

& SFP RESEARCH FUND

www.SocietyFP.org

# Strategic Plan 2018–2021

# A vision focused on family planning

#### VISION

Just and equitable abortion and contraception informed by science

#### MISSION

**Society of Family Planning** The Society of Family Planning is the source for abortion and contraception science.

**Society of Family Planning Research Fund** The Society of Family Planning Research Fund provides grants for research on abortion and contraception.

Our origins trace back to a small and dedicated group of scholars who saw a need for research that worked to address pressing family planning issues, but found there was little financial support for such research, few forums to share and discuss research ideas or findings, and an absence of an academic society focused on two key but often stigmatized components of family planning: abortion and contraception. Seeing an opportunity to address these gaps, our 18 founding members and 33 charter members worked to create an organization that provided grant support for rigorous scholarly family planning research.

Looking back, we wonder whether our founding and charter members had any idea how insightful their vision would prove to be. As you will see in the following pages, over time our grantmaking has become larger, more competitive, and more robust. We have also become much more than a grantmaking body and have built other core programs that are just as impactful as our grantmaking. We have become home to a robust, ever- growing, and diverse community of scholars; co-created a stellar annual meeting for sharing and discussing research ideas and findings; and produced needed clinical practice guidelines.

To respond to growing needs of the field, we established both the Society of Family Planning (SFP) and the SFP Research Fund (SFPRF). SFP was established in 2005 and is focused on programs related to growing and supporting our membership, our annual conference, and clinical practice guidelines. SFPRF was established in 2011 and is focused on grantmaking and advancing scholarly research. Both entities have always been governed by the same board of directors and served by the same staff. As we believe aligning programming across SFP and SFPRF allows for synergistic and increased impact, we have created one strategic plan for the two entities.

Between February 2016 and February 2018, the board and staff engaged in a comprehensive strategic planning process. Eleven years old at the start of the process, it was an opportune time for us to reflect on the first decade of our work and to begin to chart our future evolution.

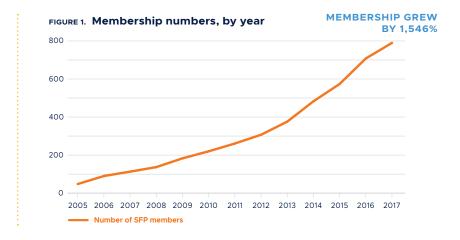
In this process, we considered our history, the environmental context of our work, feedback we have received from members and partners, and our evaluation learnings. After careful reflection, we believe our work is even more important today than it was at our founding, especially as attacks on science and evidencebased family planning care escalate. We are thrilled to share a strategic plan that will move us to our next stage of growth, and look forward to working with our members and partners to continue advancing the science of family planning.



### Accomplishments

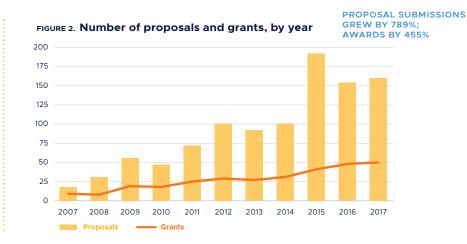
Our future direction builds on more than a decade of experience and is driven by what we learned evaluating our programs. Core programs have not only grown tremendously, but have become vital supports to the academic field of family planning.

**Membership and Community** One of the indicators of our growth is our rapidly expanding membership (see Figure 1, below). In 2005, when we were officially incorporated, there were only 48 founding and charter members. We have continued on a steady path of growth, and at the close of 2017 had almost 800 members, a growth of 1,546%.



Members come from a range of fields, including obstetrics and gynecology, family medicine, adolescent medicine, nursing, public health, sociology, and other disciplines. Members can be found in states across the US and in 12 other countries. They work in academic institutions, hospitals medical centers, private clinics, nonprofit organizations, and insurance or pharmaceutical companies. Our members are leading scholars and expert voices in the field of family planning and are often at the forefront of efforts to improve clinical care and medical education, and to align policy with evidence. Members report that we have come to serve as the intellectual home for family planning scholars and partners, providing members with a community where topics unmentionable in other spaces can be rigorously discussed and interrogated. Members have described SFP as the "soul" of family planning, and a unique place where "crosspollination of ideas across clinical and nonclinical fields occurs," and have said that this community is "particularly important during these embattled times."

