While the reflections on what 2020 was will continue, we already knew one thing: **Family physicians are a force.**

During one of the hardest years in decades, the AAFP Foundation still saw an increase in giving.

How is that possible?

Family physicians.

After working 70 hours a week, our family docs were still finding time and resources to give to the Foundation. The impact they were making with patients in their community ran parallel to the impact they made with their support.

These donations, coupled with amazing support from corporate partners and corporate foundations, allowed free health clinics to keep their doors open and, in fact, handle an influx of patients—many of whom are the most vulnerable of our population.

On top of the emergency relief grants, generous funding provided more medical students and residents the opportunity to attend the virtual National Conference of Family Medicine Residents and Medical Students as well as continue the leadership development that happens through Emerging Leadership Institute. Plus, the Foundation welcomed the beginning of the first Family Medicine Discovers projects. And so much more was still happening during this uncommon year.

All this support was a necessary response. One that showed when there’s a need—even one as daunting as this past year—philanthropy responds.

Thank you for making the necessary response for the AAFP Foundation.

All the best,

Rebecca Jaffe, MD, MPH, FAAFP

Heather Palmer, MA, MBA

President  Executive Director and Secretary
“The funds [helped] us adapt and become sustainable. Thank you is not enough, but it’s all I have. Our small, but mighty, clinic [appreciated the] grant more than thank you will ever say.

— Sarah Gray, Executive Director, Helping Hands Health & Wellness Center in Columbus, Ohio"
The Timeline of a Necessary Response

See how the Family Medicine Cares USA program was able to provide more than $1.13 million in much-needed support to 76 free health clinics in 29 states and Puerto Rico, targeted to communities with high need and socioeconomic indicators known to contribute to health disparity.

COVID-19 becomes a national emergency. Much of the United States goes into lockdown.

45 Family Medicine Cares USA clinics awarded $1,000 Emergency Relief grants.

MARCH

"The $1,000 investment from Family Medicine Cares helped cover the cost for vital medications needed. This funding helped fill the gap for a very valuable aspect of the clinic's daily operations."

— Asheville Buncombe Community Christian Ministry (abccm) doctors' medical clinic

MAY

45 Family Medicine Cares USA clinics receive $10,000 grants from the Humana Foundation donation.

JUNE

The Humana Foundation awards a $1 million grant to the AAFP Foundation’s COVID-19 Emergency Relief Fund.

"The value of The Humana Foundation’s generous grant can’t be overstated. Family physicians at free health clinics want to provide our underserved populations with dignity in care, and the best care, at all times. The need is great, and it’s even larger now than it was before."

— Dr. Jacqueline Baker, incoming Past President of the AAFP Foundation

JULY

"These are extraordinary times as nonprofit medical clinics adapt to the challenges of continuing service and the great increase in the number of individuals without health insurance or the funds to purchase their medications. I am thankful for your organization’s commitment to assist those engaged in the care of the most vulnerable."

— Medical Team Mercy

NOVEMBER

$300,000 awarded through grants to 12 free health clinics with a Community Need Index (CNI) of 4.5 or greater.

CNI takes five socioeconomic indicators known to contribute to health disparity—income, culture/language, education, housing status, and insurance coverage—and rates them for every ZIP code in the United States. Each ZIP code then receives a score ranging from 1.0 (low need) to 5.0 (high need).

14 clinics (of the 45 clinics that received grants in June) are awarded an additional $15,000 each to be used for durable (e.g., telehealth equipment), non-durable (e.g., PPE items), and operational expenses (e.g., rent, electricity).

"We are doing our best to plan for a future that basically changes every day. The one consistent we see is the growing health care needs of the vulnerable patients we serve. Your significant grant will make an immediate difference."

— Community Volunteers in Medicine

JULY NOVEMBER

"During these uncertain and difficult times, we are extremely grateful for your Foundation’s commitment to providing needed health care to the uninsured. I guarantee that every dollar will be used wisely and that your funding will make a real difference in the lives of hundreds of people in need in our community."

— Iowa City Free Medical Clinic

$300,000 awarded through grants to 12 free health clinics with a Community Need Index (CNI) of 4.5 or greater.

