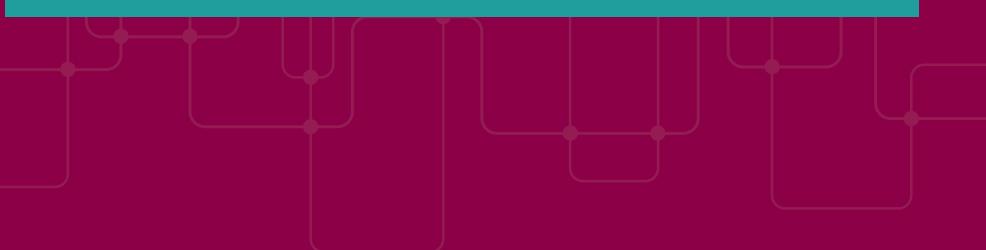


## Over 1,500 providers trained

Provide's Referrals Initiative has trained 1,346 sites through a total of 828 trainings, reaching 9,951 participants over the course of seven program years. In 2019, Provide trained 1,740 participants from 253 sites at 146 trainings.



## In 2019:

After training, **3 out of 4** participants who previously did not refer for abortion indicated that **in the future, they will refer for abortion when their client requests it**.



# of sites that made site change

Approximately **1/2** of all participants interviewed named at least one way they had **shared info from the training**.

94% were "very satisfied" with the way topics were addressed 95% were "very satisfied" with the information provided by the presenters 95% were "very satisfied" with the teaching methods and activities

The percentage of participants who reported being "not satisfied" was approximately 1% on all measures.

### $\bigcirc \bullet \bigcirc \bullet \bullet$

## Stepping into the Future Letter from ED and Board President

In 2019 Provide transformed with a deeper knowledge in bringing abortion referrals trainings to healthcare and social service providers, as well as a significant shift in organizational leadership. We bade farewell to Melanie Zurek, who led Provide for 15 years, and welcomed our new Executive Director, Fatimah Gifford, in August.

Provide remains excited to build, expand and strengthen our collaboration with community partners that ultimately will increase access to safe abortion for all. Our Training-of-Trainers (ToT) pilot program has successfully trained sites on our abortion referrals curriculum. The Nebraska Coalition Against Sexual Assault and Domestic Violence recently completed our ToT pilot program, which has resulted in their coalition training several staff throughout the state, as well as an additional six sites scheduled for 2020 and integrative technical assistance support to sexual and domestic violence staff in 20 community-based programs across Nebraska.

We are committed to building a robust organization that has a staff that is representative of the communities we serve. As a fully remote organization, we are on the ground and anchored in all our program states. Our organizational values include building a diverse infrastructure that engages new leadership to foster innovative outcomes that will continue to impact our communities throughout the South and Midwest. **We see you**. As access to abortion care in the South and Midwest continues to be at risk due to incessant political attacks, our work to **build a stronger system of care** for people experiencing unintended pregnancy perseveres through our programming, rigorous evaluation and newly developed technical assistance strategies. **We remain resilient, adaptive and positioned to pivot amidst any challenges that threaten the communities we serve.** Our work is instrumental in long-term institutional change as it better equips front-line workers to provide comprehensive, accurate information about abortion. **We hear you.** 

As we honor Provide's past accomplishments and move into a new era of innovation, collaboration, and expansion of our support network, *we persist* in our unwavering commitment to healthcare and social service providers, to their patients and clients, to our work in the South and Midwest, and to the profound impact that we all can make. **We appreciate you.** 

In solidarity,

Fatimah Gifford, Executive Director

Kuth e

Katherine Bourne, Board President

## Our Values



**Together,** we are transforming healthcare.

## Connect the Dots

Nearly half of all pregnancies in the United States are unintended. Abortion is an incredibly common health care need. According to the latest data, nearly 1 million people obtain an abortion each year. In the clinical sense, the delivery of abortion services is not complicated. Yet for many, diminishing availability of abortion care can make locating abortion services difficult, and for some, put it completely out of reach with lifelong impact.

Health and social service providers play a vital role connecting patients and clients to the care they need. Provide is a nonprofit that works in partnership with these professionals and their agencies to respond more comprehensively to patients and clients who experience unintended pregnancy. We offer CEU-eligible professional development training and technical assistance on non-directive pregnancy options counseling and how to give accurate, informed, and non-judgmental referrals for unintended pregnancy and abortion care.

