

strategic plan

2018-2023



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introduction

The global community has yet to achieve universal access to high quality reproductive and maternal health care despite numerous commitments, including the International Conference on Population and Development, the Millennium Development Goals, and the Sustainable Development Goals. Gynuity recognizes that many forces alter the landscape of current and future needs: global and regional demographic change, patterns of health system use and service availability, as well as barriers to access that inhibit women and girls from exercising autonomy over their reproductive lives. It is with these challenges in mind that we have developed this new Strategic Plan.

Since our inception, Gynuity Health Projects has been devoted to ensuring access to the full range of sexual and reproductive health services in settings where they are least available. Our overarching goal, at the heart of all our work, is to make safe, effective reproductive and maternal health care accessible to all women and girls. To achieve this goal, we focus on simple, cost-effective and sustainable tools and technologies and their position within health care systems.

1. In this document we use the term “women and girls” to define the beneficiaries of the services, tools, and health strategies for which we advocate. We realize that these terms are not always sufficiently inclusive; in this document we include all persons across the gender spectrum who might benefit from these services/tools/strategies, including transgender, non-binary, and other identifying individuals.

A woman-centered approach is fundamental to the design of our research, implementation, and policy-oriented work. Our leadership and achievements are exemplified by our success in using evidence to shift global dialogue and norms to create better care for all individuals. A map showing where we have worked can be found on our website at <http://gynuity.org/locations/>.

2018 through 2023. While our past work has focused primarily on medical abortion, postpartum hemorrhage and hypertension in pregnancy, in the coming years, we intend to grow this work while also expanding our influence in the field of contraception. Because the time of birth is critical for both infant and mother, we will also pay more attention to interventions that address newborn health.

This Strategic Plan has been developed to shape and guide Gynuity's work from

SUCCESS STORY

problem

Medical abortion approved, but number of visits and procedures too cumbersome

solution

Identify barriers and demonstrate through research that services are overly medicalized and inhibit woman-centered care

