THE YEAR IN REVIEW:

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*First annual North American Forum on Family Planning took place in 2011
DEAR SFP FELLOWS AND COLLEAGUES,

We are delighted to present the Society of Family Planning (SFP) and the Society of Family Planning Research Fund’s (SFPRF) 2016 annual report. We hope that you—our members, supporters, and colleagues—enjoy the year in review. It was an active year, and we completed a thorough evaluation of the impact of our funded research grants and other programs thanks to the efforts of our new staff member, Dr. Amanda Dennis, director of research and evaluation.

The sixth annual North American Forum on Family Planning (the Forum) again broke attendance records with nearly 1,300 faculty, exhibitors, and other attendees, an increase of almost 30% over 2015. In their feedback, participants indicated that the Forum plays an increasingly important role in their work. Over 90% of attendees who offer clinical care report that, thanks to the Forum, they are better able to integrate and apply the most current scientific research into clinical practice. (Read more about the Forum on pages 5-8.)

Through the SFPRF’s competitive request for grant proposals, we funded more than $3.9 million in new research and career development grants. These included 42 large and small research grants, community-based participatory research, interdisciplinary innovation grants, and junior investigator, midcareer mentor, and trainee grants. We remain committed to a rigorous grant review process to ensure funding of projects with important impact. (See our list of 2016 grants on pages 11-14.)

We launched a comprehensive strategic planning process in 2016, developing new vision and mission statements for SFP and creating a theory of change, which describes a process of planned social change—from the assumptions that guide its design to the long-term goals it seeks to achieve. Theory of change specifies and explains the link between a strategy or action and the intended impact. While the new four-year plan will not be completed until later in 2017, we look forward to re-envisioning our work and to reporting on the final plan. We are indebted to our dedicated board of directors, who donated significant time and energy to this important, exciting, and time-consuming initiative.

SFP’s grants have been instrumental in helping me to both launch my career as a junior investigator and forge community partnerships with local organizations and health systems.

— Emily Mann, PhD, University of South Carolina

Letter from the executive director and president

Susan Higginbotham, SFP executive director
Eve Espey, SFP president
Our membership grew significantly—by nearly 25%—over the past year. We closed 2016 with more than 700 fellows, a growing group of dedicated members representing many disciplines. (Read more about the SFP membership on page 15.)

On behalf of the board of directors and staff, we thank you for taking the time to review our 2016 activities. We are sincerely grateful for such a vibrant community of researchers and academics dedicated to family planning and to our organization.

Warmly,

Susan Higginbotham, MEd
Executive Director

Eve Espey, MD, MPH
President, Board of Directors

The SFP funding gave me the invaluable opportunity of developing a research project in a foreign country and facing the obstacles that come with global health research. The experience presented me with career options that I had not previously considered and has shaped my path towards pursuing a career in obstetrics and gynecology.

—Serena Liu, BS, Columbia University
Evaluations of the Society’s work

EVALUATING HOW SFP’S WORK PROMOTES OUR MISSION

to advance sexual and reproductive health is a critical endeavor. It helps demonstrate the growing impact of our work and provides direction for areas of needed improvements. Through evaluation, we aim to learn alongside our members, grantees, and partners, building a community primed to exert a sustained and powerful influence on clinical practice, public policy, health services, health programs, and culture.

We launched our evaluation efforts in 2016, guided by best practices identified in the literature, feedback from our members and grantees, lessons learned by other grantmakers, and the expertise of our multidisciplinary board.

These efforts have centered: (1) our grantmaking focus, (2) the process of applying for and reviewing grants, (3) the overall impact of the research we have supported, (4) use of our clinical practice guidelines, and (5) the strengths of and opportunities for improving the Forum.

Though still early in this process, we have already learned the following and have worked to apply those learnings:

- Between 2007 and 2016, we provided 255 grants to 177 different investigators. On average, we accept 29% of the proposals we receive. The research we support tends to focus on abortion and contraception issues in the U.S. We support clinical, social, implementation, and other science types.1 (Read more about the grants we funded in 2016 on pages 11-14.)