Our success lies in our connection to you. By opening your doors, committing your resources and time, and bringing your unique knowledge of your clients and practices, we have successfully partnered to build a stronger system of care. Your Team + Our Resources = Meeting the needs of the whole person

## What Participants Are Saying About Us

### Survey and interview responses from 2019



"It really opened space for people who have never talked about abortion or have never talked about reproductive rights or justice, or why that's important to the work that they're doing—in a way that can feel less personal and less political. They were really able to maintain patience front and center of all of that, and kind of de-stigmatize a lot of the thoughts and stereotypes around abortion in general." ~ Medical Student, Louisiana



"This training opened me up to the ideas behind abortion and other referrals. It caused me to be more understanding of the fact that no one can say what they would do in a given situation until they experience that situation, and the population we serve is very diverse and large, meaning my personal morals and values may clash with a client's at some point. It is at that point that it is my responsibility to continue to serve a client and respect their autonomy." ~ Case Manager, Kentucky

## Tools & Resources

"I learned about resources that I didn't know existed. It's one thing to have what you already know reinforced, it's another thing when you find something new out that is actually exciting and makes you feel better about the resources that you can provide."

~ Domestic Violence/Sexual Assault Victim Advocate, Alabama

96% agreed by the end of the training that "I have the skills and information I need to effectively refer a client with an unintended pregnancy for pregnancy termination if she requests it."

96% agreed by the end of the training that "I have the skills and information I need to effectively counsel a client with an unintended pregnancy on all her options."

## How have training participants applied the knowledge and skills learned in our training?



"I engaged in active listening when a teenage client and her mother were talking about the teenager's unintended pregnancy and how they planned to proceed with it. They said they didn't know if they were considering abortion, adoption or keeping the baby because they were still so shocked that the pregnancy had occurred. I allowed them to mention the options that they were considering (or not considering in this case) rather than suggesting anything, then said that I have resources and information on any of the different options that they had mentioned if they would like to have them so they could consider everything when they were in a better frame of mind."

~ Domestic Violence Advocate, South Carolina

"A client needed information on where to seek an abortion and only because of this training did I have any idea of where to refer her." ~ Substance Use RN, Alabama



"I've helped two clients access abortion care. I don't immediately congratulate someone who is pregnant, I ask them how they are feeling first. I have used the tri-fold brochure to facilitate a conversation with multiple clients. We have Provide laminated sheets in shared bathrooms in our emergency shelter." ~ Domestic Violence Advocate, Oklahoma

# Increased Capacity

288 sites received Technical Assistance from Provide in 2019, through a total of 508 interactions.

111 sites made site change in 2019, a 44% increase from 2018.



### workplaces improved **Policies and Protocols**

general, evaluation, and personnel policy changes; protocol for counseling/ referral

workplaces increased Staff Capacity

abortion info, pregnancy packet, contraception info, abortion myths, systemspecific info, intake form changes, phone script changes, regular trainings for staff and volunteers



#### workplaces increased Patient Access

handouts, posters, contraception info, patient's bill of rights, system-specific info, website changes

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Site change is significant because the support systems we work with are often strained for capacity and resources, and they have high staff turnover (average of 20% per year). So, for us to build on the momentum we generate in a training and make it sustainable, we need to make those deeper-level institutional changes to *Policies and Protocols* and *Staff Capacity*. It's not enough to just give clients brochures (*Patient Access*), which can be removed easily; we also need to help our sites create a culture and policies to fall back on, give them cover, something in writing to refer to that carries over even when staff or leadership change.

One thing that is vital and often overlooked, is how the process of developing a *Policy or Protocol* or making a *Staff Capacity* change usually requires the staff coming together to discuss it, air concerns, and get everyone on board. We often hear from sites that it brings everyone together, de-stigmatizing the workplace around abortion.

## Impact

### Social & Cultural Impact

- 73% of participants in 2019 who previously did not refer for abortion left the training intending to do so in the future.
- Approximately half of all participants interviewed in 2019 were able to name at least one way they had shared information from the training.

"I discuss abortion with friends, family, coworkers - anyone I interact with frequently and I am certain my trainings with Provide have greatly added to and influenced my discussions."