**Grantmaking** We have become a core source of support for scholars invested in advancing family planning through research. Applications to the SFPRF have grown tremendously, as has the competition for funding. In our first year of funding, we funded 50% of the proposals we received, and awarded just under \$650,000 (see Figure 2; total award amount not shown). In 2017, we funded 31% of the proposals we received and awarded over \$3,000,000 in grants.





### Accomplishments (cont.)

Additionally, our reliance on peer reviewers to evaluate the rigor and impact of proposals has had a positive impact on the field. In a 2017 survey to applicants, the majority reported that the peer review feedback they received through our grant process helped them improve their grantsmanship, clarify their goals and aims, and hone the rigor of their work, among other benefits.

Our grants have also proven to be vital to building, advancing, and sustaining the careers of both emerging and established family planning scholars. These scholars have advanced the field of family planning by building a robust scholarly evidence base, producing more than 200 articles that have been printed in more than 50 different journals and cited across a variety of sources including blogs, Facebook posts, news stories, policy documents, and Wikipedia pages. Among other impacts, grantees have also developed interventions and clinical practice guidelines that ultimately improved the delivery of family planning care or increased access to care.

**Clinical Practice Guidelines** Our clinical practice guidelines address cutting-edge issues in abortion and contraception care, and they are commonly used to address pressing issues in clinical care, teaching, and in advocacy efforts. At the end of 2017, 17 guidelines had been published, and conservative estimates suggest they have been downloaded over 60,000 times and cited more than 300 times.

17 GUIDELINES PUBLISHED 60,000+ DOWNLOADS 300+ CITATIONS

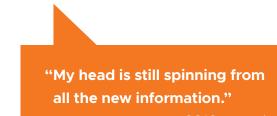
In a 2016 survey we conducted, the majority of respondents reported that they regularly use SFP's clinical practice guidelines in their work and that they rely on them for evidence-based information to guide decision-making in tough clinical situations. Also, most respondents rated the guidelines as excellent resources.

**The North American Forum on Family Planning** Our signature annual conference, the *North American Forum on Family Planning* (the *Forum*), is consistently lauded for its role in advancing science, cultivating connections among scholars, and providing tools for implementing research findings in practice. In 2017, over 1,250 people attended the *Forum*, more than double the number of attendees in 2012.

Also, in our annual evaluation of the conference, we found that the conference directly influences research and clinical practice. Many respondents who conduct research reported that attending the conference helped them to generate new ideas for research projects, develop plans for engaging and collaborating with diverse stakeholders, and consider the policy implications of their research. Those who provide clinical care reported that, as a result of what they learned at the *Forum*, they plan to improve

FORUM ATTENDANCE GREW BY 140%

their contraceptive counseling practices, cervical preparation regimens, implant removal and insertion, and care for transgender patients. Also, 95% of those who filled out the *Forum* evaluation said they plan to attend the conference again in the future.



– 2016 attendee



### 2018–2021 Strategic Plan

### Over the next three years, we plan to build on our past successes and achieve even greater, more intentional impact.

**Strategic Framework** Our strategic framework provides a high-level visual depiction of our overall strategic plan (*see Figure 3, next page*). It shows our vision, desired impact, strategies, and catalysts for effecting change.

- VISION AND IMPACT Our ambitious vision of just and equitable abortion and contraception informed by science — requires contributions from many in the field of family planning. As scholars and academic clinicians, we are well-positioned to influence academia and health care. We aim to leverage our expertise to improve reproductive health and reduce disparities by doing the following:
  - Elevating the status of family planning in academia and health care
  - Creating a robust, multidisciplinary, and impactful knowledge base
  - Increasing the delivery of, and access to, evidence-based abortion and contraception care
  - Aligning policy and practice with the best available evidence

- **STRATEGIES** To achieve our desired impacts, we will implement the following strategies, which build on our unique strengths and competencies:
  - Build and support an inclusive, multidisciplinary, skilled, and well-connected community with a shared focus on family planning
  - Serve as the academic home to graduates from the Fellowship in Family Planning and other academic clinicians and scholars
  - Support and advocate for the production of research primed for impact
  - Advance the delivery of clinical care based on the best available evidence
  - Drive uptake of the growing body of family planning evidence into policy and practice
- CATALYSTS To accelerate the impact of our work and the work of the field, and to hasten significant change through all our strategies, we will do the following:
  - Engage directly with partners to leverage research and align policy and practice with evidence, and support members and grantees in engaging with partners
  - Learn from our work and the work of the field so that we can rapidly respond to learnings and support scholars in improving their own work and increasing their impact



