10 Years of Advancing Reproductive Health Worldwide through Research, Training, Policy, and Services

1999 - 2009
“Leadership, innovation, excellence, and social impact best characterize the Bixby Center over the past decade. The Center has more than met our expectations that it would excel in advancing reproductive health worldwide by strengthening UCSF’s work in medical education, research, and the shaping of policy. So with the greatest of pleasure, I congratulate our colleagues in the Center for their distinguished achievements and contributions.”

A. Eugene Washington, MD, MSc
Executive Vice Chancellor and Provost
Professor, Department of Obstetrics, Gynecology & Reproductive Sciences, UCSF

“The Department of Obstetrics, Gynecology & Reproductive Sciences is proud to host the Bixby Center’s unique multidisciplinary approach to improving reproductive health through exemplary clinical care, training programs, and research essential to policy development. As the University and our Department collaborate to improve women’s health around the world, the Bixby Center will play a key role in bringing together campuses, schools, and disciplines for scholarship and teaching.”

Linda Giudice, MD, PhD, MSc
Professor and Chair, Department of Obstetrics, Gynecology & Reproductive Sciences, UCSF
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In 1999, Philip Darney, MD, MSc, and Nancy Padian, PhD, MPH, and shortly thereafter joined by Claire Brindis, DrPH, MPH, and Felicia Stewart, MD, founded the Center for Reproductive Health Research & Policy — now renamed the Bixby Center for Global Reproductive Health – at the University of California, San Francisco (UCSF).

**The mission of the Bixby Center is to advance reproductive health worldwide — including family planning, abortion care, safe motherhood, and the prevention of HIV and sexually transmitted infections (STIs) — through research, training, policy, and services.**

Building on the long history of UCSF’s leadership in family planning, abortion, and reproductive health, the Bixby Center focuses on efforts to address these controversial and often neglected public health issues.

Today, the Bixby Center includes the work of more than 200 talented faculty, fellows, and staff representing a range of disciplines, including medicine, nursing, pharmacy, sociology, anthropology, demography, epidemiology, law, and public health, hailing from numerous UCSF department and institutes, such as the Departments of Obstetrics, Gynecology & Reproductive Sciences, Pediatrics, and Family and Community Medicine as well as the Philip R. Lee Institute for Health Policy Studies and the Global Health Institute.

The Bixby Center’s annual budget of $40 million comes from a diversity of contracts, grants, and gifts from federal and state governments, foundations, corporations, and individuals.

**The Bixby Center’s overall goals are to:**

- develop and promote the use of reproductive health technologies
- evaluate programs to improve access to reproductive health care
- train practitioners, researchers, and future leaders
- translate research for public, professional, and policy maker audiences

Widely acknowledged for their research, clinical, and policy expertise, Bixby Center faculty routinely contribute to national and international forums, the professional and popular media, and legal and regulatory proceedings.
Major contributions over the past decade include:

- research on emergency contraception, which helped to shape FDA policy to allow over-the-counter access
- evaluation of Family PACT, California’s Medicaid waiver-supported family planning program, which strengthened support for publicly funded family planning programs nationwide
- development of the Non-pneumatic Anti-Shock Garment (NASG) for the management of obstetric hemorrhage, which saves women’s lives at the time of delivery
- formation and coordination of the Kenneth J. Ryan Residency Training Program, which is transforming medical education in family planning, contraception, and abortion

This report summarizes the impressive accomplishments of our scholars and practitioners. We are proud of our first 10 years and, in partnership with our collaborators and supporters, we pledge to continue to advance the reproductive health of adolescents, women, and men worldwide in the decades to come.

Philip Darney, MD, MSc
Director

Claire Brindis, DrPH, MPH
Director

J. Joseph Speidel, MD, MPH
Director for Communication, Development and External Relations
Where We Work

Through innovative research, training, clinical care, and evidence-based public policy, the Bixby Center addresses family planning, abortion, adolescent reproductive health, safe motherhood, and sexually transmitted infections, including HIV/AIDS, worldwide.

- Bixby Countries

**USA:** Our major programs include the Fellowship in Family Planning and the Ryan Residency Training Programs for physicians (see p14), the evaluation of the Family PACT Program (see p8), and the Advancing New Standards in Reproductive Health (ANSIRH) program (see p9).

**Mexico:** We are comparing outcomes of maternity care by midwives and physicians.

**Zimbabwe:** We conducted the MIRA (Methods for Improving Reproductive Health in Africa) trial, which examined using the diaphragm with lubricant gel to prevent transmission of HIV and other sexually transmitted infections (see p12).

**Timeline:**

- **1960** World population reaches 3 billion
- **1967** The U.S. Foreign Assistance Act allocates $35 million for population programs
- **1969** The United Nations Fund for Population Activities (UNFPA) is established
- **1970** Congress establishes domestic Title X Family Planning program
- **1971** The Supreme Court overturns the Comstock Act, which defined contraceptive information as obscene

**Bixby Countries**
1973 The Supreme Court legalizes abortion nationwide in Roe v. Wade

1973 Amendment by U.S. Senator Jesse Helms (R-NC) passes, banning use of foreign aid funds for abortion services

1974 The first World Population Conference takes place in Bucharest

1975 World population reaches 4.1 billion

1976 Amendment by U.S. Congressman Henry Hyde (R-IL) first passes, banning use of federal funds for abortion

**Egypt:** We are studying and training health workers on the use of the Non-pneumatic Anti-Shock Garment (NASG) to manage obstetric hemorrhage (see p11).

**Nepal:** We are studying the impact of abortion legalization on women’s health (see p9).

**Vietnam:** We participated in the reform of medical education and reproductive health by holding courses at UCSF and in Vietnam for policy makers and educational leaders focused on evidence-based medicine, policy, technical updates, licensure, and continuing medical education (see p17).

**Kenya:** We founded Family AIDS Care and Education Services (FACES), a major HIV service, research, and training program in Kenya (see p12).

**Egypt:** We are studying and training health workers on the use of the Non-pneumatic Anti-Shock Garment (NASG) to manage obstetric hemorrhage (see p11).
Contraceptive technology, increased contraceptive options, and delivery of high quality family planning information and services can help individuals and couples choose the number and timing of their childbearing and improve overall reproductive health in diverse settings. However, in both developing countries and the U.S., almost half of all pregnancies are still unintended. Contraceptives are not available, not used, or use is discontinued because of inconvenience, side effects, fears about safety, and/or poor quality of services. To address these problems, the Bixby Center conducts clinical research to improve contraceptive methods and evaluates innovative family planning programs to strengthen delivery of services.