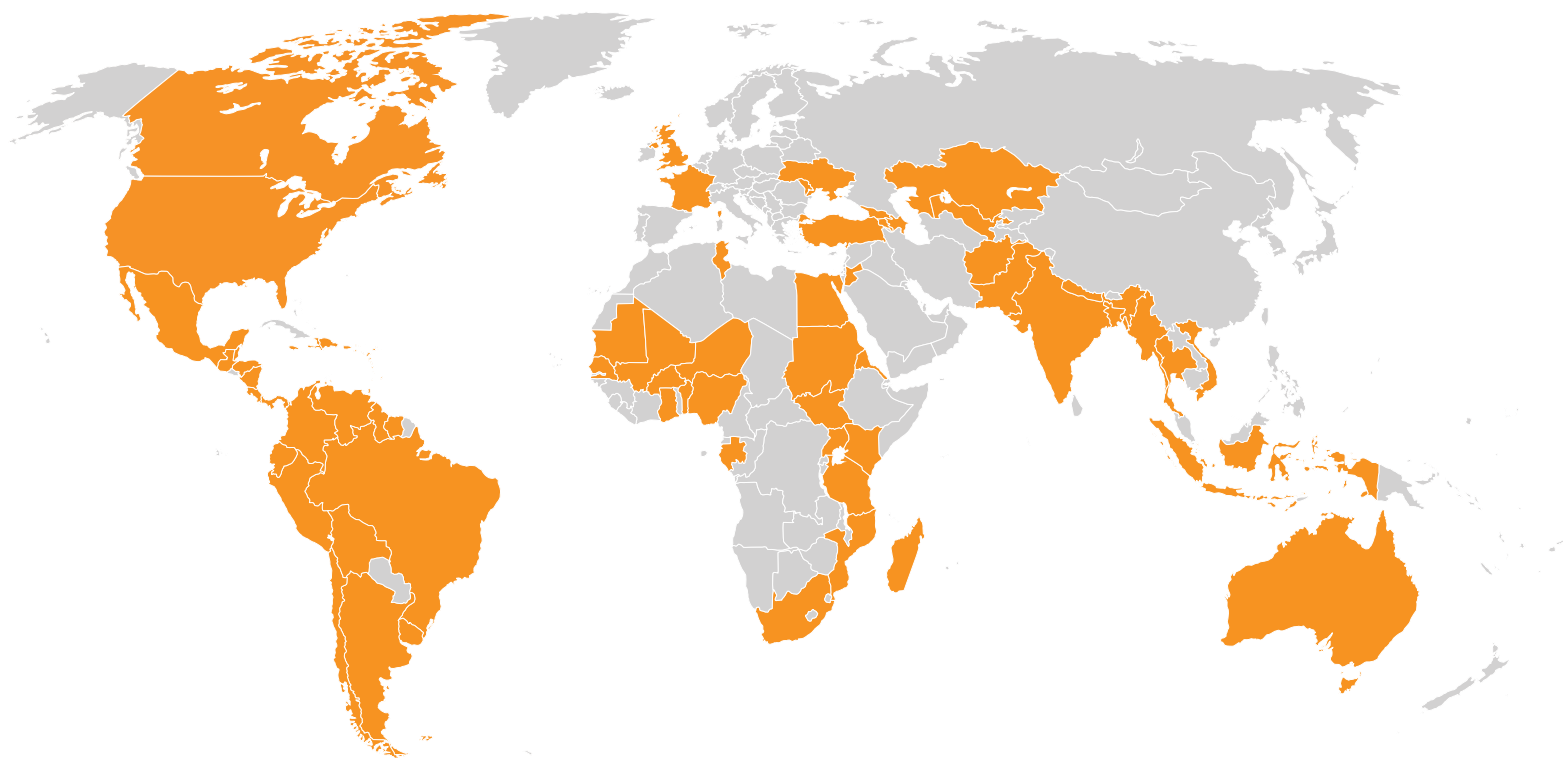
concrete actions

- ✚ Completed research to show mifepristone and misoprostol can be self-administered at home
- ✚ Demonstrated that gestational age can be extended, enabling more people to use the method on an outpatient basis
- ✚ Documented ways, including self-assessment and follow-up with a multi-level pregnancy test, to reduce clinic visits and confirm abortion outcome at home
- ✚ Shared evidence with policymakers and providers to influence practice and guidelines

“They are unique: I’ve never come across such a combination of passionate advocates who are also methodologically knowledgeable researchers.” **Public Health Stakeholder**



places we've worked



Afghanistan
Argentina
Armenia
Australia
Azerbaijan
Bangladesh
Barbados
Belize
Benin
Bolivia
Brazil
Burkina Faso
Canada
Chile
Colombia
Costa Rica
Dominican Republic

Ecuador
Egypt
Eritrea
France
Gabon
Georgia
Ghana
Guatemala
Guyana
Haiti
Honduras
India
Indonesia
Jamaica
Jordan
Kazakhstan
Kenya

Madagascar
Mauritania
Mexico
Moldova
Mozambique
Myanmar
Nepal
Nicaragua
Niger
Nigeria
Pakistan
Panama
Peru
Puerto Rico
Senegal
Singapore
St. Lucia

Sudan
Suriname
Tanzania
Trinidad and Tobago
Tunisia
Turkey
Uganda
Ukraine
United Kingdom
United States of America
Uruguay
Uzbekistan
Venezuela
Vietnam



vision, mission, and approach

Gynuity began in 2003 with a small team willing to take risks on the frontiers of reproductive and maternal health by using science as a tool to make services more accessible, of higher quality, and easier to use. That same maverick spirit lives on today in our multi-lingual staff and expert consultants who have stayed true to our original vision and mission. We have developed a core approach for our work that is adaptable to local needs and circumstances.

vision

A world in which each individual has access to safe and effective reproductive and maternal health care—delivered where, when, and how needed.

