Every Donation Tells a Story
Every single dollar that the American Academy of Family Physicians Foundation receives can trace forward to a story. A story made possible because of your support.

A free clinic ordered new equipment. A medical student participated in National Conference of Family Medicine Residents and Medical Students and decided family medicine was the right path. A resident gave back to the community by providing much-needed medical services.

That’s just scratching the surface of the many stories that evolve from the donations that the AAFP Foundation receives.

In our 2019 Annual Report, the AAFP Foundation is sharing just a few of these stories because we want you to know exactly where your money goes and the amazing impact it has on the people who receive it. They provide a glimpse into the many stories your donations to the AAFP Foundation have written.

Take time to read every story featured here.

And there are so many stories yet to be told. Thank you for your support of the AAFP Foundation. We look forward to writing many more stories in the years to come.

All the best,

Julie K. Anderson, MD, FAAFP | President

Heather Palmer, MA, MBA | Executive Director and Secretary
Thank you to the four doctors who have mentored all five years of the Family Medicine Leads program:

KEHINDE ENIOLA, MD, FAAFP
ALAN SCHWARTZSTEIN, MD, FAAFP
DANIEL SPOGEN, MD, MPH, FAAFP
DAVID WALSWORTH, MD, FAAFP
AMY ROGERS GUYTON worked for two years in Honduras prior to medical school, so she already knew about the term “border health.” But it wasn’t until she helped perform a forensic medical evaluation for an asylum at a detention center during her residency in Tucson, Arizona, that she realized the depth of the need.

That peek into the asylum process prompted Rogers Guyton to join forces with another resident to seek resources to train medical professionals.

“These evaluations that are used in asylum court are often the only evidence that is submitted on a client’s behalf,” she said. “The reason (medical evaluations) are important is that the burden of proof falls on the asylum seeker. However, many people are fleeing violence with little to no medical records or documentation of trauma they endured.”

That’s where the Family Medicine Leads Emerging Leader Institute (ELI) helped push Rogers Guyton to think bigger. “Being part of ELI has had a huge impact not only on my residency, but on my career,” she said. “ELI inspired me to dream bigger than I ever thought was possible. It helped me turn the idea of a local training into a statewide network.”

Thus began the Arizona Asylum Network, a statewide training program for physicians and psychologists interested in performing medical evaluations for asylum seekers. Through the network, which has a total of 56 medical professionals available now, attorneys can reach out to medical professionals for forensic medical and psychological evaluations for their asylum cases.

“I love how family docs get to have the broadest scope of practice within medicine and how I would be able to morph my skill set into the needs of any community,” Rogers Guyton said. “I continue to build my skills in performing forensic asylum evaluations, a skill I hope to share with others and use to serve my community throughout my career.”
MOAZZUM BAJWA didn’t come to family medicine in a straight line—but rather by way of everything from middle school teacher to medical Spanish interpreter.

“I felt most ‘at home’ working with diverse, mission-oriented teams to help folks discover the best versions of themselves,” Bajwa said of his formal medical training. “Family medicine is the most natural path to a career in navigating the challenges of a complex health care system while maintaining a strategic focus on the health of an individual, their family, and their community.”

That exact mindset drove Bajwa’s explorations of professional development during residency. At a community health education program with local high schools, he recognized an opportunity to take this existing collaboration with his residency program and focus it on health advocacy and activism.

“The AAFP Foundation’s Emerging Leader Institute provided the guidance and skills to transform that nebulous concept into a concrete plan of action,” he said.

That plan turned into the Emerging Health Advocates program, now in its fourth year. Bajwa recruited a team of resident physicians to lead curriculum and engage others to support the high school students in creating their projects.

Since 2016, the program has inspired more than 750 students to create health advocacy projects. It is also now the foundation of the Community Health and Social Medicine initiative at the Riverside University Health System/University of California-Riverside Family Medicine Residency Program.

