



NEW INITIATIVES
EXPANDING ACCESS



creating
tools &
resources



strengthening
networks,
DEVELOPING
LEADERS



training and
education



SPREADING
OUR
MESSAGE

ANNUAL REPORT 2012



who
WE
are



financial information



reproductive
health
access
project



Letter from the Board President and Executive Director

2012 was marked by great strides and continued challenges for reproductive health & rights in the United States.

The Affordable Care Act now guarantees that women have unprecedented access to contraception. But conservative state legislatures had another banner year passing restrictive reproductive health legislation: 42 states and the District of Columbia enacted 122 provisions related to reproductive health and rights, one-third of them—43 provisions in 19 states—restricting access to abortion services. We know that these laws are not intended to protect women, as their authors deceitfully claim. On the contrary, they aim to shut clinic doors and have already done so. Over the past three years, at least 54 abortion providers in 27 states have either closed or stopped offering abortion services.

Promoting best practices in reproductive health care is the heart of the Reproductive Health Access Project's mission. We work directly with clinicians, training them and providing them with the tools and support they need to offer comprehensive contraception and abortion care to their patients. In this highly politicized environment, we have to be strategic in order to achieve our goals.

Early in January 2012, our staff and board mapped out these strategic priorities for 2012:

- Strengthen and deepen the support we provide to clinicians working in underserved areas
- Increase our organization's capacity to do more in more areas of the country, and
- Develop new ways to tell our story and spread our message.

In 2012 we made great progress in raising our organizational profile: We launched a blog and expanded our Twitter and Facebook presence. Our tools, resources and expertise received significant attention in mainstream media, and our medical director, Linda Prine, was honored with the 2012 William K. Rashbaum, MD, Abortion Provider Award by Physicians for Reproductive Health.

RHAP's expanded public platform helped us connect with more supporters and reach more clinicians across the country (and around the world) in 2012 than ever before. Thank to generous gifts from new and existing supporters, we were able to hire more staff and launch new initiatives.

RHAP developed a series of new birth control resources and launched a project to expand access to miscarriage care in primary care. And our Family Medicine Reproductive Health Network, which connects and supports family physicians providing abortion care, grew to more than 420 members across 36 states. This year, our support enabled a family physician to begin offering abortion services in Arkansas, a state with some of the toughest abortion laws in the country.

RHAP has had an amazing year and we are planning even bigger things in 2013. We are proud to share with you this report on our accomplishments in 2012. We can't thank you enough for your support, and look forward to working in partnership in the years to come!

Barbara Kancelbaum
President, Board of Directors

Lisa Maldonado
Executive Director



NEW INITIATIVES EXPANDING ACCESS

GAPS (Graduate Abortion Provider Support) Fellowship

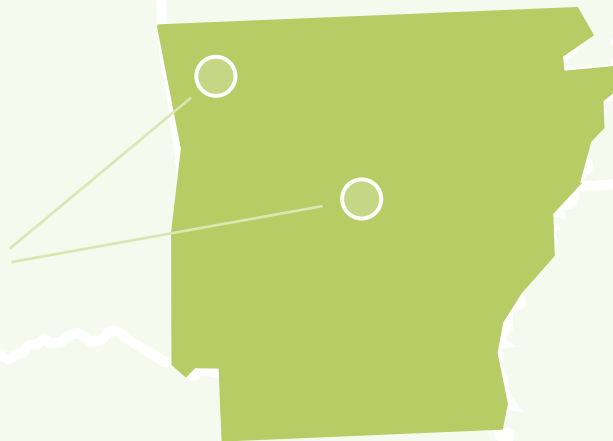
The GAPS Fellowship, launched in 2011, provides family physicians in critically underserved areas with intensive support to integrate abortion into their clinical practice.

GAPS Fellows commit to integrating early abortion care into their practices during the Fellowship year in collaboration with RHAP staff and to participating in project-evaluation efforts. Fellows receive:

- Intensive technical assistance to set up appropriate clinical and administrative systems at the clinical site.
- Financial support to help cover specific start-up costs.
- Access to legal counsel.
- Support to attend relevant national and regional conferences.
- Our GAPS Fellows are core members of our Family Medicine Reproductive Health Network.

In September 2012, our first GAPS Fellow began offering medication abortion in her Arkansas family practice.

Up until then, Arkansas had only **two abortion care facilities** in the state, both of which have to comply with onerous legislation targeting high-volume abortion facilities.



In 2012 RHAP launched an initiative to **integrate management of early pregnancy loss into primary care.**

Our goal is to learn how family physicians are providing miscarriage care and field test some strategies to expand access to this care.

