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Page 6 photo courtesy of Aura Orozco-Fuentes. All other photos with exception of page 16 #2 and #4 courtesy of Michael Rubottom, ©2014. Cover photo: SFP fellows at the 2014 Career Development Seminar listening to Dr. Melissa Gilliam, SFP Immediate Past President (at right).
Dear colleagues,

We are delighted to share with you a snapshot of 2014 in our annual report. Our ninth year of official operation, 2014 was also our eighth year releasing an annual request for proposals (RFP), as well as our fourth year producing another successful North American Forum on Family Planning, which was held in Miami (see pages 7–9 for more information on the 2014 SFP awardees and conference activities).

As we prepare for our tenth anniversary celebration in 2015, marking the passing of time is important, yet the years of operation are not nearly as important as what we’ve accomplished. With respect to SFP’s historical achievements, 2014 will likely be best remembered as the year we engaged in an iterative process to set research priorities for the field of family planning. It was an intensive activity that took place over several months and that involved numerous constituents, including SFP fellows, grant reviewers, allied experts, and community-based advocates.

Additionally, the resulting lists of top and secondary priorities developed in 2014 will have far-reaching effects in that they will be utilized in the SFP Research Fund’s request for proposals for the next few years in order to guide the projects we fund. Other beneficial outcomes of the priority setting exercise include new relationships established with colleagues, and the new grant mechanisms that were added for 2015, providing new 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 especially grateful to our funder for providing these opportunities.
to not only add to the evidence in the field, but also to help strengthen the research community and to make a lasting impact on both clinical practice and policies.

Further, we are particularly pleased with the continued growth and diversity of our membership that occurred in 2014 (see page 11 for membership details). As we strive to continue offering research funding and educational opportunities for our members, we welcome feedback on how we can continue to evolve and build upon our recent activities and successes.

On behalf of the board of directors, staff, and volunteers we thank you for taking a few minutes to review our 2014 report, and we also sincerely thank you for the important roles that you play in the SFP community of researchers, educators, clinicians, and advocates.

Warmly,

Susan Higginbotham, MEd
Executive Director

Carolyn Westhoff, MD, MSc
President, Board of Directors

“The SFP grant will enable me to answer a clinically important question, but it has also helped strengthen the clinical research program at our organization and build our program’s national reputation as a leader in abortion research.”

—Gillian Dean, 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 2014, we awarded more than $4.2 million in research grants.

**Large grants—$250,000 maximum award**

Maureen Baldwin, Oregon Health & Science University—$244,717  
Outcomes of very early medical and surgical abortion: correlates of success and role of tissue evaluation

Sadia Haider, University of Illinois at Chicago—$236,910  
Increasing the uptake of postpartum long-acting reversible contraception: A novel approach at the well baby visit

Caroline Moreau, Bloomberg School of Public Health, Johns Hopkins University—$249,984  
Bringing more evidence into contraceptive counseling: Building a new provider tool to tailor predictions of contraceptive outcomes to patient sub-populations

**Large grants—$120,000 maximum award**

Rebecca Allen, Planned Parenthood League of Massachusetts, Inc.—$119,948  
Helping women choose between local anesthesia alone and IV sedation for first-trimester surgical abortion

Catherine Cansino, University of California, Davis—$100,398  
Contraception counseling at the time of first trimester abortion: What do women want?

Gillian Dean, Planned Parenthood of New York City, Inc.—$120,000  
Misoprostol dose and timing before surgical abortion at 13 to 16 weeks’ gestation: A randomized trial

Lori Freedman, University of California, San Francisco—$117,674  
Understanding patient experiences with obstetric care in Catholic health care facilities

Marji Gold, Montefiore Medical Center/Albert Einstein College of Medicine—$50,632  
Exploring the impact of stigma among abortion services leaders

*(continued on next page)*
2014 research grants

Vinita Goyal, Population Research Center, University of Texas at Austin—$119,999
Comparing contraceptive choices and continuation among post-abortion patients with and without free access to long-acting reversible contraception

Kate Grindlay, Ibis Reproductive Health—$52,282
US servicewomen's experiences obtaining abortion care

Daniel Grossman, Ibis Reproductive Health—$119,774
Obstetrician-gynecologists’ practices related to long-acting contraception and abortion: A national survey

Kelli Hall, University of Michigan—$120,000
Stigma and adolescent sexual and reproductive health in Ghana

