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**NEED UPDATE ONCE PHOTOS FINALIZED.** All other photos with exception of page 16 #2 and #4 courtesy of Michael Rubottom, ©2015. Cover photo: SFP fellows at the 2015 Career Development Seminar.
Dear colleagues,

We are pleased to share a glimpse of 2015 with you in our annual report. Our tenth anniversary year, 2015, was also notable for the fifth annual North American Forum on Family Planning (the Forum) for a few reasons. First, including attendees and exhibitors, over 1,000 people were in attendance—a new conference record. Second, due to the strength of the science and the panel presentations, many attendees expressed that the Forum helped create movement for the field in how we frame issues such as pregnancy intendedness and stigma. (Read more about the Forum on page 9).

We also convened a new ad hoc SFP Research Fund (SFPRF) committee in 2015, the Impact Initiative subcommittee. The initial goal of the committee was to determine how SFPRF defines research impact and to begin setting expectations for researchers to envision possible impacts of their proposed studies before launching their projects. The next step identified in the impact initiative is to evaluate grants already funded. We look forward to reporting on our progress at the 2016 Forum and in the next annual report.

In addition, we were fortunate to add some new grant mechanisms in 2015, providing innovative funding opportunities for SFP members and collaborators. Those mechanisms include community-based participatory research projects, interdisciplinary innovation (I²) planning grants, and a new multi-site study. We are extraordinarily grateful to our funder for providing new options that allow us to build upon the research priority setting work that was launched in 2014, and to also build upon connections made in the course of that process. We remain committed to establishing opportunities for funding research that makes sustained contributions to society.
2015 also marked a new milestone for SFP membership. Ten years after our inception by a small but committed group of founding and charter members, we ended the year with more than 600 fellows. With this growing collection of dedicated members who represent many disciplines, SFP is poised to meet the challenges of the next ten years. *(Read more about the SFP membership on page 13).*

Lastly, we are inspired by our interactions with SFP members, grantees, volunteers and allies. Whether you are a researcher, educator, clinician, administrator or advocate, we are grateful for your participation in and collaboration with our society. On behalf of the board of directors and staff, we thank you for taking time to review our 2015 activities.

Warmly,

Susan Higginbotham, MEd
Executive Director

Eve Espey, MD, MPH
President, Board of Directors

“SFP’s I² grant helped me establish important interdisciplinary relationships inside and outside of my institution and launch my idea to create a mobile game app to decrease high-risk sexual behavior in adolescents. This funding has been a game changer (pun intended)!”

—Aileen Gariepy, MD, MPH
The SFP Research Fund’s grant program is intended to generate knowledge in the field of family planning through scientific research and strengthen family planning policies, services and programs. Proposals cover a wide range of research areas—from improvements in underlying conceptual or biomedical knowledge that advance fundamental understanding in the field of family planning, to knowledge of improved programs or policies that will provide family planning more safely, effectively, efficiently, and to wider groups of people in need. In 2015, we awarded more than $4.5 million in research grants.

**Multisite grant—$1,000,000 maximum award**

Tara Shochet, Gynuity Health Projects/National Abortion Federation—$970,141
Non-surgical alternatives to treatment of failed medical abortion: A randomized placebo-controlled trial

**Community-based participatory research grants—$150,000 maximum award**

Anu Gomez, University of California, Berkeley—$150,000
The Affordable Care Act and access to family planning and abortion in California's Central Valley: A community-based participatory research study

Brooke Levandowski, SUNY Upstate Medical University—$149,982
Asking the community: How can we improve contraceptive conversations between young women and their providers?

Heather Marlow, Ipas—$146,470
Understanding men’s support of family planning and abortion in Northern Ghana

**Interdisciplinary innovation grants—$25,000 maximum award**

Aletha Akers, The Children’s Hospital of Philadelphia—$25,000
Improving adolescent reproductive health through online family engagement: Developing the ‘Parents are TALKING’ website

(continued on next page)
Blair Darney, Oregon Health and Science University—$25,000
Contraceptive services in the safety net: Interdisciplinary innovations in using EHR data to study the impact of the ACA

Aileen Gariepy, Yale School of Medicine—$22,199
Serious games for serious issues: Reducing high-risk sexual behavior in adolescents through a mobile game app

Lisa Harris, University of Michigan—$25,000
Mobilizing abortion providers’ stories to reduce abortion stigma and legal restrictions on abortion