### FIGURE 3. Society of Family Planning and SFP Research Fund Strategic Framework

**Catalyst:** Engage partners ready to leverage research to align policy and practice with the evidence base

### VISION Just and equitable abortion and contraception informed by science

#### **STRATEGIES**

- Build and support an inclusive, multidisciplinary, skilled, and well-connected community with a shared focus
- Serve as the academic home to graduates from the Fellowship in Family Planning and other academic clinicians
- Support and advocate for the production of research primed for impact
- Advance the delivery of clinical care based on the best available evidence
- Drive uptake of the growing body of family planning evidence into policy and practice

Catalyst: Learn from our work and the work of the field; iterate and improve

### IMPACT

We aim to improve reproductive health and reduce disparities by:

- Elevating the status of family planning in academia and health care
- Creating a robust, multidisciplinary, and impactful knowledge base
- Increasing delivery of, and access to, evidence-based abortion and contraception care
- Aligning policy and practice with the best available evidence

**Assumptions** Underlying our strategic plan are the following assumptions, which we will test and reassess throughout 2018-2021:

- Scientific knowledge is one component of change. For it to be impactful, links are needed between scholars and partners, and resources must be dedicated to partner engagement, robust dissemination activities, and the translation of knowledge into policy and practice.
- Although not always the case, the impact of newly generated scientific knowledge is often not immediately evident. Instead, impact is usually demonstrated many years down the road, which requires long-range and foresighted thinking.
- When knowledge translation is successful, evidence-based family planning policies and practices lead to improved reproductive health and reductions in disparities.

- Advancing evidence-based family planning policies and practices requires focus on key components of family planning that are often under-addressed, stigmatized, and politicized; we must center work on abortion and contraception to move our desired impacts forward.
- Dedicating resources to supporting early-career scholars to pursue research agendas focused on abortion and contraception is key to ensuring that a new generation of scholars will continue to advance the field of family planning.
- Although SFP and the SFPRF are separate entities, aligning programming across the two in the same strategic plan allows for synergistic and increased impact.
- Our resources are finite and creating impact requires discipline and focus.



### 2018–2021 Strategic Plan (cont.)

**Theories of Change** In the Appendix, we share our detailed theories of change for each of our strategies. Organized by strategy, these theories of change are the foundational components that build our higher-level strategic framework. They specify the impact we are seeking to make, how we expect to make that change, the timing in which we hope change will occur, and the linkages between our programs.

For digestibility, we provide summary information about our theories of change in Table 1 (see next page). The summary information offers an overview of our rationale for pursuing a strategy, the activities that fall under each strategy, and the high-level evaluation and learning questions that we will use to assess our progress and better understand the factors that facilitate our ability to make change as well as those that impede us. **Implementation** To ensure that we are able to translate this plan into action, the board of directors has evaluated its model of governance and, before roll-out of this plan, began implementing the governance structures and processes needed to support our emergent strategic plan. Alongside this, the organization has begun to develop a staffing and fundraising plan. We will continue to evaluate how the board and staff can best be supported to move this strategic plan forward, and what resources are needed to do so.