Sabrina Holmquist, University of Chicago—$119,840
Provider experience in establishing hospital-based second trimester surgical abortion services: A qualitative study

Sarah Roberts, University of California, San Francisco—$93,793
Responding to crisis: Abortion providers and current restrictions on abortion care

Ushma Upadhyay, University of California, San Francisco—$93,169
Distance to an abortion provider and source of post-abortion care: Evidence from the Medi-Cal program

**Small/pilot grant—$15,000 maximum award**

Sarah Baum, Ibis Reproductive Health—$15,000
Access to reproductive health services among American Indian women: A qualitative study

Jenny Higgins, University of Wisconsin—$15,000
The intimate link: Documenting contraceptive sex-acceptability among new IUD and implant users

Melody Hou, University of California, Davis School of Medicine—$14,982
Assessing acceptability, benefits and satisfaction with the levonorgestrel-containing intrauterine system as a contraceptive method for women initiating chemotherapy

Siripanth Nippita, Beth Israel Deaconess Medical Center—$15,000
Umbilical cord injection to induce fetal demise at the time of second-trimester abortion

Nicole Smith, Princeton University—$14,999
The Birth Control Project: A longitudinal study of women's contraception use and sexual health

Katherine Tumlinson, Princeton University—$15,000
Validity of the retrospective reproductive calendar instrument in developing countries: findings from a prospective and longitudinal 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 2014, the SFP Research Fund provided nearly $365,000 in two junior investigator awards, two midcareer/mentor awards, and six trainee/student awards.

**Career development: Junior investigator award**

Elizabeth Janiak, The Brigham and Women’s Hospital, Inc—$128,037
A pilot assessment of job stress among the non-physician clinical abortion workforce

Katrina Kimport, University of California, San Francisco—$126,836
Learning from the divergent successes of the prochoice and gay & lesbian rights movements

**Career development: Midcareer/mentor award**

Anne Davis, Columbia University—$40,000
Combining research, mentorship and advocacy to improve reproductive health in special populations

Jeanelle Sheeder, University of Colorado School of Medicine—$40,000
The research mentorship toolkit: Development of an online resource for members of the Society of Family Planning

**Career development: Trainee/student award**

Amy Caldwell, Regents of the University of Michigan—$5,000
MiLARC: A pilot web-based intervention to increase acceptability and knowledge of long acting reversible contraceptives among university students

*(continued on next page)*
“The SFP Junior Investigator award has enabled me to pursue a question both of scholarly interest to me and of burgeoning popular interest: what can the pro-choice and LGBT movements learn from one another? Further, it has helped me hone my research agenda to focus on what these struggles can tell us about the production and possibilities of reduction of gender and sexuality-based inequality.”

—Katrina Kimport, PhD

Lucy Fu, Emory University School of Medicine—$4,800
Long-acting reversible contraceptive use in women with medical comorbidities

Faduma Gure, University of Ottawa—$5,000
Emergency contraception in post-conflict Somalia: Assessing awareness and perceptions of need

Ruth Manski, Emory University—$5,000
A survey of adolescents’ attitudes toward over-the-counter access to oral contraceptive pills

Simone Parniak, University of Ottawa—$5,000
How might Canadian women talk about peri-coital contraception?

Grace Sheehy, University of Ottawa—$5,000
A reproductive health needs assessment in Peri-Urban Yangon, Myanmar
SFPS ANNUAL MEETING was held—as it has been for the past four years—in association with the North American Forum on Family Planning, which SFP co-sponsors with Planned Parenthood Federation of America. With more than 675 attendees and strong science and educational content, this year’s Forum was rated by attendees as the best yet in the meeting’s brief history. For the first time this year, we used a mobile app at the conference that allowed people to track activities and share reactions.

The meeting, held in Miami, opened with the pre-conference SFP Career Development Seminar and annual business meeting. The topics of the Career Development Seminar were “Requesting Funding for Controversial Research Issues” with Susan Newcomer, and “Navigating the Challenges of a Career in Family Planning” with Diana Greene Foster, Lisa Harris, Melissa Gilliam, and Eve Espey.