Clinical Trials

With few exceptions, the Bixby Center has studied and further refined every new contraceptive developed in the past 30 years – including cervical caps, spermicides, sterilization methods, oral contraceptives, intrauterine contraceptives, emergency contraception, and contraceptive patches, injections, rings, and implants. These clinical trials examined contraceptive effectiveness, safety, acceptability, and evidence-based use. Bixby Center contributions to contraceptive technology have improved the health and welfare of women and men worldwide.

Emergency Contraception (EC)

Bixby Center investigators demonstrated that easier access to EC does not adversely affect adolescents’ and young women’s routine contraceptive method use, sexual risk behaviors, or sexually transmitted infection risk. Data from these studies was critical to the FDA decision to allow over-the-counter (OTC) provision of EC in the U.S. Related Bixby Center research demonstrates the benefits of direct pharmacy access to EC.

The Bixby Center completed a series of “briefs” that provide evidence-based responses to misinformation promulgated by EC opponents on topics including efficacy, safety, sexual risk behaviors, adolescent use, mechanism of action, OTC availability, and cost-effectiveness.

1984 Second World Population Conference takes place in Mexico City; the Mexico City Policy (also known as the “Global Gag Rule”) put in place by President Ronald Reagan to defund foreign organizations that counsel, refer, or provide abortion services with their own funds

1985 U.S. government suspends support for IPPF and cuts UNFPA funding by $10 million

1990 World population reaches 5.3 billion

1992 The Supreme Court decision in Planned Parenthood v. Casey makes it easier for states to regulate abortion

1991 Dr. Philip Darney founds the Fellowship in Family Planning (see p14)
Promotion of Long-Acting Reversible Contraception (LARC)

Despite the high efficacy of intrauterine contraceptives (IUCs) and contraceptive implants, only two percent of U.S. women use these LARC methods. The Bixby Center is promoting use of LARC by providing IUCs for model programs and carrying out research to determine barriers to use of LARC. Our initiative also includes provider education and hands-on training, interventions to enhance health system and health insurance support for LARC, and the development and dissemination of information for potential acceptors of LARC.

The Bixby Center is studying the contraceptive choices of women undergoing an abortion, in an effort to decrease their elevated risk of repeat unintended pregnancy.

Integrating Family Planning Services into HIV care

To decrease maternal-child transmission of HIV, maternal and neonatal morbidity and mortality related to HIV infection, unintended pregnancies, and unsafe abortion, the Bixby Center is currently studying ways to integrate family planning and HIV services in western Kenya. The Bixby Center is looking specifically at how gender impacts family planning access, and is conducting research to determine ways to facilitate the inclusion of men in fertility and family planning decisions.

Mobilizing Support for Family Planning and Reproductive Health

The Bixby Center is working to reinvigorate commitment to population and reproductive health issues. A series of Bixby Center publications and presentations have documented the close relationship between population growth and environmental degradation, highlighted successful family planning programs, described the remaining challenges to reducing population growth worldwide, and recommended an action agenda. In early 2009, the three University of California “Bixby Centers” (at UC Berkeley, UCLA, and UCSF) jointly organized the Fred H. Bixby Forum: The World in 2050, a Scientific Investigation of the Impact of Global Population Changes on a Divided Planet. This meeting of 41 experts from the fields of population, environment, and economics considered the future of population-related issues including economic development, resource demands, and the environment. Bixby Center faculty also co-authored the publication, Making the Case for U.S. International Family Planning Assistance, which has been distributed broadly.

1993 Jody Steinauer, UCSF medical student, co-founds Medical Students for Choice
1993 President Bill Clinton rescinds the “Global Gag Rule”
1994 Dr. Nancy Padian co-founds the University of Zimbabwe-UCSF Collaborative Research Programme in Women’s Health in Zimbabwe
1994 International Conference on Population and Development held in Cairo, Egypt
1995 United Nations Fourth World Conference on Women takes place in Beijing
Family PACT (Planning, Access, Care and Treatment) Evaluation

The evaluation of Family PACT is a major Bixby Center program with nationwide policy implications for the delivery of family planning to low-income women, men, and adolescents.

Family Planning for Low-Income Californians

Since 1997, the Bixby Center has provided program support and evaluation for the Family PACT Program, California’s Medicaid waiver-supported family planning program administered by the Department of Public Health’s Office of Family Planning. Family PACT serves more than 1.6 million low-income women, men, and adolescents annually. In addition to conducting a comprehensive evaluation of the Family PACT program, the Bixby Center provides quality improvement, utilization management, and clinician education support to the Family PACT program, ensuring high quality clinical services for clients. The Bixby Center evaluation team also partners with the California Department of Public Health STD Control Branch to monitor sexually transmitted infection services and to develop clinical practice guidelines and provider education programs.

Measuring Program Impact

Bixby Center researchers have investigated topics such as access to publicly funded family planning services, the cost-effectiveness of specific contraceptive methods, barriers to intrauterine contraceptive use, and the impact of oral contraceptive dispensing practices on costs and outcomes. Researchers conducted a cost-benefit analysis that estimated that annual program expenditures of about $400 million help avert more than 200,000 unintended pregnancies per year, saving $2.2 billion in public expenditures over five years.

Sharing Research Findings

The Bixby Center documents and disseminates research on the positive impact Family PACT has on reproductive health in California and the important implications for publicly funded family planning programs nationwide. The Bixby Center has published many fact sheets and briefs that are widely distributed and used by state agencies and the public. The dissemination of evaluation and health services research findings both support program improvement efforts and inform other states developing similar programs. Since 2004, the number of states obtaining similar Medicaid family planning waiver programs has increased from 18 to 27.

1996 California is the only state to reject federal funding for Title V abstinence-only education; the decision is based in part on Center faculty research

1997 Family PACT is established by the California legislature to provide family planning and reproductive health services at no cost to low-income residents; Drs. Darney and Claire Brindis receive contracts to monitor and evaluate the program

1999 Drs. Darney and Padian found the Center for Reproductive Health Research & Policy (now the Bixby Center); Drs. Brindis and Felicia Stewart join as Co-Directors
Abortion

Worldwide, women lack access to safe abortion care, sometimes as the result of laws that prohibit abortion or make abortion provision difficult. Globally, half of the estimated 42 million abortions performed each year are unsafe, and in the U.S., 87% of counties lack a known abortion provider. The Bixby Center is a leader among those few academic institutions willing to conduct social science, clinical, and policy research related to abortion. Among its initiatives, the Advancing New Standards in Reproductive Health (ANSIRH) program seeks to ensure that abortion-related care and policy are grounded in evidence.

