

Live Name Change Q & A

Last updated at 11:13pm EST, April 9, 2019

Below is a list of frequently asked questions we have received. This is a live document that will be updated frequently so we invite you to regularly check back for newly added questions and answers. Some of these questions will be addressed at the Virtual Name Change Town Hall on April 8, 2019 (8pm EST) as well as additional new questions. To submit a question, please [click here](#).

TOPIC AREA: PROPOSED NEW NAME

Q. What has been done to ensure that all perspectives have been considered in an open and transparent manner?

A. The SoWH Board has emphasized a fully transparent process, including the following opportunities/platforms for member input and feedback:

Result of member feedback have pointed to the majority of our members support a more inclusive name focused on 'what' we treat.

Feb 2015	Name Change Task Force Member Survey	Online survey	Over 200 members responded, with the majority supporting further inquiry into the possibility of a name change.
Fall 2015	SoWH Name Change Survey	Online survey	Suggestions for names, gathering information about practice content
Feb 2016	Navigate consulting Thought Leadership Discovery interviews; APTA, Component Leadership, members	More than 30 hours of in-person Interviews Town Hall at CSM Business Meeting full presentation and open discussion	Data collection from SoWH stakeholders
March 2016	Name Change & Branding Survey	Online survey	314 member responses
Feb 2017	CSM Business Meeting	In-person open forum	

June 2017	Assess support of "Academy of Women's Men's and Pelvic Health Physical Therapy	Online survey	640 responses (21% of membership feedback) including 401 member comments. Primary submitted alternative name was Academy of Pelvic Health Physical Therapy (56). 92/186 name suggestions included just "Pelvic" (Pelvic Health Section/Pelvic Health Physical Therapy/Academy of Pelvic Health) View Detailed Results
Fall 2017	SOWH Care & Share Submissions	Online ability to send info regarding concerns/thoughts regarding all SoWH issues	Always open and available for membership
Feb 2018	CSM Business Meeting	In Person open forum	
July 2018	Bylaws/Name Change Town Hall	Facebook/Online/YouTube	
July 2018	Open Comment Period on Academy of Pelvic Health Physical Therapy	Care & Share online form	34 comments (26 approve/4 disapprove)
April 2019	Name Change Town Hall	Facebook/Online/YouTube	

The following questions have also been asked in relation to the **PROPOSED NEW NAME**. The answer posted above is also relevant to these questions posted below. More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

NAME1:

Why are you changing the name of the SoWH?? What is the new name to be??

NAME2:

Why are we presented with only 1 option for a name change? Pelvic health is so limiting and it does not indicate the scope of practice of women's health. Is the intention to limit the scope of practice of the section to simply the pelvis?

NAME3:

To change to the section on pelvic health is like the orthopedic section changing to the section on knees. We would be excluding the whole other gamut of women's health. Why not have a SIG for pelvic health?

NAME4:

Can we find a good compromise and call it "Academy of Pelvic and Women's Health"??

NAME5:

"I really appreciate ALL the hard work that's been put into this. My only opposition to this proposed name is the exclusion of the obstetric/postpartum population not related to pelvic health. I don't really want to see the name longer, but I do wonder if the following should be considered:
""The Academy of Obstetric and Pelvic Health PT"""

NAME6:

Recommend "Pelvic Health" be considered to replace Women's Health.

NAME7:

In light of other sections' name changes, 'Academy of Pelvic Physical Therapy' encompasses much of what we do with both men, women and children, as well as prenatal, postpartum. I know it doesn't address much about lymphedema or osteoporosis, but both of these conditions are also concerns in the Oncology Section and Orthopedic Sections.

NAME8:

"I would encourage the progression of a section name change to incorporate a wider scope of our population."

NAME9:

"I like ""Section of Pelvic Health"" - for the name change. . . I think more reflective of what our member's focus on and keeps it open that we treat men, women and children ."

