

2017

femm@femmhealth.org www.femmhealth.org

FEMM completed a year of growth and development through 2017. All areas expanded, and important advances occurred in each area of our work.

Our teacher training moved fully online, allowing expansion of our reach. 120 people began our FEMM teacher training certification, compared to 53 in 2016. teenFEMM was launched in 2017 and was received enthusiastically by FEMM teachers.

Work is now underway to develop a classroom curriculum that will be tested and implemented with Brilla Prep Charter Schools in New York City, in collaboration with the World Youth Alliance and the Human Dignity Curriculum. This school-based evaluation will be completed in Spring 2018.

120
NEW TEACHERS
in training



### APP FEEDBACK

"This app is simply amazing! I wanted an app to check if my period and hormones are in check healthwise and this is the only one I found perfect. Super easy interface and all the options needed."



"I love love this app. I've learned a lot about my body and how my personal cycle works. Its much better than the others I have tried. I would highly recommend!"



## FEMM app

In July of 2017, FEMM launched the Android app, and in August the Spanish version of the app was released on both platforms (iphone and Android). **Downloads rose to 360k at the end of 2017, over 53k to start the year.** 



"Very informative. I look forward to using it everyday. A lot of things I don't understand about my body and it explains. Love it."

- Roxan Bennett I FEMM User





#### Research

The Reproductive Health Research Institute (RHRI), collaborated with FEMM in the training of doctors and published six articles in peer-reviewed journals. These article abstracts are available online at www.femmhealth.org.

- Ovulation, a sign of health (The Linacre Quarterly)
- ► Hormonal abnormalities in patients with ovulatory dysfunction are associated with changes in mood states, IV Edition (International workshop in Neuroendocrinology)
- New challenges in monitoring fertility (Frontiers in Medicine)



- ► Insulin sensitivity and testicular function in a cohort of adult males suspected of being insulin-resistant (Frontiers in Public Health)
- ► Steroid hormones and the action in women's brain (Frontiers in Public Health)
- ► The sperm journey from the cervix to the site of fertilization: a predetermined encounter (Imago Homini)

#### **Profiles**



#### **Dr. Timothy Flanigan**

Dr. Flanigan is the Chief of the Division of Infectious Diseases at The Miriam Hospitals and Brown Medical School in Rhode Island, USA. He arrived at Brown in 1991 to help establish a network of primary care for HIV-infected individuals with a particular focus on women, substance abusers, and individuals leaving prison. Dr. Flanigan developed the HIV Core Program at the Rhode Island State Prison to provide care for HIV-infected individuals and link them to community-based resources upon release. Dr. Flanigan has been the principal director of The Miriam/Brown AIDS Clinical Trials Unit to develop more effective therapies for the treatment of HIV. He is also associate director of The Miriam/Brown Fogarty Program, which trains and mentors overseas investigators in HIV & AIDS.

Because of his dedicated work focusing on the importance of routine testing for HIV in underserved communities and his development of outstanding primary care for these patients, he was the recipient of a community health leadership award from The Robert Wood Johnson Foundation. In 2005, he received an honorary doctorate from Salve Regina University in the United States for his support of educational opportunities for children of incarcerated parents. Dr. Flanigan currently serves on the Executive Board of the World Youth Alliance and is an advisor for WYA projects on HIV/AIDS. Dr. Tim Flanigan is the Chair of the FEMM Board of Directors.





I'm from Columbus, Ohio, originally, and returned to work here after medical school; I've been a doctor since 2007. I am married and have three little boys. I wanted to practice medicine so I could help people live their lives by first returning to good health.

Fertility awareness models are the key to preventative medicine because they get to the heart of the problem. It's interesting that contraceptives have been lumped into "preventative medicine." What are they doing to prevent illness and promote health in the case of most young, healthy women who just want to prevent pregnancy? It seems from reading their side effect profiles that they are causing illness and degrading health. I was surprised to learn that most women stop using different forms of contraception because of side effects. What a great alternative to have a model that is free of side effects and is helpful in diagnosing a variety of health problems.

In a time when women are focused on making healthy choices in so many other areas of their lives (organic foods, exercise, healthy relationships, skin cancer prevention, environmental concerns, etc.), it only makes sense to apply that to their bodies and what they are putting in them from a family planning perspective.

## **Board Members**

- Tim Flanigan Chair
- Sean Fieler
- Ellen Roy
- Dr. Bob Scanlon
- Anna Halpine (ex-officio)

# **Finances**

Income		Expenses			
Contributions	\$618,653	Program & Supporting	\$811,587	Change in Net Assets	\$77,440
Program Revenue	\$115,495	Services		Net Assets (Start of Year)	\$53,023
Total Income	\$734,147	Total Expenses	\$811,587	Net Assets (End of Year)	\$24,418