Medication Abortion

Bixby Center research has taken a comprehensive approach to studying medication abortion. Clinical research has addressed the pharmacokinetics of misoprostol and dosing alternatives for mifepristone and methotrexate. Health services research has measured the costs of clinical care delivery models, studied avenues of diffusion into primary care, developed model insurance coverage, and examined the impact of malpractice limitations. Social science studies have examined women’s out-of-pocket costs, clinicians’ knowledge about and attitudes toward medication abortion, and women’s experiences with method choice.

Abortion and Mental Health

Several ongoing studies examine the relationship between abortion and women’s mental health. A groundbreaking eight-year study aims to understand the impact of abortion on women’s lives. The study is investigating the mental health, physical health, and socioeconomic outcomes of women after an abortion, compared to those who carry an unwanted pregnancy to term. A qualitative study is examining the landscape of women’s emotions following an abortion.

Reducing Barriers to the Provision of Care

Bixby Center research has examined barriers to care experienced by women and their health care providers. Studies on women have investigated reasons for delay and experiences with regulations. Research has examined the negative effects on clinicians of facilities regulations, mandated counseling scripts, malpractice limitations, and procedure bans.

Safe Abortion Service Delivery and Advocacy

Working with local institutions in developing countries, the Bixby Center is strengthening access to safe abortion services in six geographically and culturally diverse settings. In Nepal and Mexico City, the Bixby Center is studying decline in abortion-related morbidity and improvements in care after the recent legalization of abortion. In Haiti, Kenya, Tanzania, and Zimbabwe, the Bixby Center is working to improve the quality and accessibility of abortion and post-abortion care services through clinical training in safe, effective, and affordable techniques such as manual uterine aspiration (MUA) and medication abortion. In the U.S., new evidence-based techniques for the provision of abortion are being developed and tested, including new cervical preparation protocols and the use of digoxin prior to later abortion.

Honoring San Francisco’s Abortion Pioneers

A history of the work conducted by Bixby Center investigators related to abortion was compiled for commemoration of the 30th anniversary of Roe v. Wade and is available upon request.

1999 Dr. Deborah Cohan working with two sex workers’ rights groups opens St. James Infirmary, a free clinic for commercial sex workers (see p19)

1999 Dr. Darney is named Chief of the San Francisco General Hospital Division of the UCSF Dept. of Obstetrics, Gynecology & Reproductive Sciences

1999 Center studies help California receive federal Medicaid Waiver to fund Family PACT services (In 2001, Dr. M. Catherine Maternowska becomes Director of Family PACT Research and Evaluation; in 2005, Dr. Heike Thiel de Bocanegra takes over as Director.) (see p8)

1999 Dr. Uta Landy founds the Kenneth J. Ryan Residency Training Program in Abortion and Family Planning (see p14)

2000 World population reaches 6.1 billion, compared to 1.6 billion in 1900
Adolescent and Young Adult Reproductive Health and Sexuality

The number of young people in the world between ages 15 and 24 is now over one billion and rising. Their childbearing decisions will profoundly influence both their own health and welfare and that of the societies in which they live. The U.S. has the highest rates of teen pregnancy, birth, and abortion among developed countries. Inadequate sexuality education and lack of access to family planning services contribute to about 750,000 teen pregnancies annually. The Bixby Center has carried out a broad program of research and evaluation of state and local programs to identify effective, evidence-based strategies to educate teens about sexuality and pregnancy prevention and to improve access to reproductive health services.

Evaluation of California’s Teen Pregnancy Prevention Programs

The evaluation of California’s Teen Pregnancy Prevention Programs examines the effectiveness of a wide range of interventions in changing the knowledge, attitudes, and practices of young men and women. This evaluation included two recently discontinued programs: the Male Involvement Program and the TeenSMART Outreach Program. The evaluation of La Clínica de la Raza’s Teen Pregnancy and Parenting Program is determining if the traditional model of service delivery or the “Centering Pregnancy” model is more effective in improving the health and social outcomes of Latina teens and their children. The evaluation of School Based Health Centers in Alameda County demonstrates how they increase access to care, reduce risk behaviors, and improve student health.

Applying Technology to Enhance Contraceptive Use

Contraceptive failure due to inconsistent use is an important cause of unintended pregnancies. The Bixby Center is piloting a text message reminder system for English- and Spanish-speaking women who receive services at publicly funded family planning clinics to use their method.

Adolescent Sexual Health Work Group (ASHWG)

The ASHWG is a standing work group of program managers from non-governmental organizations and the California Departments of Public Health and Education that creates a coordinated and collaborative system to promote and protect the sexual and reproductive health of youth. The ASHWG Data Integration Committee’s intention is to improve comparability and expand use of HIV, STI, and teen birth data.

Studies of Parental Notification Requirements before Abortion

The Bixby Center has published policy analyses titled, “Adolescents & Parental Notification for Abortion: What Can California Learn from the Experience of Other States?” These scientifically accurate syntheses were used by a wide variety of organizations in their efforts to prevent passage of legal mandates for parental notification before abortion.

Latina Mothers Study

Findings from this study, conducted with the UCSF Center on Social Disparities in Health, documented the need to both improve Latina teens’ knowledge about birth control and their ability to communicate with their partners about sex and to provide the skills and resources to fulfill their educational and career goals. Findings were integrated into a Telly Award winning film, A Question of Hope: Reducing Latina Childbearing in California, available in English and Spanish, which has been disseminated widely to county health departments, schools, community-based organizations, advocacy groups, legislators, and researchers in California and nationwide.

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<tr>
<th>Year</th>
<th>Event</th>
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<td>2000</td>
<td>Dr. Landy establishes the national office for the Fellowship in Family Planning at the Center (see p14)</td>
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<td>2000</td>
<td>Dr. Darney founds the Fellowship in Reproductive Infectious Disease with Dr. Deb Cohan as the first fellow (Dr. Craig Cohen becomes Fellowship Director in 2004 and Dr. Cohan Associate Director) (see p15)</td>
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<td>2001</td>
<td>President George W. Bush reinstates the “Global Gag Rule”</td>
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<td>2000 - 2003</td>
<td>FDA approves mifepristone for medication abortion</td>
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<tr>
<td>2002</td>
<td>Dr. Stewart and Tracy Weitz found Advancing New Standards in Reproductive Health (ANSIRH) (see p9)</td>
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Safe Motherhood

More than half a million women die yearly from complications of pregnancy and childbirth. An estimated 99 percent of these deaths occur in developing countries, where a woman’s lifetime risk of dying from pregnancy-related complications is 45 times higher than in developed countries. Hemorrhage and hypertensive disorders account for the largest proportion of these deaths.

