



High-risk pregnancy care, post-*Dobbs*

2023 Request for proposals

Purpose

In the wake of the sweeping *Dobbs v Jackson's Women's Health Organization* ruling, impacts on clinical care have been far reaching, not only eliminating or severely restricting abortion care, but also affecting clinicians' ability to treat pregnant people at high risk of pregnancy mortality and morbidity. While anecdotal evidence has illuminated some of the barriers that people with high-risk pregnancies face trying to receive person-centered and evidence-informed care, the scope and depth of the harm — and how it plays out at the level of the healthcare system, institution, clinician, and patient — has not been systematically documented. In order to generate this evidence, the Society of Family Planning is offering the *High-risk pregnancy care, post-Dobbs* request for proposals. This funding opportunity is offered in partnership with the Society for Maternal-Fetal Medicine.

The deadline for proposals is August 30 at 8:59 pm PT/11:59 pm ET. Awards will be announced in November 2023 and funds will be available for immediate use.

**Application submission opens on
May 17, 2023 and closes August 30, 2023**



Research focus

We invite research proposals focused on documenting how the *Dobbs* decision has impacted care for pregnant people at high risk of pregnancy mortality and morbidity, including those with maternal health conditions such as cancer, fetal health conditions such as fetal complications or anomalies, and/or pregnancy complications such as periviable premature rupture of membranes, molar pregnancies, or ectopic pregnancies. Teams are welcome to explore this topic at the level of the healthcare system, institution, clinician, and/or patient (experience or health outcomes). Regardless of level of focus, proposals must clearly define the setting of the proposed research (eg, populations served, size of system, payors, geography) and be attentive to how legal restrictions and the larger healthcare ecosystem interact within that particular setting to shape clinical care for people with high-risk pregnancies. Research proposals focused in legally restrictive settings will be prioritized, with specific attention to health systems that might otherwise be able to offer or refer to evidence-informed care.

Given the legal complexity and highly sensitive nature of this topic, teams must address the feasibility of the proposed research and the strategies they will use to facilitate recruitment and mitigate risks to participants. In addition, teams should project with as much detail as possible how research findings may be used, with careful attention to not only how findings may support efforts to improve access to care but also how findings may present potential risks to care, with thought to mitigating potential risks.

We encourage multidisciplinary teams that engage a range of clinicians involved in caring for pregnant people at high risk of pregnancy mortality and morbidity, such as those working in obstetrics and gynecology, maternal-fetal medicine, emergency medicine, family medicine, oncology, and other disciplines, as relevant to the proposed research. If needed, the Society of Family Planning and Society for Maternal-Fetal Medicine can be a resource for establishing connections with relevant partners during the application period.

Proposed research must be positioned to produce empirical evidence with a clear, concrete, and strategic path to changes in clinical practice, institutional or public policy, and/or health service delivery. We encourage proposals to be as specific as possible in describing the path from research to change, recognizing that change may be differently defined in each project and that pathways to change are constrained in the current environment. Teams must be attentive to the Society of Family Planning's [Diversity, Equity, and Inclusion Vision Statement](#) and how they can be part of bringing that vision to life in their work.



Funds, benefits, and duration


The Society of Family Planning invites proposals for research studies with budgets up to \$175,000 that can be completed within 24 months of award. Grantees will also have access to funds to cover processing fees associated with open-access publication, provided the work is published within two years of grant completion. We anticipate supporting up to six research projects via this funding opportunity.

During the award period, the Society of Family Planning will provide grantees with technical assistance around best practices for data security.

Eligibility

Grants will be made to organizations on behalf of a named principal investigator (PI) Grants are limited, without exception, to tax-exempt organizations. Applicants do not need to be members of the Society of Family Planning or the Society for Maternal-Fetal Medicine.

Funding is limited to projects focused in the US.



The purpose of this funding opportunity is to develop new evidence on how the *Dobbs* decision has impacted care for pregnant people at high risk of pregnancy mortality and morbidity.



Review process

All proposals will undergo peer review using specific criteria. The goal of peer review is to make recommendations for enhancing the research proposal and to identify the projects with the greatest potential impact. The funder of these awards may also be involved in the selection of grants; this helps ensure that the research funded through the Society of Family Planning is one of many strategic components working together to strengthen the family planning sector.

All proposals will be reviewed according to the following criteria. For more information about the review process, please see the proposal review guide: <https://bit.ly/428v2tD>.

Methods (25%)

The Society of Family Planning seeks to fund methodologically sound and rigorous projects.

Feasibility (25%)

The Society of Family Planning seeks to fund projects that have thoughtfully addressed the feasibility of the proposed project.

Impact (20%)

The Society of Family Planning seeks to fund projects that are positioned to generate empirical evidence with a clear, concrete, and strategic path to changes in clinical practice, institutional or public policy, and/or health service delivery.