Heidi E. Jones, Hunter College, CUNY School of Public Health—$24,998
Using a reproductive justice framework to integrate reproductive health services and primary care in New York

Wendy V. Norman, University of British Columbia—$25,000
Planning for the CONNECT study: Integrating family planning into community services for women experiencing intimate partner violence

**LARGE GRANTS—$250,000 MAXIMUM AWARD**

Wendy Chavkin, Physicians for Reproductive Health—$117,000
Regulation of conscientious objection to abortion: an international comparative multiple-case study

Philip Darney, University of California, San Francisco—$115,688
Investigating contraceptives’ post-fertilization mechanism of action on the endometrium

Alison Edelman, Oregon Health & Science University—$205,580
Determining the impact of combined hormonal contraceptives on ulipristal acetate

Angel Foster, Cambridge Reproductive Health Consultants—$95,000
Access denied: Understanding the experiences of Burmese women who are unable to obtain a legal abortion in Thailand

Lori Freedman, University of California, San Francisco—$250,000
Patient awareness of religious restrictions in Catholic healthcare—PARRCH Survey

Cynthia Harper, University of California, San Francisco—$120,000
Patient-centered contraceptive care: Women’s autonomy in contraceptive decision-making

Jenny Higgins, University of Wisconsin—$120,000
Contraception and sexual acceptability: Measuring a key patient-centered aspect of contraceptive satisfaction and continuation

Rachel Jones, Guttmacher Institute—$118,438
Moving targets: (In)stability in U.S. women’s fertility intentions and pregnancy attitudes
Jennifer Kerns, MD, recipient of a large research award

Jennifer Kerns, University of California, San Francisco—$250,000
Intrafetal digoxin as an adjuvant for dilation and evacuation at 20 to 24 weeks’ gestation: a placebo-controlled, double-blinded randomized controlled trial

Sara Newmann, University of California, San Francisco—$248,684
Investigating a masculinities-based approach to increase male acceptance of family planning in Kenya

Kristen Shellenberg, Ipas—$250,000
Developing and evaluating a community-based stigma reduction strategy in Mbarara, Uganda

David Turok, University of Utah—$250,000
Highly Effective Reversible Contraception Initiative–Salt Lake: A prospective cohort examining the social and economic impact of removing cost barriers to intrauterine devices and contraceptive implants

Small/pilot grant—$15,000 maximum award

Frances Casey, VCU Medical Center—$15,000
A randomized double-blinded comparison of 24-hour interval-mifepristone and buccal misoprostol versus mifepristone and vaginal misoprostol for cervical preparation in second-trimester surgical abortion

Brittany Charlton, Harvard Medical School and Boston Children’s Hospital—$15,000
Sexual orientation disparities in contraceptive use and abortion care

Antoinette Danvers, Columbia University Medical Center—$15,000
Auricular acupuncture as an adjunct for pain management during first trimester suction aspiration: a feasibility study

Elizabeth Gurney, University of Pennsylvania—$15,000
Measurement of individual-level abortion stigma resulting from Pennsylvania state-mandated abortion consent language: A pilot randomized controlled trial

Luciana Hebert, University of Chicago—$14,919
Exploring anal sex among young women: A qualitative study

Dominika Seidman, University of California, San Francisco—$14,993
Markers of increased HIV susceptibility in the setting of medroxyprogesterone and progesterone: A pilot study
The SFP Research Fund recognizes the importance of supporting researchers throughout their careers. These career development grants are designed to provide research support and protected time for junior investigators and mentors; and offer medical students, residents and graduate-level students a chance to gain hands-on experience. In 2015, the SFP Research Fund provided nearly $750,000 in two junior investigator awards, two midcareer/mentor awards, and nine trainee/student awards.

**Junior Investigator Award—$260,000 Maximum Award**

Blair Darney, Oregon Health & Science University—$259,383
Evidence, rigor, and strategy: Building a program of research to inform abortion policy in Latin America

Carolyn Sufrin, Johns Hopkins University School of Medicine—$259,615
National statistics on abortion and pregnancy in prison

**Midcareer/Mentor Award—$80,000 Maximum Award**

Emily Godfrey, University of Washington—$80,000
Translating evidence-based family planning research into primary care clinical settings

Kristina Tocce, University of Colorado—$80,000
Mentorship of preclinical medical students in family planning research

**Trainee/Student Award—$7,500 Maximum Award**

Prabjyot Chahil, University of Ottawa—$4,000
Exploring the abortion experiences of Punjabi women in Ontario