NAME10:

"I work with both women and men and have felt for a long time that the name should be more inclusive of the populations we treat. Referring to us as pelvic medicine or pelvic health therapists better represent our mission/vision."

NAME11:

"I love the name change recommendation and I love the video that was put together! Outstanding job! Makes me so excited to be part of the Section"

NAME12:

"I absolutely approve of the name change, though I wonder what it means in terms of the WCS process and content. I haven't pursued WCS because I identify more as a pelvic PT than a WCS, but will there be a PCS coming down the pipes instead?"

NAME13:

"Have you considered renaming the section: The Academy of Pelvic Physical Therapy? Bit shorter, doesn't mention men or women."

NAME14

"I'll admit I never even thought of what patients who don't fully identify with male or female would think, so I appreciate the ""aha"" moment you have provided. Are there members of our section that specifically work with patients who are transitioning (or already have)?

Would something like the ""Academy of Gender-care Physical Therapy"" better capture that, or ""Academy of Lymphedema and Pelvic Health PT""? Just wanted to throw those out there while I was thinking of it."

NAME15:

"Good for you SoWH leadership!! Please continue to take into account the gender fluidity concern. I strongly support the simple yet, in my opinion, all encompassing name: Academy of Pelvic Health Physical Therapy."

TOPIC AREA: WCS & SOWH CAPP COURSES

Q. What will happen to the WCS exam?

A. From Derek Stepp of ABPTS:

- *"The Academy name change would not result in a change to the current women's health board certification. It is unclear ABPTS even has the authority to make a name change, if they were so inclined to do so, as it was the House of Delegates and not ABPTS that officially approved the Women's Health Board Certification. "*
- *"The recent 2019 DSP revision did expand to include men and children, but no proposal to change the DSP or certification name came as a result from the Women's Health Specialty Council. And again, it did not eliminate the other elements of the current board certification exam and guidelines. A final published edition of the new DSP is not yet available, but we are expecting it within the next 4-6 weeks."*

Q. Can you please comment on the future of the WCS, JWHPT, residencies, DSP, entry-level standards etc - all of which have been created based on the entirety of women's health (vs just pelvic health)

A. 2019 DSP update includes males and pediatrics. The Name change research/process took into consideration update in DSP at the time of the DSP revalidation pilot study completed in 2017 and raw data received in 2017/18. DSP revision with changing content was an initial reason a name change was pursued.

A. ABPTRFE accredited residency programs are based on ABPTS DSP content and are required to stay up to date with any changes and revisions of the DSP (Description of Specialty

Practice). The final 2019 DSP revision will be available in April/May 2019. DSP revision with changing content was an initial reason a name change was pursued. The 2019 DSP update has content changes which include male and pediatric pelvic health. The Name Change research/process took into consideration the planned DSP revision (updated every 10 years). The initial stages of the name change process took place at the same time of the DSP revalidation pilot study (completed in 2017). The Name Change Task Force worked in conjunction with the DSP revision group and their raw data was provided to the Task Force in 2017/18 for consideration. The final draft of the revision was also provided to the SoWH Board for consideration ensuring there was alignment between changing DSP content and a potential name change.

Q. How will the Section/Academy reach those other populations who have previously been served by WCSs that will no longer fit? I am deeply concerned that removing the name women from the section is a giant step backwards. It seems to me that the role of women in health care is still largely second class. Will the section still be dedicated to the advancement of quality health care for women? or will the section only be concerned with helping grow pelvic health? If women are still a priority, how will anyone know?

A. Our organization, regardless of the name, will always include women. We have always had plans to address this concern amongst our membership about where “women’s health” will have a home via a Women’s Health SIG to specifically address issues unique to women. This SIG would join Pregnancy/Postpartum SIG and a revival of the Male Pelvic Health SIG.