“The experience of ELI remains the most formative part of my growth as a family physician in community health,” he said. “I sincerely hope that each new generation of future leaders in family medicine find the same support and encouragement that I received through the AAFP Foundation.”
“The experience of ELI remains the most formative part of my growth as a family physician in community health.”
Changing Lives, One Resident at a Time

From 2013-2019, the Family Medicine Cares Resident Service Award has awarded:

$181,500
to

19 first- or second-year residents
THE STORY OF THE LARC

As a result of a meeting with the Detroit Health Department about teen pregnancy, Drs. Diahann Marshall and Pamela Castro-Camero decided to start a program that would provide underserved teenagers access to contraception.

The LARC Initiative’s objective was to increase awareness and understanding of long-acting reversible contraceptive (LARC) options among junior and senior high school girls and their parents as well as identify doctors that would perform these services.

The project placed three IUDs in teens at their resident clinic, free of charge, as well as counseled teen boys and girls on safe sex practices, different types of contraception, and information on where to go for medical assistance.

“The [Resident Service Award] was very beneficial to the Detroit Health Department and the teens we serviced,” Marshall said. “The project, although small, built a bridge of access to contraception counseling and management for underserved teens and became part of the goal to reduce unplanned pregnancies in the community.”
In the city of Bryan, Texas, the county seat of Brazos Valley, the rate of uninsured is approximately 1 in 4 (23%). As the population increases, as it has in the last 10 years by more than 10,000 individuals, more are left without insurance. Estimates show around 60,000 individuals are currently uninsured in Brazos Valley.

That’s where the Health for All clinic comes in.

“We work with low-income adults, ages 18 to 64, who have no health insurance and are not eligible for government programs,” said Elizabeth Dickey, executive director of the nonprofit. “The growth of uninsured individuals in our region places a heavy burden on our public resources.”

Currently, the clinic provides more than 5,000 patient visits annually to more than 1,500 unique individuals. Each eligible patient receives free medical exams, preventive lab services, counseling, and free or low-cost medications.

In 2019, Family Medicine Cares USA awarded the clinic more than $6,000. “We have the potential to continue drastically improving health outcomes for our patients while reducing the entire community’s health care costs,” Dickey said.
Family Medicine Cares USA
51 Clinics

New Clinic Awards - $316,933
Existing Clinic Awards - $248,894

Amounts have been rounded up to the nearest dollar.
2019 Awarded Clinics
“This is a groundbreaking opportunity for family physicians on Main Street to explore the phenomenal ideas they have that will bring about change,” said Richard Smith Jr., a member of the AAFP Foundation Board of Trustees and co-chair of the Family Medicine Discovers RapSDI Work Group. “The health care system is fraught with barriers to innovation. This approach helps mitigate that.”
THE STORY OF RAPSDI

In January, the first few pages of the Family Medicine Discovers program were written with the launch of Family Medicine Discovers Rapid Cycle Scientific Discovery and Innovation (FMD RapSDI).

FMD RapSDI is a collaboration between the AAFP Foundation and the AAFP National Research Network (AAFP NRN). It seeks to build research capacity for scientific discovery and innovation in family medicine. The program will fund short-term, high-impact projects led by practicing family physicians to generate new evidence and innovative models for “what works” in real-world primary care settings.

FMD RapSDI will create infrastructure for submission of ideas and questions from AAFP members and family medicine stakeholders that meet the following criteria: relevant and responsive to AAFP and AAFP NRN members’ priorities and interests; address scientific and clinical questions that have a high potential to advance the knowledge base of the specialty; and feasible to accomplish within an approximate 12- to 18-month timeline. Physicians selected as FMD RapSDI scholars will receive support and mentorship from a team of experienced researchers.
177 hours contributed by volunteers

814 engagements

Reference requests, tours and presentations, handling loans, exhibitions, anniversaries, and more
2019 IN REVIEW

The Center awarded the 9th Annual Sandra L. Panther Fellowship in the History of Family Medicine to Timothy Huff, PhD, of Boston for his project, “The Family Physician Career Evolution Study: A Multi-Level Analysis.” It will be published in a book entitled, “Searching for the Country Doctor,” which will be available in the fall of 2021.