Non-pneumatic Anti-Shock Garment (NASG) for the Management of Obstetric Hemorrhage

Studies by the Bixby Center’s Safe Motherhood Program in Egypt, Mexico, and Nigeria have demonstrated that the application of the NASG, a simple neoprene and Velcro device, significantly reduces blood loss during obstetric and post-abortion hemorrhage, decreases maternal morbidity and mortality, and buys time for critically ill patients to reach emergency obstetric care.

The Safe Motherhood Program is currently studying the use of the NASG for application by midwives at primary health care centers before transport of patients to Comprehensive Emergency Obstetrical Care facilities in Zambia and Zimbabwe. The Safe Motherhood Program is also working with Pathfinder International in India and Nigeria on the Continuum of Care for Postpartum Hemorrhage Project.

A Book for Midwives

Co-authored by the director of the Bixby Center’s Safe Motherhood Program, the Hesperian Foundation’s *A Book for Midwives*, with a focus on simple low-cost treatments, has proven to be a vital resource for thousands of practicing midwives and midwifery training programs around the world.

Tibet

The Safe Motherhood Program studied use of a traditional Tibetan medicine, Zhi Byed 11, vs. misoprostol to prevent postpartum hemorrhage. The study demonstrated a lower frequency of postpartum hemorrhage with misoprostol. This was the first randomized controlled trial ever conducted in Tibet and it included two years of ethnographic research. The work resulted in a series of publications, including articles on the ethics of informed consent in research-naive populations.

2002 Dr. Karen Meckstroth opens second Women’s Options Center at UCSF in a National Center of Excellence in Women’s Health at the Medical Center at Mt. Zion (see p18)

2002 Dr. Stewart launches the “Integrity in Science” national sign-on initiative

2003 Dr. J. Joseph Speidel – former director of AID’s Office of Population, president of Population Action International, and director of the William and Flora Hewlett Foundation’s Population Program – becomes the Center’s Director for Communications, Development and External Relations

2002 Nepal, with one of the highest maternal mortality rates in Asia, legalizes abortion

2002 ANSIRH publication, *Early Medical Abortion: Issues for Practice*, is sent to 60,000 physicians, including all members of the American College of Obstetricians and Gynecologists
HIV/AIDS and Sexually Transmitted Infections (STIs)

An estimated 33 million people are living with HIV worldwide, with 2.5 million new infections each year. An annual toll of two million deaths is rapidly adding to the 25 million people who have already died of AIDS. In Africa, the most severely affected region, the number of children orphaned by AIDS has reached an estimated 11.6 million. A widespread but largely unacknowledged epidemic of sexually transmitted infections (STIs) other than HIV, with some 340 million new, potentially curable infections each year, intensifies the disease burden worldwide. The difficulty and cost of treating STIs, and the fact that some STIs, notably HIV, are incurable, places a great premium on prevention – the major goal of Bixby Center programs.

International Projects

The Women’s Global Health Imperative (WGHI)

WGHI, a former Bixby Center program now located at RTI International, demonstrated that the economic empowerment of individual young women was insufficient to protect them from HIV without broader social changes to support their autonomy and equality. The Methods for Improving Reproductive Health in Africa (MIRA) trial, a clinical trial in Zimbabwe, showed that providing women with a diaphragm and lubricant gel was not effective in preventing male-to-female transmission of HIV, nor did it affect risk of HPV infection. The study was instrumental, however, in developing new microbicide testing methodologies appropriate for clinical trials in developing countries.

Addressing the Intersection between Safe Motherhood and HIV/AIDS

Improving access of pregnant women to essential maternity and HIV services in sub-Saharan Africa is an important goal for Bixby Center researchers. After an initial study indicating that fears of HIV/AIDS stigma may adversely affect uptake and quality of maternity services, Bixby Center investigators spearheaded a five-year research program in rural Kenya to measure and investigate the effects of HIV/AIDS stigma and gender-based violence on pregnant women’s use of health services, with the goal of developing interventions. Bixby Center investigators are also working on a study evaluating the effectiveness of protease inhibitors in HIV-infected pregnant women with malaria in rural Uganda.

Family AIDS Care and Education Services (FACES)

FACES, a collaboration between the Bixby Center and the Kenya Medical Research Institute (KEMRI), began as a small family-based HIV care and treatment program for research participants and their families and has rapidly grown into a major HIV care, research, and training program located in five districts in Kenya. FACES serves as a site for several groundbreaking clinical and operations investigations, such as the impact of antiretroviral treatment on sexual risk behaviors, cervical cancer prevention, HIV prevention among street youth, and integration of HIV and sexual and reproductive health services.
Clinical Trials

University of Zimbabwe-UCSF HIV/AIDS Clinical Trials Unit (CTU)
The NIH-funded CTU conducts multiple HIV/AIDS clinical research trials at the UZ-UCSF Collaborative Research Programme site in Harare, Zimbabwe. The CTU carries out the clinical research plans of the NIH Division of AIDS (DAIDS) HIV/AIDS Networks, specifically in the areas of microbicides for HIV prevention, non-vaccine HIV prevention strategies, prevention of mother-to-child transmission, and clinical management of HIV/AIDS, including co-infections and other HIV-related conditions.

STI Clinical Trials Group
The STI Clinical Trials Group is a seven-year, NIH-funded program that supports domestic and international clinical trials for STI diagnostics, treatment, vaccines, and microbicides. The group includes investigators and field sites in Brazil, Canada, China, Kenya, Mexico, U.S., Vietnam, and Zimbabwe.

Domestic Projects

Prenatal HIV Testing
The Bixby Center has been involved in evaluating best practices of prenatal HIV testing. Studies include the assessment of patient perspectives with the integration of routine HIV testing into prenatal care and rapid HIV testing at the time of labor and delivery. These projects enhance strategies to eliminate mother-to-child transmission and also identify individuals who could benefit from early HIV infection identification.

