Massachusetts Board of Registration in Nursing

Advisory Ruling on Nursing Practice

**Title:** Certified Nurse Midwives:Care of Transgender and Gender Diverse Individuals

**Advisory Ruling Number:** 2101

**Date Issued:** January 13, 2021

**Authority:**

The Massachusetts Board of Registration in Nursing (Board) is created and authorized by Massachusetts General Laws (M.G.L.) c. 13, §§ 13, 14, 14A, 15 and 15D, and G.L. c. 112, §§ 74 through 81C to protect the health, safety, and welfare of the citizens of the Commonwealth through the regulation of nursing practice and education. In addition, M.G.L. c.30A, § 8 authorizes the Board to make advisory rulings with respect to the applicability to any person, property or state of facts of any statute or regulation enforced or administered by the Board. Each nurse is required to practice in accordance with accepted standards of practice and is responsible and accountable for his or her nursing judgments, actions, and competency. The Board’s regulation at 244 CMR 9.03(6) requires all nurses to comply with any other law and regulation related to licensure and practice.

**Scope of Practice:** Certified Nurse Midwives.

**Purpose:**

To guide the practice of Certified Nurse Midwives whose clinical responsibilities include the care of transgender and gender diverse individuals.

**Advisory:**

As per M.G.L. C. 112 Section 80G: A nurse authorized to practice as a certified nurse-midwife, under 80C, may order and interpret tests, therapeutics and prescribe medications in accordance with regulations promulgated by the board and the commissioner of public health under subsection (g) of section 7 of chapter 94C. Nurse-midwives shall practice within a health care system and have clinical relationships with obstetrician-gynecologists that provide for consultation, collaborative management or referral, as indicated by the health status of the patients. Nurse-midwifery care shall be consistent with the standards of care established by the American College of Nurse-Midwives (ACNM).

As per 244 CMR 4.06 (2) (a), A CNM will only practice in the clinical category(s) for which the CNM has attained and maintained certification. A CNM may attain additional competencies within his/her category(s) consistent with the scope and standards of CNM practice.

It is the Board’s position that it is within the CNM’s scope of practice to provide care to

transgender and gender diverse individuals for which the CNM has been educationally

prepared and/or for which competency has been established and maintained.

The ACNM considers the use of inclusive non-discriminatory language a powerful tool that may be used to address inequities. They have chosen to use both gendered and gender-neutral terms to represent the full diversity of people who experience pregnancy, birth, and lactation. They also acknowledge and support people who are not childbearing, but are accessing sexual and /or reproductive health care.[[1]](#endnote-1)

Since 2012, ACNM has recognized the role of midwives in caring for transgender and gender diverse (T&GD) individuals. Similarly, administration of hormone therapy for gender affirmation is appropriate for primary care providers, including certified nurse-midwives/certified midwives who have undergone appropriate training.[[2]](#endnote-2)

**Definitions:**

* Certified Nurse Midwife (CNM): means a currently licensed Massachusetts registered nurse RN) who has authorization by the Board to engage in advanced nursing activities. (see definition under advisory).
* ACNM: American College of Nurse Midwives, the certifying organization for CNMs. The ACNM supports efforts to provide transgender and T&GD individuals with access to safe, comprehensive, culturally competent health care and therefore endorses the 2011 World Professional Association for Transgender Health (WPATH) Standards of Care[[3]](#endnote-3).
* Transgender and gender diverse (T&GD) individuals: means individuals whose gender expression and/or identify differs from their sex assigned at birth. As a note the ACNM uses Gender Nonconforming (TGNC) in the *Core Competencies for Basic Midwifery Practice* as an umbrella term for all individuals whose gender expression and/or identity differs from their sex assigned at birth.[[4]](#endnote-4) In order to cover the full spectrum of patients and to respect that individuals are not out of conformance, the Board uses term Gender Diverse instead.
* Non-discriminatory language: the use of both gendered and gender-neutral terms to represent the full diversity of people who experience pregnancy, birth, and lactation as well as people who are not childbearing, but are accessing sexual and /or reproductive health care.[[5]](#endnote-5)

1. *American College of Nurse Midwives.* Core Competencies for Basic Midwifery Practice. Approved March 2020. [ACNMCoreCompetenciesMar2020\_final.pdf (midwife.org)](https://www.midwife.org/acnm/files/acnmlibrarydata/uploadfilename/000000000050/ACNMCoreCompetenciesMar2020_final.pdf) Accessed November 25, 2020.

   *American College of Nurse Midwives.* Core Competencies for Basic Midwifery Practice. Approved March 2020. [ACNMCoreCompetenciesMar2020\_final.pdf (midwife.org)](https://www.midwife.org/acnm/files/acnmlibrarydata/uploadfilename/000000000050/ACNMCoreCompetenciesMar2020_final.pdf) Accessed November 25, 2020. [↑](#endnote-ref-1)
2. *American College of Nurse Midwives.* Position Statement. Transgender/Transsexual/Gender Variant Health Care. Developed: November 2012. Board of Directors Approved: December 2012. [POSITION STATEMENT (midwife.org)](https://www.midwife.org/acnm/files/ACNMLibraryData/UPLOADFILENAME/000000000278/Transgender%20Gender%20Variant%20Position%20Statement%20December%202012.pdf). Accessed 11/24/2020 [↑](#endnote-ref-2)
3. *American College of Nurse Midwives.* Position Statement. Transgender/Transsexual/Gender Variant Health Care. Developed: November 2012. Board of Directors Approved: December 2012. [POSITION STATEMENT (midwife.org)](https://www.midwife.org/acnm/files/ACNMLibraryData/UPLOADFILENAME/000000000278/Transgender%20Gender%20Variant%20Position%20Statement%20December%202012.pdf). Accessed 11/24/2020 [↑](#endnote-ref-3)
4. [↑](#endnote-ref-4)
5. Ibid, p.2. [↑](#endnote-ref-5)