The Oral History Digitization Project, which started in 2019, takes recordings that are now archived on audio cassettes and creates digital versions of them, making these recordings easier to access. The first recording that is being digitized is Dr. Doug Henley’s oral history of how he became interested in family medicine as a boy growing up in Hope Mills, NC. This is one of the Center’s most frequently requested recordings.

In addition, the Center announced the publication of “A Pocket History of Family Medicine,” a colorful, illustrated booklet designed to give a brief overview of the history of the specialty. Gifts from the Franciscan Health Indianapolis Family Medicine Residency and Eli Lilly and Company helped fund the project.
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*posthumously
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THANK YOU TO OUR DONORS who make our work sustainable.
Foundation Financials
January 1 to December 31, 2019

**REVENUE AND SUPPORT**
- 21% Grants
- 21% Individual Donations
- 21% Corporate Support
- 37% Earnings of Subsidiary

**PROGRAM EXPENSES**
- 11% Research
- 11% Humanitarian
- 78% Education

**EXPENSE ALLOCATION**
- 21% Fundraising
- 13% Administration
- 66% Programs

Numbers Tell a Story
### Statement of Financial Position

**ASSETS**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td>Cash and Cash Equivalents</td>
<td>$2,445,324</td>
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<td>Accounts Receivable</td>
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<tr>
<td>Accounts Receivable, Planned Giving Program</td>
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<td>Prepaid Expenses</td>
<td>34,901</td>
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<td>Investments</td>
<td>16,574,797</td>
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<td>Investment in AAFP Insurance Services, Inc.</td>
<td>1,276,610</td>
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<td>Office Equipment, Furniture and Fixtures, Net of Accumulated Depreciation</td>
<td>25,122</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$20,616,552</strong></td>
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</table>

**LIABILITIES and NET ASSETS**

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<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td>Accounts Payable</td>
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<td>Deferred Revenue</td>
<td>4,073</td>
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<td>Liabilities Under Split-interest Agreement</td>
<td>194,772</td>
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<td>Grant Awards Payable</td>
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<td><strong>Total Liabilities</strong></td>
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<td>Without Donor Restrictions</td>
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<td>Undesignated</td>
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<td>Board-appropriated</td>
<td>10,993,044</td>
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<td>With donor restrictions</td>
<td>4,844,133</td>
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<td><strong>Total Net Assets</strong></td>
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<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td><strong>$20,616,552</strong></td>
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### Statement of Activities

**REVENUES and SUPPORT**

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<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td>Individual Donations</td>
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<td>Corporate Support</td>
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<td>Administrative Support</td>
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<td>Grants</td>
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<td>Investment Return</td>
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<td>Earnings of Subsidiary</td>
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<td>Other</td>
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<td><strong>Total Revenue and Support</strong></td>
<td><strong>$6,585,000</strong></td>
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**EXPENSES**

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<th>Description</th>
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<td>Programs</td>
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<td>Education</td>
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<tr>
<td>Research</td>
<td>272,544</td>
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<tr>
<td>Humanitarian</td>
<td>281,454</td>
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<tr>
<td>Administration</td>
<td>507,521</td>
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<tr>
<td>Fundraising</td>
<td>821,386</td>
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<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$3,899,092</strong></td>
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<tr>
<td>Change in Net Assets</td>
<td>2,685,908</td>
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<td><strong>Net Assets, Start of Year</strong></td>
<td><strong>$16,437,285</strong></td>
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<tr>
<td><strong>Net Assets, End of Year</strong></td>
<td><strong>$19,123,193</strong></td>
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</table>