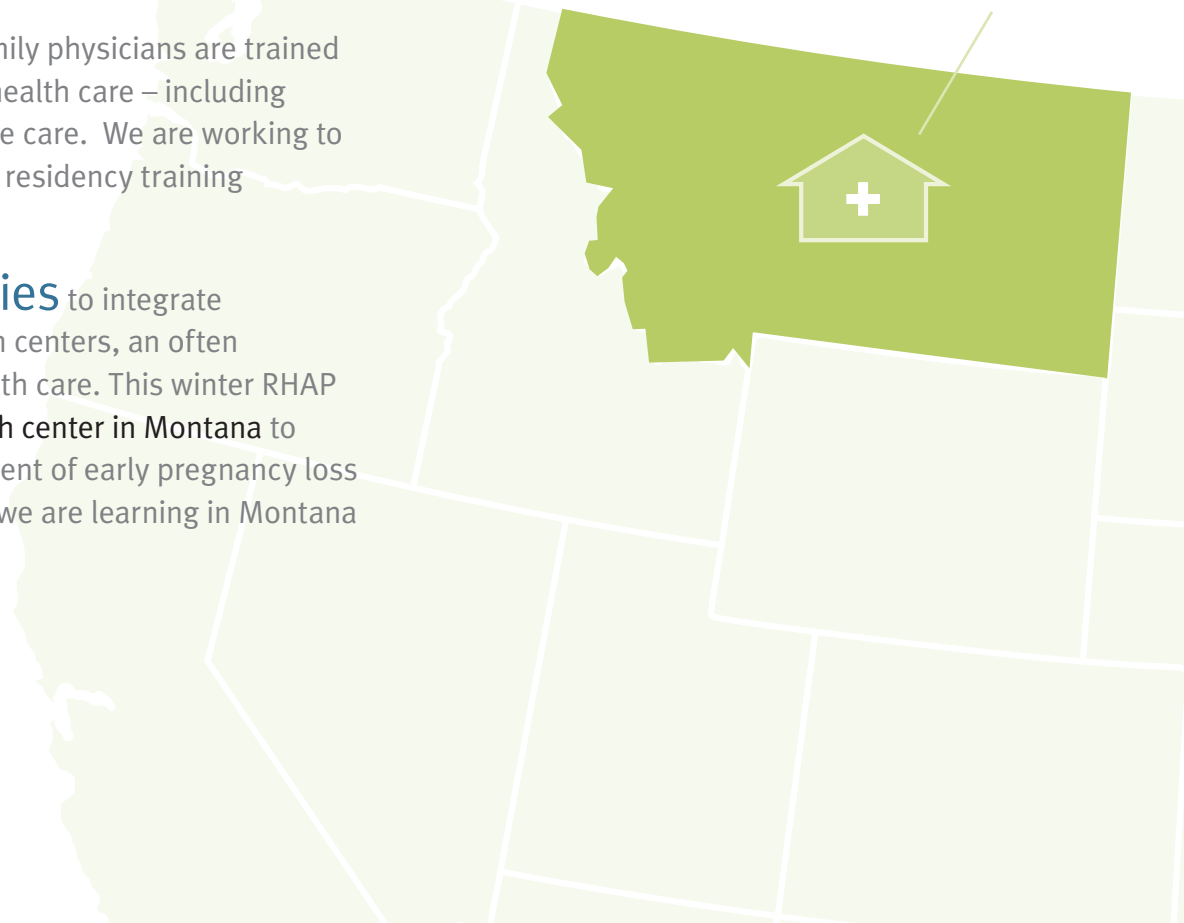
RHAP is:

Conducting research to understand how family physicians trained in abortion are using their skills to provide miscarriage care. We want to learn about barriers that they face and the factors that help them succeed in caring for women.

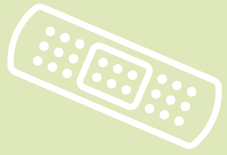
Advocating to ensure that all family physicians are trained to provide full-spectrum reproductive health care – including contraception, abortion and miscarriage care. We are working to strengthen the current family medicine residency training guidelines.

Pilot-testing new strategies to integrate miscarriage care into community health centers, an often overlooked source of reproductive health care. This winter RHAP began working with a **community health center in Montana** to integrate the comprehensive management of early pregnancy loss into their clinical practice. The lessons we are learning in Montana will guide our work in years to come.

Integrating miscarriage management into community health care centers



creating
tools &
resources



Just about every day RHAP receives a message from a clinician or learns about an organization that is using our tools and materials. These resources are among the central ways in which RHAP is concretely changing the way reproductive health care is provided.

We have tools and resources covering **Contraception, Medication Abortion, Manual Vacuum Aspiration, and Miscarriage Management**. Our resources include clinical protocols, patient-education materials, clinical forms, administrative information, and teaching tools.

Practical

Everything we share on our website was developed through our hands-on work in the field with primary care clinicians.

Emergency Contraception and Medication Abortion: What's the Difference?	
Emergency Contraception for EC	Medication Abortion (Mifepristone/RU-486)
<p>What is it for? Prevents pregnancy after intercourse.</p> <p>How does it work? Prevents fertilization of the egg.</p> <p>When to take it? Within 72 hours of intercourse.</p> <p>What happens if you don't take it? Pregnancy may occur.</p> <p>Is it safe? Yes, it is safe.</p> <p>Is it legal? Yes, it is legal.</p>	<p>What is it for? Terminates a pregnancy.</p> <p>How does it work? Terminates a pregnancy by blocking the hormone progesterone.</p> <p>When to take it? Within 10 weeks of pregnancy.</p> <p>What happens if you don't take it? Pregnancy may continue.</p> <p>Is it safe? Yes, it is safe.</p> <p>Is it legal? Yes, it is legal.</p>

Tus Opciones Para El Control Natal	
Método	¿Qué es?
Condón	Un dispositivo flexible que se coloca sobre el pene para evitar que el semen llegue a la vagina.
DIU	Un dispositivo pequeño que se inserta en el útero para evitar que el semen llegue a la vagina.
Implante	Un dispositivo pequeño que se inserta en el brazo para evitar que el semen llegue a la vagina.
Tabletas	Tabletas pequeñas que se toman diariamente para evitar que el semen llegue a la vagina.
inyección	Una inyección que se hace en el brazo para evitar que el semen llegue a la vagina.
intrauterino	Un dispositivo pequeño que se inserta en el útero para evitar que el semen llegue a la vagina.
intrauterino	Un dispositivo pequeño que se inserta en el útero para evitar que el semen llegue a la vagina.