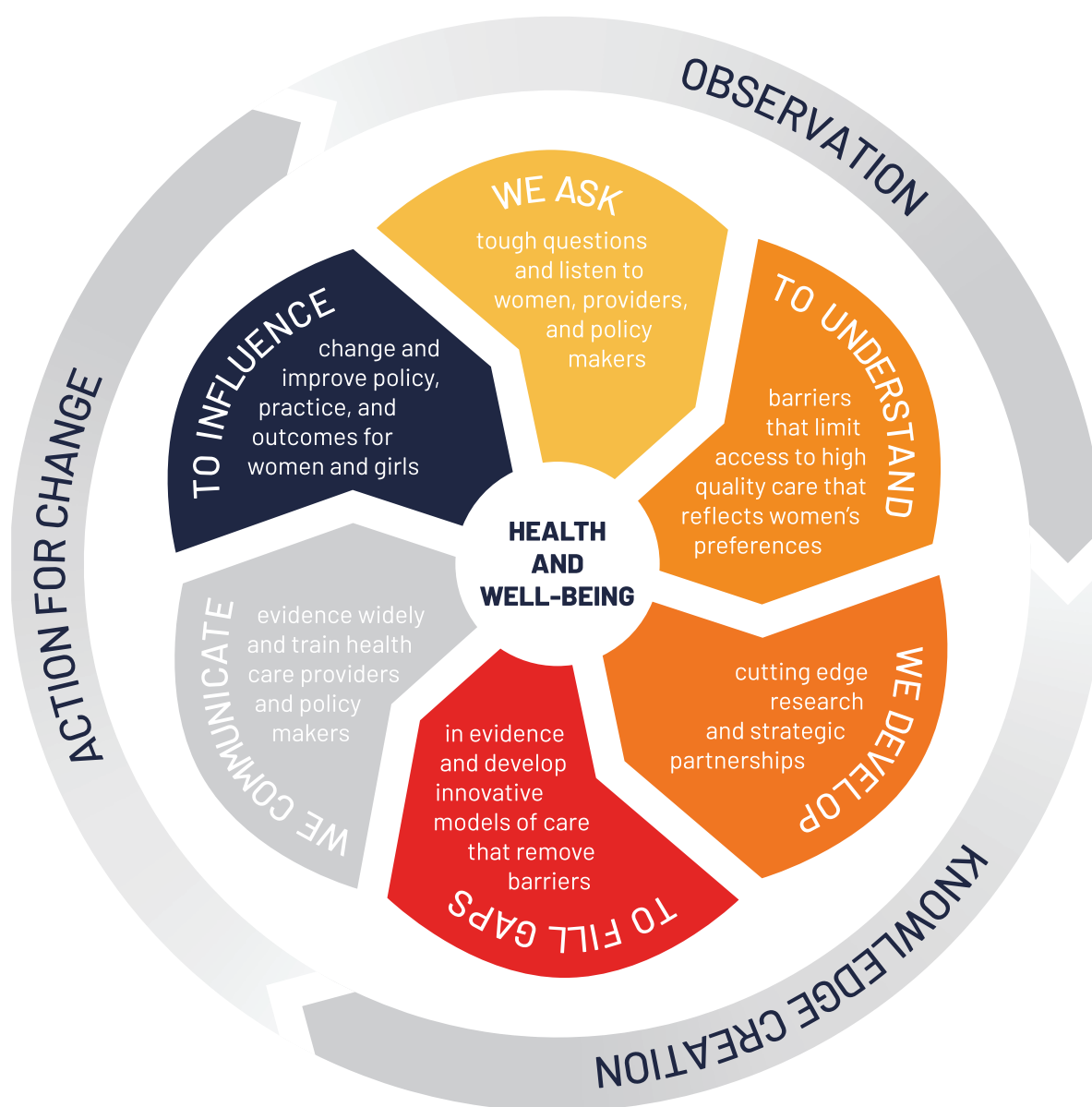
mission

To develop and advocate for the use of scientific, clinical and programmatic evidence in reproductive and maternal health, assuring that each individual benefits from the fruits of medical science and technology.

