



# Briefly...

## State and Local Efforts to Reduce Unplanned Pregnancy Among Adults

**Of the 6.4 million pregnancies in the United States in 2001, nearly half – more than 3 million – were unplanned. Of these unplanned pregnancies, 55 percent are to women in their 20s, and 69 percent are to unmarried women.**

The National Campaign has recently expanded its mission to include reducing unplanned pregnancy among single, young adults with a focus on those in their 20s; this group accounted for more than 1 million of the 3 million unplanned pregnancies in 2001. While teen pregnancy prevention remains a focus of our work, a growing body of research shows that unplanned pregnancy among adults can also result in a number of negative outcomes for children and families, including late entry into prenatal care, abuse and neglect, behavioral and cognitive deficits, economic hardship, and relationship and family turmoil. For additional information on unplanned pregnancy in the U.S., please visit <http://www.thenationalcampaign.org/national-data/unplanned-pregnancy-birth-rates.aspx>.

We recognize that a number of states are doing important work to prevent unplanned pregnancy through state and local family planning and human services programs, community health clinics, and other approaches to promoting pregnancy planning among women and men. We have attempted to highlight unique examples of work on this issue from all over the country, where states have introduced initiatives and innovations in this area. This certainly is not an exhaustive list of states' efforts, and we are eager to learn more about what other groups are doing on this issue.

### States

#### California

California's innovative family planning program, FamilyPACT (Planning, Access, Care and Treatment), was started in 1997 under Gov. Pete Wilson to replace the state's previous family planning program which served 500,000 individuals each year through state contracts with 100 community and public health clinics. Any woman, man, or adolescent who is at or below 200 percent of the federal poverty level and has no other source of reproductive health care is eligible to receive comprehensive family planning services through this program. Family PACT served 750,000 clients during its first year.

In 1999, the program was expanded with a Medicaid Family Planning Waiver which allowed for the expansion of the scope of services provided and for increased recruitment and outreach to adolescents and other hard-to-reach populations. Through a network of nearly 3,000 providers, including private practitioners, community health clinics, and public clinics, the program served a total of 1.5 million clients in 2003 alone.

According to an evaluation by Claire Brindis of the University of California, San Francisco, Institute for Health Policy Studies and her colleagues, FamilyPACT averted an estimated 205,000 unintended pregnancies (44,000 to teens) in 2002, which would have resulted in 79,000 abortions and 94,000 unintended births, including 21,400 births to adolescents. In addition, the total public sector cost-savings of the pregnancies averted by FamilyPACT in FY 2002 was over \$1.1 billion up to two years after birth and \$2.2 billion five years after birth. More information is available about this program at <http://www.familypact.org>.

## Indiana

The Indiana Perinatal Network and the Indiana Department of Health developed a comprehensive call-to-action, *Best Intentions: Unplanned Pregnancies and the Well-Being of Indiana Families*, in April 2007. The report, endorsed by the Indiana Section of the American College of Obstetricians and Gynecologists and Indiana Chapter of the American Academy of Pediatrics, culminates the yearlong efforts of 25 public and private healthcare professionals, clergy and human service providers throughout the state. This call-to-action emphasizes the need for common ground solutions and identifies short and long-term recommendations and strategies for providers, consumers and public officials to increase planned and properly spaced pregnancies in the State of Indiana over the next 10 years. To view the full report, visit [http://www.indianaperinatal.org/files/Unintended\\_CTA\\_120507.pdf](http://www.indianaperinatal.org/files/Unintended_CTA_120507.pdf).

## Iowa

In January 2008, former first lady Christie Vilsack launched the Iowa Initiative to Reduce Unintended Pregnancies. Funded by the Susan Thompson Buffett Foundation, the Iowa Initiative aims to reduce the high level of unintended pregnancies by educating young women about contraception and making it easier for them to obtain family planning counsel and services. By partnering with established family planning service providers around the state, the Iowa Initiative will help create awareness while exploring and implementing the best ways to reach this target market based on the results of research conducted by the University of Northern Iowa. These findings will help create a framework designed to increase knowledge, improve attitudes toward consistent contraceptive use, and increase the use of family planning services. For more information, visit the Initiative's website at <http://www.iowainitiative.org>.

## Michigan

The Governor's Blueprint for Reducing Unintended Pregnancies, released in 2005, outlined three strategies to achieve multiple objectives in ensuring that every pregnancy is a wanted pregnancy. The Michigan Department of Community Health, including the office of the Surgeon General, manages the initiative in an interagency partnership and has implemented three strategies that address the initiative's three objectives:

- **Increase public knowledge and skills that will help avoid unintended pregnancy:** In 2005, Talk Early & Talk Often was launched to support parents in their efforts to communicate with their middle school-aged children about abstinence and sex. In the program's pilot, over 800 parents participated in workshops led by 12 trained facilitators, and the evaluations indicate that these adults feel more comfortable speaking with their teens about this topic. Since the pilot, more than 30 workshops have taken place in various settings. The program has received substantial media attention, and several other states are working to implement the curriculum.
- **Expand and improve coverage for family planning services:** In July 2006, Michigan implemented a Medicaid family planning waiver, Plan First!, which provides coverage for family planning services for women aged 19 through 44, who are not otherwise eligible for Medicaid and whose incomes are at or below 185 percent of the federal poverty level. Pregnancy Risk Assessment Monitoring System (PRAMS) data for Michigan indicates that 64 percent of Medicaid births are the result of an unintended pregnancy. The state estimates that Michigan can save up to \$39 million dollars with a 10 percent reduction in unintended pregnancy.
- **Challenge and engage Michigan's health care community in a statewide effort to reduce the rate of unintended pregnancy in Michigan:** A 40-member Provider Task Force, along with the Michigan Quality Improvement Consortium, a group of Michigan health plans representing 6 million people in Michigan, collaborated to produce a clinical guideline to encourage all health providers to discuss pregnancy planning with all men and women 18 years and older. The guide's four-point intervention process encourages conversations between providers and patients about the risks and consequences of unintended pregnancy, intention to have a child, and helping women and men to plan and prepare for their pregnancies.