Olivia Foley, Harvard Medical School—$7,402
When do women decide to undergo sterilization? A qualitative study to evaluate the utility of the federally-mandated Medicaid waiting period

Gillian Horwitz, Harvard Medical School—$7,476
BMI as predictor of adverse outcomes with intravenous sedation during surgical abortion
Aaron Lazorwitz, University of Colorado—$7,211
The effect of carbamazepine on the etonogestrel contraceptive implant

Molly Murphy, University of Illinois at Chicago—$7,500
Abortion providers’ experiences with and management of stigmatization in freestanding and hospital-based clinics

Alison Ojanen-Goldsmith, University of Washington—$7,500
Beyond the clinic: Preferences, motivations and experiences with alternative abortion care in the United States

Whitney Smith, University of Alabama at Birmingham—$7,500
Examining the social context of reproductive health behavior and outcomes

Lisa Stern, University of California, San Francisco—$6,466
Planning the unplanned pregnancy: Examining the history of pregnancy intention in 20th-century America

Emily Treleaven, University of California, San Francisco—$6,472
Understanding sex-selective abortion, perceived access, and stigma in northern Vietnam

“The SFP Junior Investigator Award enabled me to gather national statistics about abortion and other pregnancy outcomes for women in prison. The award has been amazing for my career development. In addition to developing research skills, I have learned so much about public policy as I worked to get prison facilities to participate—activities and skills that someone without the time and resources afforded by the SFP award would have trouble developing.”

—Carolyn Sufrin, MD, PhD
In 2015, the SFP Research Fund convened an Impact Initiative subcommittee in order to define impact and discuss how researchers can become more involved in the impact of their research. The SFP Research Fund defines impact as the demonstrable contribution that family planning research makes to society. This includes impact on clinical practice, public policy, health services, programs, or culture.

Future activities will seek to identify and define the indicators used to measure the impact of previously funded SFPRF research, select the methods used to collect data on the designated indicators, and design an RFP that addresses impact as an integral part of the application and review process.

“For the past ten years, I have worked with parents and adolescents in communities around the country to understand the success and challenges families face when educating their children about sexual and reproductive health issues. Recognizing that parents are children’s earliest sexual health educators, our team used our I² grant to develop an educational website for parents and to integrate it into our medical records system, making addressing the reproductive health needs of adolescents a normative part of pediatric primary health care.”

—Aletha Akers, MD, MPH
**SFP’s Annual Meeting** was held—as it has been for the past five years—in association with the *North American Forum on Family Planning*, which SFP co-sponsors with Planned Parenthood Federation of America. For the first time this year, the *Forum* was produced in coordination with the Association of Reproductive Health Professionals and included their annual meeting sessions. With more than 1,000 attendees and strong science and educational content, this year’s *Forum* was an overwhelming success.

The meeting, held in Chicago, opened with the pre-conference SFP Career Development Seminar and annual business meeting. The Career Development Seminar included a panel reflecting on the history of SFP at its 10-year mark and three workshops on research methodologies.

The SFP Business meeting featured brief presentations by the 2013 SFP Research Fund grantees and covered a wide range of research areas—from exploring the role of reproductive health stigmas in pregnancy decision-making to IV sedation during first-trimester surgical abortion. Recipients of the junior investigator grants also presented their research projects, one on the mobile health applications for improving access to and information about safe abortion and another on access to abortion care in the Deep South.
Scientific abstracts review: One of SFP’s roles in producing the annual meeting is to manage the scientific abstracts. We rely significantly upon the strength of our volunteer fellows as reviewers. Twenty-one abstracts were selected for oral presentations. Another 180 were presented as posters, and some of these could be viewed both also through the conference app.

The Outstanding Researcher Award went to SFP fellow Lisa Harris, MD, PhD, for *Doctors as messengers: mobilizing physicians across all medical specialties to respond to state level abortion restrictions* (funded by the SFP Research Fund). The Outstanding Researcher in Training Award went to SFP junior fellow Susan Wilson, MD, MSHP, for *The role of doulas to address analgesic and psychological needs during surgical management of early pregnancy failure and abortion*.

Awards were also given for the top scientific posters. First place went to Elissa Test, MD, MPH, Geffan Pearlson, Jennifer Kerns, MD, and Eleanor Drey, MD, for *Structural counseling for women seeking walk-in pregnancy testing*.