Our members are and will always be advocates for their patient populations. A name change will continue to provide a voice for women but also take steps to giving a voice to growing underserved populations. The name change will be more inclusive to meet the needs of men, women, LGBTQIA, children and others who may need our care

Q. Changing the name to pelvic health will eliminate all other aspects of women's health and therefore narrow the focus of the section. This seems in opposition to the current climate in this country. Will the section still welcome courses, research, PT curriculum, residencies and certifications on aspects of women's health other than their pelvic floor? If so, what are the plans to let the community of physical therapists outside the section know that all aspects of women's health are still part of the section?

A. Current content related to SoWH course offerings and activities will be maintained. No content is planned to be removed. Content in the DSP 2019 Revision actually increases and becomes more inclusive.

The following questions have also been asked in relation to the **WCS exam and SoWH CAPP Courses**. The answer posted above is also relevant to these questions posted below. More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

WCS1:

With the most recent DSP based on the new practice analysis, the blue print for exam questions was based on % of patients "conditions" currently seen by those that answered the survey with ~ 50% being various pelvic floor dysfunctions (not Pelvic health) and the other ~50% being other women's health diagnoses. Since this data was not collected on the 1st practice analysis, there is no data to validly indicate a "change in practice" has occurred to base the name of our component on 50% of our practice.

In addition, ABPTS recently denied approval of "vestibular" as a specialty practice because it was deemed a sub-specialty and ABPTS currently does not provide certification for sub-specialties. With the results of the recent practice analysis, ABPTS, and probably the APTA HOD, would deem "pelvic health" to be a sub-specialty. Thus the specialty, upon which our section is based, would not be in line with the new name of our component. Does the BOD not think this will only confuse other practitioners and the public even more?

WCS2:

1. Was there consideration of an open forum (similar to the process the House of Delegates uses to make major decisions) so that various perspectives could be shared with the membership and the Task Force could describe their process and how they arrived at the name NOT chosen? The only open discussion I am aware of was at CSM Annual Business meeting a few years ago. We know that a small percentage of members attend. Are the people who have commented representative of the entire membership?
4. How will this name impact specialty practice and the WCS, the scope of our practice? Will pregnancy, breast cancer, etc be excluded?

WCS3:

What will happen to the women's health clinical specialists? Will that name change as well?

WCS4:

I am a WCS. I do not want to see the specialty certification change to focus on pelvic health alone; How will the APTA HOD vote to change the section name to the Academy of Pelvic Health PT, and the ABPTS vote to change this when the DSP still includes a broader focus (including lymphedema, osteoporosis, post breast surgery care, etc)? Seems to me the name would be inconsistent with the specialty certification.

WCS5:

Will the WCS stay the WCS? Will it change going forward? what about people who already have a WCS? Will there be an option to keep it vs change to a new name (e.g. for those who focus on women's health

(peripartum care, breast & lymph, etc) rather than pelvic health?

WCS6:

I have found the Guide for Women's Health Content in Entry Level PT Education to be very useful in the academic setting and as a resource I have provided other international women's health PT organizations. What will be the Section message to PT programs about content to include in PT education if the scope of practice and name narrow to be "Pelvic Health"? I know the leadership keeps saying you will still cover areas outside of pelvic health, but seems like you are speaking out of both sides of your mouth; either drop the other areas or take on a name that reflects what your membership does and wants covered by the Section.

WCS7:

Wikipedia would say that a brand "is an overall experience of a customer that distinguishes an organization or product from its rivals in the eyes of the customer." How does the proposed name change, a body part, describe the entire scope of work that we do?

TOPIC AREA: ROLE OF WOMEN & IOPTWH

Q. How will the Section/Academy reach those other populations who have previously been served by WCSs that will no longer fit? I am deeply concerned that removing the name women from the section is a giant step backwards. It seems to me that the role of women in health care is still largely second class. Will the section still be dedicated to the advancement of quality health care for women? or will the section only be concerned with helping grow pelvic health? If women are still a priority, how will anyone know?

A. Our organization, regardless of the name, will always include women. We have always had plans to address this concern amongst our membership about where "women's health" will have a home via a Women's Health SIG to specifically address issues unique to women. This SIG would join Pregnancy/Postpartum SIG and a revival of the Male Pelvic Health SIG.