Non-Prescription Birth Control Methods	
Method	How to Use
Male Condom	Use a new condom each time you have sex.
Female Condom	Use a new condom each time you have sex.
Diaphragm	Use a new diaphragm each time you have sex.
Cap	Use a new cap each time you have sex.
Coitus Interruptus	Withdraw the penis before ejaculation.
Withdrawal	Withdraw the penis before ejaculation.

Green Planin Anjans (Emergency Contraception) cava EC (Green Nan Demei Maten Apes Seks La)	
Kitas 10-17	Use a new condom each time you have sex.
Kitas 18-24	Use a new condom each time you have sex.
Kitas 25-31	Use a new condom each time you have sex.
Kitas 32-38	Use a new condom each time you have sex.
Kitas 39-45	Use a new condom each time you have sex.
Kitas 46-52	Use a new condom each time you have sex.
Kitas 53-59	Use a new condom each time you have sex.
Kitas 60-66	Use a new condom each time you have sex.
Kitas 67-73	Use a new condom each time you have sex.
Kitas 74-80	Use a new condom each time you have sex.
Kitas 81-87	Use a new condom each time you have sex.
Kitas 88-94	Use a new condom each time you have sex.
Kitas 95-101	Use a new condom each time you have sex.
Kitas 102-108	Use a new condom each time you have sex.
Kitas 109-115	Use a new condom each time you have sex.
Kitas 116-122	Use a new condom each time you have sex.
Kitas 123-129	Use a new condom each time you have sex.
Kitas 130-136	Use a new condom each time you have sex.
Kitas 137-143	Use a new condom each time you have sex.
Kitas 144-150	Use a new condom each time you have sex.
Kitas 151-157	Use a new condom each time you have sex.
Kitas 158-164	Use a new condom each time you have sex.
Kitas 165-171	Use a new condom each time you have sex.
Kitas 172-178	Use a new condom each time you have sex.
Kitas 179-185	Use a new condom each time you have sex.
Kitas 186-192	Use a new condom each time you have sex.
Kitas 193-199	Use a new condom each time you have sex.
Kitas 200-206	Use a new condom each time you have sex.
Kitas 207-213	Use a new condom each time you have sex.
Kitas 214-220	Use a new condom each time you have sex.
Kitas 221-227	Use a new condom each time you have sex.
Kitas 228-234	Use a new condom each time you have sex.
Kitas 235-241	Use a new condom each time you have sex.
Kitas 242-248	Use a new condom each time you have sex.
Kitas 249-255	Use a new condom each time you have sex.
Kitas 256-262	Use a new condom each time you have sex.
Kitas 263-269	Use a new condom each time you have sex.
Kitas 270-276	Use a new condom each time you have sex.
Kitas 277-283	Use a new condom each time you have sex.
Kitas 284-290	Use a new condom each time you have sex.
Kitas 291-297	Use a new condom each time you have sex.
Kitas 298-304	Use a new condom each time you have sex.
Kitas 305-311	Use a new condom each time you have sex.
Kitas 312-318	Use a new condom each time you have sex.
Kitas 319-325	Use a new condom each time you have sex.
Kitas 326-332	Use a new condom each time you have sex.
Kitas 333-339	Use a new condom each time you have sex.
Kitas 340-346	Use a new condom each time you have sex.
Kitas 347-353	Use a new condom each time you have sex.
Kitas 354-360	Use a new condom each time you have sex.
Kitas 361-367	Use a new condom each time you have sex.
Kitas 368-374	Use a new condom each time you have sex.
Kitas 375-381	Use a new condom each time you have sex.
Kitas 382-388	Use a new condom each time you have sex.
Kitas 389-395	Use a new condom each time you have sex.
Kitas 396-402	Use a new condom each time you have sex.
Kitas 403-409	Use a new condom each time you have sex.
Kitas 410-416	Use a new condom each time you have sex.
Kitas 417-423	Use a new condom each time you have sex.
Kitas 424-430	Use a new condom each time you have sex.
Kitas 431-437	Use a new condom each time you have sex.
Kitas 438-444	Use a new condom each time you have sex.
Kitas 445-451	Use a new condom each time you have sex.
Kitas 452-458	Use a new condom each time you have sex.
Kitas 459-465	Use a new condom each time you have sex.
Kitas 466-472	Use a new condom each time you have sex.
Kitas 473-479	Use a new condom each time you have sex.
Kitas 480-486	Use a new condom each time you have sex.
Kitas 487-493	Use a new condom each time you have sex.
Kitas 494-500	Use a new condom each time you have sex.
Kitas 501-507	Use a new condom each time you have sex.
Kitas 508-514	Use a new condom each time you have sex.
Kitas 515-521	Use a new condom each time you have sex.
Kitas 522-528	Use a new condom each time you have sex.
Kitas 529-535	Use a new condom each time you have sex.
Kitas 536-542	Use a new condom each time you have sex.
Kitas 543-549	Use a new condom each time you have sex.
Kitas 550-556	Use a new condom each time you have sex.
Kitas 557-563	Use a new condom each time you have sex.
