Why Compromise? Quality Preconception Care

Cheryl L. Robbins, Ph.D.

PRECONCEPTION CARE IN U.S. CLINICS THAT PROVIDE PUBLICLY-FUNDED FAMILY PLANNING SERVICES
Disclaimers and Acknowledgements

- The findings presented today are those of the authors and do not represent the official position of CDC or OPA

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Objectives

- Describe administrators’ reported prevalence of:
  - Reproductive life plan assessment
  - Provision of preconception care
  - Written protocols for specific preconception care screenings

- Describe how estimates vary by Title X funding status and health center type
QFP Recommendation for Preconception Care*

- QFP identified preconception care (PCC) as a core family planning service (April 2014)
- PCC can improve the health of women and men through health promotion, screening, and interventions
- PCC is medical care to identify and modify biomedical, behavioral, and social risks to a women’s health or future pregnancy outcomes

OPA and CDC Survey

- **Baseline survey to assess baseline practices among family planning providers** (June 2013 – May 2014)
  - Administered prior to release of QFP
  - Covered a range of QFP-related topics

- **Monitor changes in QFP recommended practices over time among family planning providers**
The Survey Sample

- **Sample frame provided by Guttmacher Institute**
  - National sample of administrators of publicly-funded health centers that offer family planning

- **Diverse sample of administrators**
  - Health center type (health department, CHCs, PPs, hospitals)
  - Title X funding status (yes/no)
  - Geographic location (HHS regions)
  - Service delivery area (urban/rural)
### Survey Respondents

- 50% response rate (n=1,615)

<table>
<thead>
<tr>
<th>Health center type</th>
<th>Weighted %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community health center</td>
<td>37</td>
</tr>
<tr>
<td>Health department</td>
<td>31</td>
</tr>
<tr>
<td>Hospital and other</td>
<td>23</td>
</tr>
<tr>
<td>Planned Parenthood</td>
<td>9</td>
</tr>
</tbody>
</table>

#### Received Title X funding

- Yes: 49
- No: 51
## Survey Respondents

<table>
<thead>
<tr>
<th>Geographic location</th>
<th>Weighted %</th>
</tr>
</thead>
<tbody>
<tr>
<td>NE/Mid-Atlantic (Regions I-III)</td>
<td>18</td>
</tr>
<tr>
<td>South/SW (Regions IV and VI)</td>
<td>33</td>
</tr>
<tr>
<td>Midwest (Regions V and VII)</td>
<td>19</td>
</tr>
<tr>
<td>West (Regions VIII-X)</td>
<td>30</td>
</tr>
</tbody>
</table>

### Service Delivery Area

<table>
<thead>
<tr>
<th>Service Delivery Area</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mostly urban/suburban</td>
<td>31</td>
</tr>
<tr>
<td><strong>Mostly rural</strong></td>
<td><strong>48</strong></td>
</tr>
<tr>
<td>Both rural and urban/suburban</td>
<td>21</td>
</tr>
</tbody>
</table>
Results - Preconception Care (PCC)

Provision of PCC
- Stratified by client gender

Written clinical protocols
- Assessment of reproductive life plans (RLPs)
- Specific PCC screenings
  - Stratified by client gender
Frequency Measures of PCC for Women and Men

- **Based on two survey questions:**
  - “In the past 3 months, about how often did your health center provide preconception health care for women?”
  - “In the past 3 months, about how often did your health center provide preconception health care for men?”

- **Response options were dichotomized:**
  - “never” or “rarely”
  - “occasionally” or “frequently”
Provision of PCC by Client Gender

Overall prevalence is for female clients = 81%

Overall prevalence is for male clients = 38%
Provision of PCC - Title X funding

Title X funded agencies reported a **higher** prevalence of providing preconception care to:

**Women**
- Title X: 85%
- Non Title X: 77%

**Men**
- Title X: 36%
- Non Title X: 39%

* p<.05
### Provision of PCC – Health Center Type

<table>
<thead>
<tr>
<th>Health Center Type</th>
<th>Female clients</th>
<th>Male clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Health Center</td>
<td>77%</td>
<td>43%</td>
</tr>
<tr>
<td>Health Department</td>
<td>85%</td>
<td>31%</td>
</tr>
<tr>
<td>Planned Parenthood</td>
<td>77%</td>
<td>37%</td>
</tr>
<tr>
<td>Hospital/Other</td>
<td>83%</td>
<td>39%</td>
</tr>
</tbody>
</table>

