate change impact reproductive health?" And actually, there's more and more research that's really showing. It can have significant impacts on our ability to have children, to have safe and healthy pregnancies, to have children that grow up healthy and strong. For example, with climate change, as we're seeing temperatures increase more days in the summer where it's really hot, very humid. In areas that we may not have experienced this before, it can be really challenging for a pregnant person to be able to stay well hydrated on those really hot summer days and later in pregnancy. Hydration is really key to preventing preterm labor. And so, as a nurse midwife talking with my nurse midwife colleagues and OBGYN colleagues on those hot summer days when we're just not used to the heat, those are the days where you see more women coming into the ER or into triage having preterm contractions.

**Dr. Katie Huffling (**[**03:46**](https://www.rev.com/transcript-editor/Edit?token=IsW0QQJZt5dUqwBDTPJc-J39n_g9QZXCE7HdCISZ2uVqlrBm4gneO-mckB2m_0In1_wIkYj1K7WpeF46zsSVuriQCiY&loadFrom=DocumentDeeplink&ts=226.71)**):**

And it's a lot of it has to do with the heat and not staying well hydrated. We also find on these high heat days, when the heat goes up, the air quality goes down, and there's a lot of research that's showing that poor air quality can be associated with pregnancy complications such as preterm birth, small for gestational age babies, stillbirth, all these things that all of us working in the reproductive health space to really trying to prevent. They just released the maternal mortality data for 2021, I believe, and our mortality data is getting worse and worse. And this is something as we're looking to address maternal health in this country, if we're not looking at climate change, I think we're going to have a really tough time reducing maternal morbidity and mortality because it does have such clear links to pregnancy complications. Other issues that maybe aren't as dark and easy to see are I think some more subtle and long-term exposures that are occurring.

**Dr. Katie Huffling (**[**04:58**](https://www.rev.com/transcript-editor/Edit?token=5hmF26Y-HI__WnmyHM8f5S1aSJWJ4_gVU-4YjygYlpZ5p0Qmqi_chZU3p-Yb2405-vP8uvicnuWge0Qmw6jwsMiOXIU&loadFrom=DocumentDeeplink&ts=298.47)**):**

For example, when I first got into the environmental health space, I was completely shocked to realize that many of the products that are on the shelves that are local grocery store or department store, a lot of the ingredients haven't been tested for safety and our regulations. They're really not very good at getting harmful ingredients out of those products. And so just thinking about personal care products, when you think about all of the things that you use every day, your shampoo, conditioner, soap, moisturizer, the list goes on and you think of how many different ingredients are in those, you're potentially throughout the day being exposed to some chemicals that could be linked to different reproductive issues, infertility, reproductive cancers, and we really don't have good data on how that long-term exposure could increase your risk of developing some of those issues.

**Katherine Atcheson (**[**06:04**](https://www.rev.com/transcript-editor/Edit?token=pgyvoWu-IpgeIHR0S-7NQ78HcSyh37xdI2cyu9h-lCp1kZqkBCc7V_LFslprOWLkUSgtZJ578yZQ9J4Rr-laLq-qNFg&loadFrom=DocumentDeeplink&ts=364.44)**):**

And to kind of build on that, about how many reproductive age people in the US live and work in those, shall we say it like chemical or environmental exposures, obviously we're all affected by climate change. We all live on earth, but there are people who have higher levels of exposures based on their environments. What's the sort of population size of this group?

**Dr. Katie Huffling (**[**06:36**](https://www.rev.com/transcript-editor/Edit?token=i-UU-eFj5kWOfZ_f8vO7WFyZ7qeG963rl1RWiMD_-d-wku3eSMu2ydfpIuZrl7KcHrFYdi-7y_cyMBA2XIZ-_2ojMtc&loadFrom=DocumentDeeplink&ts=396.36)**):**

Like you were saying, depending on the types of chemicals that we're looking at or environmental exposures, something like climate change everyone in the United States is impacted in some way. Most Americans live in areas that do not have air quality that's defined as healthy by the World Health Organization, but there are definitely some populations that have more exposures. We call these cumulative exposures, so exposures for multiple sources, and we call these environmental justice communities, or you may see it described as fence line communities.