Kitas 564-570	Use a new condom each time you have sex.
Kitas 571-577	Use a new condom each time you have sex.
Kitas 578-584	Use a new condom each time you have sex.
Kitas 585-591	Use a new condom each time you have sex.
Kitas 592-598	Use a new condom each time you have sex.
Kitas 599-605	Use a new condom each time you have sex.
Kitas 606-612	Use a new condom each time you have sex.
Kitas 613-619	Use a new condom each time you have sex.
Kitas 620-626	Use a new condom each time you have sex.
Kitas 627-633	Use a new condom each time you have sex.
Kitas 634-640	Use a new condom each time you have sex.
Kitas 641-647	Use a new condom each time you have sex.
Kitas 648-654	Use a new condom each time you have sex.
Kitas 655-661	Use a new condom each time you have sex.
Kitas 662-668	Use a new condom each time you have sex.
Kitas 669-675	Use a new condom each time you have sex.
Kitas 676-682	Use a new condom each time you have sex.
Kitas 683-689	Use a new condom each time you have sex.
Kitas 690-696	Use a new condom each time you have sex.
Kitas 697-703	Use a new condom each time you have sex.
Kitas 704-710	Use a new condom each time you have sex.
Kitas 711-717	Use a new condom each time you have sex.
Kitas 718-724	Use a new condom each time you have sex.
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Kitas 739-745	Use a new condom each time you have sex.
Kitas 746-752	Use a new condom each time you have sex.
Kitas 753-759	Use a new condom each time you have sex.
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Kitas 767-773	Use a new condom each time you have sex.
Kitas 774-780	Use a new condom each time you have sex.
Kitas 781-787	Use a new condom each time you have sex.
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Kitas 795-801	Use a new condom each time you have sex.
Kitas 802-808	Use a new condom each time you have sex.
Kitas 809-815	Use a new condom each time you have sex.
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Kitas 837-843	Use a new condom each time you have sex.
Kitas 844-850	Use a new condom each time you have sex.
Kitas 851-857	Use a new condom each time you have sex.
Kitas 858-864	Use a new condom each time you have sex.
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Kitas 872-878	Use a new condom each time you have sex.
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Kitas 900-906	Use a new condom each time you have sex.
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Kitas 991-997	Use a new condom each time you have sex.
Kitas 998-1004	Use a new condom each time you have sex.
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Kitas 1859-1865	Use a new condom each time you have sex.
Kitas 1866-1872	Use a new condom each time you have sex.
Kitas 1873-1879	Use a new condom each time you have sex.
Kitas 1880-1886	Use a new condom each time you have sex.
Kitas 1887-1893	Use a new condom each time you have sex.
Kitas 1894-1900	Use a new condom each time you have sex.
Kitas 1901-1907	Use a new condom each time you have sex.
Kitas 1908-1914	Use a new condom each time you have sex.
Kitas 1915-1921	Use a new condom each time you have sex.
Kitas 1922-1928	Use a new condom each time you have sex.
Kitas 1929-1935	Use a new condom each time you have sex.
Kitas 1936-1942	Use a new condom each time you have sex.
Kitas 1943-1949	Use a new condom each time you have sex.
Kitas 1950-1956	Use a new condom each time you have sex.
Kitas 1957-1963	Use a new condom each time you have sex.
Kitas 1964-1970	Use a new condom each time you have sex.
Kitas 1971-1977	Use a new condom each time you have sex.
Kitas 1978-1984	Use a new condom each time you have sex.
Kitas 1985-1991	Use a new condom each time you have sex.
Kitas 1992-1998	Use a new condom each time you have sex.
Kitas 1999-2005	Use a new condom each time you have sex.
Kitas 2006-2012	Use a new condom each time you have sex.
Kitas 2013-2019	Use a new condom each time you have sex.
Kitas 2020-2026	Use a new condom each time you have sex.
Kitas 2027-2033	Use a new condom each time you have sex.
Kitas 2034-2040	Use a new condom each time you have sex.
Kitas 2041-2047	Use a new condom each time you have sex.
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Kitas 2076-2082	Use a new condom each time you have sex.
Kitas 2083-2089	Use a new condom each time you have sex.
Kitas 2090-2096	Use a new condom each time you have sex.
Kitas 2097-2103	Use a new condom each time you have sex.
Kitas 2104-2110	Use a new condom each time you have sex.
Kitas 2111-2117	Use a new condom each time you have sex.
Kitas 2118-2124	Use a new condom each time you have sex.
Kitas 2125-2131	Use a new condom each time you have sex.
Kitas 2132-2138	Use a new condom each time you have sex.
Kitas 2139-2145	Use a new condom each time you have sex.