approach

Gynuity's approach starts at the community level where we listen to women, providers and policymakers, and work with them to create services that are safe, of high quality and more person-centered. Through conversations and active collaborations with partners on-the-ground, we fill evidence gaps by using basic science research, clinical research, implementation research to achieve proof of concept for new models of care. We use this information to influence change and advocate for improvements in policy and practice.

Collaboration with a range of partners is integral to our model of work. We engage with Ministries of Health, community-based organizations, hospitals and clinic/hospital networks, social marketing organizations, universities, pharmaceutical entities, global norm-setting bodies (such as the WHO and FIGO), research organizations and independent providers and advocates. Our small size enables us to be nimble and unconstrained in terms of the types of partnerships we develop and has enabled us to have a relatively large impact at the field level.



at Gynuity, we:

Take risks in all areas of our work, including the topics we study, our partnerships and where we work.

Advocate with a diverse set of partners and policymakers to advance new evidence-based protocols, clinical care guidelines, standards of care, and interventions.

Use evidence to challenge the status quo by creating progressive, person-centered models of care; by helping to reshape clinical guidelines; and by advocating for policy and practice changes at the local, regional, national and international levels.

Use our voice to tackle difficult issues, promote new ideas and influence change.

Train and provide high-quality technical assistance to providers, governments and health care systems so that they can incorporate new knowledge into policy and practice.

Employ clear and effective communications tools, including publications, presentations, and social media to share our research and programmatic findings with providers, policymakers and program implementers.

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achievements

In our more than 15 years on the frontiers of reproductive and maternal health across the globe, including in low resource settings, Gynuity has:

Expanded use of medical abortion pills

Completed seminal clinical research demonstrating that medical abortion pills (mifepristone and misoprostol) are safe, effective and desirable to women, which ultimately paved the way for greater access to care in, for example, Bangladesh, Mexico, Tunisia, the United States and Uzbekistan

Translated science into clinical policy

Conducted implementation research and translated findings into professional guidelines later adopted by FIGO, WHO and national Ministries of Health promoting new models of care, such as task sharing for first—and second-trimester medical abortion and for the management of postpartum hemorrhage

Informed drug registration processes

Provided critical clinical data for applications to regulatory agencies around the globe, enabling commercial entities to register and label medicines for reproductive and maternal health uses. For example, we provided data to support Health Canada's registration of mifepristone and the U.S. FDA's decision to expand outpatient medical abortion through 70 days gestational age

Conducted seminal research on misoprostol for postpartum hemorrhage

Conceived and implemented large-scale clinical and community-based research demonstrating that misoprostol, a pill that can be used to prevent blood loss at delivery and immediately after delivery, is as safe and effective as oxytocin for these purposes

Developed innovative medical abortion telemedicine service delivery model

Created the TelAbortion Project—the United States’ first direct-to-patient telemedicine abortion

service enabling women in some states to access medical abortion without going to an abortion clinic

Studied and promoted low-tech non-surgical postabortion care

Filled critical evidence gaps to demonstrate that misoprostol—a simple, widely available pill—can replace surgery for postabortion care (e.g. spontaneous miscarriage, incomplete abortion or postabortion complications)

Advocated for access to essential medicines

Applied for and obtained World Health Organization’s Essential Medicines List

(EML) approvals for three misoprostol indications: incomplete abortion, postpartum hemorrhage prevention and postpartum hemorrhage treatment

Evaluated low-tech screening, diagnostic and treatment tools

Developed evidence to understand the role of promising low-tech screening, diagnostic and treatment tools, including at home urine multi-level pregnancy tests for medical abortion follow-up; the Congo Red Dot point-of-care test, developed to screen for pre-eclampsia; and use of uterine balloon tamponade (UBT) for managing uncontrolled PPH

“There’s a commitment to their mission of changing health outcomes for women in low-income countries that overrides everything. They have this ability to look for small incremental answers to large problems.”