Our members are and will always be advocates for their patient populations. A name change will continue to provide a voice for women but also take steps to giving a voice to growing underserved populations. The name change will be more inclusive to meet the needs of men, women, LGBTQIA, children and others who may need our care

Q. Most of the member countries of the IOPTWH have names that include women's health; has the Section BOD considered that changing our name to Pelvic Health will put us out of step with other subgroups around the world? The IOPTWH newsletter that detailed the discussion on the IOPTWH name change from South Africa showed clear preference by member

organizations to keep "women" in the IOPTWH name; why take a different path? Can't we include "women" and 'pelvic health" in our name like the Australians and New Zealanders?

A. Intentions and actions definitely matter. Changing the name does not change the dedication of this association to IOPTWH and its mission. This association will continue to be members of IOPTWH, continue to champion women leadership / champion women as researchers and topics of research / champion the further growth of women owned and operated PT practices / and also champion the need to intentionally create welcoming places for women physical therapists, physical therapy assistants and students.

In Spring 2017, a survey was put forward to membership assessing the acceptance of a potential name change to “Academy of Women’s, Men’s and Pelvic Health” Physical Therapy.” This was the unanimous recommendation of the Name Change Task Force and the recommendation of the SoWH Board of Directors (8:2). This name was nearly identical to the new name adopted by New Zealand (New Zealand Pelvic, Women’s and Men’s Health Special Interest Group) and Australia (Women’s, Men’s and Pelvic Health Physiotherapy Australia). SoWH membership did not show clear support for this name option. With over 600 responses and 400 comments, more than 70% of the 186 suggested names provided from membership had “Pelvic” only in the name. The current name recommendation is a reflection of this survey data.

The women in our local communities also need safe spaces. We need to create an environment where women, men, and gender non-confirming PTs and PTAs take CAPP (Certificate of Achievement in Pelvic Physical Therapy) Courses, seek CAPP Certification, and the WCS Credential among varying specialities where the pelvic area is impacted like Sports, Geriatrics, Home Health, Oncology and Orthopedics. If these PTs can recognize where there patients, particularly their female and gender non-confirming patients need pelvic-floor physical therapy to improve their movement, then we will further ensure that women and gender non-confmring members of our local communities will have access to wholistic PT care.

The following questions have also been asked in relation to the **Role of Women in the Name Change**. The answer posted above is also relevant to these questions posted below. More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

Role of Women 1:

I am deeply concerned that removing the name women from the section is a giant step backwards. It seems to me that the role of women in health care is still largely second class. Will the section still be

dedicated to the advancement of quality health care for women? or will the section only be concerned with helping grow pelvic health?

If women are still a priority, How will anyone know?

RoleofWomen2:

Changing the name to pelvic health will eliminate all other aspects of women's health and therefore narrow the focus of the section. This seems in opposition to the current climate in this country. Will the section still welcome courses, research, PT curriculum, residencies and certifications on aspects of women's health other than their pelvic floor? If so, what are the plans to let the community of physical therapists outside the section know that all aspects of women's health are still part of the section?

RoleofWomen3:

How will the section continue to support WH practitioners who focus on additional areas to the pelvis?

RoleofWomen4:

I understand one goal of the name change was to have a name that was more inclusive and would allow clients to more easily find therapists doing WH, men's health and pelvic health; so why choose a name that EXCLUDES women's health PT areas such as lymphedema and post breast surgery care, and osteoporosis?

TOPIC AREA: THE JOURNAL - JWHPT

Q. What will happen to the name of the Journal and how will this change the focus of the research offered there?

A. The Journal name will remain the same. The board is open to the opportunity to have multiple journals in the future to meet the needs of our readership. This is common practice across the medical field. The current goal of the Journal is and has been primarily on indexing. There is no intent to change the name of the Journal. As the name will remain the same, there are no downstream costs for the Journal.

