

Presidential Documents

Title 3—

Executive Order 14437 of October 19, 2026

The President

Advancing Women's Health To Improve Outcomes in All Phases of Life

By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered:

Section 1. *Purpose and Policy.* My Administration is committed to advancing women's health and ensuring that medical research, diagnosis, prevention, and treatment reflect the highest quality scientific evidence, with the goal of improving health outcomes in all phases of life.

Despite considerable advances in biomedical science, many diseases and conditions that disproportionately or uniquely affect women have not received the level of research, clinical attention, and treatment that other diseases and conditions have received. More research is needed in critical aspects of women's health, including cardiovascular and heart disease, cancer, stroke, Alzheimer's Disease, autoimmune and inflammatory conditions, osteoporosis, mental health, chronic pain, endometriosis, fibroids, polyendocrine metabolic ovary syndrome, infertility, maternal health, menopause, neurological disorders, aging, and more. Improving health outcomes for women requires coordinated Federal leadership, bolstered scientific investment, and accelerated translation of research into clinical and community practice.

While previous administrations have invested in women's health research, there is a need to enhance, streamline, and elevate Federal efforts regarding both research and the critical step of translation into health solutions. My Administration is committed to ensuring that American women are receiving the best scientifically-supported medical advice in the world. Therefore, it is the policy of the United States to prioritize translating research into improved clinical care that benefits women and girls through a comprehensive approach to women's health that recognizes evolving health needs from infancy, childhood, and adolescence through pregnancy, midlife, menopause, and aging, and supports timely, stage-specific prevention, diagnosis, treatment, and care.

Sec. 2. *Establishment of the Women's Health Division Within the National Institutes of Health.* (a) The Secretary of Health and Human Services, acting through the Director of the National Institutes of Health (NIH), shall establish a Women's Health Division within an appropriate institute or center within 90 days.

(b) The Women's Health Division shall, in coordination with the NIH Office of Research on Women's Health:

- (i) increase the scientific review of women's health conditions in all phases of life that remain understudied or insufficiently understood;
- (ii) advance and coordinate research on women's health conditions at all phases of life, including replication studies;
- (iii) promote innovation and advanced research technologies to accelerate time to diagnosis and improve access to high-quality prevention, treatment, specialized healthcare services, personalized medicine, and coordinated care delivery for women's health conditions;
- (iv) strengthen interdisciplinary collaboration to advance basic and clinical research on women's health;

(v) support data-collection methodologies and research methodologies that improve understanding of sex-specific health outcomes and increase inclusion of women and girls in clinical trials;

(vi) develop accountability for grant recipients to enhance adherence to the NIH policy requiring research to account for sex as a biological variable; and

(vii) facilitate translation of scientific discoveries into clinical practice and public health implementation across Federal, State, and local jurisdictions.

(c) The Women's Health Division shall work with all relevant Federal partners to continue to expand strategic coordination and policy leadership on, career development in, and advancement of women's health research across disciplines.

Sec. 3. *Establishing the White House Women's Health Task Force.* (a) There is hereby established the White House Women's Health Task Force (Task Force) co-chaired by the Secretary of Health and Human Services and the Assistant to the President and Chief of Staff.

(b) In addition to the Co-Chairs, the Task Force shall include the following officials:

(i) the Secretary of War;

(ii) the Secretary of Agriculture;

(iii) the Secretary of Labor;

(iv) the Secretary of Education;

(v) the Secretary of Veterans Affairs;

(vi) the Administrator of the Environmental Protection Agency;

(vii) the Commissioner of Food and Drugs;

(viii) the Director of the Centers for Disease Control and Prevention;

(ix) the Director of the National Institutes of Health;

(x) the Director of the Advanced Research Projects Agency for Health;

(xi) the Administrator of the Centers for Medicare and Medicaid Services; and

(xii) other members of my Administration invited to participate, at the discretion of the Co-Chairs.

(c) The Co-Chairs may hold public hearings, meetings, roundtables, and similar events, as appropriate, and may receive expert input from leaders in women's health, technology, academia, the private sector, philanthropy, and other relevant subject matter areas to inform coordinated action with measurable results.

(d) The Department of Health and Human Services shall provide funding for the administrative costs of the Task Force.

Sec. 4. *Task Force Functions.* (a) The Task Force shall ensure that the Federal Government pursues a comprehensive approach to women's health that recognizes evolving health needs from infancy, childhood, and adolescence through pregnancy, midlife, menopause, and aging, and supports necessary policy and regulatory reforms to ensure timely and stage-specific prevention, diagnosis, treatment, and care for women. To achieve those goals, the Task Force shall focus on:

(i) advancing the science of women's health through strengthening research and initiatives across the Federal Government to improve prevention, early detection, diagnosis, treatment, and long-term health outcomes for women and girls, including through acceleration of the development of new therapies and cures;

(ii) accelerating proven, measurable, and evidence-based strategies to increase innovation, translation, adoption, and implementation of women's

health research into policies, evidence-based medicine, and best clinical practices, including through updated clinical education based on the best available science. These efforts shall prioritize grantmaking focused on prevention, treatment, and long-term health by promoting early identification and management of health risks throughout infancy, childhood, adolescence, reproductive years, midlife, menopause, and aging, to reduce the burden of chronic disease and improve long-term health outcomes;

(iii) advancing patient-centered care by supporting education and research into coordinated, preventive, and woman-centered care as well as integration and implementation across primary care, specialty care, and behavioral health providers, including through ensuring a robust supply chain of providers and medical products to deliver high-quality clinical care. These efforts may include advising heads of executive departments and agencies (agency heads) on opportunities to implement pilot programs that improve incentives to integrate prevention, early intervention, and treatment and remove obsolete silos between agencies, programs, or systems, in each case as deemed appropriate by the agency head and consistent with applicable law; and

(iv) consulting with States, tribal nations, local jurisdictions, community-based organizations, faith-based organizations, the private sector, philanthropic entities, and other relevant stakeholders on the best strategies to translate research into practice. This consultation will ensure that scientific and technological advances in women's health research are effectively incorporated into evidence-based policies and integrated across clinical practice, public health programs, and community-level initiatives. Such collaboration shall accelerate innovation, strengthen public-private partnerships, promote investment in women's health solutions, and support the broad adoption of evidence-based interventions by both healthcare providers and women to improve women's health outcomes.

Sec. 5. *Revocation of Prior Actions.* The following executive actions are hereby revoked:

(a) Executive Order 14120 of March 18, 2024 (Advancing Women's Health Research and Innovation).

(b) Presidential Memorandum of November 13, 2023 (White House Initiative on Women's Health Research).

Sec. 6. *General Provisions.* (a) Nothing in this order shall be construed to impair or otherwise affect:

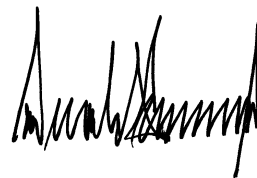
(i) the authority granted by law to an executive department or agency, or the head thereof; or

(ii) the functions of the Director of the Office of Management and Budget relating to budgetary, administrative, or legislative proposals.

(b) This order shall be implemented consistent with applicable law and subject to the availability of appropriations.

(c) This order is not intended to, and does not, create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the United States, its departments, agencies, or entities, its officers, employees, or agents, or any other person.

(d) The costs for publication of this order shall be borne by the Department of Health and Human Services.




THE WHITE HOUSE,
October 19, 2026.