Infertility Prevention Project
Since 1995, the California Department of Public Health STD Control Branch (STDCB) in partnership with the California Family Health Council, Family PACT, California Public Health Laboratories, and local STI control programs has conducted chlamydia and gonorrhea prevalence monitoring in clinical sites in California, including family planning and STI clinics, school-based health centers, and juvenile hall facilities. The project funds critical staffing for quality improvement initiatives and program evaluation activities, as well as outreach and screening services for underserved young women, especially those in juvenile detention facilities.

HPV-IMPACT: Human Papillomavirus Vaccine Impact Monitoring Through Surveillance of Cervical Precancerous Lesions
The California Department of Public Health and the California Emerging Infections Program have teamed up with the CDC and four other Emerging Infections Program sites on pilot surveillance of cervical dysplasia called HPV-IMPACT. This project monitors trends in incidence, vaccine use, and use of cervical cancer screening, including Pap and HPV tests.

The Bayview Networks Study
This study of the sexual networks of San Francisco’s Bayview Hunter’s Point youth showed which youth are at elevated risk for STIs. The identification of highly connected individuals may prove to be important to reduce the burden of STIs within that community.

2003 Dr. Weitz testifies to California legislature on state abortion law SB 1301, which codifies Roe in state law and allows nurse practitioners, certified nurse midwives, and physician assistants to legally perform non-surgical abortion
2004 Dr. Cohen founds Family AIDS Care and Education Services (FACES) in Kenya (see p12)
2003 Dr. Suellen Miller founds and becomes director of the Center’s Safe Motherhood Program (see p11)
2004 Dr. Darney is elected as Founding President of the Society of Family Planning (see p15)
Training Tomorrow's Reproductive Health Leaders

Training in contraceptive technologies, family planning, and abortion is often neglected. To address these deficiencies, the Bixby Center has established formal training programs to develop future generations of highly skilled and motivated reproductive health researchers, clinicians, teachers, and advocates. These training activities are among the most important contributions the Bixby Center is making to reproductive health.

Fellowship in Family Planning

Established in 1991, the Fellowship in Family Planning is the only one of its kind in the U.S. to train post-residency physicians in family planning and abortion clinical skills and research. The national office, at the Bixby Center, leads the expansion of this program, now at 20 sites, of which three have program directors trained at UCSF. With more than 150 incoming, current, and graduated fellows, this program is working with the American Board of Obstetrics and Gynecology (ABOG) to establish family planning as a sub-specialty within obstetrics and gynecology. The national office holds an annual meeting for fellowship directors and current and former fellows where fellows present their research and address pertinent or emerging clinical topics.

Kenneth J. Ryan Residency Training Program in Abortion and Family Planning

This national training initiative focuses on integrating and enhancing abortion and family planning training for obstetrics and gynecology residents and medical students by providing both start-up funding and technical assistance. To date, 51 residency programs, including two in Canada, have formally incorporated or strengthened training in abortion and contraception. Twenty-two Ryan Programs were started by graduated Family Planning Fellows. The program also evaluates the impact on obstetrics and gynecology department curricula, resident skills, and future practice. The Ryan Program has trained more than 600 residents who will ensure continuing access to family planning and abortion care in the U.S.

Fellowship in Family Planning Sites

1. Albert Einstein College
2. Boston University
3. Columbia University
4. Emory University
5. Harvard Medical School
6. Johns Hopkins University
7. Northwestern University
8. Oregon Health & Science University
9. Stanford University
10. UCSF
11. University of Chicago
12. University of Colorado
13. University of Illinois, Chicago
14. University of Michigan
15. University of North Carolina, Chapel Hill
16. University of Pennsylvania
17. University of Pittsburgh
18. University of Southern California
19. University of Utah
20. Washington University School of Medicine

2004 The Center and Pathfinder International collaborate to initiate the Vietnam Medical Education Program (see p17)
2004 Drs. Darney and Padian elected to the Institute of Medicine of the National Academies
2004 Dr. Drey is recognized as a “Local Hero” by the San Francisco Bay Guardian and a “Champion of Choice” by NARAL Pro-Choice California
2004 Dr. Speidel secures a $5 million endowment for the Center, which is renamed the Bixby Center for Reproductive Health Research & Policy

2004 Dr. Drey receives the Carl S. Shultz Award for Lifetime Achievement from the American Public Health Association (previous winners include Dr. Speidel in 1982 and Dr. Stewart in 1997)
Fellowship in Reproductive Infectious Disease (RID)

This fellowship trains obstetrician-gynecologists and postdoctoral researchers in reproductive infectious disease. The Bixby Center established the fellowship in response to the need for an interdisciplinary approach to investigate the biological, cultural, behavioral, and socioeconomic causes of STIs and HIV. It seeks to combine the skills of clinician-researchers with bench and social scientists. It is the only RID program with a global emphasis, giving fellows a chance to conduct research internationally. The program holds global biweekly seminars to connect RID programs worldwide.

California STD/HIV Prevention Training Center (CA PTC)

The CA PTC, funded by the Centers for Disease Control and Prevention (CDC), is a joint project of the California Department of Public Health STD Control Branch, the Bixby Center, and the UC Berkeley School of Public Health. The CA PTC develops and conducts training designed to meet the needs of a wide array of medical, health promotion, and community professionals serving persons and communities affected by STIs and HIV. Conferences, small group discussions, interactive exercises, case studies, hands-on clinic practice, and a variety of visual media enrich the learning experience. The CA PTC also conducts international trainings in STI clinical care and HIV prevention in numerous countries, including Mexico, South Africa, Thailand, Uganda, Vietnam, and Zambia as well as Puerto Rico and designated Pacific Island jurisdictions. The CA PTC works with several international entities, including the International Training and Education Center on HIV and the CDC’s Global AIDS Program.

Charlotte Ellertson Social Science Postdoctoral Fellowship in Abortion and Reproductive Health

The Bixby Center and Ibis Reproductive Health are the two founding sites of the Ellertson Fellowship. The fellowship’s goal is to support early career social scientists to produce scientific evidence on family planning and abortion-related issues of clinical relevance. Fellows work closely with abortion and reproductive health providers and advocates to ensure that their research informs policies and program design. Fourteen fellows have completed or are currently taking part in the fellowship at five sites, including Columbia University, Johns Hopkins University, and the Guttmacher Institute.

Society of Family Planning

With the Bixby Center serving as the initial secretariat, and with leadership provided by Dr. Philip Darney as founding president, the Society was separately incorporated in 2004 to bring together medical professionals dedicated to the scientific study of family planning, with a focus on contraception and abortion. With a membership of 140 fellows and junior fellows, the Society meets annually in conjunction with the Association of Reproductive Health Professionals and the Planned Parenthood Federation of America, at which new and experienced researchers share ideas and form collaborations. In 2008, the Society funded investigator-initiated awards and multi-center research grants totaling $1.5 million.