Q. Since Nancy Donovan (former Editor-in-Chief of JWHPT) and Cynthia Chiarello (current Editor-in-Chief) have expressed at CSM 2019 and CSM 2018 that having a Section/Academy name that is different from the JWHPT title will probably be devastating to JWHPT, do you have data that suggests manuscript numbers will not decrease? In the past JWHPT has received manuscripts on the topics of incontinence, pre/post partum, lymphedema, medical imaging, menopause, osteoporosis, pelvic pain, chronic pain, women's musculoskeletal problems, women's sports, women's health promotion, post-cancer rehab. Considering the

narrow focus of the proposed name, how do you conclude that this will not decrease submissions to the JWHPT? On what basis are you dismissing the opinions from leaders of JWHPT? Authors will typically go to Section/Academy website and see only pelvic health in the name and most likely decide to find a journal specific to the content of their manuscript.

A. The JWHPT name is not changing and we have taken the JWHPT leadership opinion into account in making this decision. While JWHPT is an independent entity subsidized almost entirely by SOWH, we respect and value the opinions of our editorial team, which is why the name is remaining the same. We also recognize and value that our members have explicitly and repeatedly expressed their desire to have JWHPT indexed in Medline, which is another reason we are choosing to keep JWHPT as is.

To address the point of authors searching for journals, the most common practice by researchers is not to search for journals by professional organizations but by the name, mission, and scope of the journal. Therefore, if someone wants to publish a manuscript in the area of women's health, the name, mission, and scope of the journal will help that individual decide whether or not to submit their manuscript there.

Regarding the number and types of articles published in JWHPT, the most recent published data we have is the bibliometric analysis of JWHPT performed by Bishop and colleagues for the period 2005-2015 (Bishop et al 2017) . It is worth noting that Dr. Bishop is the current statistical consultant and member of JWHPT's editorial team. This publication indicates that the number of research articles published in JWHPT was less than 20% of total published items, indicating that overall number of research manuscripts has not actually been very high, with the total number of research articles per year ranging from 5 to 14 with an average of 9. The most common clinical conditions studied were incontinence (21%), pregnancy related pain and issues (19%), and pelvic pain (16%), indicating that over half of the total publications during this 10-year time period fell into the realm of pelvic and abdominal health.

Q. Please provide examples of medical associations where the Journal name is not reflective of the organization's name.

- 1. American Association of Anatomists** (*just approved name change 2/11/19 to American Association of Anatomy*)
 - a. Journals** (all journals for association)
 - i. Developmental Dynamics
 - ii. Anatomical Sciences Education

iii. The Anatomical Record

2. American Psychological Association

a. Journals with names that don't include Psychology/Psychological in the Name

- i. Behavior Analysis: Research and Practice
- ii. Behavioral Development
- iii. Behavioral Neuroscience
- iv. Decision
- v. Dreaming
- vi. Evolutionary Behavioral Sciences
- vii. Experimental and Clinical Psychopharmacology
- viii. Families, Systems, & Health
- ix. Group Dynamics: Theory, Research, and Practice
- x. International Journal of Play Therapy
- xi. International Journal of Stress Management
- xii. Journal of Threat Assessment and Management
- xiii. Law and Human Behavior
- xiv. Motivation Science
- xv. Personality Disorders: Theory, Research, and Treatment
- xvi. Spirituality in Clinical Practice
- xvii. Traumatology

3. American Heart Association

a. Journals (all journals for the association)

- i. Arteriosclerosis, Thrombosis, and Vascular Biology
- ii. Circulation
- iii. Circulation: Arrhythmia and Electrophysiology
- iv. Circulation: Genomic and Precision Medicine
- v. Circulation: Cardiovascular Interventions
- vi. Circulation: Cardiovascular Quality and Outcomes
- vii. Circulation: Heart Failure
- viii. Circulation Research
- ix. Hypertension
- x. Stroke
- xi. Journal of the American Heart Association

The following questions have also been asked in relation to the **Journal - JWHPT**.