- Applicants and reviewers give high marks to our grant application and review process. Most applicants report that the insightful feedback provided by reviewers enables them to improve their grantmanship and the rigor of their research. Reviewers report that they are overwhelmingly pleased with how the review process is run. At their suggestion, we have secured reviewers with additional areas of expertise and worked to improve the quality of grant review discussions.

- Scholarly publications enable the research we support to have greater impact through the sharing of new knowledge. By the close of 2016,

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Through evaluation, we aim to learn alongside our members, grantees, and partners, building a community primed to exert a sustained and powerful influence on clinical practice, public policy, health services, health programs, and culture.
over 150 scholarly publications had been produced in association with research we supported. These publications can be found in 50 different journals, and have been referenced approximately 4,700 times across a variety of sources including blogs, Facebook posts, news stories, tweets, policy documents, and Wikipedia pages.2

- Our 15 clinical practice guidelines are high-quality tools that provide evidence-informed guidance on pressing abortion and contraception issues. Collectively, they were viewed or downloaded over 60,000 times in 2016. In addition to using the guidelines to inform their clinical practice, members reported using them to advocate for practice change at their facility and for policy change at the local, state, or federal level.

In response to members’ feedback, we plan to produce more clinical practice guidelines and ensure they are disseminated more regularly and more widely. (Read more about our clinical practice guidelines on pages 9-10.)

In 2016, 1,248 people attended the Forum, more than twice as many as in 2012. Attendees increasingly represent a diversity of fields and include advocates, clinicians, industry members, researchers, and other partners. They report that the Forum continues to be an important space for learning about new research and networking. Among other improvements, we plan to bring more diverse and multidisciplinary speakers to center stage and feature more interactive sessions in 2017. (Read more about the Forum on pages 5-8.)

Sharing what we learn, as we learn it, is a core principle of our evaluation approach. We have shared evaluation learnings through reports on our website, quick takeaways on Facebook, and presentations at the Forum. Please keep an eye out for more evaluation learnings in 2017.

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SFP’s annual meeting at the North American Forum on Family Planning

IN NOVEMBER 2016, we convened our annual meeting in Denver in conjunction with the sixth annual North American Forum on Family Planning, produced in collaboration with Planned Parenthood Federation of America (PPFA) and the Association of Reproductive Health Professionals (ARHP).

The Forum continues to serve as the premier family planning conference in North America. In 2016:

- Attendance reached nearly 1,300—almost a 30% increase over the previous year’s meeting attendance.

- More than 90% of attendees plan to attend the Forum in the future.

- More than 90% of attendees who offer clinical care reported that the Forum enables them to better integrate and apply the most current scientific research into clinical practice.

Highlights noted by attendees of the 2016 conference included the session on transforming health and health care for transgender patients and the debate on the intersection of family planning and HIV.

“The transgender plenary was outstanding. It included clinical, policy, legal and patient perspectives and the speakers were all outstanding. It was refreshing to have new voices featured at the conference.”

“The format of the debate on family planning and HIV was wonderful—interactive, engaging, and very informative. I always love watching experts discuss or debate a hot topic, and adding audience participation is a great way to engage the audience in a difficult subject.”
Awards

The following honorees were recognized at the November 5, 2016 SFP awards luncheon:

**SFP Lifetime Achievement Award**

**Dorothy Roberts, JD.** has helped transform public thinking on reproductive health, child welfare, and bioethics. She is the 14th Penn Integrates Knowledge Professor and George A. Weiss University Professor of Law & Sociology at the University of Pennsylvania, with joint appointments in the departments of Africana Studies and Sociology and the Law School, where she is the inaugural Raymond Pace and Sadie Tanner Mossell Alexander Professor of Civil Rights. She is also the founding director of the Penn Program on Race, Science, and Society.

**Allan Rosenfield Award for Lifetime Contributions to International Family Planning**

**Beverly Winikoff, MD, MPH.** is president of Gynuity Health Projects and a professor of clinical population and family health at the Mailman School of Public Health, Columbia University. At Gynuity, she works to ensure that reproductive health technologies are widely available and provided in the context of high-quality services. Before starting Gynuity in 2003, Dr. Winikoff worked for 25 years at the Population Council, where she developed and managed the Council’s Ebert Program on Critical Issues in Reproductive Health.