~ Social Worker, Alabama



### **Client-level Impact**

- Clients whose providers mentioned abortion as an option were significantly more likely to recommend the clinic to a friend than clients whose providers did not discuss abortion, even among clients who planned to continue their pregnancy.
- Clients of trained providers were 33% less likely to have left the clinic with unmet need for abortion referral.

### **Provider Practice Impact**

New data from our Client Study found that our Referrals Training significantly increases participants' enthusiasm for their role in supporting clients. Additionally, trained providers are *three times more likely* to discuss abortion with their clients, and about *twice as likely* to refer for abortion. "I think just having and seeing the posters has been a huge change. Seeing those around the building I think changes the culture for the client. I think it makes the client think 'Oh, this must be okay.' I think that's been a big change. You know when a client first comes in they don't know their counselor. We provide this information in their welcome folder. It has a ton of information they can look through. That just triggers conversation sometimes and they just want to talk about this now!"

~ Site Contact

I am actively working to have our agency take a public stance on reproductive justice issues and require all options counseling for all direct care staff for unintended pregnancies.

~ Domestic Violence Administrator, Oklahoma

## We Know Our Work Is Creating Culture Change

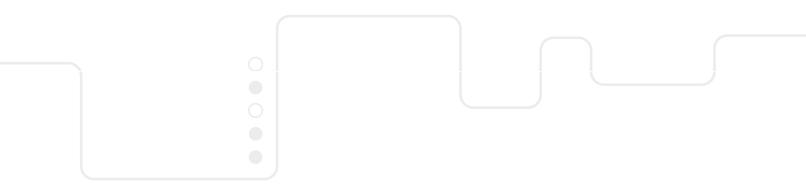
We think about our intervention, the Abortion Referrals Training, like a drop of water. A drop of water has many ripples and can be many sizes. **Culture change is what happens at the furthest ripples out from that initial drop.** 

We have evaluation tools that capture all those big, initial ripples and immediate changes, but we've been thinking and wondering more and more about the further ripples that represent culture change. *How far does our work reach? And how do we capture and document the farthest ripples and larger impact of our work?* 



**We know our work is creating culture change.** And we know this because, over the years, we've seen directly the impact of our trainings and conversations within health and social service systems. We've heard countless stories from training participants and leaders of the sites we train about how their workplace culture has changed since our training, they've used what they've learned in a surprising instance outside of work, or they've shared what they learned from our Abortion Referrals Training outside of their workplace.

In our site follow-up interviews, when we ask, "What changes have happened at your workplace, or what do you do differently as a result of the training?" we've heard stories like this one from an Executive Director in Kentucky:



"There has really been a cultural change...now it's okay to have that conversation, to ask for more information, when a client comes to you, you know we're in the South, most people when they announce their pregnancy it's been, 'Oh my gosh, congratulations, I'm so happy for you.' You don't know if this is a good thing or not. It's really re-framing the way we work with the client and find out if this is an intended pregnancy."

**We know this story is one of many.** *We've been wondering, how do we learn from stories like this one? Or how do we capture all the stories and information that document the larger impact and culture change our work creates?* 

To answer questions like these, we're convening a learning community next year to explore evaluation methods around culture change. We're currently doing a literature review to see what work has been done already to document and evaluate culture change. And in 2020, we'll bring together researchers from abortion, social science, and experts who have explored culture change around other topics like gay rights and tobacco cessation. Stories like the one above from Kentucky tell us that culture change is happening, and we want to create a framework and strengthen the methods we use to evaluate this culture change.

**Evaluating culture change is essential to understanding if we are making the change we want to see in the world.** The framework we create will be our road map and the evaluation methods will help us create meaningful benchmarks. By using the framework as our guide and evaluation methods as our tools, we can document and measure each step to ensure we're making meaningful strides toward creating lasting cultural change so that we're able to continue to shift the experiences of those with unintended pregnancy in a positive and meaningful way.



