

## Grant application form - Project v2016

<b>Submission Date</b>	2016-12-30 19:07:31
<b>Name of applicant</b>	Teresa Bombas
<b>Job title</b>	MD, Consultant in Gynecology and Obstetrician
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<b>A short CV of the applicant (or the principal investigator) should be provided here.</b>	<p>CURRICULUM VITAE Name: Teresa Bombas Country: Portugal Born: 5/11/65 Mail: tabombas@sapo.pt</p> <p>Academic Qualifications: - MD, Consultant in Gynecology and Obstetrician at Obstetric Service A. Centro Hospitalar e Universitário de Coimbra. Portugal - Máster degree on Sexual and Reproductive Health. University of de Alcalá de Henares. Madrid Spain</p> <p>Actual Positions: - President of the Portuguese Society of Contraception - Board Member of Portugal on (International Federation of the Professional Abortion and Contraception Associates (FIAPAC) - Member of the FIGO Working Group for the Prevention of Unsafe Abortion - Member of Scientific Committee of the European Society of Contraception and Sexual Health (ESC) - Board Member of ECEC (European Consortium for emergency contraception) - Board Member of Portugal on CIC (Confederation Iberoamericana de Anticoncepción)</p>
<b>Submission date of this form</b>	30-12-2016
<b>Is the person responsible for the project different to the person named in box A</b>	No
<b>Title of the project</b>	Is there a stigma for working on abortion field? The care provider's perspective

**Comprehensive description of the project (max 200 words)**

**Introduction:**

In Portugal, abortion is allowed by women request since 2007 and is performed mainly on public National Health System Services (NHS) (70%). Since then we performed near 19000 abortions per year, but paradoxically there are few professionals working on the field. The stigma generated between healthcare professionals is underestimated and could be one of the reasons for the gap on training and a future barrier on access to safe abortion. Moreover, stigma may also contribute to increased stress, burnout, and strain on collegial relationships. If stigma represents a human resource issue in abortion, reducing its impact may improve the gap on training and the access to safe abortion care, an important indicator of public health.

**Study Design:**

We will recruit health professionals (medical doctors, nurses and midwives) who work on abortion at public NHS to complete an online survey anonymously. The evaluating providers' experiences of stigma and its impact on their work and life will be studied using the 35-item Abortion Provider Stigma Survey Instrument developed by Lisa Martin and colleagues and correlated with demographic characteristics of the providers including years of practice. This scale was design specifically for abortion providers and included adaptations of items that targeted universal aspects of stigma in each of its domains as well as items that measured circumstances specific to abortion care, including stigma related to professional work. The answers will be evaluated into five main topics: Disclosure Management (providers' experiences with disclosing their abortion work identity, including worries, consequences and actions associated with disclosure); Internalized States (providers' responses to potentially positive aspects of their work) judgment (negative behavior from other health professionals), Social Support ( support of the family and friends about the work field) and Discrimination (perceived consequences of abortion stigma).

**When would it start / finish? (Max 20 words)**

The study will start on January 2017 and will take place during 3 months.

**Where will it take place – country / town, establishment? (Max 20 words)**

Portugal, national level.  
Multicentric.  
National Health Service

**Objectives and needs identified. (Max 20 words)**

Primary: Quantify and qualify the healthcare professional's perceptions of stigma for working on abortion field.  
Secondary: - Assess and explore how the stigma is related with demographic aspects of the providers like years of practice, specific intervention on the abortion, professional condition of work (included on regular working contract, extra job)  
- Assess and explore how the stigma is related with other aspects of professional quality of life, including the professional exclusion.

**Sector in the area of contraception, sexual and reproductive health:**

Abortion

**Is it a 'new' project?**

Yes

**What outcomes will be measured? List. (Max 20 words)**

The answers will be evaluated into 5 main topics: Disclosure Management; Internalized States, Judgement, Social Support and Discrimination.  
The answers include the following: all of the time (5), Often (4) Sometimes (3) rarely (2) Never (1).  
Total stigma score for the full scale is calculated by adding all of the scores for each individual question. The range of possible total scores is 35 to 175. We classified "low" stigma as 35-81, "moderate" as 82-128, and "high" as 129-175.

<b>Do you foresee any reasons (political, climatic, etc) why this project may be adversely affected? (Max 20 words)</b>	No.
<b>The ESC may not be in a position to fully fund all applications; you must indicate whether / how part funding may impact your project. (Max 100 words)</b>	There is no other sponsors
<b>Are there other partners or organisations supporting this same project?</b>	No
<b>Have you already obtained any funding or still awaiting a response towards this project?</b>	No
<b>How much money are you requesting? Up to 10,000 euro per project application can be requested. Provide an overview of the budget here (max 50 words)</b>	We request 7300€ to partially cover for: Design, organize coordinate the project. Applied the survey, statics work of the results, write a publication to submit to the ESC journal, Present the results at National Congress of Portuguese Federation of the OBG Societies
<b>Please provide a detailed budget here.</b>	Budget: Design and lay out: € 1.300 Project coordination: € 1.000 Statics work: € 2.000 Writer: € 3.000 TOTAL: € 7.300
<b>Will this be part of a larger fund or stand alone? (Max 20 words)</b>	Stand alone
<b>Who will oversee the budget &amp; keep accounts?</b>	Portuguese Society of Contraception
<b>If you or your department has received funding from ESC for a project or course before, please give details of the date of funding, contact person and title of project or course.</b>	2012: Promoting the harmonization of emergency contraception services in Europe Applicant: Teresa Bombas (ECEC) Allocated amount: 8.000 €

**We, as responsible agents for this project, agree to the following 8 points:**

	yes
<b>We agree that all monies will be spent appropriately</b>	
<b>We agree to work with the nominated Mentor</b>	
<b>We agree to advise you at the earliest time if this project is delayed or cannot be completed</b>	
<b>We agree to provide an interim report(s) part way through the project and a final report to the ESC within 6 months of the end of the project.</b>	
<b>We agree to provide the ESC with an interim budget(s) and a detailed budget at the end of the project. NOTE funding will be awarded in stages and will be dependent on appropriate reporting.</b>	
<b>We agree to provide receipts for monies spent if requested.</b>	
<b>We agree that if we need to make any significant changes to the duration, contents or funding of the project after it has been awarded, I/we will advise the nominated mentor.</b>	
<b>We agree to acknowledge the ESC as a donor in any publications and oral communications resulting from this project. Ideally any manuscript should be sent to the ESC journal in the first instance.</b>	

**Full Name**

Teresa Bombas

**Date**

31-12-2016