2005 Dr. Drey and a team of UCSF researchers publish an article in the *Journal of the American Medical Association* that indicates that the scientific evidence does not support the existence of fetal pain before the third trimester

2005 Dr. Darney testifies before the South Dakota Task Force to Study Abortion

2005 Drs. Stewart and Carole Joffe of ANSIRH launch first monthly “Abortion Discussion Group”

2005 California Proposition 73: Waiting Period and Parental Notification Before Termination of Minor’s Pregnancy is rejected (similar propositions 85 in 2006 and 4 in 2008 are also rejected); Dr. Brindis and Dr. Norma Jo Waxman offer expert testimony at hearings held for each initiative

2005 Dr. Brindis receives the Federal Maternal and Child Health Bureau Director’s Award in recognition of contributions made to the health of infants, mothers, children, adolescents, and children with special needs
Primary Care Initiative (PCI)

The PCI seeks to secure the professional practice, health care system, and regulatory changes necessary to allow properly trained advanced practice clinicians (i.e. nurse practitioners, physician assistants, and certified nurse midwives) to offer early abortion services. California-based activities include a three-year Health Workforce Pilot Project, through which 60 advanced practice clinicians are receiving training in aspiration abortion at 32 sites. Data will be collected to demonstrate the safety and effectiveness of advanced practice clinicians as providers of early aspiration abortion care. A successful program in California could help lead to legislative and policy changes in other states.

Training in Early Abortion for Comprehensive Healthcare (TEACH)

TEACH works with Family Medicine residencies and primary care clinicians to integrate abortion training into their curricula and to model comprehensive reproductive health care. Since its inception in 2003 by ANSIRH and two Planned Parenthood affiliates, TEACH has collaborated with four family practice residency programs in California. TEACH is now managed by Ibis Reproductive Health.

Early Abortion Training Workbook

ANSIRH’s *Early Abortion Training Workbook* was developed for use in a clinical setting where an experienced trainer or provider is available. Now in its third edition, the workbook is currently in use at top medical schools around the world. There is both a trainee and a trainers edition available online at no cost (http://www.ansirh.org/training/workbook.php). To date, there have been over 10,000 visits to the workbook website.

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### 2005 - 2007

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
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<tbody>
<tr>
<td>2005</td>
<td>Number of abortion providers in the U.S. drops below 2,000</td>
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<tr>
<td>2006</td>
<td>Dr. Stewart receives a Special Commendation Award for outstanding service to the State of California in the field of reproductive health from the Director of the Health and Human Services Agency</td>
</tr>
<tr>
<td>2006</td>
<td>Dr. Joffe receives a Distinguished Scholarly Public Service Award from the Academic Senate of the University of California, Davis</td>
</tr>
<tr>
<td>2006</td>
<td>Dr. Weitz becomes Director of ANSIRH and Dr. Diana Greene Foster becomes Research Director</td>
</tr>
<tr>
<td>2006</td>
<td>An analysis by the Guttmacher Institute ranks California first among states in efforts to help women avoid unintended pregnancy — the rate of unintended pregnancies having declined by 35% in the last decade</td>
</tr>
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*Photo courtesy of Jana Carrey Photography*
International Training

Completed Programs

The William and Flora Hewlett Fellowship in Reproductive Health Policy

From 1989 to 2005, this fellowship sponsored 31 senior fellows from Latin America for nine months at UCSF to develop special expertise in the area of reproductive health policy. Among the successful graduates of the program are professors in key universities in Guatemala, Mexico, and Peru; leaders in government and health, including Mexico’s Ministry of Health; and leaders directing community-based organizations.

Post-Abortion Care in Central America

From 2000 to 2005, Bixby Center faculty directed a training program to establish a Post Abortion Care unit in teaching hospitals in El Salvador and Guatemala to improve access to quality care for women who have complications related to incomplete or unsafe abortion. The project has trained a core group of hospital staff and physicians in a variety of family planning services.

International Family Planning Leadership Program (IFPLP)

Between 2000 and 2006, the Bixby Center carried out training for 270 family planning managers and practitioners from developing countries in collaboration with the Public Health Institute and UC Berkeley. The IFPLP provided scientific knowledge, developed skills relating to program management and evaluation, and offered leadership training and in-country technical assistance. Trainings at UCSF included participants from Ethiopia, India, Myanmar, Nigeria, Pakistan, the Philippines, and Sudan. Trainings conducted in Guatemala and the U.S. included participants from El Salvador, Guatemala, Honduras, Nicaragua, and Mexico.

Training on Ethical Issues in HIV/AIDS Research

From 2003 to 2008, this training served to build capacity in UC Berkeley, UCSF, and collaborating Indian institutions to conduct ethically sound HIV/AIDS research and to promote cross-cultural understanding of ethical issues in HIV/AIDS research in India.

Vietnam Medical Education Program

Between 2004 and 2009, the Bixby Center collaborated with Pathfinder International to hold annual courses for policy makers and clinical teachers from all eight Vietnamese medical schools on reproductive health curriculum reform, evidence-based medicine, problem-based learning, and policy. The courses brought together UCSF faculty and leadership with high-level members from the Ministry of Health, the Ministry of Education and Training as well as medical school deans, department heads, and faculty in Vietnam.

Ongoing Programs

KEMRI-UCSF Infectious Disease Research Training Program

This two- to four-year program trains Kenyan master’s and doctoral students to perform epidemiological, clinical, and basic science STI research in order to develop a multidisciplinary team of researchers in Kenya. Since its inception in 2005, 11 scholars have completed the program.

Student Training Education Program (STEP)

STEP provides rotations for health professional students and residents at sites within the Family AIDS Care and Education Services (FACES) network of clinics in Kenya. This program began in 2006 and 88 residents and students have completed the training.