### TABLE 1. Strategies, rationale, key activities, and evaluation questions

STRATEGY	RATIONALE	KEY ACTIVITIES	KEY EVALUATION QUESTIONS
Build and support an inclusive, multidisciplinary, skilled, and well-connected community of emerging and established scholars and partners who have a shared focus on the science and clinical care of family planning	An inclusive, multidisciplinary, skilled, and well- connected community of scholars and partners that is focused on family planning will be primed to serve as leaders in family planning and agents of change in multiple spaces, creating impact through the collective and varied strengths of the community.	<ul> <li>Recruit a rich array of new scholars who represent diverse disciplines, institutions, and demographic groups</li> <li>Support scholars' career development through grants and trainings</li> <li>Enhance connections among new and existing members</li> <li>Provide opportunities for members to take on leadership roles within and outside of SFP</li> </ul>	<ul> <li>Who is a member of SFP and who is missing from the community?</li> <li>In what ways can we address barriers underrepresented scholars face within SFP, their home organizations, and the broad family planning field?</li> <li>What strategies are most impactful for growing the skills of members, connecting members to one another, and enhancing the leadership capacity of members?</li> </ul>
Support and advocate for the production of research primed for impact	Family planning policies and practices should be grounded in scientific evidence. However, few funders are dedicated to supporting family planning research, and some explicitly prohibit funding of research on abortion	<ul> <li>Diversify and support the development of scholars who are conducting family planning research</li> <li>Identify research topics that are aligned with the most pressing needs of the field</li> <li>Ensure that SFPRF's grantmaking procedures support the development and selection of rigorous and high-impact research</li> <li>Provide resources to help improve the rigor and impact of family planning research</li> <li>Engage other funders and advocate for them to provide better support for impactful research and researchers</li> </ul>	<ul> <li>What are the key knowledge gaps in the field?</li> <li>What is the impact of the research we fund?</li> <li>What barriers and facilitators do scholars experience in identifying impactful research topics and leveraging research for impact?</li> <li>How can we better support scholars in producing rigorous and impactful work?</li> <li>How can we ensure that scholars have the resources they need to tackle high-priority projects?</li> <li>Have other funders increased their support of family planning research?</li> </ul>
Serve as the academic home to graduates from the Fellowship in Family Planning (the Fellowship) and other academic clinicians	Academic clinicians are uniquely positioned to advocate for change within and outside of the health care system. Graduates of the Fellowship in particular are focused on family planning and have been rigorously trained in advocacy, research, and complex clinical issues. Also, the Fellowship is currently seeking subspecialty status; if obtained, the status of family planning providers could be elevated within academia and medicine—a goal we share with the Fellowship.	<ul> <li>Develop new programs, and manage existing programs, to support Fellows after graduation</li> <li>Provide pre- and post-graduation grants to Fellows</li> <li>Engage Fellows in all aspects of SFP and SFPRF programming</li> <li>Recruit non-Fellowship academic clinicians to join and participate in SFP and SFPRF activities</li> </ul>	<ul> <li>How can we best meet the needs of Fellows and other academic clinicians and scholars after they graduate?</li> <li>Which of our programs are Fellows and other academic clinicians and scholars most engaged in, and how can we increase that engagement?</li> </ul>
Advance the delivery of clinical care based on the best available evidence	Evidence-based care improves the delivery of care and health outcomes. Particularly in family planning, providing care steeped in evidence is critical to supporting people in making and implementing their own family planning choices.	<ul> <li>Identify and fill gaps in clinical knowledge</li> <li>Develop needed, evidence-based clinical guidance and ensure guidance produced by others reflect the evidence base</li> <li>Package and actively promote clinical guidance produced by SFP and other entities</li> <li>Connect members to trainings on best clinical and education practices</li> <li>Address logistical, legal, and policy challenges to implementing best practices</li> </ul>	<ul> <li>What are the gaps in clinical knowledge and in clinical guidance?</li> <li>To what extent is evidence-based clinical guidance being adopted by our community and those outside our community?</li> <li>What are the key barriers to implementing best clinical practice and what strategies are most effective at addressing those barriers?</li> </ul>
Drive uptake of the growing body of family planning evidence into policy and practice	Scientific evidence alone is an insufficient tool for change. There is a well-documented chasm between research and policy and practice. Many factors contribute to this challenge, and primary among them are insufficient knowledge engagement and dissemination, a lack of training on exactly how to leverage research for impact, and a dearth of knowledge brokers.	<ul> <li>Increase SFP's public-facing activities and ability to serve as a trusted voice of science in family planning</li> <li>Provide resources and incentives for conducting knowledge engagement activities and disseminating research</li> <li>Engage with legal and advocacy partners to understand their needs and connect them to research and researchers</li> <li>Convene cross-sectional panels that engage funders, policymakers, clinicians, advocates, researchers, media, and other stakeholders</li> </ul>	<ul> <li>What strategies are most effective for promoting scientific evidence?</li> <li>How can SFP/SFPRF and its members ensure that evidence is being used to drive policies and practice?</li> <li>How can we best engage partners in shared work?</li> <li>What impacts do our knowledge engagement and dissemination activities ultimately have?</li> </ul>



### Acknowledgments

### We are thankful to the board and staff members, past and present, who contributed to the strategic plan.

#### **Board of Directors**

**Stephanie Teal, MD, MPH** President

**Tessa Madden, MD, MPH** President-Elect

Tina Raine-Bennett, MD, MPH Treasurer

Sonya Borrero, MD, MS Secretary

Eve Espey, MD, MPH Immediate Past President Carolyn Westhoff, MD, MSc Immediate Past President, 2015-2017