The answer posted above is also relevant to these questions posted below.

More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

JWHPT1:

"It seems that the section mission has changed from one of Women's health to a body region as listed below: advance global excellence in abdominal and pelvic health through evidence-based practice, innovative education, research and social responsibility.

How will this affect the Journal of Women's Health? Do you anticipate that the scope and content of the journal will have to change to be in accordance with the section/academy?"

JWHPT2:

The JWHPT needs scientific, high quality publications. Changing the name to the Academy of Pelvic Health PT narrows the scope of practice of the "Academy/Section"...won't this negatively impact the journal? Seems to me many will see a disconnect between the journal and the section, especially if the journal stays the JWHPT but the academy/section is focused on pelvic health.

JWHPT3:

Since Nancy Donovan (former Editor-in-Chief of JWHPT) and Cynthia Chiarello (current Editor-in-Chief) have expressed at CSM 2019 and CSM 2018 that having a Section/Academy name that is different from the JWHPT title will probably be devastating to JWHPT, do you have data that suggests manuscript numbers will not decrease? In the past JWHPT has received manuscripts on the topics of incontinence, pre/post partum, lymphedema, medical imaging, menopause, osteoporosis, pelvic pain, chronic pain, women's musculoskeletal problems, women's sports, women's health promotion, post-cancer rehab. Considering the narrow focus of the proposed name, how do you conclude that this will not decrease submissions to the JWHPT? On what basis are you dismissing the opinions from leaders of JWHPT? Authors will typically go to Section/Academy website and see only pelvic health in the name and most likely decide to find a journal specific to the content of their manuscript.

JWHPT4:

I am very concerned about how the name change may impact the Journal of Women's Health Physical Therapy. At CSM in Washington DC, Carrie stated that the journal would maintain the current title. When I questioned whether any other APTA Sections/Academies have a journal title that is different from the name of the Section, she replied that there is none. However, she did say that other entities have that situation. In my brief exploration of this, I found that the American Academy of Neurology has 4 journals within the Academy. These include: 1. Neurology, 2. Neurology Clinical Practice, 3. Neurology Genetics, 4 . Neurology: Neuroimmunology and Neuroinflammation. However, it should be noted that the American Academy of Neurology has 36,000 members. They did not separate the neurology information by body areas. As an answer to one of the questions asked in this forum, it is reported that the BOD might be open to the idea of multiple journals in the future to meet the needs of the readership. Do you really think this is plausible given a membership of 3,000? Already in this most recent quarter there is a 75% decrease in submissions. Given the cost of publishing JWHPT, how can you conclude that there will be an adequate amount of submissions, and finances to support multiple journals?

JWHPT5:

I find it curious that the section claims the name change will not affect the Journal. Yet the Journal will remain "The Journal of Women's health Physical Therapy". Can we hear directly from the journal editors

how they think the name change will impact the journal?

JWHPT6:

"In the section literature it is stated, The Journal name will remain the same. The board is open to the opportunity to have multiple journals in the future to meet the needs of our readership. This is common practice across the medical field. The current goal of the Journal is and has been primarily on indexing. There is no intent to change the name of the Journal. As the name will remain the same, there are no downstream costs for the Journal. However, the name change will cause considerable confusion by members of the national and international community of physical therapists. It is anticipated that this will decrease submissions to the journal. What is the section's plan to publicize the journal's scope should the name be changed?"

JWHPT7:

"Has consideration been given to the fact that, if this name change goes through, it will probably not align with name of the Journal or the Specialization designation? Why would we consider such a disconnect between these 2 vital components of practice to our component name?"

JWHPT8:

3. How will this change impact the Journal? Does this smaller umbrella name reduce submissions?

TOPIC AREA: RESEARCH GRANT

Q. How would this potential name change affect the annual research grant? Will grants only be considered competitive if they are on the pelvis? For example, pregnancy is not simply a pelvic or abdominal health issue but rather a global health issue? Would a grant on psychosocial aspects of pregnancy be in the running?