**Dr. Katie Huffling (**[**07:18**](https://www.rev.com/transcript-editor/Edit?token=r9Zr8WA7_OGBvuAH3_87l7S2n0G00OWQsQNnUoXZkyMwrJ48JJIOXn0JnILIEiURt1wSxYLV1jOR2ACtyoPKn4gYOIw&loadFrom=DocumentDeeplink&ts=438.51)**):**

And these are communities, often lower income communities. They may be communities of colors in which we, unfortunately, the way that our regulatory system works and the way that our permitting system works, polluting industries often get located in these communities where you've got low-income residents, they've got multiple polluting industries there, and then they have other issues related to social determinants of health. They may be dealing with historic racism and racist policies. They may be dealing with lower quality schools, lack of access to healthcare, lack of access to fresh fruits and vegetables and healthy foods. And so, it's those same communities as we're looking at who is most impacted by the different social determinants of health. These are also usually the same communities that are having higher or more exposures to environmental contaminants.

**Katherine Atcheson (**[**08:24**](https://www.rev.com/transcript-editor/Edit?token=vbNyjp5umnHnrU-DMiucQ3nOSieELKAswbUR_GPBJbVAJco5SoHnrnKBej54qWiFeXH71pUmWKxJz-ciuRPO9FM4o0Q&loadFrom=DocumentDeeplink&ts=504.66)**):**

So, you've given us a really kind of great overview of environmental health and how our environments can affect our sexual and reproductive health. If we can move back from the big picture and move into the clinic, as most of our listeners, our clinicians, when should a provider take the time in a visit to ask about possible environmental contaminants or what kind of an environment a person lives or works in? Are there specific signs or symptoms or things a patient might mention that would warrant a thorough environmental health history?

**Dr. Katie Huffling (**[**09:03**](https://www.rev.com/transcript-editor/Edit?token=IQRZMZROL8-DSjdigkf2oHYZA6V4_YK22p1Qn8DOcq4PKYSJJhVVdoFrI2EHsMkSFU8QWEQ9T52pgMBA6V95pokJZpU&loadFrom=DocumentDeeplink&ts=543.69)**):**

So, I think that there's a number of different touchpoints where we can be doing an environmental assessment. I think when we're seeing young people coming in for their first exams or if they're wanting to get on some type of birth control, that can just be a great time to maybe not do an environmental assessment, but to talk about some of these things because making these changes is great before somebody's even thinking of becoming pregnant, if that's something that they would like to do. And they do have positive health benefits outside of pregnancy. So, I love talking with my patients, sometimes it's the first visit, it was talking about what kind of cosmetics they're using. And yeah, it's just a really great way to start having them just thinking about the issue. If you're doing preconception visits, I would include an environmental health assessment as part of that preconception visit.

**Dr. Katie Huffling (**[**10:05**](https://www.rev.com/transcript-editor/Edit?token=_gjIDGc-y7-xv-VV1atxXa_ftBT7VpbGj356RVWfTMplucG1ebB5DKRX6G3OXQWhPv6D17n4NdCb6oFlchVRO2ElVJY&loadFrom=DocumentDeeplink&ts=605.19)**):**

Assessing for workplace exposures, home exposures. I think now one of the areas that we're being more and more in the news is around this class of chemicals called PFAS that we're now seeing a lot of water contamination with PFAS chemicals throughout the United States. So, being aware of local water advisories, are they on municipal water or well water? And I know that this can feel like a lot of questions that are maybe different than what we're used to asking, but I feel like because there is so much information now on how environmental exposures impact reproductive health, that we need to start changing the feeling that it's like outside of our kind of normal assessments, that it needs to become part of that regular new patient fixed exam or preconception visit because there are ways that we can also counsel them to reduce these exposures and things that they can do to reduce their risk.