The SFP Business meeting featured brief presentations by the 2012 SFP Research Fund grantees and covered a wide range of research areas—from how trust in the health care system affects postpartum contraceptive choice, to the sexual and reproductive health needs of teens with epilepsy. Recipients of the 2012 junior investigator grants also presented their work, one on the impact of doula support on pain in first-trimester abortion and one on the bioethics of reproductive health care in Catholic-affiliated hospitals and clinics. The mid-career mentor awardee presentations included one on increasing opportunities for residents and fellows to engage in translational reproductive health research; a second on development of mentor-mentee relationships and research infrastructure in North Carolina, Malawi and Zambia; and a third on developing a multi-disciplinary Family Planning Research Group at the University of Utah.
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 abstracts were selected for oral presentations. Another 180 were presented as posters, almost 50% more than the preceding year.

The winner of the Outstanding Researcher Award was SFP fellow Alisa Goldberg, MD, MPH, for her abstract *Cervical preparation before second trimester dilation and evacuation: A multicenter randomized trial comparing osmotic dilators alone to dilators plus adjunctive misoprostol or mifepristone*. The winner of the Outstanding Researcher in Training Award was Heidi Moseson, MPH, for her abstract *Testing a new method to reduce under-reporting in abortion measurement*. Both studies were funded by the SFP Research Fund.

Awards were also given for the top scientific posters. First place went to Jessica Lee, MD, for *Structural counseling for women seeking walk-in pregnancy testing*. Second place went to SFP fellow Diana Greene Foster, PhD, MA, for *Effect of an unwanted pregnancy carried to term on existing children’s health, development and care*. Third place went to SFP junior fellow Kate Grindlay, MSPH, for *Unintended pregnancy among active-duty women in the U.S. military, 2011*.

Photos, top to bottom: Alisa Goldberg, MD, MPH; Heidi Moseson, MPH; and (left to right) Jessica Lee, MD; Diana Greene Foster, PhD, MA; and Kate Grindlay, MSPH
Awards: As in the past, one of the highlights of the meeting was the SFP Awards Luncheon.

Horacio Croxatto, MD, received SFP’s 2014 Lifetime Achievement Award. Dr. Croxatto is one of the world’s leading experts in the use of progestins in contraception. He currently serves as Director of the Center for Integrative Medicine and Innovating Science at the Universidad Andres Bello in Chile. Dr. Croxatto was the co-founder and, from 1985-2008, President of the Chilean Institute for Reproductive Medicine.

Jack Sciarra, MD, PhD, received the Allan Rosenfield Award for Lifetime Contributions to International Family Planning. Dr. Sciarra is Chairman Emeritus of Obstetrics and Gynecology at Northwestern University Medical School, having served as Professor and Chair there from 1974-2003. He initiated the Program for Applied Research on Fertility Regulation (PARFR), which is responsible for much of the fundamental research leading to family planning methods that are used today around the world.

Marji Gold, MD, received the Robert A. Hatcher Family Planning Mentor Award. Dr. Gold wrote the first curriculum for training non-obgyn clinicians in early abortion practice. In her faculty role at the Albert Einstein College of Medicine, Dr. Gold assumed responsibility for the integration of a women’s health curriculum into the residency program. She is also the Director of RHEDI/Reproductive Health Education in Family Medicine, and works closely with family physicians around the country to develop opt-out training in abortion in the context of family medicine education.

Dr. Horacio Croxatto, Dr. Marji Gold, and Dr. Jack Sciarra
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.

Fourteen Clinical Guidelines had been published through the end of calendar year 2014. Most notably, the last guideline, Medical management of first-trimester abortion, authored by Mitchell D. Creinin and Daniel Grossman, MD, was our first joint guideline and publication with the American College of Obstetricians and Gynecologists.

Medical management of first-trimester abortion

Cervical preparation for second-trimester surgical abortion prior to 20 weeks’ gestation
Contraception 89:2(2014), pp. 75-84. Guideline #2013–4 (This document revises and replaces the previous version, originally published in #2007-2)

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

At the end of calendar year 2014, SFP had 542 fellows: 303 junior fellows, 202 full fellows, and 37 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 2014, 17 junior fellows became full fellows, having met the eligibility requirements. We also added a new full fellowship status, scholar fellow, for non-MDs who meet the income threshold. This new status is intended to assist the Society with recruiting new members for whom the cost may be prohibitive, and to help us create a diverse and collaborative environment for all those dedicated to a career in family planning research and education.

“SFP funding helps junior faculty like myself to pursue academic careers as family planning researchers and ultimately to advance our specialty within academic medicine.”