2006 Supported by the work of Center researchers (see p6), the FDA makes Plan B® emergency contraception available without a prescription to women 18 and older

2007 The Partial-Birth Abortion Ban Act of 2003 is upheld by the Supreme Court in Gonzales v. Carhart; Dr. Weitz demonstrates negative effects on care in Massachusetts

2007 Dr. Cohan testifies before the California legislature on SB 443, which states that HIV-positive men can use reproductive technology

2007 Mexico City legalizes abortion; the law also allows access to safe abortion services for women from other Mexican states

2007 Drs. Padian, Alexandra Minnis, Suneeta Krishnan, Megan Dunbar, and Ariane van der Straten transfer the Women’s Global Health Imperative (WGHI) to RTI International; Drs. Cohen, Miller, and Janet Turan continue to lead STI/HIV/AIDS and Safe Motherhood programs at the Center
Reproductive health care that includes family planning and abortion is difficult to obtain, especially for low-income and adolescent clients. To address this shortfall, Bixby Center faculty and staff work within the UCSF Schools of Medicine, Pharmacy, and Nursing and a world-renowned system of hospitals and clinics to deliver comprehensive reproductive health care. Bixby Center accomplishments in clinical research and training would not be possible without the resources and collaboration of UCSF clinical centers at San Francisco General Hospital and the Medical Centers at Parnassus and Mt. Zion. The health care centers described below have medical directors who are Bixby Center faculty and many were also founded by Bixby Center faculty.

San Francisco General Hospital (SFGH) Division of the UCSF Department of Obstetrics, Gynecology & Reproductive Sciences

The mission of the SFGH Division of the Department of Obstetrics, Gynecology & Reproductive Sciences is to promote justice, quality, and equity in women’s health care. It seeks to eliminate barriers to good health for women in San Francisco and around the world by providing exemplary patient care to all women, especially those who are poor and vulnerable; training and inspiring the next generation of reproductive health leaders; and improving policy and practice through research and scholarship. Obstetrician-gynecologists and midwives provide the full range of clinical care to a diverse population of women.

The Women’s Options Centers at SFGH and Mt. Zion Hospital

The SFGH Women’s Options Center serves as a model clinic for the nation for hospital-based out-patient abortion care, offering comprehensive, high quality services for pregnancy termination and related health conditions. The Mt. Zion Women’s Options Center integrates abortion care into the Women’s Health practice. Both centers emphasize family planning counseling and post-abortion provision of contraception including long-acting reversible contraceptive (LARC) methods. The centers are known for their ability and expertise in serving high-risk and medically complicated patients who cannot obtain care elsewhere.

New Generation Health Center (NGHC)

The mission of “New Gen” is to help empower youth to make informed, positive decisions about their health and future, particularly related to reproductive health and family planning. Annually, NGHC provides services to more than 2,500 minority and low-income clients, including many who live in teen pregnancy “hot spots” identified by the Bixby Center Family PACT evaluation team. NGHC is also involved in studies to improve services for vulnerable youth. For example, the Young Women’s REACH Project is studying the impact of rigorous follow-up phone counseling on sexual behaviors and pregnancy.

Providing Quality Reproductive Health Care

2007 Drs. Weitz and Joffe offer nationwide online undergraduate course, “Social science perspectives on the abortion conflict in the U.S.” (in 2009, the course is replicated for Family Planning and Ellerton Fellows)

2008 Over the past 35 years, the average number of children per woman has declined from more than four to 2.5 worldwide; however, fertility remains more than four in the least developed countries

2009 World population reaches 6.8 billion

2008 Of the 33 million people living with HIV/AIDS worldwide, women account for 50% of all adults and for 59% in sub-Saharan Africa

2008 The Center is renamed the Bixby Center for Global Reproductive Health to reflect its increased involvement with international work
National Perinatal HIV Resources

The National Perinatal HIV Consultation and Referral Service (the “Perinatal HIV Hotline”) was started in 2004 in conjunction with the UCSF Department of Family and Community Medicine and the National HIV/AIDS Clinician Consultation Center. The hotline provides direct access to experts for clinical consultation. It is free, confidential, and available 24 hours a day to answer clinicians’ questions on topics ranging from interpreting HIV test results, antiretroviral use in pregnancy, and care of HIV-exposed newborns. Based at SFGH, the hotline has answered over 1,300 calls since its inception.

The Perinatal HIV Clinicians Network is a national directory of 275 perinatal HIV experts, created to connect clinicians with local resources so that their patients can remain in care in their communities. Approximately 180 referrals have been made through the Clinicians Network.

Family AIDS Care and Education Services (FACES)

FACES has enrolled more than 59,000 adults and children in HIV care and treatment at 61 sites, provided 38,000 women at 59 sites prevention of mother-to-child transmission counseling and HIV testing services, and trained over 1,200 health care providers and lay health care workers in HIV service competencies in Kenya.

St. James Infirmary

This San Francisco-based, peer-led clinic prevents occupational illnesses and injuries through compassionate and non-judgmental comprehensive health care and social services for sex workers. Each year, the St. James Infirmary delivers 8,000 clinic and venue based services to more than 2,000 sex workers and their families.

Bay Area Perinatal AIDS Center (BAPAC)

BAPAC includes a multi-disciplinary team of providers who offer comprehensive medical and psychosocial services to hundreds of HIV-positive women and their families from Northern California before, during, and after pregnancy. It also offers consultations and education to medical providers worldwide, including countries such as Tanzania, Cote d’Ivoire, Zambia, and Kenya.

Women’s Community Clinic

This clinic, staffed mostly by volunteers, provides free sexual and reproductive health care services to 3,500 un- and underinsured women in San Francisco every year.

2009 President Barack Obama rescinds the “Global Gag Rule” and restores $50 million in funds to the UNFPA. Congress increases funds for Title X and foreign aid population programs. President Obama proposes additional funding increases for population work, elimination of funds for abstinence-only education programs, and expansion of eligibility for Medicaid-funded family planning services in FY 2010 budget.

2009 Dr. Brindis receives the UCSF Chancellor’s Award for the Advancement of Women, Dr. Darney receives the Physicians for Reproductive Choice and Health Kenneth J. Ryan Physician Leadership Award, and Dr. Speidel receives the Society of Family Planning’s Allan Rosenfield Award for Lifetime Contributions to International Family Planning.
Forging Ahead
Drs. Craig Cohen and Elizabeth Bukusi at the dedication of the new Steinberg Comprehensive Care Centre at Suba District Hospital in Kenya
Looking back and forging ahead

As we assess our first decade of work to improve the reproductive health of adolescents, women, and men, we can be proud of our successes, but recognize that we still face numerous and ever-shifting challenges. We look forward to the next 10 years as an opportunity to further contribute to the goal of better worldwide reproductive health.

Research, training, and evidence-based clinical practice

At a time when reform of health systems is underway, our evidence-based research on better reproductive health technologies and practices as well as our training of a diverse cadre of reproductive health clinicians and researchers is increasingly likely to influence health.