**Dr. Katie Huffling (**[**11:06**](https://www.rev.com/transcript-editor/Edit?token=sf4KDRRneHxMm82zTF9PHGDJEqcoeU2dPN8hV2ZCfhM3URz3Q_enwmrD18ZNPODh_AGEwljTG6MTaTctMLUvYG4_35w&loadFrom=DocumentDeeplink&ts=666.54)**):**

I also think first pregnancy visit or throughout pregnancy, that's a time when people are really looking to make healthy changes. They want to have a healthy pregnancy, have healthy babies, have a home that's healthy and supportive. And so that's a really great time to be doing these type of exposure assessments and providing anticipatory guidance on ways to reduce exposures.

**Katherine Atcheson (**[**11:32**](https://www.rev.com/transcript-editor/Edit?token=WFA7Zqu56Lb1vsLHeVlT1ty_irRAW9JKJ69LkmGqlGcqvEQp36Ahr3meaQSm0e0AXYq9gVzBMClikw0xf5rWs1tNZCk&loadFrom=DocumentDeeplink&ts=692.13)**):**

And that leads us really well into our next question. How exactly should a provider take an environmental health history assessment? What are some questions to ask? You mentioned asking about what sort of toiletries and cosmetics the patient might use or things like that.

**Dr. Katie Huffling (**[**11:51**](https://www.rev.com/transcript-editor/Edit?token=e9DG5kc27wH4X28v5Q1Rwobx_6T2MYJc5SI9kteK2lKUWuo2kv_2lStkS5TKRlT5xdf6WYOpjXJfbfoKb-8yJgEOd4w&loadFrom=DocumentDeeplink&ts=711.81)**):**

Yeah, and some other questions are, do you have access to fresh fruits and vegetables? If yes, do you ever buy organic or have access to organic? There are some really great tools: Environmental Working Group has this great dirty dozen and clean 15 for fruits and vegetables where they take USDA data where they're testing fruits and vegetables for the quantity of pesticide residues on them, as well as the number of pesticide residues. And so, the dirty dozen are the fruits and vegetables that have the highest number of pesticides or greatest levels, and those are the ones if you can only afford to pick and choose which you want to buy organic, those are the ones definitely buy organic. The Clean 15 are the ones the conventional have very little or no pesticide residues. So, if you're on a budget, don't waste your money on those to buy organic.

**Dr. Katie Huffling (**[**12:55**](https://www.rev.com/transcript-editor/Edit?token=Wt1upFBQlZVjYH2DMXfDPXc0Df2GXkE7hMhCvvNfh1CkfpweRO6N_9DeQIF4gUOz_MPIj3-cGzd6FfwqO3pf8_676ec&loadFrom=DocumentDeeplink&ts=775.56)**):**

Thinking about also things like are you using pesticides in your home? What kind of cleaning products are you using? Same within the workplace. Are you using pesticides in the workplace? What type of work do you do? Could there be other chemicals that you're using in the workplace? I'm just thinking of my new patient intakes for a pregnant patient. And you do already ask a lot of questions. It's a robust assessment, but I think that it's also a time where you've got a longer visit with that patient. You can definitely spend a little more time to talk about these environmental exposures and then providing in that new patient packet, some really great information on how to reduce those exposures. Again, patients are really interested in these issues and there's a lot that they can do to reduce the exposures.

**Katherine Atcheson (**[**13:46**](https://www.rev.com/transcript-editor/Edit?token=r1dqVJhCP_C-frkwOkWqKCeaYl4atGOM1LPjf5nDJgymWI1oIGhHcTAh7mfsNt5MISfrM2kGVSD52bG5MYDeHWULHYE&loadFrom=DocumentDeeplink&ts=826.56)**):**

Again, a wonderful intro into our next question, because environmental health is such a structural or almost societal issue, it can maybe be a little challenging for clinicians to offer advice or counseling that a patient could realistically take into practice. You mentioned, again, the organic fruits and vegetables, but what if a patient mentioned a workplace exposure or the way their house is built has some sort of contaminant in it, what are some good pieces of advice that a clinician could offer patient that is doable and also does have an impact to reduce those environmental exposures?