CONDOM / EL CONDÓN (O PRESERVATIVO)



THE SHOT / LA INYECCIÓN DEPO-PROVERA



DIAPHRAGM / EL DIAFRAGMA



EMERGENCY CONTRACEPTION PILL (EC PILL) / PÍLDORAS ANTICONCEPTIVAS DE EMERGENCIA (AE)



FEMALE CONDOM / EL CONDÓN (O PRESERVATIVO) FEMENINO



PROGESTIN IMPLANT / EL IMPLANTE DE PROGESTINA



COPPER IUD / EL DIU DE COBRE

In 2012 we released a series of **13 contraception user guides** – the perfect handouts for anyone starting or switching birth control. Each birth control user guide is available in English and Spanish, provides information on what to expect, outlines how each method works and is used, answers typical questions, and troubleshoots the most common issues that come up.



PROGESTIN IUD / EL DIU DE PROGESTINA – MIRENA™, SKYLA™



PROGESTIN-ONLY / MINI-PILL / LA PÍLDORA SOLO DE PROGESTINA



THE PATCH / SOBRE EL PARCHÉ



THE PILL / SOBRE LA PÍLDORA



THE RING / SOBRE EL ANILLO



SPERMICIDE / EL ESPERMICIDA



strengthening
networks,
**DEVELOPING
LEADERS**

RHAP's Family Medicine Reproductive Health Network pulls together more than 420 family physicians in 36 states and Washington, D.C., to work together to integrate abortion into their primary care practices.



Often, the clinicians we work with are the lone prochoice voices in their communities. **Their work can be very hard.** The Network connects members with like-minded colleagues all across the country who can provide them with clinical guidance and a sympathetic ear.

Network members connect via:



The Accesslist

A **vibrant clinical listserv** that serves as the hub of Network communications. Members share information about best clinical practices in abortion and contraceptive care.



National and Regional Network meetings

We host **Network gatherings** at various national primary care and reproductive health meetings and also in areas where we have a critical mass of members.

In 2012 we hosted Network meetings in Cambridge, Cleveland, New Orleans, New York City, Seattle, and Vancouver.



Mentoring relationships

Every year we **connect newly graduated family physicians with seasoned clinicians** who are committed to offering support and guidance.

So far, we have fostered 145 mentor/mentee relationships.



Network members work together to put the American Academy of Family Physicians on record supporting contraception and abortion care.

We work with RHEDI (the Center for Reproductive Health Education in Family Medicine) to put forward these **policy initiatives** through the American Academy of Family Medicine in 2012.

2012 Policy Initiatives:

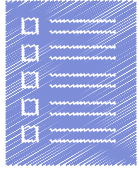
End Health Care Discrimination for Transgender People

End Age Restrictions for Emergency Contraception (EC) Access

Ensure Comprehensive and Confidential Health Care for Minors and Adults Insured as Dependents

Remove Barriers to IUD Use

Stop State Legislators from Practicing Medicine Without a License



Assessing the Impact of the Family Medicine Reproductive Health Network

We build our Network by systematically reaching out to family medicine residents training in abortion care. The residents tell us about their training and future plans, and we, in turn, share our tools and resources with them and link them to mentors who help them as they start their clinical practices.

Since 2007 we have **added more than 325 newly trained family physicians to our Network and fostered 145 mentor/mentee relationships.**

To understand the difference that our work is making, in 2012 we asked all Network members who completed their training 5 years ago to complete a short survey. We wanted to find out how their training and our efforts had affected the care they provide. Here is a summary of what we learned:

21% of the physicians we reached are **providing abortion care as part of their regular clinical practice.**

15% **work part-time in secondary jobs where they provide abortion care.**

More than one-third of the physicians provide abortion care.

70% of the physicians are **treating early pregnancy loss.** These clinicians are using their abortion skills to provide miscarriage care—even if they aren't able to provide abortion care.

100% are **offering a wide range of contraceptive options,** including IUDs, at their primary clinical sites, and

100% **offer patient-centered options counseling.**

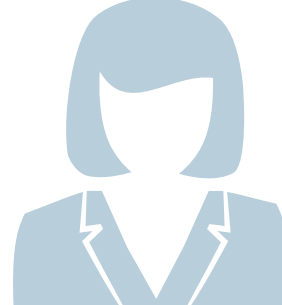
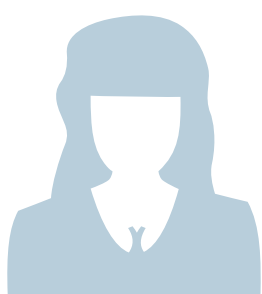
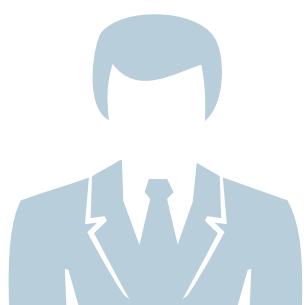
86% are **involved in clinical training.** This means that their reproductive health clinical training is being passed on to the next generation of clinicians.

80% of the respondents **received help from RHAP and the Family Medicine Reproductive Health Network.**

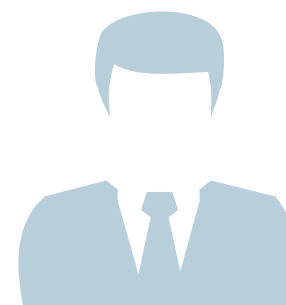
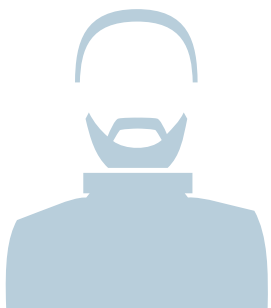
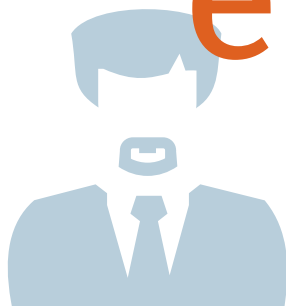
100% had used **our website, our patient education materials and clinical protocols, and educational resources** like the Contraceptive Pearls.