## Building Partnerships & Technology to Increase Access

### Futures Without Violence Webinar

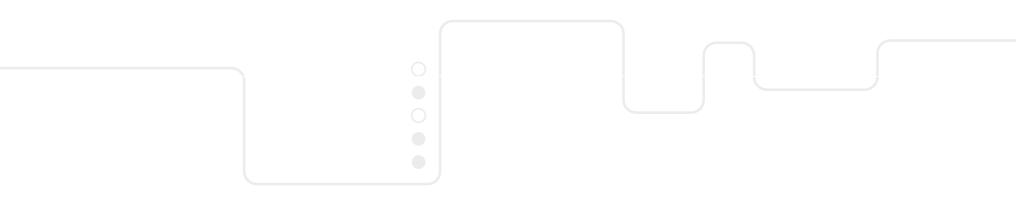
In October, which is Domestic Violence Awareness Month, we partnered with Futures Without Violence (FWV) to bring a webinar about combatting stigma within domestic violence and reproductive healthcare services to 145 attendees. This collaboration was a great fit, given Provide's shared commitment to train providers on improving their response to stigmatized issues like domestic violence and abortion. An added benefit of this collaboration was the opportunity to learn from FWV on how they've built their infrastructure to host and disseminate webinars to a broad audience across the US, as well as promote our co-branded patient safety card and Provide's Abortion Referrals Tool.

Participants learned how to recognize and address stigma in the workplace and received tools and strategies for making

referrals and de-stigmatizing conversations around domestic violence and abortion care. This webinar provided a new avenue for us to encourage change around abortion referral practices by reinforcing the importance of respecting client autonomy and self-determination and honoring that everyone deserves to be treated with dignity and worth. We're hopeful that expanding access to our trainings and tools will have a positive impact on reducing stigma and providing the highest quality of care.



Healthy Relationships and Pregnancy: Taking control of your health

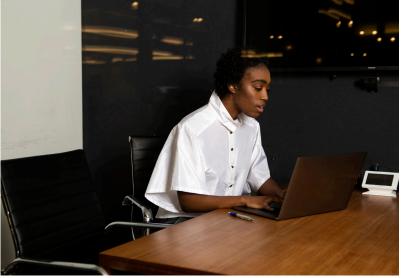


#### Training of Trainers: Nebraska Coalition to End Sexual and Domestic Violence

Building on our Referrals Trainings in Nebraska in 2018, Provide staff developed and implemented a three-part virtual training of trainers (ToT) for the Nebraska Coalition to End Sexual and Domestic Violence. As a result of this collaboration, the Coalition trained three of their member programs on how to make abortion referrals in 2019, and intend to train six more programs in 2020. This ToT project is a big win regarding sustainability, and we're exploring opportunities to expand ToT programming.

Now the Coalition will be able to:

- Provide technical assistance to sexual and domestic violence support staff in 20 community-based programs across Nebraska
- Conduct abortion referrals trainings twice a year for new advocates
- Conduct refresher abortion referrals trainings as needed for other program staff
- Integrate abortion referrals trainings into their program audits



#### The Digital Defense Fund, Bedsider.org, and the Guttmacher Institute

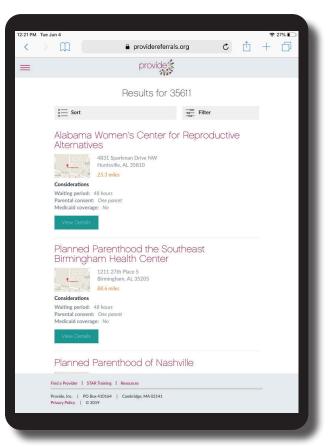
Provide's Abortion Referrals Tool (ProvideReferrals.org) launched in February 2018 to give health care and social providers an accessible, user-friendly source of information with which to make high-quality abortion referrals. Since its development, over 1,000 unique users have visited ProvideReferrals.org.

## ProvideReferrals.org is the industry's only online provider-facing abortion referrals tool.

A primary challenge has been the maintenance of the abortion provider lists and policy information housed in the Referrals Tool. Maintaining and updating the information is an arduous task that requires hours of staff labor and is made more complex by the ever changing and difficult-to-track status of abortion providers. This is particularly true for unaffiliated abortion providers—providers who are not listed on Planned Parenthood, Abortion Care Network, or National Abortion Federation websites. Unaffiliated abortion providers can provide an important link to abortion care services because they may be the closest and most accessible source of care, especially in the rural Southeast, where our work is focused.

To address this challenge, with the support from the Digital Defense Fund, Provide collaborated with Bedsider.org and the Guttmacher Institute on the integration

of their API's into our Referrals Tool. The impact of this collaboration is that we have a more robust tool to share with healthcare and social service providers who make referrals, that includes 100+ unaffiliated abortion providers and the most up-to-date information on abortion laws and policies for each state.