**Robert A. Hatcher Family Planning Mentor Award**

**Linda Prine, MD.** is a professor of family medicine at Mount Sinai School of Medicine, director of women’s health at the Institute for Family Health, and cofounder and medical director of the Reproductive Health Access Project. She also teaches early abortion techniques at the Institute’s residency programs and at Planned Parenthood of New York City and works with residents as part of these programs’ leadership development. In all of her work, she has been a leader and advocate for full-spectrum reproductive health care.
Scientific abstracts review

SFP relies on the strength of our volunteer fellows as reviewers of the scientific abstracts presented at the Forum. At the 2016 meeting, 19 abstracts were selected for oral presentation and another 120 for poster presentation. The following abstracts received awards:

**Outstanding Researcher Award**

Reni Soon, MD, MPH

“Paracervical block to decrease pain with second trimester laminaria insertion: a randomized controlled trial”

**Outstanding Researcher in Training Award**

Gillian Horwitz, BS

“BMI as predictor of adverse outcomes with moderate intravenous sedation during surgical abortion”

**First-Place Poster**

Wendy Norman, MD, MHSc

“Immediate vs. delayed insertion of intrauterine contraception after second trimester abortion: a Randomized Controlled Trial.”

**Second-Place Poster (tie)**

Eve Espey, MD, MPH

“Breastfeeding continuation in postplacental vs. interval postpartum IUD insertion: the Breastfeeding Levonorgestrel IUD Study (BLIS) RCT”

Anu Gomez, PhD

“How long is long-acting? Recent trends in mean duration of intrauterine device use”

**Third-Place Poster**

Kelsey Holt, SD candidate

“Predictors of pregnancy options counseling and abortion referrals or dissuasion among United States primary care physicians: results from a national survey”

**Best Translational Science Poster Abstract**

Hadas Zachor, MD

“Acceptability of a tailored computerized intervention to reduce adolescent relationship abuse in family planning clinics”
Career development seminar

The 2016 seminar began with a panel discussing funding opportunities for research on family planning. Panelists included Christine Clark, program officer in global development and population at the Hewlett Foundation; Dr. Susan Newcomer, extramural program staff at the National Institute of Child Health and Human Development; and SFP executive director Susan Higginbotham.

For part two of the seminar, attendees selected from one of four workshops on concrete ways to secure funding:

1. Grant writing and Hewlett Foundation priorities related to reproductive health—led by Christine Clark, MPH, a program officer at the Hewlett Foundation for grants that support family planning services and reproductive rights advocacy, and Kelli Hall, PhD, MS, a professor of behavioral sciences and health education at Emory University’s Rollins School of Public Health

2. Finding federal funding—led by E. Bimla Schwarz, MD, MS, professor of medicine at University of California Davis and medical director of the UCSF Family PACT Evaluation Contract

3. Proposing early career development mentoring grants—led by Jeanelle Sheeder, PhD, MSPH, who has been using a 2014 SFP career development grant to build an online research mentorship toolkit resource for SFP members

4. Navigating concerns related to submitting NIH applications on sensitive topics—led by Susan Newcomer, PhD, who manages a portfolio of research on fertility, contraceptive use, and AIDS/HIV risk at the National Institute of Child Health and Human Development

“It is such a great conference. I had an amazing time. So many wonderful people, and it is very well organized!”

“My head is still spinning from all the new information.”

“The best year since I’ve been coming.”

Drs. Kelli Hall and Christine Clark reviewing grant writing and foundation priorities in reproductive health with SFP fellows at 2016 career development seminar
DEVELOPING METHODOLOGICALLY RIGOROUS, EVIDENCE-BASED CLINICAL PRACTICE GUIDELINES is a high priority for SFP. Individual SFP members develop these guidelines after a thorough review of published literature and emerging clinical and scientific advances to date. The guidelines must be approved by the SFP board of directors, and are subject to periodic revision as warranted by advancements in the field.

SFP's clinical practice guidelines provide advice that cannot be found elsewhere, such as best practices for medical management of first-trimester abortion, cervical dilation before first-trimester abortion, and cervical preparation preceding a surgical second-trimester abortion.

In 2016, as part of a wider evaluation endeavor (see pages 3-4), we focused on assessing how our clinical practice guidelines are being produced and ultimately used. We learned that the guidelines were viewed or downloaded more than 60,000 times in 2016 alone. SFP members stated that they used these guidelines to inform their clinical practice as well as to advocate for change in their institutions’ practices and in local, state, and federal policies.