**Dr. Katie Huffling (**[**14:33**](https://www.rev.com/transcript-editor/Edit?token=qZicaf030wqtYgAfQIOzYb8rb9J3sy04ejYqTqxje9FkW4GcU5wX9xv145YHJH8ANFhR6sFutzslSgey6MfprNs_mGE&loadFrom=DocumentDeeplink&ts=873.78)**):**

I think that it can be really challenging when some of these are just really systemic issues like air pollution. The individual patient is not going to be able to have very much impact on reducing the air pollution. We can provide guidance on ways to reduce their exposures, but the air pollution's still going to be there. So, I think that that can be frustrating as a health professional. And one of the reasons that we as health professionals need to be using our trusted voice in support of policies that reduce air pollution, reduce environmental contaminants because of the significant health benefits that will be realized by these different policies. I also think being aware of resources that are available in your community. Great example of community resources related to environmental exposures occurs around lead exposures. We know that there's no safe level of lead. It's very damaging to fetal and children's developing nervous systems.

**Dr. Katie Huffling (**[**15:45**](https://www.rev.com/transcript-editor/Edit?token=BDZcFa4P5TYspripqXOLFYcsUdKZOuMXk9DzdJsZnwhUpJGPZzaOT-du0-fnF0QduSAbzMDQStYzBb90bnk_6IUUq1U&loadFrom=DocumentDeeplink&ts=945.69)**):**

And I think we've done a pretty good job of developing robust resources within communities. So, if a provider does find elevated blood lead levels, then there's the local health department or other folks that you can refer to that can help support finding ways, where is that contaminant coming from in the home or the workplace and then how can we help reduce those exposures to reduce the lead levels. So, I think it depends on what type of exposure is found. To go back to PFAS, it was really exciting to hear just this past summer, the National Academy of Science and Medicine released the first report for clinicians describing what are the health effects of PFAS chemicals? What should we be concerned about? How can we test for it? Because I know as a provider, I'd be like, "I don't even know what blood tests to order."

**Dr. Katie Huffling (**[**16:42**](https://www.rev.com/transcript-editor/Edit?token=qyUj35pq8-NpgyRsYf_egBoY6WYOsLuBzKzun9iEEOdXnLBLGevF1S9iyJkIysIRi4QTiov30d2vRRS-xEruhhaPA2I&loadFrom=DocumentDeeplink&ts=1002.69)**):**

If it's elevated, how do we treat that patient? And so, it provides very clear guidance for clinicians on any follow up that's needed if there's additional testing that may need to be done. And so, I'm hoping that for other kind of more widespread contaminants that will start getting more guidance like this, that can be really helpful to clinicians because it can be challenging. There's just so many different topics that we need to stay on top of that, that it can just be really challenging to stay up to date on all of these different environmental contaminants.

**Katherine Atcheson (**[**17:17**](https://www.rev.com/transcript-editor/Edit?token=Lh3UsenqrogyTgSljhR6EFBAz1dZDeBgfheeVb9zW6JS4ybaGf4udG-JWQISHX38b9xae2O1vMo1a__E42x2u3YtjiM&loadFrom=DocumentDeeplink&ts=1037.88)**):**

And so, if a provider wanted to give a client some more information about possible environmental contaminants or exposures or ways to improve sexual and reproductive health through lowering environmental exposures, what would be some good places that a provider could point a client or resources that they could give a client about that?

**Dr. Katie Huffling (**[**17:43**](https://www.rev.com/transcript-editor/Edit?token=wSPxRVC3Ymub5ov7Cpu-rbG5PkueyawQnTiMTUIzuq1FRgGMpCFS-27af6RmJ1lNjyPBLYfHE7EjYNIuO7EAOvTaWnM&loadFrom=DocumentDeeplink&ts=1063.29)**):**

Definitely the Pediatric Environmental Health Specialty units. They're federally funded by the US Environmental Protection Agency in the Centers for Disease Control. They're called PEHSUs for short, and there is one in each EPA region. So, there's 10 throughout the United States, and they have tones of materials both for patients and families as well as providers. And they're also a really great free resource. If you're seeing a patient, for example, they're pregnant, they're exposed to something in the workplace, and you don't know if it's something they need to be concerned about, you can call the PEHSU, you can have the patient call the PEHSU, they'll review the chemical that they're exposed to provide guidance around that, and it's totally free, which is amazing. For even kind of smaller exposures, they're happy to answer questions if it's something that's coming up in practice. A couple of other great resources, there's out of University of California, San Francisco, there's the program on Reproductive Health in the environment, they have patient resources, provider resources, and they also are doing a lot of research around how environmental exposures impact reproductive health.