### Sharing Our Expertise

- "Quality Referrals for Unintended Pregnancy" Kentucky School for Alcohol and Other Drug Studies Statewide Conference (Louisville, KY)
- "Create Meaningful Change: Destigmatizing Pregnancy Referrals in the Workplace" – Nurses for Sexual and Reproductive Health Conference (Atlanta, GA)
- "Referrals for Unintended Pregnancy" South Carolina HIV, STD and Viral Hepatitis Conference (Columbia, SC)
- "Intro to Referrals for Unintended Pregnancy" Louisiana Foundation Against Sexual Assault Reproductive & Sexual Health Summit (Baton Rouge, LA)
- "The Criminalization of Pregnant Persons" Panel Presentation and Q&A, American Public Health Association Annual Conference (Philadelphia, PA)
- O'Donnell, Jenny, and Zurek, Melanie. "Abortion referral-making in the United States: findings and recommendations from the abortion referrals community." Contraception 100 (2019), 18 July 2019, pp. 360-366, doi: https://doi.org/10.1016./j. contraception.2019.07.141.



## Programs

The providers and agencies we partner with strive every day to meet their clients' needs, whether it's in a domestic violence shelter, HIV care clinic, substance use center, family planning clinic, or primary care setting. All of the health and social service systems we work with experience time and budget constraints, and often are supporting a client through a moment of crisis or hardship. We understand these environments and have tailored our program to be responsive to individual setting realities. We provide the opportunity to increase clientcentered care and build organizational expertise in caring for clients facing unintended pregnancy.





### **Our Trainings Offer:**

- On-site training with a local Provide team
- Continuing education units (CEUs)\*
- Certificate of attendance
- A model for effective referral-making

#### **Available Training Structures:**

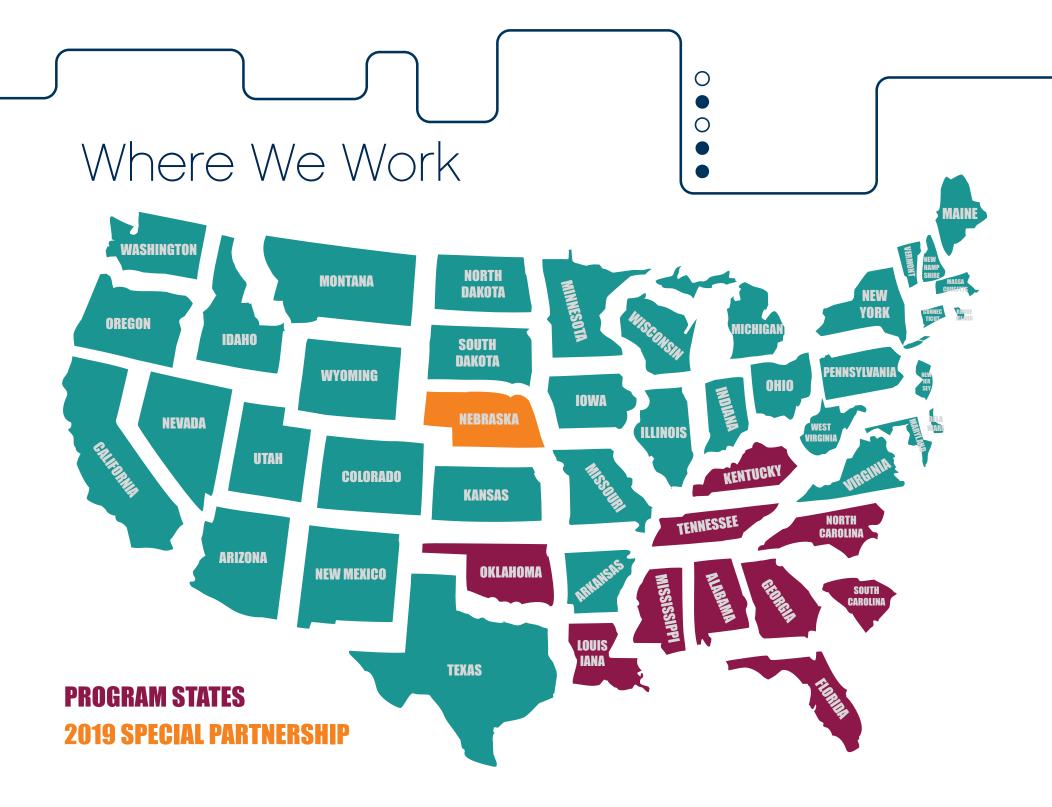
- Take-away information and resources that help you in your work
- A detailed training report for site administrators
- Ongoing customized Technical Assistance