—Sadia Haider, MD, MPH
### Statement of Financial Position (SFP & SFP Research Fund consolidated)

#### Assets:

- **Cash and cash equivalents:**
  - Checking, savings, & money markets .................................. $1,012,931
  - Cash reserve certificate .................................................. 1,074,614
  - *Total cash and cash equivalents* .......................................... 2,087,545
- Membership dues receivable, net .......................................... 35,296
- Prepaid expenses and deposits ............................................. 5,837
- *Total current assets* .......................................................... 2,128,678

- Furniture and equipment, net ............................................. 688

*Total assets* .................................................................................. $2,129,366

#### Liabilities

- Accounts payable and accrued expenses .................................. $16,773
- Grants payable ................................................................. 883,369

*Total liabilities* ........................................................................... 900,142

#### Net Assets

- Unrestricted ................................................................. $312,010
- Temporarily restricted ....................................................... 917,214

*Total net assets* ........................................................................... 1,229,224

*Total liabilities and net assets* ................................................ $2,129,366

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“With SFP’s support, family planning science has continued to evolve into a rigorous, innovative, and high-impact field of research, and my investigative team and I are eternally grateful to be recipients. Our SFP-funded project on the social context of family planning for adolescents in Ghana will ultimately allow us to challenge existing paradigms of adolescent sexual and reproductive health in Sub-Saharan Africa, the United States, and across the globe.”

—Kelli Hall, PhD, MS
### Statement of Functional Expenses (SFP & SFP Research Fund Consolidated)

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### Board of Directors

#### Officers

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<th>Name</th>
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<th>Institution</th>
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<tr>
<td>Carolyn Westhoff, MD, MSc</td>
<td>President</td>
<td><em>Columbia University Medical Center</em></td>
</tr>
<tr>
<td>Eve Espey, MD, MPH</td>
<td>President-Elect</td>
<td><em>University of New Mexico School of Medicine</em></td>
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<tr>
<td>Nikki Zite, MD, MPH</td>
<td>Secretary</td>
<td><em>University of Tennessee at Knoxville</em></td>
</tr>
<tr>
<td>Stephanie Teal, MD, MPH</td>
<td>Treasurer</td>
<td><em>University of Colorado, Denver School of Medicine</em></td>
</tr>
<tr>
<td>Melissa Gilliam, MD, MPH</td>
<td>Immediate Past President</td>
<td><em>University of Chicago Medical Center</em></td>
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#### At-large members

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<tr>
<th>Name</th>
<th>Title</th>
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<td>Danielle Bessett, PhD</td>
<td></td>
<td><em>University of Cincinnati</em></td>
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<tr>
<td>Sonya Borrero, MD, MS</td>
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<td>Carrie Cwiak, MD, MPH</td>
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<tr>
<td>David Hubacher, PhD</td>
<td></td>
<td><em>Contraceptive Technology Innovation Dept, FHI 360</em></td>
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<tr>
<td>Anu Kumar, PhD, MPH</td>
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<td><em>Ipas</em></td>
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<tr>
<td>Tessa Madden, MD, MPH</td>
<td></td>
<td><em>School of Medicine, Washington University in Saint Louis</em></td>
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<td>Maureen Paul, MD, MPH</td>
<td></td>
<td><em>Harvard Medical School</em></td>
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<tr>
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<tr>
<td>Michael A. Thomas, MD</td>
<td></td>
<td><em>University of Cincinnati College of Medicine</em></td>
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<tr>
<td>James Trussell, PhD</td>
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<td><em>Office of Population Research, Princeton University</em></td>
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<tr>
<td>Beverly Winikoff, MD, MPH</td>
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Top, from left to right: Carolyn Westhoff, SFP President; Eve Espey, President-Elect; Stephanie Teal, Treasurer.
Bottom: At-large board members Danielle Bessett, James Trussell, and Tina Raine-Bennett and Sonya Borrero.
Staff

Susan Higginbotham, MEd
Executive Director

Marlo Polonsky, MPH
Grants Officer

Sarom Sot
Administrative Coordinator

Lauren Bruce, MPH
Program Coordinator

Left to right: Susan Higginbotham, SFP Executive Director; Marlo Polonsky, Grants Officer; Sarom Sot, Administrative Coordinator; Lauren Bruce, Program Coordinator

“I have been thrilled to be able to engage with colleagues in occupational health psychology and social epidemiology who had never previously studied the experiences of health care workers who provide abortion care. The junior investigator grant offered me a true bridge between family planning and other disciplines.”

—Elizabeth Janiak, MA, MSc
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