A. There are no anticipated changes to the research grant related to a potential name change.

The following questions have also been asked in relation to the **Research Grant**.

The answer posted above is also relevant to these questions posted below.

More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

RESEARCH1:

How would this potential name change affect the annual research grant? Will grants only be considered competitive if they are on the pelvis? For example, pregnancy is not simply a pelvic or abdominal health issue but rather a global health issue? Would a grant on psychosocial aspects of pregnancy be in the running?

TOPIC AREA: FINANCIAL IMPACT/BUDGET

Q. Please share the financial impact of the name change, What has been spent so far as well as what is the impact related to future costs... ie: how much will it cost to re-brand the section?

A. Fiscal impact is considered by the board with all its activities including the Name Change. APTA is going through a rebranding that will include a likely collaborative change in look/logo for all Components (States/Sections/Academies). The Board has agreed it is in the best interest of SoWH to wait until the APTA process is complete (2020/21) so we are efficient with branding/any logo changes required. A name change vote now would include a change in name on our website and future printed documents. A planned website update has been deferred to a later date to ensure we are cost efficient and fiscally responsible. We are fortunate that our current process is in alignment with the APTA timeline for branding and we have not spent any funds on changes that would've been affected by the APTA brand change.

A.
2016

In 2016, Navigate was hired to perform consulting with the outcome to define the association's brand foundation and promise, and to define options for a new name that fulfills the association's brand promise and meets the needs of both the primary and secondary audiences.

2016 spending = \$12,882.05 - approx 43 hours

Establish SoWH Brand Foundation and Brand Promise - 4 hours // Name Change Survey - 1 hour // Name Change Interviews (30+ hours) // Name Change Town Hall at 2016 CSM SoWH Business Meeting - 2 hours // Name Change Task Force Consulting - 6 hours

2018

In 2018, Navigate was hired to develop the messaging strategy for introducing the name recommendation for APHPT.

2018 spending = \$4,000 - approx 16 hours

- Key messages development - 4 hours prep and 4 hours presentation // Video production (project management, storyboard & guidelines) - 8 hours

The following questions have also been asked in relation to the **Financial Impact/Budget**. The answer posted above is also relevant to these questions posted below.

More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

BUDGET1:

"Please share the financial impact of the name change,

what has been spent so far as well as what is the impact related to future costs... ie: how much will it cost to re-brand the section?

What are the downstream costs associated to our journal?"

BUDGET2:

If the name changes there will be costs incurred for promotion to membership and providers, logo change, and website changes. What is the projected cost and how can the Biard justify the expense when the research grant was cut?

BUDGET3:

The section has spend a considerable amount of money so far on the name change and will probably continue to spend at re-branding will cost additional money. Please give an accounting of all the funds that have been spent to date on consultants, task force etc with respect to the name change.

BUDGET4:

Up to this point, how much as the Section spent on the name change (expenses for Task Force, consultant charges, phone calls, etc.)?

BUDGET5:

In light of the financial difficulties that the section is currently experiencing, has the section allocated funds to update all marketing materials for this change? Please provide specific evidence for fiscal feasibility and responsible use of funds.

BUDGET6:

It seems that there is a lot of money spend on the name change and engendering support. Can you provide an accounting of the costs?

BUDGET7:

"1. What are the projected costs (and costs to date for the consulting firm) for this change? The ripple effect of this vote needs due diligence and full disclosure prior to a vote. How stable are our finances at this time? Unable to find current budget info on website.

BUDGET8:

2. We are hearing about a ""deficit budget"" in the SoWH; have the costs of a name change been calculated? Can we afford this change?

TOPIC AREA: APTA BYLAWS & SOWH BYLAWS

Q. Have all processes been followed with respect to APTA guidelines?

A. We have followed all procedures required by APTA for a name change request, with the final step being membership approval. We have recently had a re-confirmation from APTA Component Services and Board of Directors that the appropriate steps were followed.