Our training model rests on the knowledge that it takes a team of dedicated, informed professional staff to care for patients and clients. Our approach is efficient and flexible, with options such as: a comprehensive full day, on-site training; a half-day, on-site training; or a tailored training set up in consultation with our teams.

#### **Technical Assistance:**

Our Technical Assistance Program helps to bring lasting programmatic and operational improvements to patient and client care. Working in partnership with your site, we can provide: detailed training reports and insights from your team's training experience; consultation on forms and info for patients and staff; support for integrating abortion referral practices at your workplace; up-to-date local resource lists; trainings for new staff; and evaluation and recommendations on best practices to include in all-options counseling.

\*Free national CEUs for social workers, therapists and counselors, case workers, physicians, advance practice clinicians, registered nurses, and medical assistants include: National Association for Alcoholism and Drug Abuse Counselor (NAADAC), National Association of Social Workers (NASW), California Board of Registered Nurses (CBRN), and American Academy of Family Physicians (AAFP).



## Who We Work With

We partner to integrate abortion referral practices throughout five of the most critical systems of care for patients and clients of reproductive age:



Domestic & sexual violence



Primary care

## Who We Train



Health administration management & non-management



Social workers



Counselors and case workers



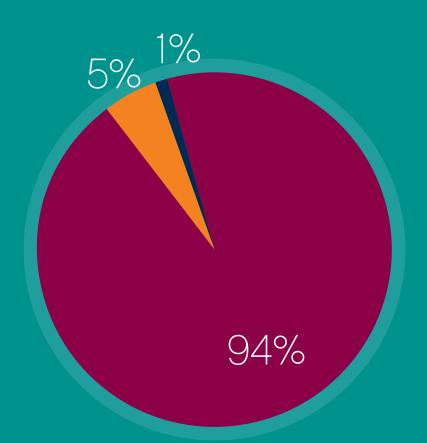
Client educators and advocates



Substance use



## Finances



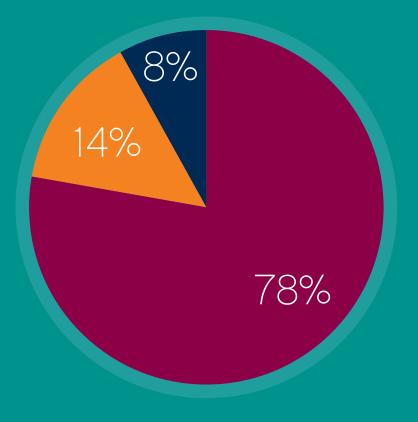
### **2019 Income\***

Grants = \$3,381,750
Contributions = \$190,524
Other = \$41,647









### **2019 Expenses\***

- Program = \$1,874856
- Management = \$343,832
- Fundraising = \$181,079

## Our Supporters

#### We're grateful for our dedicated individual donors who commit vital general support for our work.

\*supporters who have given for at least 5 consecutive years \*\*supporters who have given for at least 10 years

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## Staff

Our team is a group of people who care deeply about people and the workers and agencies who serve them. We are people who live in and who love the communities in which we work.

We have the benefit of experience and training in HIV service delivery, substance use counseling, domestic and sexual violence case management, and safety nets health service. This experience roots us in deep compassion for people and the workers who serve them. It positions us to be highly effective in engaging and supporting these systems.

We recognize and thank all the staff who contributed to our work in 2019:



Fatimah Gifford Executive Director



Kristin Nobel, MPH Director of Program Evaluation



Melanie Zurek, EdM Exiting Executive Director



Dannielle Shaw, JD Director of Program Quality



**Wyndi Anderson** Senior Director of Programs



Kara Hinkley, MPP Regional Director



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Camilla Eubanks Director of Program Implementation



**Amy Handler, MPH** Program Evaluation Manager



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