CALL FOR ABSTRACTS
Submission Deadline: May 1, 2013

The Conference organizers invite abstracts on cutting edge research and program results directed at enabling individuals in the world, especially in low-income areas, to achieve their contraceptive and reproductive intentions. Of particular interest are abstracts on research demonstrating how family planning benefits and advances the health and wealth of people and nations and on high impact or best practices of family planning programs and service delivery models. **Abstracts using strong scientific/evaluation methods will be given priority in the review and acceptance process.**

Below are topics of special interest. Abstracts with a focus that does not easily fit one of these will be considered, but should be submitted using the “Other topics” category on the form.

1 Family planning practice
   - Patterns and trends in contraceptive use and method mix
   - Contraceptive continuation/failure
   - Use of long-acting methods, emergency contraception, female condoms
   - Cultural and behavioral barriers to use

2 Family planning policy
   - Frameworks: Post MDG, ICPD and beyond, FP2020
   - PMA and transparency in FP2020
   - Strategies for contraceptive security
   - Leadership development

3 Family planning, rights and empowerment
   - Contraceptive choice
   - Human rights
   - Voluntarism

4 Effective family planning programs
   - Essential dimensions of equity, cost, quality, scale and access
   - Scaling up
   - FP acceptability (social norms, perceptions, beliefs)
   - Translating FP research into action
   - Demand and supply side interventions
   - Health communications
   - Trained workforce
   - Health systems strengthening
   - High-impact practices
5 Contraceptive financing
   Performance-based financing, health insurance models
   Budget monitoring and costing FP
   Expanding private sector participation

6 Family planning and adolescents
   Youth-oriented service delivery innovations and models
   Developing youth leaders
   FP use by youth (acceptability, use and continuation)

7 Innovations in contraceptive service delivery
   Community-based models
   Task shifting
   mHealth and information technology applications
   Supply chain management
   Total market approach
   Postpartum family planning

8 Family planning and sustainable development
   Socioeconomic impacts of FP
   Demographic dividend
   Gender equality

9 Health benefits of family planning
   FP for people living with HIV
   FP and maternal and child survival
   Gender-based violence
   Birthspacing and the 1000-day window for child development

10 Contraceptive technology updates
    Male contraceptive methods
    Multi-purpose prevention technologies

11 Integrating family planning services
    Child health services
    Maternal health care
    Sexual health services (HIV, PMTCT, STI, cervical cancer)
    Education, environment, agriculture, sports and other sectors

12 Family planning and abortion
    Post-abortion FP
    Unsafe abortion

13 Family planning for underserved or vulnerable populations
    Men, displaced/refugee, persons with disabilities, older persons

14 Innovations in family planning monitoring, evaluation and research
    Health management information systems and indicators
    Evolution of population-based surveys
    Empowering decisionmakers with data
    Impact assessment methods

15 Other
    The language of family planning
    Late-breaking results
**INDIVIDUAL ABSTRACT SUBMISSION**

Individual abstracts may address a) research findings or b) effective program practices. Each should be no longer than 800 words in length and should follow their respective outlines below. Individuals submitting abstracts should ensure they provide sufficient detail for external reviewers to evaluate their work.

**OUTLINE FOR ABSTRACTS**

<table>
<thead>
<tr>
<th>Research abstract</th>
<th>Program/Best Practice abstract</th>
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<tbody>
<tr>
<td>1. Significance/background</td>
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<tr>
<td>2. Main question/hypothesis</td>
<td>2. Program intervention/activity tested</td>
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<tr>
<td>3. Methodology (location, study design, data source, time frame, sample size, analysis approach)</td>
<td>3. Methodology (location, setting, data source, time frame, intended beneficiaries, participant size, evaluation approach)</td>
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<tr>
<td>4. Results/key findings</td>
<td>4. Results/key findings</td>
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<td>5. Knowledge contribution</td>
<td>5. Program implications/lessons</td>
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**EVALUATION CRITERIA**

1. Originality – Contains significant new findings
2. Quality – Significantly advances evidence base for addressing family planning needs
3. Importance – Directly addresses key themes for conference
4. Presentation – Clearly presents material according to outline (with headings)

Abstracts should be submitted in English or French by May 1, 2013 online at [www.fpconference2013.org](http://www.fpconference2013.org) or by e-mail, along with the completed cover form to abstracts@fpconference2013.org. Submitters will receive an e-mail acknowledging receipt. The corresponding author will be notified regarding abstract decisions by June 24, 2013.

*Note persons with accepted presentations, either as individuals or on panels, will be restricted in their appearance on the conference program to two times. This is to provide opportunity for a broadened base of conferee participation.*

**CONFERENCE TRAVEL SUPPORT**

Limited travel support is available. Only individuals whose abstracts are selected for oral presentation will be eligible to apply. Priority will be given to junior researchers. Travel support application forms will be provided with notification letters.

For more information, please contact: [info@fpconference2013.org](mailto:info@fpconference2013.org)