Nikki Zite, MD, MPH Treasurer, 2015-2017

Angela Dempsey, MD, MPH At-large member

Mary Fjerstad, RN, NP, MHS At-large member

Lisa Harris, MD, PhD At-large member

David Hubacher, PhD At-large member **Megan Kavanaugh, DrPH** At-large member

Wendy V. Norman, MD, MHSc At-large member

Pooja R. Patel, MD, MMS At-large member

Maureen Paul, MD, MPH At-large member

Joseph E. Potter, PhD At-large member

Anu Kumar, PhD, MPH At-large member, 2015-2017

#### **Staff Members**

Amanda Dennis, DrPH, MBE Interim Executive Director

Marlo Polonsky, MPH Grants Officer

Ruth Manski, MPH Evaluation Manager

Christine Hence, MS Program Coordinator

Sarom Sot Administrative Coordinator

Susan Higginbotham, MEd Executive Director, 2008-2017



# Appendix I: Strategic Planning Process

Strategic planning took place over the course of two years, from February 2016 through February 2018. We held six in-person retreats and several web- and phone-based meetings. All board and staff members participated in planning. The early and mid-stages of the strategic planning process were supported by a consultant with expertise in strategic planning, board governance, and family planning.

Our planning process is described below.

- Conduct an environmental scan. We conducted an environmental scan to generate input from key stakeholders about how our programming is perceived and received. The scan included analysis of: a) our history, b) existing surveys of our membership, c) a survey to our members and partners about our communications strategies, d) surveys of our board members (which included a SWOT analysis), e) interviews with our primary funder, and f) all evaluation reports.
- 2. **Clarify our niche.** We are one of a small but growing and increasingly diverse group of organizations seeking to address family planning challenges. We spent time surveying other partners in the field and articulating our unique contributions to the field of family planning.
- 3. **Craft vision and mission statements.** We held interviews with key stakeholders, conducted a survey of our members, centered our niche, and then crafted new vision and mission statements that articulate our reason for being, ideal future state, and the values that serve as guiding principles for the organization.

- 4. Articulate a strategic framework and a theory of change. To develop a strategic framework and a theory of change, the board held multiple in-person meetings to discuss the following questions:
  - What is the problem we are trying to address?
  - How are others in the field addressing that problem? What is our unique contribution? What would happen if we no longer existed?
  - What do we see as the underlying causes of the issue or problem?
  - At what depth or level do we want to work?
  - Who/what would be impacted?
  - How could we reach/influence/impact the identified groups/structure? What vehicles could we use?
  - What tools or processes would we need to impact/influence the identified groups/structures?
  - What activities are we uniquely positioned to move forward?

Responses to these questions helped us articulate the impact we hope to have in the world and the short-, mid-, and long-term outcomes that we hope to see as we move toward our desired impact. Discussing these questions also helped us identify our focus areas and strategies, the activities that we will conduct, and the assumptions underlying our work.

5. **Develop evaluation and learning questions.** Members of our research and evaluation team developed questions that will be used to monitor the impact of our work and to evaluate whether our activities help us reach our short-, mid-, and long-term outcomes.



# Appendix 2: Theories of Change

#### TABLE 2.

STRATEGY	ACTIVITY	SHORT-TERM OUTCOME	MID-TERM OUTCOME	LONG-TERM OUTCOME
Build and support an inclusive, multidisciplinary, diverse, skilled, and well- connected community of emerging and established scholars and partners who have a shared focus on the	<ul> <li>Offer emerging scholars career development grants, scholarships to attend the <i>Forum</i>, and SFP membership</li> <li>Recruit members from a broad array of disciplines, geographic areas, and institutions</li> <li>Identify and articulate a plan for supporting underrepresented scholars to become members of SFP and to participate in its programs</li> <li>Offer grants or incentives to existing members to identify and recruit new members</li> <li>Provide robust membership benefits</li> <li>Create mentorship matching programs</li> <li>Connect new <i>Forum</i> attendees with prior attendees</li> <li>Build in networking events and sessions at the <i>Forum</i>, and provide opportunities to host add-on meetings at the <i>Forum</i></li> <li>Build a platform for members to connect outside of the <i>Forum</i></li> </ul>	<ul> <li>Membership grows more diverse</li> <li>By necessity, to accomplish diversity, membership grows larger</li> <li>Members build robust and meaningful connections to one another across demographics, disciplines, institutions, and geographies</li> </ul>	Cross-pollination among new and established scholars increases the diversity of scholars' work and expands their expertise	<ul> <li>An activated, inclusive multidisciplinary, diverse, and connected community is created and sustained and has: (a) expertise in the latest developments in the science and clinical care of family planning, (b) the networks needed to translate research into policy and practice change, and (c) interest in being rallied as agents</li> </ul>
science and clinical care of family planning	<ul> <li>Provide grants to support career development activities throughout the career life cycle</li> <li>Offer career-building trainings at the Forum and in other locations</li> <li>Provide opportunities for members to participate in SFP committees, serve as grant reviewers and/or Forum planners, and judge abstracts at the Forum</li> <li>Support members to serve as delegates to other academic organizations, and to chair and present sessions at their meetings</li> </ul>	Members have the knowledge, skills, and resources they need to be active and expert participants in SFP and the broader field of family planning.	Family planning research is better integrated into a diversity of academic spaces, and not just in focused academic spaces	of change