30% reported receiving **one-on-one support from RHAP.**

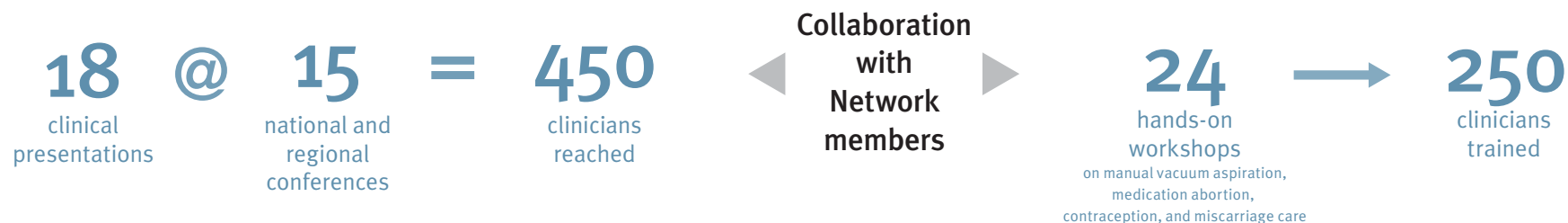
Our work is making a difference.



training and education



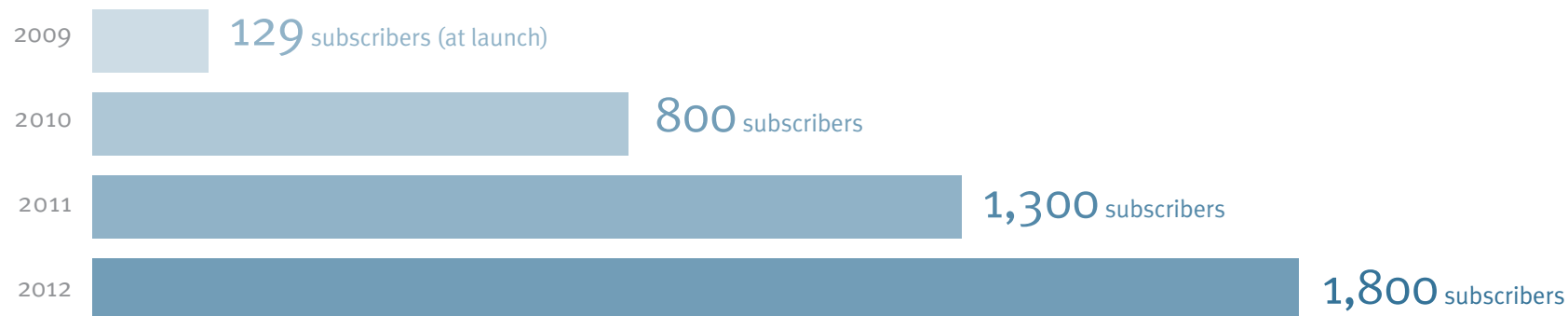
Every year we work hard to ensure that reproductive health care is well represented at primary care conferences and that a primary care perspective is represented at reproductive health conferences.



contraceptive
pearls

The Contraceptive Pearls are a monthly email publication that highlights evidence-based clinical best practices designed to improve or expand access to contraception.

2012 Topics: Diabetes and Contraception Use Contraception and the Affordable Care Act Post-Abortion Contraception The Myth of the Required Pelvic Exam Non-Pharmacologic Pain Management Breastfeeding and Birth Control Clinician Question: IUD Insertion in a Single Visit? Birth Control for Less: Low-Cost Contraception Options Estrogen Contraindications





While contraception is a core component of the family medicine model, most family physicians do not receive adequate training in all family planning methods and very few residency programs offer training in abortion care. The Fellowship in Reproductive Health Care and Advocacy **develops leaders who will promote and teach full-spectrum women's reproductive health care.**



2012 Reproductive Health and Advocacy Fellow: **Dr. Lucia McLendon**

Originally from South Carolina, Lucia joined us as a fellow upon completing the Beth Israel Residency in Urban Family Practice. As the Reproductive Health and Advocacy Fellow, Lucia spent the year developing her skills as an advocate, educator, and mentor. A strong educator, Lucia coordinated an initiative to ensure that **all 17 sites of a large community health center had someone on staff trained in providing IUD and implants.**

Lucia organized two pop-up birth control clinics:

- For the students of Fordham's Law School (who have no access to birth control via their catholic university health center or health insurance)
- For students of John Jay Community College

127 students received free birth control counseling.



A FAMILY PHYSICIAN AND A MEDICAL STUDENT LEAD A GROUP CONTRACEPTIVE COUNSELING SESSION WITH STUDENTS FROM JOHN JAY COMMUNITY COLLEGE.

The background of the image consists of numerous triangular rays of varying shades of blue, radiating outwards from a central point, creating a sunburst or starburst effect.

SPREADING
OUR
MESSAGE

The Reproductive Health Access Project is building a **movement to transform healthcare in this country so that everyone can access the care they need from the clinicians who know them best.** In order to grow the movement, we need to reach out to as many people as possible.

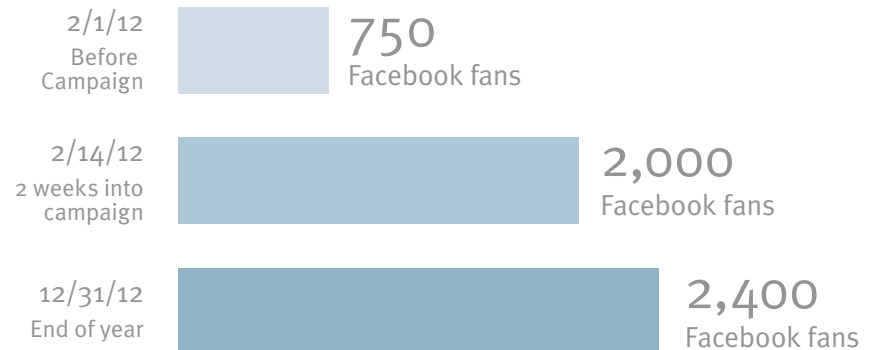
In 2012 we focused on improving our ability to tell our story and spread our message.