Based on feedback provided by our members as part of this evaluation process, SFP is now committed to producing a greater number of clinical practice guidelines and disseminating them more broadly and regularly.

Our guidelines are published in Contraception, a peer-reviewed international reproductive health journal, and then posted on the SFP website. They provide treatment recommendations and should not be construed as prescribing exclusive courses of treatment or procedures relating to any clinical matter.

I think many doctors are discouraged from pursuing a career in family planning because of a lack of funding in that area, a lack of institutional support for abortion, or an increasingly hostile political environment.

My grant from SFP was essential for me to pursue a career in family planning despite the many challenges.

—Nisha Verma, MD, Beth Israel Deaconess Medical Center
To date, 15 clinical practice guidelines have been published by SFP:

GUIDELINE #2016-1. Medical abortion reporting of efficacy: the MARE guidelines

GUIDELINE #2015-1. Cervical dilation before first-trimester surgical abortion (<14 weeks’ gestation) (Revises and replaces Guideline #2007-1)

GUIDELINE #2014-1. Medical management of first-trimester abortion

GUIDELINE #2013-4. Cervical preparation for second-trimester surgical abortion prior to 20 weeks’ gestation (Revises and replaces Guideline #2007-2)

GUIDELINE #20133. Interruption of nonviable pregnancies of 24–28 weeks’ gestation using medical methods

GUIDELINE #20132. Surgical abortion prior to 7 weeks of gestation

GUIDELINE #20131. Management of postabortion hemorrhage

GUIDELINE #20122. First-trimester abortion in women with medical conditions

GUIDELINE #20121. Cancer and contraception

GUIDELINE #20111. Labor induction abortion in the second trimester

GUIDELINE #20102. Prevention of infection after induced abortion

GUIDELINE #20101. Induction of fetal demise before abortion

GUIDELINE #20092. Use of the Mirena LNG-IUS and Paragard CuT380A intrauterine devices in nulliparous women

GUIDELINE #20091. Contraceptive considerations in obese women

GUIDELINE #20073. Cervical preparation for surgical abortion from 20 to 24 weeks’ gestation
SFP research and career development grants

THE SFP RESEARCH FUND'S GRANT PROGRAM is intended to generate knowledge in the field of family planning through scientific research on contraception and abortion that exerts a sustained, powerful influence on clinical practice, public policy, health services, programs, and culture. In 2016, we awarded more than $3.9 million in research grants.

SFP also provides career development grants—junior investigator, midcareer/mentor, and trainee/student awards—designed to provide research support and protected time for junior investigators and mentors and to give 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 career development awards.

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

Samantha Garbers, Public Health Solutions—$150,000
Understanding and tailoring pregnancy intention screening tools through community-based participatory research (CBPR) with Latina women

Kate Grindlay, Ibis Reproductive Health—$149,815
Creating youth-informed and youth-centered pharmacy access to contraception in Washington, DC

Emily Mann, University of South Carolina—$147,793
Breaking barriers to contraceptive access among recent Latino immigrants in South Carolina: a community based participatory research study

Reni Soon, University of Hawaii—$150,000
Expanding reproductive healthcare access for adolescents in primary care settings at a community health center: a CBPR project

Interdisciplinary innovation grants— $75,000 maximum award

Aletha Akers, The Children’s Hospital of Philadelphia—$75,000
Improving adolescent reproductive health through online family engagement: developing the ‘Parents are TALKING’ website

Blair Darney, Oregon Health and Science University—$75,000
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—$74,995
Serious games for serious issues: reducing high-risk sexual behavior in adolescents through a mobile phone game

Dr. Samantha Garbers will use a community-based participatory research grant to study pregnancy intention screening tools

Dr. Aletha Akers will use an interdisciplinary innovation grant to look at online family engagement and teen reproductive health
Lisa Harris, University of Michigan—$75,000
Out of the margins: dismantling stigma and disrupting stereotypes of abortion providers

Heidi E. Jones, CUNY School of Public Health—$75,000
Client and provider perspectives on reproductive intention screening during the primary care encounter: using a reproductive justice framework to strengthen reproductive health services in primary care in New York Phase II