Setting and study population (15%)

The Society of Family Planning seeks to fund projects focused on study populations that are aligned with the proposed research questions and bring attention to how legal restrictions and the larger healthcare ecosystem shape high-risk pregnancy care in the research setting. We prioritize projects focused in legally restrictive settings.

Team (15%)

The Society of Family Planning seeks to fund projects where the team composition is an asset to the project, including teams that bring together individuals with diverse skill sets, backgrounds, and perspectives. We prioritize study teams that include different types of clinicians involved in caring for people with high-risk pregnancies and that elevate the expertise and skills of individuals that identify as Black, Indigenous and people of color.

Additional review considerations (not scored)

Reviewers are also asked to provide feedback on the reasonableness of the proposed budget and timeline; however, these factors are not scored.



Proposal instructions

1. Online application form:

Includes contact and demographic information for the PI, institution, and parties responsible for accounts payable and grants management if the project is funded.

2. Summary (250 words):

Provide a brief summary of the proposed project. This information may be used in our newsletter, website, and other educational and promotional purposes should the application be funded.

3. Study team:

List key team members, including contact and demographic information.

4. Proposal narrative (8 to 10 pages):

All proposals should include:

Background: Describe the issue and justify how the proposed research project will generate data that will produce empirical evidence with a clear, concrete, and strategic path to changes in clinical practice, institutional or public policy, and/or health services delivery.

Research question(s): Include the question(s) that will be answered through the proposed project.

Methods: Describe the research methods that will be used to answer the research question(s) at hand.

Setting and study population: Describe the research setting and study population. The study population (eg, people seeking care, clinicians, healthcare administrators, legal counsel) must align with the research question(s) and be specifically defined and justified, bringing attention to how legal restrictions and the larger healthcare ecosystem shape high-risk pregnancy care within the research setting. Sample size should be based on power calculations or other appropriate methods as determined by the study approach; sample size should account for subgroup analyses as appropriate.

Feasibility: Discuss the feasibility of the proposed research and the strategies you will use to facilitate recruitment and mitigate risks to participants.

Timeline: Describe the timeline for conducting research activities. Data collection and analysis must be feasible to complete within 24 months of receiving the award.

Use of research results: Narrate the target audience(s) with whom you plan to share your research findings, the actions you would like them to take in response to your findings, and the desired outcomes. Share how you will steward the range of potential findings to greatest impact, while mitigating harm.

Proposal instructions, continued

4. Proposal narrative (8 to 10 pages), continued:

Team composition: Team composition must be an asset to the project, including teams that bring together individuals with diverse skill sets, backgrounds, and perspectives relevant to the proposed project. Elaborate on the expertise and skills of the individuals composing your study team. Describe the positionality (eg, the social and political context that creates your identity in terms of race, class, gender, sexuality, and ability status) of the team and its effect on the proposed project's design, feasibility, and impact. Note that we prioritize study teams that include different types of clinicians involved in caring for people with high-risk pregnancies and that elevate the expertise and skills of individuals that identify as Black, Indigenous and people of color.

References: Works cited should be listed as an appendix to the proposal; reference page is not included in the 8 to 10 pages of the proposal narrative.

5. Budget and budget narrative:

Studies should be \$175,000 or less. The budget narrative must provide sufficient detail to assess feasibility and suitability in the peer review process and must justify the relevance of requested resources to the project's success. Additional secured or requested funds for the proposed project must be named, if applicable. Direct project costs include personnel, research expenses (eg, equipment, supplies, travel, materials), activities related to use of research results, and other related costs. Indirect costs are permitted at no more than 20% of total direct costs. For subcontracts and sub-awards, the budget itself may include the 20% indirect cost charges, but the subcontract total may not be included in the main budget when calculating the overall indirect cost charges. Budget documents should be included as an appendix and are not included in the 8 to 10 pages of the proposal narrative.

6. Team information:

NIH-style biosketches are encouraged for all established scientists. Professional resumes are encouraged for those whose careers have not focused on research. Team members can submit the format that works best for the individuals on the team; however, each submitted biosketch or resume should not exceed 10 pages in length. These documents must be included as an appendix and are not included in the 8 to 10 pages of the proposal narrative.

7. Tax exempt status:

Proof of the agency/institution's tax-exempt status determination letter must be included as an appendix and is not included in the 8 to 10 pages of the proposal narrative. Documentation should also be included for subcontracts with tax-exempt organizations that exceed 20% of the budget. These documents must be included as an appendix and are not included in the 8 to 10 pages of the proposal narrative.



Required formatting and submission instructions

Please use a font size that is at least 11 points and 1.5 line spacing. Upload all materials as a single PDF file. All proposals must be submitted electronically through the [online application portal](#).

Questions

The Society welcomes the opportunity to provide clarification around or assistance with any components of the application. Please contact Grants@SocietyFP.org.



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