CNI takes five socioeconomic indicators known to contribute to health disparity—income, culture/language, education, housing status, and insurance coverage—and rates them for every ZIP code in the United States. Each ZIP code then receives a score ranging from 1.0 (low need) to 5.0 (high need).

30 clinics (of the 45 clinics that received grants in June) are awarded an additional $10,000 each to be used for durable (e.g., telehealth equipment), non-durable (e.g., PPE items), and operational expenses (e.g., rent, electricity).
Medical students and residents can only become leaders of the family medicine specialty if they are given a chance to learn and challenge themselves. That’s the mission of the Family Medicine Leads (FML) program: provide access to a number of outstanding programs, mentors, and faculty to build connections and open doors for leadership development.

In 2020, even with its unique challenges, FML was able to extend more scholarship opportunities for medical students and residents to participate in the National Conference of Family Medicine Residents and Medical Students.

Donor support allowed a team to quickly revamp the FML Emerging Leader Institute (ELI) curriculum into a virtual format to provide 30 medical students and resident scholars the same quality leadership development and networking they deserved.

Knowing that meaningful research advances family medicine, the first two scholars, Lauren Ciszak, MD, and Vijay Singh, MD, MPH, MS, FAAFP, of the Family Medicine Discovers Rapid Cycle Scientific Discovery and Innovation program wrapped up their respective projects.

Cizak a practicing family physician with the South End Community Health Center, Boston, MA, who received $39,212, completed work on her project titled, Medically Tailored Meal Kits as a Means of Decreasing ED Visits and Hospitalizations in Primary Care Patient with Chronic Disease. The project studied the impact of providing meal kits and nutritional education to patients with chronic diseases, rather than ready to heat/eat meals, which is the standard approach.

“How wonderful to take an evidence-based approach and say, ‘Let’s not just give you food. Let’s teach you how to make good food, and you’ll be able to go home and teach others in your family,’” said Richard Smith, Jr., an AAFP Foundation Board of Trustee and RapSDI Work Group member. “That brings sustainable, systemic change.”

Singh, a clinical assistant professor at the University of Michigan Medical School in Ann Arbor, who received $40,000, finished his project, Adapting Evidence-based Male Intimate Partner Violence Perpetuation Interventions for Use by Family Medicine Clinics and Patients. He used evidence-based family medicine interventions, proven successful with adolescents, to help identify men with anger issues and provide relevant services.

“Domestic violence is a silent killer in our community,” says Smith. “[We took] what we know works and focused on the perpetrator. It could have a profound effect on the family going forward, and no one else is doing it.”
As part of the AAFP Foundation, the Center for the History of Family Medicine’s (CHFM) mission is to serve as the collective memory of the specialty in order to guide the future.

This past year, CHFM:

• Completed its latest oral history project, “COVID-19 Stories,” which is focused on capturing the stories of family physicians, students, and residents as they deal with COVID-19. Through this project the Center was able to capture 22 oral histories during this important time in family medicine.

• Handled a total of 398 engagements.

• Benefited from 103 hours of volunteer time, valued at $2,543.07. (Valuation based on a rate of $24.69 per hour, according to the National Nonprofit Independent Sector.)

• Awarded the 10th Annual Sandra L. Panther Fellowship in the History of Family Medicine to Allyssa Abel, MPH, and Aaron George, DO, for their project Reinvigorating the Visions of the Founders of Family Medicine.

To continue its mission, CHFM relies on the generosity of donors who understand and appreciate how crucial the historical context is in moving our specialty forward. It not only allows CHFM to continue capturing the evolution of family medicine, but also the ability to take an active voice in the future.

RESIDENT SERVICE AWARDS

The Family Medicine Cares Resident Service Awards are given annually for two 12-month service projects implemented by first- or second-year residents that tackle the health needs of the underserved in their communities.

$16,500 for Rebecca Rada, DO, MBA, MS, (PGY2) and Mindy Guo, MD, (PGY2) with Saint Louis University Family Medicine Residency in St. Louis, MO. The goal of their project, Patient Centered Addiction Treatment: Leveraging Accessibility and Inclusion to Improve Medication for Addiction Treatment (MAT), is to bridge the gap between the need of the community to the resources available at Family Care Health Clinic (FCHC).