Interdisciplinary innovation planning grants—$25,000 maximum award

Brittany Charlton, Boston Children's Hospital—$25,000
Understanding why teen pregnancies are more common among lesbian, gay, and bisexual youth compared to heterosexuals

Emily Godfrey, University of Washington—$25,000
Building a national contraceptive registry for multiple complex medical conditions: improving contraceptive care for women through engagement

Sadia Haider, University of Illinois at Chicago—$25,000
Improving the provision of reproductive and sexual health services to women living with and affected by HIV in the Midwest: a community-academic partnership

Sadia Haider, University of Illinois at Chicago—$24,991
Understanding family planning disparities among sexual minority women: a critical first step for improving contraceptive care

Debra Stulberg, University of Chicago—$25,000
Religious healthcare systems and the impact on reproductive health service delivery in the Chicago metropolitan area

Rachel Thompson, Trustees of Dartmouth College—$24,998
(Family) planning ahead: adopting user-centered design to enable patient-centered decision-making about postpartum contraception

Large grants—$250,000 maximum award

Liza Fuentes, Guttmacher Institute—$250,000
Stages of change: a patient-centered study on LARC removal

Caitlin Gerdzs, Ibis Reproductive Health—$249,729
Understanding abortion seeking and care outside of legal public sector services in South Africa: testing the potential of respondent-driven sampling (RDS)

Anu Gomez, University of California, Berkeley—$120,000
Moving beyond unintended pregnancy: a national study of prospective pregnancy desires and acceptability

Vinita Goyal, University of Texas at Austin—$119,995
Undue? Quantifying the burden of a restrictive abortion law on Texas women

Elizabeth Janiak, Planned Parenthood League of Massachusetts—$109,657
Describing the impact of parental involvement laws for minors seeking abortion care: the case of Massachusetts

Erika Levi, Albert Einstein College of Medicine—$239,798
Immediate postpartum contraceptive implant placement and breastfeeding success in women at risk for low milk supply: a randomized non-inferiority trial

SFP funds enabled our multidisciplinary team to use innovative approaches like a patient/advocate advisory panel, collect sufficient data, and employ a mixed-methods design — contributing to both family planning literature and practice. The advisory panel will continue, improving and expanding family planning care.

—Liza Fuentes, PhD, Guttmacher Institute

Dr. Brittany Charlton will study teen pregnancies among LGB youth
Mary Ott, Indiana University—$250,000
ACCeSS (Adolescent Capacity for Contraceptive Self Screening) Project

Sarah Roberts, University of California, San Francisco—$236,669
Cost and complications of abortion in ambulatory surgery centers vs. offices/clinics

Ushma Upadhyay, University of California, San Francisco—$120,000
Emergency department visits and major complications after abortion: analysis of a nationwide emergency department sample

Small/pilot grants—$15,000 maximum award

Stephanie Begun, University of Denver Graduate School of Social Work—$14,477
Family planning among homeless youth: the role of social network norms and social support

Lyndsey Benson, University of Washington—$14,984
Developing an evidence-based IUD self-removal guide: a pilot study

Sabrina Holmquist, University of Chicago—$14,948
Refining milestones for the Fellowship in Family Planning using a Delphi approach

Aaron Lazorwitz, University of Colorado Denver—$15,000
The effect of isotretinoin on the etonogestrel implant

Kate MacFarlane, Cambridge Reproductive Health Consultants—$15,000
Assessing the reproductive health needs of Burmese refugees in Kuala Lumpur, Malaysia

Emily Mann, University of South Carolina—$14,969
Assessing South Carolina Medicaid recipients’ experiences with the promotion of immediate post-partum insertion of long-acting reversible contraceptives

Erin Pearson, Harvard T.H. Chan School of Public Health—$15,000
Developing and testing novel measures of misoprostol use for induced abortion using the list experiment in Pakistan

Julia Potter, Boston University Medical Center—$14,958
Involving parents in adolescent contraceptive decision-making: a feasibility study

Aparna Sridhar, University of California, Los Angeles—$13,750
Birth control tales: development and testing of theory-based contraception educational comics for young adults

Junior investigator award—$260,000 maximum award

Abigail Aiken, University of Texas at Austin—$240,800
Making equitable choice a reality: towards safe, effective, and supported medical abortion outside the formal healthcare setting in the United States

Maryam Guiahi, University of Colorado Denver—$260,000
Providing solutions to inadequate family planning and abortion training at U.S. OB-GYN residency programs affiliated with restrictive faith-based hospitals

The scientific peer review of our grant provided an important methodological improvement, helping us reduce a potential source of bias and, hopefully, make an even more rigorous contribution to the field and thereby provide credible evidence to ongoing policy conversations about this topic.