“Best conference ever! I can honestly say that every single session I attended was top-notch in terms of content as well as being engaging and thought-provoking.”
Second place went to Alison Norris, MD, PhD, Elise Berlan, MD, MPH, and Nicole Pritt, MD, for *Toll free but not judgment free: Evaluation of post-abortion support services in Ontario.*

Third place went to Priyanka Gokhale, Justin Lappan, MD, and Lisa Perriera, MD, MPH, for *Safety of deep sedation without intubation for obese and non-obese women undergoing first and second trimester surgical abortion.*

The winners of Best Translational Science Poster Abstract—a new award this year—were Corinne Rocca, PhD, MPH, Mahesh Puri, PhD, MSc, MA, Maya Blum, MPH, Prabhakar Shrestha, Daniel Grossman, MD, and Cynthia Harper, PhD, for *Safety and effectiveness of access to medication abortion from pharmacy clinics in Nepal.*

“Wonderful networking opportunities—particularly important for our community during these embattled times.”
Awards: As in the past, one of the highlights of the meeting was the SFP Awards Luncheon.

Stanley K. Henshaw, PhD, received SFP’s 2015 Lifetime Achievement Award. Dr. Henshaw serves as a consultant to numerous nonprofit organizations, including the Guttmacher Institute, for which he worked for 34 years, retiring as a Senior Fellow in 2013. Dr. Henshaw published the first detailed report of unintended pregnancy and abortion rates in relation to women’s demographic characteristics and launched the first nationally representative survey to produce information on demographic characteristics of abortion patients, such as income and religion, that is not available elsewhere.

Willard Cates, Jr., MD, MPH, received the Allan Rosenfield Award for Lifetime Contributions to International Family Planning. Dr. Cates served as President and then President Emeritus at FHI360 (formerly Family Health International) for more than two decades, and made key contributions in his work at the worked with the Centers for Disease Control in the two decades preceding that. Due to failing health, Dr. Cates was unable to receive our award in person, and we were deeply saddened by his death several months later. We have lost a public health champion and leader in women’s health research.

Mark D. Nichols, MD, received the Robert A. Hatcher Family Planning Mentor Award. Dr. Nichols served as the Ob/Gyn residency program director at Oregon Health and Sciences University for 12 years and as Chief of the Division of General Gynecology and Obstetrics there for 25 years. In 2001, he started OHSU’s Family Planning Fellowship. Dr. Nichols was the local principal investigator in the initial Population Council trial investigating mifepristone for first trimester abortion leading to FDA approval. He also directed the first provision of mifepristone in Oregon and the first Essure services through Planned Parenthood in the country.
AT THE END OF CALENDAR YEAR 2015, SFP had 602 fellows: 326 junior fellows, 227 full fellows, and 49 affiliate fellows. Membership in SFP is open to any qualified individual who is in good professional standing and has an interest in family planning demonstrated through post-doctoral training, a substantial clinical or laboratory practice, or academic presentations and publications within this field. Eligible potential members include persons who perform clinical, basic science, epidemiologic, social science, demographic, statistical, or related types of studies. The essential criterion for selection is continuing affinity with the field of family planning.

Over time, SFP has developed into a more inclusive academic society. Members include physician researchers trained in internal medicine, family medicine, pediatrics/adolescent medicine, and public health; PhDs, including social scientists, epidemiologists, demographers, and nurse researchers; and affiliated colleagues working in education, training, or clinical care.

In 2015, 12 junior fellows became full fellows, having met the eligibility requirements.

“As a junior scholar, the SFP award has been pivotal for my career development, allowing for the fostering of collaborations and the time to conduct rigorous research and translate it to policy.”

—Anu Manchikanti Gomez, PhD

SFP Junior Fellow Pooja Mehta, MD, MSHP; Aalap Bommaraju, MA, MPH; Scholarship Recipient Yassaman Vafai, MPH, and Junior Fellow Kat Tumlinson, PhD
As SFP’s membership continues to grow and diversify, so too does the type of activities, committees, and opportunities that we have to offer our membership. These play an enormous role in the development and advancement of not only the society, but the field of family planning.

In order to learn about the ways our members would like to become more involved in these opportunities, SFP sent out a Membership Engagement Survey. One hundred twenty-one members completed the survey, and a number of members have joined committees or become more involved.

Results will be used to assist in the planning of upcoming SFP projects, and as current committee members complete their terms, those interested may join.