To read Michigan's background paper and recommendations, please visit [http://www.michigan.gov/documents/REDUCING\\_UNINTENDED\\_PREGNANCIES\\_132688\\_7.pdf](http://www.michigan.gov/documents/REDUCING_UNINTENDED_PREGNANCIES_132688_7.pdf). For more information on the Clinical Guideline, please visit the Surgeon General's website at <http://www.michigan.gov/mdch/0,1607,7-132--65525--,00.html>.

## **Oregon**

To ease the burden of the citizenship documentation requirement for Medicaid now mandated through the Deficit Reduction Act (DRA) of 2005, the state of Oregon has developed a 'one-time exception' strategy for individuals accessing family planning services through its Medicaid waiver. Applicants that meet all eligibility criteria except for the citizenship verification requirement are still offered one waiver-covered contraceptive management visit which includes up to one year's supply of contraception.

If the patient can provide the required documentation in a reasonable amount of time, the state is able to claim federal matching funds to cover the visit. Within six months of a visit, 60 percent of patients were able to produce the required documents. For more information on Oregon's family planning program, please visit <http://www.oregon.gov/DHS/ph/fp>.

## **Virginia**

The Virginia Department of Health's Partners in Prevention program focuses on unplanned pregnancy prevention among 20-29 year-olds. This builds on an ongoing effort to reduce non-marital births through the department's "I Do" campaign.

While the message is new, the work has already begun largely through the efforts of ten local grantees who are reaching out to individuals through community colleges and vocational schools, parole and probation offices, subsidized housing, and family planning clinics. In FY 2006, 37 percent of the grantees' clients were male – which they are hoping to increase to 50 percent in the coming years. Communities are conducting outreach through basketball leagues and computer training courses which require the men to participate in a one hour family planning educational course. The Department of Health has also produced three new public service announcements, two for radio and one for television, which each contain positive messages about planning pregnancies. For more information, please visit <http://www.vahealth.org/pip>.

## **Washington**

Washington State offers family planning services to clients of the Department of Social and Health Services' (DSHS) Community Services Offices (CSOs), which determine eligibility for financial and other support services such as Medicaid and Temporary Assistance to Needy Families. In fact, Washington mandates that family planning information and assistance be made available to all women

and men enrolled in the state's welfare program, WorkFirst, which has a goal of zero additional births for clients. CSOs have trained staff on-site who provide education about preventing unplanned pregnancies and referrals for medical family planning services. Family planning nurses offer medical services on-site at some CSOs and at local family planning agencies, which partner with DSHS in this program.

Providing family planning education and services to individuals receiving welfare is just one way Washington State is addressing unintended pregnancy. This program, along with the Washington's Medicaid family planning waiver, has contributed to declines in unintended pregnancies for women receiving welfare and Medicaid. General information about Washington's program, as well as information on family planning in CSOs, is available at <http://fortress.wa.gov/dshs/maa/familyplan>.

## **Wyoming**

The Wyoming Department of Health, in partnership with the Wyoming Health Council, will launch a social marketing campaign in Spring 2008 for 18-24 year olds on reducing unplanned pregnancy, HIV, STIs, and hepatitis. The interactive website, <http://www.getthei.com> ("I" stands for information), will contain storyboards, myths and facts on pregnancy, HIV, STIs, and hepatitis; a risk behavior quiz; and helpful resources. Movie theater ads and additional social marketing will encourage young adults to visit the website.

## **Communities**

### **New York City**

In 2006, Planned Parenthood of New York City unveiled its "Planning is Power" ad campaign to raise awareness and promote positive messages about contraceptive use. This bilingual education campaign had materials appear on 1,000 subway cars, 2,000 buses, 145 phone booths, English- and Spanish-language radio stations, and two prominent billboards. For more information, please visit <http://www.plannedparenthood.org/nyc>.

### **San Antonio**

A community-wide meeting has been held in San Antonio on preventing unplanned pregnancy, and a working coalition has been created to address this issue in San Antonio and Texas. This

coalition, comprised of community leaders, elected officials, and providers, will function through the efforts of its three task forces: a Policy Task Force that will develop a policy agenda in the coming months; an Education/Curriculum Task Force that will make recommendations on content for educational materials, health curricula and social marketing campaigns; and an Assessment Task Force that will focus on collecting data on needs and resources in San Antonio.

The San Antonio coalition is led by Dr. Janet Realini in collaboration with the University of Texas School of Public Health and the

South Central Area Health Education Center. Dr. Realini has put together suggested proposals for the coalition to consider in a document entitled *Reducing Unplanned Pregnancy in Texas: Strategies to Improve Health and Strengthen Families*. These proposals include increasing access to contraception for low-income women, expanding insurance coverage of contraceptives, improving integration of pregnancy planning into the health care system, and ensuring that young adults, including college students, have access to information on sex, relationships, abstinence and contraception.