* Chi-square test comparing distribution of health center type by client gender, p<.05
Written Protocol for Assessing RLPs

- Based on multi-part question about having written protocols for various counseling topics during contraceptive counseling
- Response options: Yes/No
- Assessment of RLP defined as “asking about clients’ intentions regarding the number and timing of pregnancies in the context of their personal values and life goals”
Written Protocol to Assess RLPs

- Overall percentage =
- Title X funding
  - Yes =
  - No =
- Health Center Type
  - Planned Parenthood =
  - Community Health Center =
  - Health Department =
  - Hospital/other =
Written Protocol to Assess RLPs

- Overall percentage = 57.0%
- Title X funding
  - Yes =
  - No =
- Health Center Type
  - Planned Parenthood =
  - Community Health Center =
  - Health Department =
  - Hospital/other =
Written protocol to assess RLPs

- Overall percentage = 57.0%
- Title X funding*
  - Yes = 76%
  - No = 35%
- Health Center Type
  - Planned Parenthood =
  - Community Health Center =
  - Health Department =
  - Hospital/other =

* p<.0001
Written protocol to assess RLPs

- Overall percentage = 57.0%
- Title X funding*
  - Yes = 76%
  - No = 35%
- Health Center Type*
  - Planned Parenthood = 92%
  - Community Health Center = 30%
  - Health Department = 76%
  - Hospital/other = 52%

*p < .0001
Written Protocols for Specific PCC Screenings for Women

- Based on multi-part question
- Response Options: Yes/No
- Screening: routinely asking questions or performing a physical exam or laboratory test

- Intimate partner or sexual violence (IPV)
- Alcohol or drug use
- Body Mass Index
- Tobacco use
- Blood pressure
- Diabetes
- Depression
- Immunizations
- Chlamydia
- Gonorrhea
- Syphilis
- Human immunodeficiency virus
Written Protocols for Specific PCC Screenings for Female Clients

MOST FREQUENT

Tobacco use  88
Blood pressure  87
Written Protocols for Specific PCC Screenings for Female Clients

LEAST FREQUENT

Diabetes
- Percent: 76

Syphilis
- Percent: 74
### Percentage Reporting Written Protocols for Specific PCC Screenings for Female Clients

<table>
<thead>
<tr>
<th>Specific PCC Screening*</th>
<th>Title X</th>
<th>Non-Title X</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syphilis</td>
<td>88</td>
<td>59</td>
<td>29</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>93</td>
<td>68</td>
<td>25</td>
</tr>
<tr>
<td>IPV</td>
<td>91</td>
<td>66</td>
<td>25</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>94</td>
<td>70</td>
<td>24</td>
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<td>100</td>
<td>92</td>
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<td>56</td>
</tr>
<tr>
<td>Syphilis</td>
<td>96</td>
<td>89</td>
<td>71</td>
<td>54</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>99</td>
<td>95</td>
<td>78</td>
<td>64</td>
</tr>
<tr>
<td>HIV</td>
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## Percentage Reporting Written Protocols for Specific PCC Screenings for Female Clients

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Written Protocols for Specific PCC Screenings for Male Clients

- Most frequently reported:
  - Tobacco use (83%)
  - Blood pressure (80%)

- Least frequently reported:
  - Syphilis (70%)
  - Diabetes (66%)

- Estimates lower for all screenings compared with estimates of protocols for female clients

- Estimates generally higher among Title X funded health centers

- Estimates generally highest among PPs, followed by HDs, Hospitals/other, and CHCs
Limitations

- Self-reported data subject to desirability bias
- Results indicate presence of protocols for specific PCC screenings, not actual delivery of services
- No information about the quality or implementation of protocols for PCC screening services
Summary

- Only 57% of health centers reported having written protocols for RLP assessment

- Prevalence of having written protocols for specific PCC screenings ranged 74-88% (women) and 66-83% (men)
  - Most frequently reported protocols were for tobacco use and blood pressure screening
  - Least frequently reported protocols were for diabetes and syphilis screening

- Baseline assessment indicates room for improving delivery of recommended preconception care
Thank you.

For more information please contact Centers for Disease Control and Prevention

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E-mail: cdcinfo@cdc.gov   Web: www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.