Left to right: SFP Junior Fellow Antoinette Danvers, MD; Fellow Cynthia Chuang, MD, MSc; Junior Fellow Lisa Stern, RN, MSN; and Junior Fellow Jenny O’Donnell, MSc, in a break-out session on Patient-Centered Outcomes Research at the 2016 Forum.
SFP Clinical Guidelines are prepared by the individual members of SFP and are reviewed, modified, and approved by the SFP Board of Directors. The Clinical Guidelines reflect a thorough review of published literature and emerging clinical and scientific advances as of the date issued, and are subject to change.

The Clinical Guidelines provide treatment recommendations and should not be construed as prescribing exclusive courses of treatment or procedures relating to any clinical matter. All guidelines are posted on the SFP website after they have been published in our peer-reviewed journal, Contraception, an international reproductive health journal.

Fifteen Clinical Guidelines had been published through the end of calendar year 2015. The most recent, listed below, was prepared by Rebecca H. Allen, MD, MPH, and Alisa B. Goldberg, MD, MPH.

Cervical dilation before first-trimester surgical abortion (<14 weeks’ gestation)

“A well-crafted guideline promotes quality by reducing health-care variations, improving diagnostic accuracy, promoting effective therapy, and discouraging ineffective—or potentially harmful—interventions.”

## Statement of Financial Position (SFP & SFP Research Fund consolidated)

### Assets:

- **Cash and cash equivalents:**
  - Checking, savings, & money markets: $1,097,199
  - Cash reserve certificate: $1,589,970
  - *Total cash and cash equivalents*: $2,687,169

- **Membership dues receivable, net of allowance:** $41,772

- **Other receivables:** $16,129

- **Prepaid expenses and deposits:** $3,426

  - *Total current assets*: $2,748,496

- **Furniture and equipment, net:** $0

  - *Total assets*: $2,748,496

### Current Liabilities:

- **Accounts payable and accrued payroll:** $11,769

- **Grants payable:** $2,915,894

  - *Total current liabilities*: $2,927,663

### Net Assets:

- **Unrestricted (deficit):** $(419,367)

- **Temporarily restricted:** $240,200

  - *Total net assets (deficit):* $(179,167)

  - *Total liabilities and net assets*: $2,748,496

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“SFP has been absolutely instrumental in launching our research portfolio in the sexual acceptability of contraception, a critically understudied part of what makes contraceptives appealing or unappealing to women. SFP funding has also catalyzed a now-robust collaboration between both senior and junior investigators at two different institutions—the University of Utah and the University of Wisconsin.”

— Jenny Higgins, PhD, MPH
### Statement of Functional Expenses (SFP & SFP Research Fund consolidated)

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BOARD OF DIRECTORS

Officers

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    University of New Mexico School of Medicine
Stephanie Teal, MD, MPH—President-Elect
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    Columbia University Medical Center
Melissa Gilliam, MD, MPH (completed term November, 2015)
    University of Chicago Medical Center

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    University of Cincinnati College of Medicine
Anu Kumar, PhD, MPH
    Ipas
James Trussell, PhD (completed term November, 2015)
    Office of Population Research, Princeton University
Top, from left to right: Eve Espey, SFP President; Stephanie Teal, President-Elect; and at-large board members Tina Raine-Bennett and Sonya Borrero. Bottom: Carolyn Westhoff, Immediate Past President; and at-large board members Pooja Patel and Joe Potter.
2015 staff

Staff

Susan Higginbotham, MEd
Executive Director

Marlo Polonsky, MPH
Grants Officer

Amanda Dennis, DrPH, MBE
Director of Research & Evaluation (May 2016–)

Sarom Sot
Administrative Coordinator

Christine Hence, MS
Program Coordinator (June 2016–)

Lauren Bruce, MPH
Program Coordinator (through April 2016)

Top, from left to right: Susan Higginbotham, SFP Executive Director; Marlo Polonsky, Grants Officer; Amanda Dennis, Director of Research and Evaluation. Bottom: Sarom Sot, Administrative Coordinator; Christine Hence, Program Coordinator; Lauren Bruce, Program Coordinator.
"Our SFP grant enabled us to undertake a rigorous national survey on how informed women are about religious restrictions in health care. This is perhaps the first large-scale, generalizable data about Catholic health care in our field. It anchors our qualitative research and highlights the ethical problem of allowing large institutional providers to refuse care their clinicians want to provide and their patients need.”

—Lori Freedman, PhD
Talk to Kathy about just changing blue back to pms 3025