**Key evaluation and learning questions:** Who is a member of SFP and who is missing from the community? How can we best enhance the diversity and inclusiveness of our membership? In what ways can we address barriers underrepresented scholars experience within SFP, their home organizations, and the broad family planning field? What strategies are most impactful for growing the skills of members, connecting members to one another, and enhancing the leadership capacity of members?



#### TABLE 3.

STRATEGY	ΑCTIVITY	SHORT-TERM OUTCOME	MID-TERM OUTCOME	LONG-TERM OUTCOME
	Identify and support scholars from untapped and underrepresented groups	Scholars leading SFPRF-supported research are more diverse in terms of discipline, institution, and demographic background	<ul> <li>Scholars submit more and higher quality family planning proposals to SFPRF and other funders</li> <li>Funders provide more constructive reviews, and award more family planning grants</li> </ul>	<ul> <li>Investigators have the research tools, collaborators, and funding they need to develop and disseminate impactful family planning scholarship</li> </ul>
	Support early and mid-career scholars in enhancing their research skills through grants and trainings, or connecting scholars to existing trainings	Early- and mid-career scholars show signs of growth in their careers and fundability		
	Serve on committees/coalitions focused on relevant family planning topics to learn about research gaps			
	Survey members and partners about research gaps			
Support the production of research primed for impact	Develop and disseminate a list of research priorities that align with our mission and the field's needs			
	Release RFPs focused on identified priorities	Proposals and grants funded by SFPRF		
	Evaluate rigor and likely impact of grants as part of review process	and other funding bodies are based on the best available evidence, primed for impact, and aligned with our mission and needs of the field		
	Provide or connect applicants and grantees with resources that will help improve the rigor and impact of their work			
	Provide avenues (such as the Forum) for scholars to learn about the best science in the field, and research practice			
	Connect scholars to repositories for sharing data sets and encourage grantees to place their data and instruments in repositories			
	Develop and disseminate best practices for conducting family planning research			
	Support a network of scholars primed to take on multisite, large-scale family planning studies and apply for funding at SFPRF and elsewhere	Scholars have the tools and collaborators they need to tackle tough research questions and complete projects		
Influence philanthropic organizations, governments, and other grantmaking bodies ("funders") to support impactful research and researchers	Develop relationships with funders who work in the family planning space, and funders interested in working in the space and learn about their priorities	SFP and SFPRF understand funders' family planning priorities		
	Host funder roundtables at the Forum and in other venues	Funders are more aware of engagement opportunities within the field of family planning and more knowledgeable about the best available evidence		
	<ul> <li>Advocate for increased funding of family planning research from governments, and for an improved process for reviewing family planning research (e.g. NIH and PCORI)</li> </ul>	<ul> <li>SFP members serve as reviewers or external consultants for other funders</li> <li>Funders have improved skills for reviewing family planning research</li> </ul>		

**Key evaluation and learning questions:** What are the key knowledge gaps in the field? What is the impact of SFPRF-funded research? What barriers and facilitators do scholars experience in identifying impactful research topics and leveraging research for impact? How can we better support scholars in producing rigorous and impactful work? How can we ensure scholars have the resources they need to tackle priority projects? Have other funders increased their support of family planning research?