—Sarah Roberts, DrPH, MPH, ANSIRH/UCSF
Midcareer/mentor award—$80,000 maximum award

Angel Foster, University of Ottawa—$80,000
Supporting a new generation of social scientists in abortion and contraception research

Bliss Kaneshiro, University of Hawaii—$79,955
Developing early-stage investigators to meet the Society of Family Planning research priorities

Trainee/student award—$7,500 maximum award

Megan Cohen, Oregon Health & Science University—$6,743
Tamoxifen to reduce unscheduled bleeding in new users of the Levonorgestrel-releasing intrauterine system (LNG-IUS)

Kyla Donnelly, Trustees of Dartmouth College—$7,500
Pro-voice: women’s and health professionals’ priorities for communication and decision support about early abortion methods

Alyssa Hersh, Oregon Health & Science University—$7,500
Video versus conversational contraceptive counseling during maternity hospitalization: a randomized trial

Sarah Huber, The Ohio State University—$7,500
Method-specific barriers and facilitators: a novel evaluation of contraceptive use in Malawi

Serena Liu, Columbia University—$7,500
The effect of dolutegravir-based ART on serum etonogestrel levels in HIV-infected women using contraceptive implants in Botswana

Sarah Peterson, University of Colorado Denver—$7,500
Do women traveling greater distances to obtain abortion services experience undue burden?

Lindsay Stevens, Rutgers University—$6,655
Reproductive planning, pregnancy intention, ambivalence, and health care experiences: a qualitative study

Mary Tschann, University of Hawaii—$7,479
A comprehensive family planning needs assessment for syringe exchange program participants in Hawaii

Nisha Verma, Beth Israel Deaconess Medical Center—$7,500
Exploring the impact of federal regulations on abortion research

Katie Woodruff, University of California Berkeley School of Public Health—$7,500
The role of evidence in shaping reproductive health policy in the U.S.

Because of funding from SFP, I have had the opportunity to develop new collaborative relationships with researchers in my field, receive ongoing mentorship, and study how restrictive state policies have affected access to reproductive health care.

—Vinita Goyal, MD, MPH, Population Research Center, University of Texas at Austin
SFP fellowship demographics and growth

At the end of calendar year 2016, SFP had 708 fellows:
- 396 junior fellows
- 249 full fellows
- 63 affiliate fellows

This represents the following growth over the number of fellows in 2015:
- 18% increase overall
- 22% increase in junior fellows
- 10% increase in full fellows
- 29% increase in affiliate fellows

In 2016, 20 junior fellows met the eligibility requirements to become full fellows, a 67% increase over the number who did so in 2015.

Membership in SFP is open to any qualified individual who is in good professional standing and has an interest in family planning demonstrated through postdoctoral 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.

Members include physician researchers trained in obstetrics and gynecology, 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.

At the 2016 SFP career development workshop, held in conjunction with the North American Forum on Family Planning, E. Bimla Schwarz, MD, MS, coached SFP junior and full fellows on finding federal funding.
# 2016 audited financials
## For the year ended December 31, 2016

## Statement of financial position (SFP & SFP Research Fund consolidated)

### Assets

#### Current assets
Cash and cash equivalents:
- Checking, savings, and money markets $1,888,950
- Cash reserve certificate 1,916,347
- **Total cash and cash equivalents** 3,805,297
- Membership dues receivable, net 34,943
- Other receivables 76,014
- **Prepaid expenses and deposits** 47,050

**Total current assets** 3,963,304

#### Furniture and equipment, net

**Total assets** $3,963,304

### Liabilities and net assets

#### Current liabilities
- Accounts payable and accrued payroll $16,073
- Grants payable 2,475,662
- Refund due to grantor 1,147,713