Translation and dissemination of research

We will continue to ensure that the implications of our research, both for policy and for programs, reaches appropriate audiences, including health care professionals, policy makers, and the public. We recognize the importance of increasing the awareness and engagement of the broader public through a variety of established and new media. We are also committed to assuring greater diffusion of research findings and best practices so that more effective reproductive health programs can be implemented.

Reaching the underserved

Lack of access to quality family planning, abortion, maternity, and sexually transmitted infection services for most of the world’s citizens results in an enormous and unnecessary burden of disease and death. Over the coming decade, we will give high priority to advancing reproductive health by training providers and researchers as well as by bringing new knowledge and technology to the underserved, both in the U.S. and in developing countries.
Financial Summary

Over the past decade, the Bixby Center has been awarded $280 million from governmental agencies, foundations, corporations, and individuals to support our work.

Funding by Program Area 1999-2009
(Percent of $280 million)

- HIV/AIDS & STIs: 45%
- Contraceptive Development & Family Planning: 20%
- Adolescent Reproductive Health: 8%
- Abortion: 7%
- General Support: 4%
- Training & Fellowships: 14%
- Safe Motherhood: 2%
- Safe Motherhood: 2%

Annual Budgets 1999-2009
(in $ million)

- 1999: $5 million
- 2000: $15 million
- 2001: $25 million
- 2002: $35 million
- 2003: $45 million
- 2004: $50 million
- 2005: $45 million
- 2006: $35 million
- 2007: $25 million
- 2008: $15 million
- 2009*: $5 million

*partial-year

Campaign to Endow a Chair:

The Philip D. Darney Professorship of Population, Family Planning, and Reproductive Health

UCSF is establishing an endowed chair to continue Dr. Darney’s legacy in the field of family planning and reproductive health. The goal of the campaign is $2.5 million.

For information or to donate:
http://bixbycenter.ucsf.edu/get_involved/donate.html
Our Funders

We would like to thank the following organizations for their support of the Bixby Center over the past decade. Although not listed below, we also wish to note with appreciation the generosity of the many individual donors who have supported our work.

Anonymous (1)*
Anonymous (2)
Anonymous (3)
The AIDS Support Organisation (TASO)
Alameda County Health Care Services Agency
The American College of Obstetricians & Gynecologists
Erik and Edith Bergstrom Foundation
Berlex Laboratories, Inc.
Better World Fund
The Fred H. Bixby Foundation*
California Health and Human Services:
  Department of Public Health, Office of Family Planning*
  Department of Public Health, STD Control Branch*
  Department of Social Services
The California Wellness Foundation
The Annie E. Casey Foundation
Centers for Disease Control and Prevention (CDC)
  President’s Emergency Plan for AIDS Relief (PEPFAR)*
Columbia University
Compton Foundation, Inc.
CONRAD (Contraceptive Research and Development Program)
Doris Duke Charitable Foundation
Duramed Research, Inc.
The Educational Foundation of America
The Ford Foundation
Bill & Melinda Gates Foundation*
The Bill and Melinda Gates Institute for Population and Reproductive Health,
  Johns Hopkins Bloomberg School of Public Health
Gen-Probe Incorporated
The Wallace Alexander Gerbode Foundation
GlaxoSmithKline
The David B. Gold Foundation
Richard and Rhoda Goldman Fund
The Grousbeck Family Foundation
Gynetics, Inc.
Hellman Family Foundation
The William and Flora Hewlett Foundation*
Ipas
Johns Hopkins University
Johnson & Johnson
KickStart
The John D. & Catherine T. MacArthur Foundation
The John Merck Fund
The Mulago Foundation
National Campaign to Prevent Teen and Unplanned Pregnancies
National Institutes of Health (NIH):
  Fogarty International Center
  National Center for Research Resources
  National Institute of Allergy and Infectious Diseases (NIAID)*
  National Institute of Child Health and Human Development (NICHD)*
  National Institute of Mental Health (NIMH)
Open Society Institute
Organon, Inc.
Ortho McNeil Pharmaceuticals, Inc.
Osel, Inc.
The David & Lucile Packard Foundation*
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Pharmacia & Upjohn Company
Planned Parenthood Federation of America
The Population Council
Public Health Foundation Enterprises, Inc.
Public Health Institute
Quintiles
ReProtect, Inc.
The Robert Wood Johnson Foundation
The San Francisco Foundation
Society of Family Planning
Levi Strauss Foundation
Tides Foundation
U.S. Department of Health and Human Services:
  Health Resources and Services Administration, Global HIV/AIDS Program
  Office of Public Health and Science, Office of Population Affairs
  Office of Public Health and Science, Office on Women’s Health, Region IX
Unique Zan Foundation
United States Agency for International Development (USAID)
University of California, Institute for Mexico and the United States (UC MEXUS)
University of California, Office of the President:
  California HIV/AIDS Research Program
  California Policy Research Center
  California Program on Access to Care
University of California, San Francisco
Vestergaard Frandsen
Weeden Foundation
The Winslow Foundation
Mary Wohlford Foundation
Women’s Capital Corporation
The Women’s Foundation of California
Wyeth

* Organizations providing more than $4 million over the period 1999 to 2009
If you would like to contribute to the Bixby Center’s important work: http://bixbycenter.ucsf.edu/get_involved/donate.html
Selected Bibliography

Over the past decade, Bixby Center faculty and investigators have published more than 1,000 journal articles, books, chapters, monographs, briefs, and other publications. The following is a selection of publications:

Peer-Reviewed Journal Articles


* Recipient of the Steven Polgar Prize from the Society of Medical Anthropology

** Recipient of the Roy M. Pitkin Award for outstanding research article from the American College of Obstetricians and Gynecologists
Peer-Reviewed Journal Articles, continued


Books


American College of Nurse-Midwives “Notable Book of 2006”


Monographs, Fact Sheets, and Briefs


Bixby Center Publications: http://bixbycenter.ucsf.edu/publications.html
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In Memoriam

Felicia Stewart, MD, served as one of the founding directors of the Bixby Center from 1999 until her untimely death in 2006. Her contributions are innumerable and include her early work to make emergency contraception well known to the public and a routine practice for health care providers. She demanded that we include the “why” as well as the “how” when teaching about abortion care. She reclaimed the term “moral” to describe the value of reproductive health services. A scholar, clinician, colleague, mentor, and friend to many, Dr. Stewart’s absence is felt everyday at the Bixby Center.
Hundreds of individuals have contributed to the work of the Bixby Center over the past 10 years. Their work is critical to our success and we are grateful for their contributions.