STRATEGY	ΑCTIVITY	SHORT-TERM OUTCOME	MID-TERM OUTCOME	LONG-TERM OUTCOME
Serve as the academic home to graduates from the Fellowship in Family Planning (the Fellowship), and other academic clinicians*	Develop new education, training, and leadership programs (particularly medical education scholarship) and manage or co-brand existing programs*	Fellows increase their knowledge and skills	Fellows receive	<ul> <li>Cadre of academic clinicians and scholars are visible, productive, and impactful leaders in the field of family planning and academic health care</li> </ul>
	Administer post-Fellowship salary support grants	Fellows are able to work at a variety of institutions not traditionally open to family planning clinicians or researchers	leadership promotions or tenure in their careers in academic health care	
	<ul> <li>Administer Fellows' research grants prior to graduation</li> <li>Provide Fellows with rigorous research training*</li> </ul>	After graduation, Fellows apply for and are competitive for grants from SFPRF	Fellows receive a greater number of grants from SFPRF and other sources	
	<ul> <li>Actively promote Fellows' work*</li> <li>Ensure Fellows are represented on SFP committees</li> <li>Recruit Fellows to work on SFP clinical practice guidelines (CPGs)</li> <li>Ensure that Fellowship-focused programming can be offered at the <i>Forum</i></li> <li>Include Fellowship-focused topics at the membership meeting at the <i>Forum</i></li> </ul>	Fellows are aware of and engaged with the work of SFP and SFPRF, and feel valued by the organizations	Fellows are active and productive leaders in the SFP and SFPRF communities	
	<ul> <li>Identify and cultivate relationships with other academic clinicians and their training bodies</li> <li>Develop SFP membership benefits/offers for newly identified academic clinicians</li> </ul>	Newly identified academic clinicians become SFP members	Newly identified academic clinicians participate in SFP- and SFPRF-related activities	The work and reach of SFP and SFPRF are enriched through involvement of diverse types of academic clinicians

**Key evaluation and learning questions:** How can we best meet the needs of Fellows and other academic clinicians and scholars after they graduate? Which of our programs are Fellows and other academic clinicians and scholars most engaged in, and how can we increase that engagement?

\*Note: The needs of clinicians prior to graduation are met by their training organization. Some training organizations also provide post-graduate support; these pre- and postgraduate activities conducted by other organizations are starred throughout.



#### TABLE 5.

STRATEGY	ΑCTIVITY	SHORT-TERM OUTCOME	MID-TERM OUTCOME	LONG-TERM OUTCOME
Advance the delivery of clinical care based on the best available evidence*	<ul> <li>Create a list of high-priority, stakeholder-informed research questions to fill gaps in knowledge and a list of needed SFP-CPGs</li> <li>Provide grants to answer high-priority clinical practice questions and to conduct systematic reviews of unanswered clinical questions</li> </ul>	Scholars fill gaps in knowledge surrounding best clinical practice	New knowledge begins to be fed into other activities (e.g. CPGs and CME-accredited trainings, etc.)	
	<ul> <li>Develop relationships with other entities that produce relevant CPGs</li> <li>Place SFP stakeholders in leadership or reviewer positions at entities that produce or review CPGs</li> <li>Write responses or alternatives to external CPGs that are not consistent with the evidence, or are not efficient or innovative</li> </ul>	CPGs put forth by other entities use the best available evidence to inform their work	Clinicians have increased awareness and knowledge of best clinical practice	<ul> <li>Clinicians have the information, support, and resources they need to provide clinical care according to the best available evidence</li> </ul>
	<ul> <li>Assimilate and distill existing science into authoritative SFP-CPGs</li> <li>Translate SFP-CPGs into ready-made educational material (e.g. apps, slide-decks, and toolkits)</li> <li>Actively promote evidence-based, family planning guidelines produced by SFP and other organizations through the membership list, social media, and featured presentations and CME activities at the <i>Forum</i></li> </ul>	SFP and external CPGs serve as a key source for what to do in clinical situations, and are used in teaching, and for leveraging practice change at institutions		
	<ul> <li>Connect members to existing training in best clinical and educational practice provided by other organizations</li> <li>Sponsor sessions on the best available evidence in existing training venues (e.g. NAF, Title X, ACNM)</li> </ul>	Clinicians who attend trainings report learning new skills, the ability to implement those skills in practice, and/or the ability to train others	Clinicians share their knowledge with others, and use it in practice and in teaching	
	Provide implementation grants to address barriers to best practice after articulating (through evaluation) priority issues	Solutions to address barriers to implementing best clinical practice are developed, tested, and shared	<ul> <li>Solutions to address barriers to implementing best clinical practice are scaled or retooled</li> </ul>	
	<ul> <li>Develop connections with legal and advocacy partners</li> <li>Participate in legal challenges</li> <li>Engage SFP members to serve as advocates in legal and policy work</li> </ul>	Legal and advocacy partners are knowledgeable about expertise of SFP members and the relevant evidence base	Legal and advocacy partners cite evidence in challenges fought to reduce legal intrusions in care, and SFP members are active participants in legal and advocacy challenges	

**Key evaluation and learning questions:** What are the gaps in clinical knowledge and in CPGs? To what extent are CPGs being adopted by our community and those outside our community? What are the key barriers to implementing best clinical practice and what strategies are most efficient at addressing those barriers?