Public Health Stakeholder



Simplified care for hypertension in pregnancy

Generated evidence for simpler ways to treat severe hypertension in pregnancy by demonstrating a safe and effective role for oral anti-hypertensive drugs that may allow treatment in settings where IV administration and careful fetal monitoring are not possible

Increased contraceptive access after medical abortion

Demonstrated that contraceptive injectables and implants can be “quickstarted” at the initial medical abortion visit, eliminating the need for a return visit and reducing exposure to unwanted pregnancy

Filled evidence gaps about safety of mifepristone

Generated evidence to respond to concerns about the safety of mifepristone medical abortion following a series of fatal clostridia bacterial infections, which showed that presence of clostridia bacteria is rare

and transient in the vagina and rectum, and risk of infection is not increased due to medical abortion

Convened and coordinated advocacy actions to protect mifepristone in the U.S.

Established the Mifepristone Coalition bringing together more than 150 organizations and 360 individuals to increase mifepristone medical abortion access in the U.S. We heightened awareness of the U.S. FDA’s REMS (Risk Evaluation and Mitigation Strategy) and the barriers it creates for access

Produced materials for health programs and research communities

Produced scientific and user-focused materials available in more than a dozen languages to support country programs globally, including an image bank with pictorials for trainings and research

Lists of our publications and previous awards can be found on our website www.gynuity.org/resources.

SUCCESS STORY

problem

Women die every day due to postpartum hemorrhage because of poor quality of care and limited tools/options for managing PPH in resource-constrained settings

solution

Test simple technologies and interventions that can be used by providers (including community providers and/or women themselves) to prevent and treat PPH

concrete actions

- + Documented safety and effectiveness of technologies (e.g. misoprostol, use of uterine balloon tamponade, oral tranexamic acid) for PPH
- + Developed and tested solutions to facilitate timely diagnosis and management of PPH care
- + Collaborated with global stakeholders, including providers and policymakers, to facilitate uptake of new evidence into guidelines and practice

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strategic goals, priorities and strategies

Gynuity's Strategic Plan 2018-2023 is focused on a set of four interconnected Strategic Goals. Strategic Goals 1, 2, and 3 are in the service of meeting our overarching goal of influencing policy and practice in line with our vision. Strategic Goal 4 outlines efforts to make a stronger and more effective organization to achieve our programmatic aims.



Conduct research at the frontiers of reproductive and maternal health



Influence policy and practice



Strengthen communications for impact



Strengthen and advance our organization

STRATEGIC GOAL

I

Conduct research at the frontiers of reproductive and maternal health

Leverage our research and policy work to simplify practices and policies for providing contraception, abortion, and maternal and newborn health

Women and girls around the world lack access to low-cost, easy-to-deliver medicines and tools that can improve the safety and quality of maternal and reproductive health services. Evidence is needed to demonstrate that simple, safe and effective reproductive and maternal health technologies have the power to transform lives and improve outcomes for women and girls in hard-to-reach settings, including those living in remote or sparsely populated areas and in humanitarian settings. Each project we develop starts with practical questions derived from extensive experience and close observation of a wide variety of services and the most recent international dialogue. Together with our partners, we demonstrate in a rigorous manner that some service delivery

policies and practices make access to services unduly burdensome for women and girls. We believe that if we harness the power of establishment tools (in this case, scientific evidence and understanding), share our findings in reputable scientific journals, and collaborate with thought-leaders (including physicians, international policymakers, and advocacy and service delivery organizations), we can create a path for more effective, more efficient and, ultimately, better services. While much progress has been made, more is needed to improve access to and the quality of services and to make pregnancy and childbirth safer and more compatible with individual choices and desire for autonomy. In Strategic Goal 1, we outline how we plan to move the needle on these issues.

