Our Leadership

The UCSF Bixby Center for Global Reproductive Health is proud to announce that Dr. Jody Steinauer, MD, MAS, is our new Director. Dr. Steinauer is Vice Chair and Professor of Obstetrics, Gynecology, & Reproductive Sciences. As Bixby Director, she leads a team of over 200 interdisciplinary members who conduct research and training to improve reproductive and sexual health worldwide. As the founder of Medical Students for Choice and Innovating Education in Reproductive Health, she brings a passion for innovation and education along with proven leadership skills to her new role. Division Chief Dr. Rebecca Jackson said, “We are thrilled to welcome Dr. Steinauer and inspired by her vision for the future of our work.”

Our Impact

Our work defines the highest standards for evidence-based and patient-centered care in sexual health, and prepares providers to deliver this care.

Abortion

We found that women who received abortions had no greater levels of depression or anxiety compared to women who were denied abortions.

Our studies of state abortion restrictions found that laws aiming to dissuade women from having abortions had little impact, as most women were highly certain of their decision to have an abortion.

We joined women’s health experts in calling on the FDA to lift regulatory restrictions on mifepristone, one of the drugs commonly used for medication abortion.

We helped develop the Procedural Abortion Incident Reporting and Surveillance (PAIRS) Framework for monitoring quality and safety in abortion care.

Adolescent Sexual Health

Our research affirmed that we can further reduce pregnancy among adolescents through improved education, health services, and community engagement.

We found that living in a household with another HIV-positive member was the only factor that improved HIV-positive adolescents’ ongoing treatment in Kenya and Uganda.

With a team of adolescent reproductive health experts, we reviewed data on teen use of contraception and found that they—more than other groups—will benefit from over-the-counter access to oral contraceptive pills.
Contraception

We showed that publicly funded family planning clinics—often the only source of health care services for disadvantaged people—were key in helping their patients sign up for health insurance.

- We found that women were most satisfied with their chosen contraceptive method when their healthcare provider facilitated shared decision making and did not have a preference for which method the woman chose.
- With our research partners, we found that pharmacists in California expressed strong intentions and comfort in prescribing hormonal contraception directly to women, potentially increasing access, use and adherence.

HIV & STIs

Our “one-stop shop” in Kenya integrated HIV and family planning care, and we found that women living with HIV who received this care had a 30 percent lower pregnancy rate compared with those who did not.

- We found that women were more likely than men to have negative experiences of disclosing HIV status to partners in Kenya and Uganda, showing the need for gender-sensitive HIV services.
- We showed that bacterial vaginosis (BV) increases the risk of other STIs by making cells in the vagina less capable of healing from wounds. But we also found that daily oral pre-exposure prophylaxis (PrEP) drugs were just as effective at preventing HIV for women with BV as without.
- Our livelihood program in Kenya, Shamba Maisha, has empowered HIV-positive people to become part of the farming economy and improved their self-esteem and hope.

Education & Training

Our training programs have prepared more than 6,080 providers to offer evidence-based abortion care, creating the next generation of US women’s health care experts.

- We helped to develop national guidelines for family planning care in the context of Zika.
- The PRONTO training increased the number of mothers receiving evidence-based care during birth in Mexico.

Pregnancy & Childbirth

We developed a tool to support shared decision making during miscarriage, and found that women greatly preferred clear and unbiased information about all suitable treatment options and feeling ownership over their treatment choice.

- We projected that adding home pregnancy tests to community health worker programs in Malawi, Madagascar and Ethiopia would save many lives and be cost-effective for local health systems.
- We showed that the Ebola outbreak in Guinea not only stunted progress toward improved care for pregnant women, but set it back significantly.
- We tested the Lifewrap non-pneumatic anti-shock garment in Colombia, and showed that it reduced the need for serious medical interventions among women with severe postpartum bleeding.
- We called for US Ob-gyns to routinely offer PrEP drugs to pregnant and breastfeeding women who are at risk of HIV.
Our Finances
The Bixby Center received over $52 million in research support in 2016-2017.

Bixby funds by topic (2016-2017), thousands of US $

- General Support $1,460 (3%)
- HIV & STIs $20,115 (38%)
- Abortion $5,198 (10%)
- Contraception $4,794 (9%)
- Education & Training $13,604 (26%)
- Pregnancy & Childbirth $2,050 (4%)
- Adolescent Sexual Health $5,376 (10%)
- Other sources $3,937 (8%)

Bixby funds by donor (2016-2017), thousands of US $

- Government $27,048 (51%)
- Foundations $21,431 (41%)
- Pharmaceutical company $181 (<1%)
- Other sources $3,937 (8%)

Foundations
Anonymous (6)
Bill & Melinda Gates Foundation
Children’s Investment Fund Foundation
David & Lucile Packard Foundation
Fred H. Bixby Foundation
Greenwall Foundation
JPB Foundation
Wallace Global Fund
William & Flora Hewlett Foundation

Government
California Health and Human Services
Department of Health Care Services
Alameda County Health Care Services Agency
California Department of Public Health
National Institutes of Health:
  Fogarty International Center
  National Institute on Alcohol Abuse & Alcoholism
  National Institute of Allergies & Infectious Diseases
  National Institute of Arthritis & Musculoskeletal & Skin Diseases
  National Institute of Child Health and Human Development
  National Institute of Mental Health
  Office of the Director

Patient-Centered Outcomes Research Institute
US Centers for Disease Control and Prevention
US Office of Adolescent Health
US Office of Population Affairs
Centro de Investigación Epidemiológica en Salud Sexual y Reproductiva

Other Sources
American Congress of Obstetricians & Gynecologists
FHI 260
Fred Hutchinson Cancer Research Center
Ibis Reproductive Health
Indiana University School of Medicine Micronutrient Initiative
Public Health Foundation Enterprises, Inc.
Society of Family Planning
The National Campaign to Prevent Teen and Unplanned Pregnancy
UCSF Resource Allocation Program
University of California, Los Angeles
University of Chicago
University of Texas at Austin
University of Zimbabwe – College of Health Sciences Clinical Trials Unit

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