**Total current liabilities** 3,639,448

#### Net assets
- Unrestricted (deficit) 323,856
- Temporarily restricted

**Total net assets (deficit)** 323,856

**Total liabilities** $3,963,304
### Statement of functional expenses (SFP & SFP Research Fund consolidated)

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<td>46,522</td>
</tr>
<tr>
<td>Office expenses and printing</td>
<td>13,759</td>
<td>2,429</td>
<td>16,188</td>
</tr>
<tr>
<td>Outreach and exhibits</td>
<td>7,125</td>
<td>—</td>
<td>7,125</td>
</tr>
<tr>
<td>Professional fees</td>
<td>23,560</td>
<td>64,637</td>
<td>88,197</td>
</tr>
<tr>
<td>Rent, utilities, and parking</td>
<td>18,473</td>
<td>3,260</td>
<td>21,733</td>
</tr>
<tr>
<td>Travel, meetings, and conferences</td>
<td>59,831</td>
<td>10,559</td>
<td>70,390</td>
</tr>
<tr>
<td><strong>Total other expenses</strong></td>
<td>299,790</td>
<td>90,606</td>
<td>390,396</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$7,115,787</td>
<td>$163,470</td>
<td>$7,279,257</td>
</tr>
</tbody>
</table>
2016 board of directors

Officers

Eve Espey, MD, MPH—president (University of New Mexico School of Medicine)
Stephanie Teal, MD, MPH—president-elect (University of Colorado, Denver School of Medicine)
Nikki Zite, MD, MPH—secretary (University of Tennessee at Knoxville)
Tessa Madden, MD, MPH—treasurer (School of Medicine, Washington University in Saint Louis)
Carolyn Westhoff, MD, MSc—immediate past president (Columbia University Medical Center)

Ex officio

Susan Higginbotham, MEd—executive director

At-large members

Sonya Borrero, MD, MS (University of Pittsburgh School of Medicine)
Mary Fjerstad, RN, NP, MHS (women’s health care nurse practitioner)
David Hubacher, PhD (Contraceptive Technology Innovation Dept, FHI 360)
Megan Kavanaugh, DrPH (Guttmacher Institute), began term November 2016
Anu Kumar, PhD, MPH (Ipas)
Wendy V. Norman, MD, MHSc (University of British Columbia), began term November 2016
Pooja R. Patel, MD, MMS—junior fellow representative (University of Texas Medical Branch in Galveston)
Maureen Paul, MD, MPH (Harvard Medical School)
Joseph E. Potter, PhD (The University of Texas at Austin)
Tina Raine-Bennett, MD, MPH (Women’s Health Research Institute)
Michael A. Thomas, MD (University of Cincinnati College of Medicine), completed term November 2016

Without SFP funding, I would not have been able to pursue my research—research that I hope will provide guidance for new providers and make second-trimester abortion accessible to more women. SFP provides the support that makes choice a reality.

—Sabrina Holmquist, MD, MPH, University of Chicago

With their emphasis on supporting research among trainees and young professionals, SFP is paving the way for the next generation of the strongest researchers in our field.

—Aaron Lazorwitz, MD, University of Colorado Denver

Community engagement is vital to addressing the reproductive and other disparities in the community, and I’m really glad SFP recognizes the value of community-engaged and CBPR projects.

—Reni Soon, MD, MPH, University of Hawaii
2016 staff

Susan Higginbotham, MEd, executive director
Marlo Polonsky, MPH, grants officer
Amanda Dennis, DrPH, MBE, director of research & evaluation
Sarom Sot, administrative coordinator
Christine Hence, MS, program coordinator

From left to right: Amanda Dennis, director of research and evaluation; Susan Higginbotham, executive director; Sarom Sot, administrative coordinator; Christine Hence, program coordinator; and Marlo Polonsky, grants officer
SFP Vision Statement

We envision a world where people have optimal reproductive health and rights.

Mission of the Society of Family Planning

The Society of Family Planning advances sexual and reproductive health through research, education, advocacy and professional development.

Mission of the Society of Family Planning Research Fund

The SFP Research Fund supports research on contraception and abortion that exerts a sustained, powerful influence on clinical practice, public policy, health services, programs and culture.