



Bixby Center for Global Reproductive Health | University of California, San Francisco

## Daniel Grossman, MD



### ANSIRH Director

Dan Grossman focuses his research on both clinical and social science studies aimed at improving access to contraception and safe abortion in the United States, Latin America, and sub-Saharan Africa, as well as evaluating the impact of integrating reproductive health and HIV services. He has published over 100 articles in peer-reviewed journals and serves on committees for professional organizations such as the American Public Health Association and the American College of Obstetricians and Gynecologists. As a faculty member in the

Department of Obstetrics, Gynecology and Reproductive Sciences at UCSF, Dan performs clinical work at San Francisco General Hospital. He is also a Senior Advisor with Ibis Reproductive Health. Dan received his Bachelor of Science in Molecular Biophysics and Biochemistry from Yale University and an MD from Stanford University. He completed his residency in Obstetrics and Gynecology at UCSF.

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## Research projects

**California Analysis of Abortion Safety.** A retrospective analysis evaluating the incidence of post-abortion emergency department visits and complications using data on 55,000 abortions from California's state Medicaid program, Medi-Cal.

**Moving Oral Contraceptives Over-the-Counter in the US.** Oral contraceptives (OCs) are one of the most widely used and effective methods of birth control available worldwide. They are one of the best-studied and safest medications on the market today, yet in most of North America and Western Europe a prescription is required to obtain them.

**Texas Policy Evaluation Project (TxPEP).** In 2011, and again in 2013, the Texas Legislature passed sweeping legislation impacting reproductive health in Texas, which has a population of 5.4 million women of reproductive age.

**Telemedicine to Improve Access to Abortion Care.** The practice of telemedicine—accessing care remotely from a doctor or nurse via phone or teleconference to address a health need—is a rapidly growing segment of the healthcare landscape. *Forbes* recently called it a “game-changer for patients.”

**Reproductive Health Access for Women in the US Military.** Because of the provisions of the Hyde Amendment, a federal law that prohibits federal funding from being used for abortion care except in the case of rape, incest or life endangerment, the hundreds of thousands of women serving in the U.S. military face unique barriers to accessing care.

**Contraceptive Preferences.** Nearly all women in the United States have used a method of contraception. Most commonly, women use condoms or the pill, but an increasing number choose an Intrauterine Device (IUD) or

contraceptive implant. Inconsistent use and discontinuation rates are high for all methods. ANSIRH researchers have found that currently available methods do not have all the features that women say are important to them.

**Public Funding for Abortion Where Broadly Legal.** Nearly half of the countries with liberal or liberally interpreted abortion laws had public funding for abortion, including most countries that liberalized their abortion law in the past 20 years. Outliers remain, however, including among developed countries where access to abortion may be limited due to affordability.