

# Georgetown University's Institute for Reproductive awarded Office of Population Affairs grant to increase family planning service utilization in California

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In September 2010, Georgetown University's Institute for Reproductive Health (IRH) was awarded a 3-year, \$600,000 grant by the Department of Health and Human Service's Office of Population Affairs (OPA) titled "Increasing Efficiency and Utilization of Family Planning Services through Systematic Integration." This research is a collaborative effort between Golden Valley Health Centers (GVHC) of Central California and IRH. Rebecka Lundgren, IRH's Deputy Director and Director of Research, is the Principal Investigator.

The study will determine whether Systematic Screening, a best practice successfully tested in developing countries, is a feasible and effective in-reach strategy to: 1) increase the use of family planning and sexually transmitted infection (STI) services among Latino women and men and other vulnerable populations by integrating family planning counseling with diabetes care and other services; and 2) increase the efficiency of study clinics by increasing the number of services provided in a single visit. Systematic Screening typically consists of designing and using an algorithm of between five and ten questions that are answered with a yes or no; depending on the answer, the provider offers the service to meet the identified service need of the client or asks another question to identify the need for a different service.

It is expected that Systematic Screening will improve the efficiency of services by addressing multiple needs in a single visit. Moreover, patient health will be improved by detecting and addressing unmet needs, particularly in the areas of family planning, STI screening and treatment, and diabetic screening and counseling. Nearly 77% of GVHC's clients are Latino, primarily of Mexican origin, and nearly half are farm workers and their dependents. Increasing the use of services among Latinos is important due to disparities in health care, diabetes prevalence and family planning use. Many immigrant Latinos have no regular source of health care, and preventive care is difficult to achieve. Diabetes is now considered "an emerging health threat" among Latinos nationally. Despite improvements in maternal and fetal surveillance techniques, women with diabetes continue to fare worse during pregnancy than non-diabetic women. The only way to increase the chances for a healthy pregnancy and baby among diabetic women is through planned pregnancies and preconception counseling, including utilizing appropriate family planning strategies to postpone pregnancy until glucose levels are controlled.

As this is the first time this innovation is being tested in the U.S., the study provides a unique opportunity for South to North diffusion with the potential of significant health improvements among underserved populations in the U.S. The identification of effective, feasible, and replicable integration strategies, if scaled-up widely, could play a role in decreasing unintended pregnancies, and ensuring healthier pregnancies and health outcomes while promoting utilization of preventive health care.

## Research Overview:

The research design includes formative research and the collection of baseline and endline data in experimental and control clinics. GVHC clinics are matched and randomly assigned to control and experimental groups. Service statistics will be used to compare changes in the number of: 1) services provided to clients per visit; 2) family planning users; and 3) patients receiving diabetic screening and pre-conception counseling before and after implementing Systematic Screening in the control and experimental groups. Data will be collected to determine the cost-effectiveness of the Systematic Screening approach. In addition, simulated client interviews and chart audits will test the fidelity of the intervention.

## Project Partners:

IRH, directed by Dr. Victoria Jennings, has over 25 years experience in designing and implementing evidence-based programs that address critical needs in family planning and reproductive health. IRH has more than 20 years experience managing multi-site research with a wide range of partners in 30 countries, including a service delivery improvement project to test the integration of the Standard Days Method® (SDM) into family planning services in Title X funded clinics in California.

GVHC is a private, non-profit organization, and has provided comprehensive primary medical care to Central California's San Joaquin Valley through a network of 25 clinics for over 35 years. GVHC serves an ethnically diverse population, including migrant and seasonal farm workers, Southeast Asian refugees and the homeless population of Modesto. GVHC has participated in a variety of research projects including mammography screening for Latinas with diabetes, and cultural/linguistic competence for HIV education and testing.

For more information, contact [irhinfo@georgetown.edu](mailto:irhinfo@georgetown.edu)