**Dr. Katie Huffling (**[**19:08**](https://www.rev.com/transcript-editor/Edit?token=iSEjWdFoxfuTeld-sB0o5W7RZAyvcOnSrx0kUBnzmi02Sr3UUsNUuwD7JtxeKQelXDO0a7Y7MTNZLYjaRABXpuQb1yo&loadFrom=DocumentDeeplink&ts=1148.46)**):**

They're a really amazing resource. Another great group is the Breast Cancer Prevention Partners. They're a nonprofit who's really worked on looking at how we can prevent breast cancer. There are so many organizations, it's like Race for the Cure. Well, what if we could just prevent it from happening in the first place? And they've done some really amazing analyses, created really robust resources showing how it's not the only piece, but looking at the environment is definitely one of the pieces that we have to be addressing as we're trying to prevent breast cancer. Another great resource for, I'd say consumer products. So for cleaning products in the home, personal care products is Environmental Working Group. They take a ton of science, pull it together, and they create these really user-friendly online tools. One of them, the cosmetics one, it's called Skin Deep, and you can put any personal care product in there.

**Dr. Katie Huffling (**[**20:17**](https://www.rev.com/transcript-editor/Edit?token=b7tACTmaVA6E5he1AUXq1LKuxkmHtnep3DP2IaHE3XmXHtBSuCRdOmm5UxP22iM9sCeR3wgGG71tS2ZkpCg7mIAQcLQ&loadFrom=DocumentDeeplink&ts=1217.43)**):**

And the ones that have the lowest toxicity, they're green, the ones that are middle of the road, they have them as yellow. And on the ones where you really should stay away from them, they have lots of ingredients that have higher toxicities. Those are red. So, I think it's really user friendly, easy for patients to use. When I'm talking with students, I always have them, I'm like, "When we're done with our class, let's all of you. I want you to go home and look at something in your cosmetics bag or in your shower, and let's see what you find out," because I think it's really eye-opening.

**Katherine Atcheson (**[**20:54**](https://www.rev.com/transcript-editor/Edit?token=zO6tIYqwdngp9Xn7EKsyfYY7RtYuoFD5pl5AHTR5QWIM1P6OGVLS_aQPyAxNSRrR8cOleubvjcvp_gRCs2LOsyOmbt4&loadFrom=DocumentDeeplink&ts=1254.03)**):**

Similarly, what are some good resources for clinicians, especially if they want to start addressing environmental health in clinical practice? So, learning how to ask about that history, learning what kind of tests to order. If they think someone's had an exposure, where are good places for them to learn about that?

**Dr. Katie Huffling (**[**21:14**](https://www.rev.com/transcript-editor/Edit?token=p69_yuZLUxh9NcTbaUAfKfNDXp4d87S6Msam2ap6UfQNEWJWG67r_jR8NvNEu59GRL_dyT8uh8El1VW2JOqXLcKOsfY&loadFrom=DocumentDeeplink&ts=1274.82)**):**

Well, again, the PEHSUs have a ton of great resources. They frequently have webinars. They have a lot of kind of white papers on different pieces that I think are really helpful for folks working in the reproductive health space. Other places that you can go. My organization, the Alliance of Nurses for Healthy Environments, we have an environmental health and nursing free textbook that has a lot of great resources I think for any health professional. I would also say folks should be really looking to their professional organizations. I know American College of Obstetricians and Gynecologists, the American College Nurse Midwives, all of them have been really active in the environmental health space. And so I'd say going to your different professional organizations, and if you're not finding the tools that you need, I think this is where they can be really helpful in helping to develop those for their members because it is something that all of us in the reproductive health space really need to be working on and helping to develop more robust tools for all of us to be using.