The following questions have also been asked in relation to the **APTA Bylaws & SoWH Bylaws**. The answer posted above is also relevant to these questions posted below. More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

BYLAWS1:

"According to the by-laws, a ""special meeting"" is supposed to come with a 30 day notice. Is this Town Hall meeting considered a special meeting?
Since this ""town hall"" meeting is not in the format of what a ""town hall meeting"" is defined where there is supposed to be dialog and discussion and for those in a place of authority to hear from concerns from constituents, I would assume this is considered a special meeting and is not within the parameters of the SOWH's by-laws."

BYLAWS2:

"In reviewing the By-laws for the SOWH, under Article VI, Section 5, the section has online voting mentioned as allowed but is does not appear clear on how many need to vote for the vote to count."

TOPIC AREA: VOTER SECURITY

Q. How is voter security ensured?

A. The Section is using [Survey & Ballot](#) which is a **third-party** platform by company that specializes in voting events. They have conducted and tallied the previous 2 elections and the Bylaws vote.

TOPIC AREA: VOTING PROCESS & NEXT STEPS

Q. What are the logistics of the voting process? What happens if the vote doesn't pass?

A. If the vote doesn't pass the requirement of (**5% of eligible voting member participation / 3070 eligible voters -> 5% = 153.5 -> 154 eligible votes must be cast**) then the process is discontinued. Eligible voters are PT and PTA members in good standing. Voting is not open to Student members.

The following questions have also been asked in relation to the **Voting Process and Next Steps**. The answer posted above is also relevant to these questions posted below. More in depth answers were provided from the SoWH Board during the Town Hall on Monday, April 8th.

VOTING1:

A quorum appears to be in reference to votes at special meetings and section meetings and does not seem to apply to online voting. How can we interpret the results of this voting if determining how to interpret the voting online when it is not specifically defined in the by-laws? I would assume that voting will be anonymous and, therefore, how do we know that the required # of the BOD will have voted?"

VOTING2:

"In reviewing the By-laws for the SOWH, under Article VI, Section 5, the section has online voting mentioned as allowed but it does not appear clear on how many need to vote for the vote to count.

The statement is as follows: ""Unless otherwise specifically provided by the bylaws, a majority vote of those component members in good standing shall govern. A majority is defined as a number more than 1/2, providing a quorum is present.""

A quorum appears to be in reference to votes at special meetings and section meetings and does not seem to apply to online voting. How can we interpret the results of this voting if determining how to interpret the voting online when it is not specifically defined in the by-laws? I would assume that voting will be anonymous and, therefore, how do we know that the required # of the BOD will have voted?"

VOTING3:

"I appreciate that there will be many questions posted for the Town Hall and there won't be time to address all. Will the membership have access to all questions posted? Would you make them available and notify the membership as to where to find them? Thank you."

VOTING4:

May we please see ALL questions submitted and not just the ones you select?

VOTING5:

"Please confirm that the town hall meeting tomorrow evening 8pm EST will be recorded and posted afterwards in order to allow membership that will not be able to join the meeting Live an opportunity to view it at a later time if they missed it. Thank you."

VOTING6:

"could you post all the questions that have been submitted, even if duplicates, so that members can view and think about all questions. If there are duplicates could we see how many times the same question/concern has been voiced? Thank you"

VOTING7:

Just like the APTA in the past had gone "to the streets" to ask the "person on the street" about physical therapy to assist with branding and changing the vision, was this done as part of the new name process for the SOWH? One aspect of the name change was "because the public didn't know what women's health was." How do we know that "Pelvic health" will assist in this endeavor? I have asked several patients and the general public as presentations, and even other PTs and they have no idea what "pelvic health means." This name change does not appear to assist with this issue at all.

VOTING8:

5. Is there a mechanism for postponing this vote until more member consensus is reached?
6. What percentage of the membership vote is necessary to approve this name?"