July 2012:
Launched our **BLOG**



RHAP now has a space to share our thoughts on policy initiatives, promote our newest resources, and share stories from the clinicians with whom we work, highlighting the patients they care for, the challenges they face, and the impact of providing contraceptive and abortion care on the communities they serve.

February 2012:
Launched our **Valentine's Day Facebook Campaign**



220% increase in social media presence

National Recognition of Our Work



The New York Times
Interview with Ruth Lesnewski, MD,
our education director
“Switching Contraceptives Effectively”
by Jane E. Brody
September 17, 2012

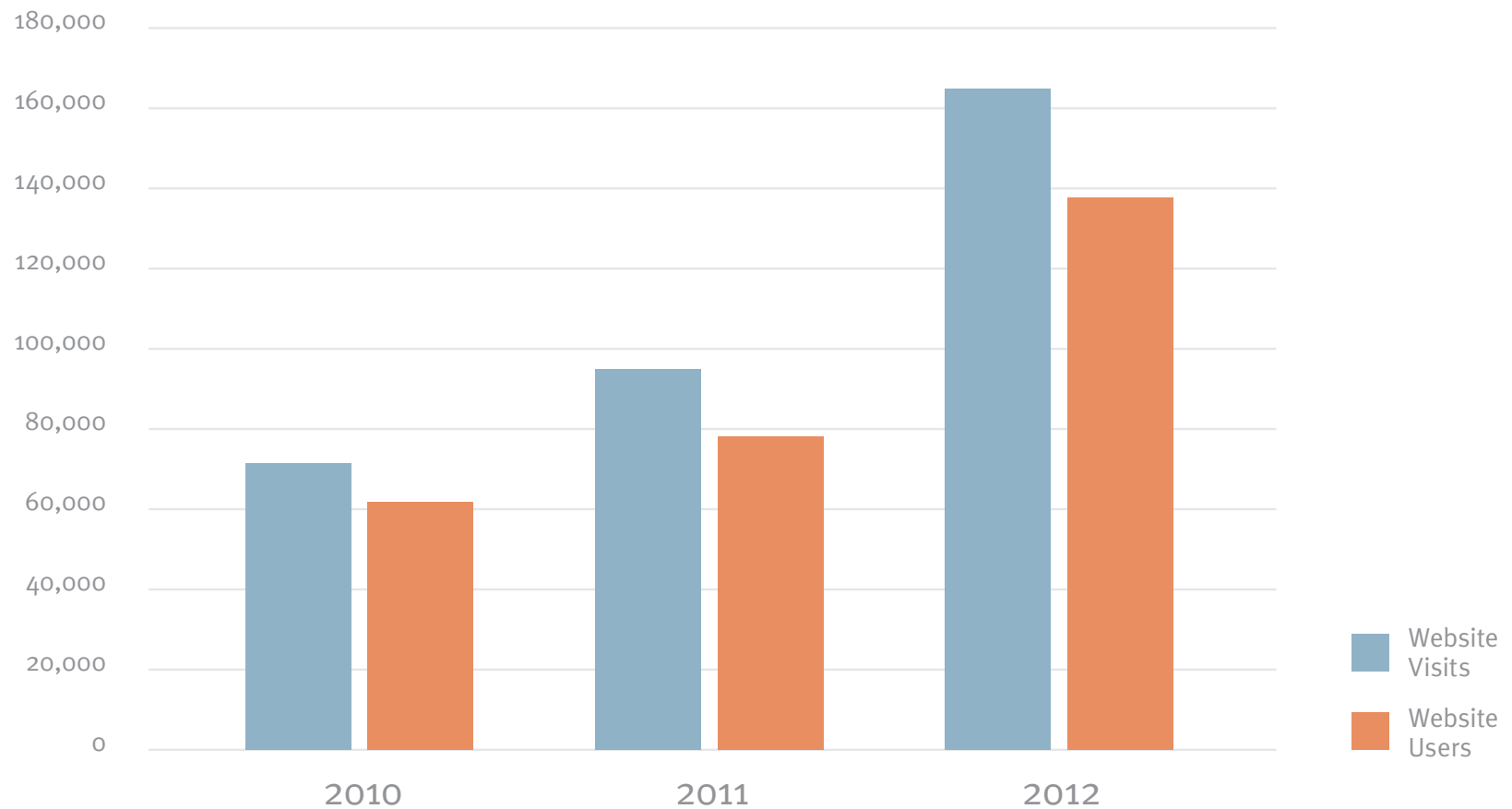


Physicians for Reproductive Health
William K. Rashbaum Award
Presented to Linda Prine, MD,
our medical director
in recognition of her career-long service
and impact on the field of abortion care.

Impact

Greater public recognition has allowed RHAP to **connect with more clinicians and supporters than ever before.**

Our website statistics illustrate our growing reach.