**Katherine Atcheson (**[**22:27**](https://www.rev.com/transcript-editor/Edit?token=VFDHP9J62zqDc2nyNc0ldVSXwJ3T80dxr3neKVF1WGdbtpsnpZkfbZrOZdZjMuiRexbN_AOtkIwFokYcW9DUB3YQrJ8&loadFrom=DocumentDeeplink&ts=1347.45)**):**

Well, Dr. Huffling, this has been a wonderful conversation, but of course, all good things must come to an end. But before you go, if you had to give our clinician listeners one final takeaway, the one thing you want them to remember from our conversation, what would that be?

**Dr. Katie Huffling (**[**22:48**](https://www.rev.com/transcript-editor/Edit?token=aHJyxm5fTYI1SEjNTUZAVtZdziMgEX_H7uq8imUUC5KR27YtuJKQtwjFZHARgsznzI0murW69JGu6jSEUgX-3CWMd6o&loadFrom=DocumentDeeplink&ts=1368.24)**):**

I think it would be that I come to health from a very holistic focus, and I think all of us trying to provide holistic reproductive care, it's such a crucial piece to include environmental health within that care, and that we need to really stop thinking of it as like an add-on, but it should just be part of that routine care that we're providing to our patients to ensure that their reproductive health is the best that it can be.

**Katherine Atcheson (**[**23:18**](https://www.rev.com/transcript-editor/Edit?token=SxQ_ECb4omBzb23dkclXvugUeKEmQwLUILt3j_7I4w9S6UBJEJJG4SNVKaLSwFnjW8Q4z8T-QPu0BCoKdsh6_VhwSJY&loadFrom=DocumentDeeplink&ts=1398.18)**):**

Well, thank you so much for joining us today, Dr. Huffling, and for sharing your time and expertise.

**Dr. Katie Huffling (**[**23:24**](https://www.rev.com/transcript-editor/Edit?token=lb4JLObGixhm9E2aF8BRbYO8Acdp_4YZe6IFh3AVGbxo7MOdITBPXQrEE_fxbae5KJ0qJtoDh4LI8BhLktyulHtAoh8&loadFrom=DocumentDeeplink&ts=1404.93)**):**

Thanks for having me.

**Katherine Atcheson (**[**23:26**](https://www.rev.com/transcript-editor/Edit?token=OzoigA8hn9pGyUVVtiH7lF3BtKNpDkHQEVVk1-2H2Q70_mXo_JIu4JgKr457lTIAqtyw52LHDnlqYz4qZLHDbkeY5Lo&loadFrom=DocumentDeeplink&ts=1406.1)**):**

For more content, including previous podcast episodes, search for The Family Planning Files or subscribe to our show on iTunes, Google Podcast, Spotify, Stitcher, or wherever you listen to podcasts. For transcript of this podcast as well as other online learning activities and continuing education opportunities, please visit our website at www.ctcfp.org. While you are there, you can sign up to receive our newsletter, Clinical Connections at the top of the page. You can also follow the National Clinical Training Center for Family Planning on Twitter at nctcfp, all lowercase, and now on LinkedIn. The National Clinical Training Center for Family Planning is funded by the Office of Population Affairs to provide continuing education training and technical assistance to Title X grantees, subrecipients, and service sites, and is supported by DHHS grant number 5 FPTPA 006031-02-00. This podcast is intended for informational purposes only and does not constitute legal or medical advice or endorsement of a specific product.

**Katherine Atcheson (**[**24:38**](https://www.rev.com/transcript-editor/Edit?token=taGHx9UU6hOw68wS7BeuBJaYOA2Ib0vN0WWHlWij_AXMjQ5rfzAi0HxJB14jh76EY62tAzbBJkmToebqS_2zxu2MMBo&loadFrom=DocumentDeeplink&ts=1478.94)**):**

Opinions expressed herein are the views of the contributors and do not necessarily reflect the official positions of the Department of Health and Human Services, or DHHS, office of the Assistant Secretary of Health, or OASH, or the Office of Population Affairs or OPA. No official support or endorsement by DHHS, OASH, and/or OPA is intended or should be inferred. The music written by Dan Jones and performed by Dan Jones and the Squids other production support provided by the Collaborative to Advance Health Services at the University of Missouri- Kansas City School of Nursing and Health Studies. And finally, thank you to our listeners for tuning in today. We hope that you'll join us next time for another episode of The Family Planning Files.