$16,500 for Laura Latey Bradford, MD, with University of Maryland Family Medicine in Baltimore, MD, will be partnering with the University Family Medicine (UFM) Clinic, a nonprofit, NCQA Level 3 Patient Centered Medical Home that has been a pillar of primary care for the West Baltimore community for many decades and has been recognized as a national leader in urban health.

FMPC GRANT AWARDS

The Family Medicine Philanthropic Consortium (FMPC) is a collaborative program of the AAFP Foundation and AAFP Constituent Chapters/Foundations. Since 2006, FMPC Grant Awards have facilitated sharing of expertise, best practices, and outcomes of health care initiatives implemented by Constituent Chapters across the country.

After a review of applications and average reviewer score, 28 projects were approved to receive funding from the FMPC Steering Committee. Total funding allocated was $38,750, the maximum amount of funds available for distribution.
In August 2020, Douglas E. Henley, MD, FAAFP, retired from the AAFP after 20 years as Executive Vice President and Chief Executive Officer. The AAFP Foundation established an endowment in honor of Doug and Mary Henley to celebrate their service to the AAFP, the Foundation, and family medicine over the last 43 years. The Douglas and Mary Henley Fund supports the Family Medicine Leads signature program and provides scholarships for medical students to attend the National Conference of Family Medicine Residents and Medical Students.

In addition to the personal pledge of $100,000 from Doug and Mary Henley, the Henley Fund raised more than $30,000 in 2020.

The Foundation would like to thank the donors to this endowment.

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Medicine Endowment Fund

2020 Donor Honor Roll

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Foundation Financials
January 1 to December 31, 2020

REVENUE AND SUPPORT

16% Individual Donations
17% Corporate Support
29% Earnings of Subsidiary
38% Grants

EXPENSE ALLOCATION

9% Administration
16% Fundraising
75% Programs

PROGRAM EXPENSES

9% Research
35% Humanitarian
56% Education

Statement of Activities

ASSETS
Cash and Cash Equivalents ........................................ $ 2,066,593
Accounts Receivable .................................................. 141,925
Accounts Receivable, Planned Giving Program ................. 153,510
Prepaid Expenses .................................................. 63,563
Investments .......................................................... 17,854,817
Investment in AAFP Insurance Services, Inc. ............... 1,613,251
Office Equipment, Furniture and Fixtures,
Net of Accumulated Depreciation of 274,188 ............... 179,506
Total Assets .................................................. $ 22,073,165

LIABILITIES and NET ASSETS
Accounts Payable .................................................. $ 578,022
Deferred Revenue .................................................. –
Liabilities Under Split-interest Agreement ................. 180,645
Grant Awards Payable ........................................... 75,718
Total Liabilities .................................................. $ 834,385
Without Donor Restrictions ........................................... 15,604,481
Undesignated .................................................. 4,375,514
Board-appropriated ............................................. 11,228,967
With donor restrictions ........................................... 5,634,299
Total Net Assets .................................................. $ 21,238,780
Total Liabilities and Net Assets .................................. $ 22,073,165

Statement of Activities

REVENUES and SUPPORT
Individual Donations .................................................. $ 931,132
Corporate Support .................................................. 1,020,500
Administrative Support ........................................... –
Grants .......................................................... 2,288,111
Investment Return .................................................. 1,216,943
Earnings of Subsidiary ............................................. 1,711,641
Other .......................................................... (12,561)
Total Revenue and Support ........................................ $ 7,155,766

EXPENSES
Programs .......................................................... $3,784,050
Education .................................................. 2,111,744
Research ................................ .................. 338,170
Humanitarian ................................ .................. 1,344,136
Administration ................................ .................. 458,894
Fundraising ................................ .................. 797,235
Total Expenses .................................................. $5,040,179

Change in Net Assets .................................................. 2,115,587
Net Assets, Start of Year ............................................. $19,123,193
Net Assets, End of Year ............................................. $21,238,780
Looking to the Future
With Gratitude
in our Hearts