PRIORITY 1.

Improve access to high-quality, simplified safe medical abortion

STRATEGY

a

Support streamlined medical abortion through clinical and implementation research addressing issues that may pose unnecessary barriers to services

STRATEGY

b

Develop and document models of medical abortion service delivery through implementation research that promotes task sharing using non-physician providers

STRATEGY
c

Demonstrate that abortion medicines can be safely and effectively provided through telemedicine, pharmacies, and/or over-the-counter models of care

STRATEGY
d

Develop easy-to-use screening and diagnostic tools to enable women and girls to use medical abortion more easily and autonomously

STRATEGY
e

Conduct clinical research to develop new abortion medications

PRIORITY 2.

Enhance access to a range of contraceptive services

STRATEGY
a

Develop and pilot scalable models of care that enable all women and girls who desire a contraceptive method after abortion to receive one at the primary abortion visit

STRATEGY
b

Conduct qualitative and quantitative research to demonstrate that many methods of contraception can be made available over-the-counter

STRATEGY
c

Evaluate the efficacy, safety, and acceptability of pericoital oral contraceptives (PCOC) using both clinical and implementation research

PRIORITY 3.

Strengthen access to high quality maternal and newborn health care

STRATEGY
a

Conduct clinical and implementation research on promising technologies to promote new models of management for post-partum hemorrhage with focus on low resource environments and empowering women and girls



STRATEGIC
GOAL
I

STRATEGY
b

Develop new and adapt existing program and training tools to expand capacity of birth companions and providers for timely recognition and prompt treatment of postpartum hemorrhage

STRATEGY
c

Develop tools to improve timely recognition, prompt treatment and effective management of preeclampsia, eclampsia and other hypertensive disorders of pregnancy

STRATEGY
d

Promote inclusion of evidence-based interventions for task sharing and self-management

PRIORITY 4.

Leverage our institutional relationships to generate debate, foster creative thinking and provide learning opportunities to reduce maternal morbidity and mortality

STRATEGY
a

Actively seek out collaborations with implementing, policy-focused and advocacy organizations representing different areas of expertise to explore ways to bring our knowledge together to create, pilot and introduce comprehensive reproductive and maternal health programs

STRATEGY
b

Present new ideas and research to decision makers at advisory and educational briefings for advocates, media, and donors

STRATEGIC GOAL

II

Influence policy and practice

Develop research, advocacy and training to inform reproductive and maternal health service delivery and policy in concert with existing and new partners

We understand that it is critical to take research and use it to influence policy change. We do this by speaking at professional conferences, hosting convenings and publishing our work. We collaborate with a range of partners—at the international and national levels and

locally, on-the-ground, in communities—to create the synergies necessary to trigger change in policy and practice. Partnerships have always been essential to this effort, but even more so given the ambitious nature of our strategic plan.

PRIORITY 1.

Engage strategically with key international stakeholders, national partners, commercial entities, and program implementers to foster a more favorable environment for evidence-based decision-making, clinical guideline development and program implementation

STRATEGY

a

Foster stronger dialogue around evidence-based reproductive and maternal health by convening and participating in stakeholder meetings and high-level policy discussions

STRATEGY

b

Provide technical support to key local and international stakeholders to monitor, evaluate and improve the quality of reproductive and maternal health services; including conducting constructive evaluations of field programs

STRATEGY

c

Provide leadership and/or actively participate in strategic coalitions (e.g., Mifepristone Coalition, Reproductive Health Supplies Coalition [RHSC], Abortion and Post Abortion Care Consortium [APACC] and the Oral Contraceptives Over-the-Counter [OC OTC] working group)

STRATEGY

d

Create relationships with commercial entities to identify new technologies, test them and evaluate their potential role in reproductive and maternal health programs

PRIORITY 2.