The background of the image consists of numerous green rays of varying lengths and widths, all originating from a central point and radiating outwards to the edges of the frame. The rays create a sunburst or starburst effect. The colors are different shades of green, ranging from a light, pale green to a slightly darker, more saturated green.

who
WE
are

Advisory Committee

Talcott Camp, JD

American Civil Liberties Union

Eric Ferrero

Planned Parenthood Federation
of America

Joshua Freeman, MD

University of Kansas, Department
of Family Medicine

Robert Gillespie

Population Communication

Rebecca Hart, JD Chair

Provide

Angela Hooton, JD

Center for Reproductive Rights

Rachel K. Jones, PhD

Guttmacher Institute

Hannah S. Kully, PhD

Virna Little, PsyD

Institute for Family Health

Jodi Magee

Physicians for Reproductive Health

Maureen Paul, MD

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Eric Schaff, MD

Temple University/Greater
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Lucia McLendon, MD

Fellow in Reproductive Health and
Advocacy

Lisa Maldonado, MA, MPH

Executive Director

Rosann Mariappuram

Communications and Fundraising
Associate

Linda Prine, MD

Medical Director

Susan Yanow, MSW

National Organizer

Mia Mattioli

Intern

Eve Peyser

Intern

Lianne Salcido

Intern

Hannah Wade

Intern



financial information

Our Funders

The Reproductive Health Access Project is supported by many generous individual donors and the following foundations:

The Anderson-Rogers Foundation

The Brack Family Foundation

The Ettinger Foundation

FJC-A Foundation of Philanthropic Funds

The Bernard and Alva Gimbel Foundation

The Glickenhau Foundation

The Lisa and Douglas Goldman Foundation

The Green Fund

The Grove Foundation

The Irving Harris Foundation

The Edward S. Moore Foundation

The Prentice Fund

The Morris Smith Foundation

The Mary Wohlford Foundation

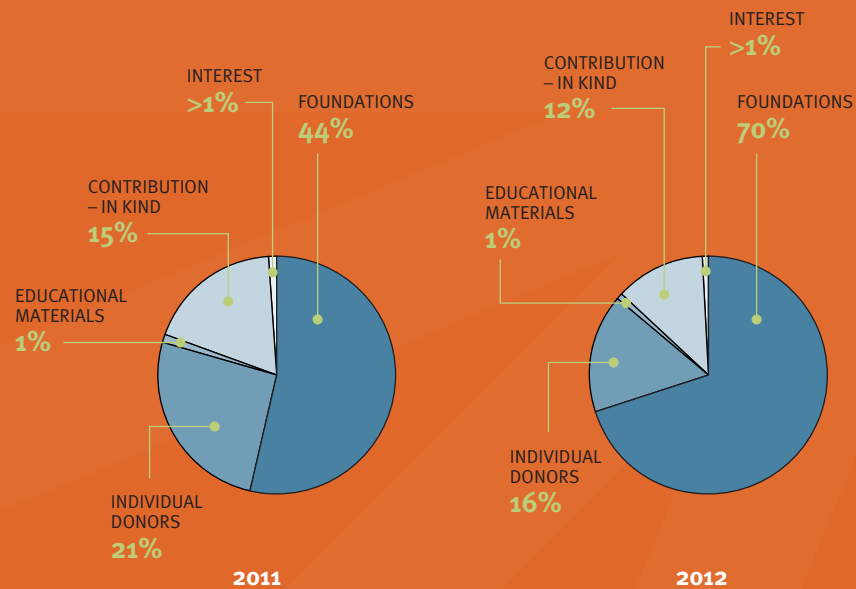
Financial Information

Fiscal Year: April 1 – March 31

INCOME

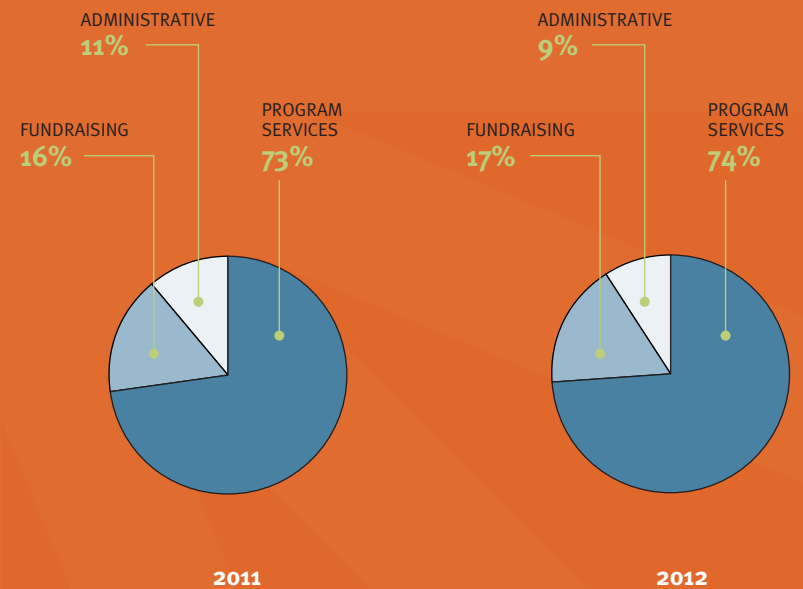
	2011	2012
Foundations	\$122,500	\$263,500
Individual Donors	\$57,132	\$61,150
Education Materials	\$2,587	\$3,941
Contribution - in kind	\$41,362	\$45,543
Interest and other income	\$385	\$502
Total Income	\$223,966	\$374,636

Net assets, beginning of year	\$175,510	\$142,510
Net assets, end of year	\$142,850	\$230,136



EXPENSES

	2011	2012
Program Services	\$186,340	\$211,862
Fundraising	\$42,162	\$48,223
Administrative	\$28,123	\$27,267
Total Expenses	\$256,625	\$287,352



* Percentages may not add up to 100 due to rounding.



reproductive
health
access
project

Integrating
contraception
and abortion into
primary care

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