\*Note: Creating the supply of clinicians interested and able to do the work in this area (a necessary precondition) is met by colleague organizations such as the Fellowship in Family Planning.



#### TABLE 6.

STRATEGY	ΑCTIVITY	SHORT-TERM OUTCOME	MID-TERM OUTCOME	LONG-TERM OUTCOME
Drive uptake of the growing body of family planning evidence into policy and practice*	<ul> <li>Make the SFP website more front-facing</li> <li>Identify opportunities to promote evidence (e.g. sign-on letters, lobby days, and news stories)</li> <li>Increase our social media presence</li> <li>Work with partners who are savvy at working with traditional media</li> <li>Develop relationships with stakeholders who leverage research</li> </ul>	<ul> <li>SFP/SFPRF makes a clear strategic shift to become more externally facing</li> <li>SFP/SFPRF has increased capacity to disseminate and promote family planning evidence</li> </ul>	Stakeholders increasingly rely on SFP for summaries of non-branded evidence	SFP/SFPRF is a trusted void in science and the go-to organization for learning about the latest research on family planning and best practices for abortion and contraception care
	<ul> <li>Provide grants to support research on what influences policymakers to align with evidence base around family planning, and what influences media portrayals</li> <li>Incentivize grantees to engage with stakeholders at all stages of research projects, including at the stage of pre-articulation of study topic</li> <li>Support grantees to participate in knowledge engagement activities</li> <li>Continue to work with and promote innovations in the journal <i>Contraception</i></li> <li>Incentivize grantees to submit family planning research to conferences and journals outside of the field</li> <li>Create prizes for members and grantees who actively disseminate their work</li> <li>Identify and articulate best practices in dissemination</li> <li>Develop templates for research briefs, press releases, and infographics</li> <li>Test different mechanisms for presenting research data (e.g. video, briefs, and Twitter chats)</li> <li>Provide trainings on knowledge engagement and dissemination</li> <li>Connect members to colleague organizations and media stakeholders who can help draw attention to their findings</li> </ul>	<ul> <li>SFP members and SFPRF grantees have more knowledge about how research can be used to influence policy</li> <li>SFP members and SFPRF grantees have enhanced capacity to participate in knowledge engagement activities and disseminate their own work</li> </ul>	Stakeholders who can leverage research are more actively engaged, and SFP/SFPRF and its grantees more actively disseminate	Key stakeholders consistently rely on the best available evidence in their work; the science of family planning becomes a key part of the conversation; and researchers are seen as critical and engaged
	<ul> <li>Develop relationships with policymakers, lawyers, and policy and advocacy-focused organizations</li> <li>Increase our understanding of these stakeholders' needs</li> <li>Have a seat at health care and health policy tables</li> <li>Support scholars in conducting policy-relevant research through skills training and grant funding</li> <li>Produce summaries of evidence targeted at legal and advocacy partners</li> </ul>	Legal and advocacy partners are more knowledgeable about the relevant evidence base, and the evidence base meets their needs	- research	members of the broader family planning field
	Convene cross-sectional panels that engage funders, policymakers, clinicians, advocates, researchers, media, and others stakeholders	Stakeholders build diverse collaborations and identify shared research priorities	-	

**Key evaluation and learning questions:** What strategies are most effective for promoting scientific evidence? How can SFP/SFPRF and its members ensure that evidence best engages partners in shared work? What impact do our knowledge engagement and dissemination activities ultimately have?

\*Note: Activities primarily targeted at influencing how clinicians deliver health care are housed under a different objective.





& SFP RESEARCH FUND

www.SocietyFP.org

### **Questions?**

Contact Amanda Dennis, ADennis@SocietyFP.org.

### VISION

Just and equitable abortion and contraception informed by science

### MISSION

**Society of Family Planning** The Society of Family Planning is the source for abortion and contraception science.

**Society of Family Planning Research Fund** The Society of Family Planning Research Fund provides grants for research on abortion and contraception.