Expand partnerships with advocacy and program organizations to develop evidence-to-practice changes

STRATEGY
a Engage more deeply with other agencies in the reproductive and maternal health fields to share our research and programmatic findings so that they may be used to influence policy and practice on-the-ground

STRATEGY
b Develop and foster new collaborations with agencies and advocates focused on improving the reproductive and maternal health outcomes of at-risk populations in the U.S. and globally, including Native Americans, incarcerated people, migrants, low-income communities and other marginalized groups

STRATEGY
c Ensure implementation of new findings by developing and implementing training and educational activities focused on providers, policymakers and women's health advocates



"Gynuity has always been punching above its weight. The staff is relatively small but so lean, efficient and hardworking they've been able to accomplish great things over the short term."

Public Health Stakeholder

STRATEGIC
GOAL

III

Strengthen communications for impact

Translate our research and programmatic findings into compelling resources to impact policy and practice at global, national, and local levels

We recognize that strategic communications are critical to increase the impact of our research and programmatic findings. While strengthening our use of traditional methods, we are also using a range of digital communications channels to communicate more actively

and frequently with our target audiences and amplify our organizational voice to influence policy and practice. To achieve this goal, we will bolster our internal communications capacities and increase our communications partnerships.

PRIORITY 1.

Use strategic communications to position Gynuity as an accessible, credible source for the latest clinical and programmatic evidence on reproductive and maternal health

STRATEGY

a

Focus on the information needs of our core target audiences so we can share, in a tailored and timely fashion, our latest knowledge

STRATEGY

b

Develop, adapt and share educational tools and materials to ensure that clinical and programmatic evidence reaches providers and policymakers to inform best practices globally

STRATEGY

c

Develop new materials and adapt existing ones to share health information with key target audiences, including resources to empower women and girls with a focus on low resource and low-literacy settings

PRIORITY 2.

Grow the base of partners and supporters with whom we communicate and engage

STRATEGY

a

Revamp our website to make Gynuity's extensive collection of resources, particularly our most recent research and image bank, more easily accessible, engaging, and useful to our target audiences

STRATEGY

b

Use various digital communications channels to reach a broader range of audiences, leveraging our findings for policy and practice change

STRATEGIC
GOAL
IV

Strengthen and advance our organization

Continue to grow and evolve as a financially healthy organization by diversifying funding, improving internal communications, and supporting staff leadership and development

We are committed to growing and evolving as a financially healthy organization. To achieve this, we plan to improve our external funding opportunities and our

internal operations and structure to foster a creative and collaborative working environment for all Gynuity staff.

PRIORITY 1.

Sustain financial health

STRATEGY a	Expand and diversify our funding base among institutional and individual donors
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STRATEGY b	Explore and/or transition into an expanded organizational structure that increases our fundraising opportunities and capacity
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PRIORITY 2.

Improve internal communications, and support staff leadership and development

STRATEGY a	Improve and expand internal communications and staff knowledge of all of Gynuity's program areas
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STRATEGY b	Create a short- and long-term succession plan for organizational leadership and management
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STRATEGY c	Support staff in professional development opportunities and offer benefits in line with our mission
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assessing progress

We recognize the importance of monitoring progress towards implementation of this Strategic Plan.

We will create an annual operational plan that identifies areas for focus each year and define a set of actions to take to achieve each of our strategic goals. The senior leadership team meets on a quarterly basis to assess our progress and fundraising strategy. The entire staff gathers as a team twice a year to deliberate and reflect on what has been achieved, what is working well and what is working less well, and to identify ways to achieve even more in the next year.

conclusion

We have learned that change is possible, but it takes time. We are extremely proud of the significant contributions our small but nimble organization has made in reproductive and maternal health services around the globe. We look forward to using this Strategic Plan as a guiding document as we continue to grow as an organization and make even further significant improvement in the ways individuals can manage their reproductive lives.





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