Performance Measure 1: Increase statewide capacity to reduce unintended pregnancies among populations at high risk for poor birth outcomes.

Last Year's Accomplishments

Progress for this process measure is measured by the extent to which four benchmarks can be reached. The target for FFY Year 2007 was to reach three of these benchmarks: 1) identify baseline rates of unintended pregnancy rates in Ohio; 2) identify populations and areas at risk for poor birth outcomes; and 3) identify and apply appropriate evidenced-based practice standards and interventions for the target population. Ohio has met benchmarks 2 and 3 and has made progress toward #1 through analysis of PRAMS data.

A. Identify baseline rates of unintended pregnancy in Ohio.

State level data on unintended pregnancy that is available through the Pregnancy Risk Assessment Monitoring System (PRAMS) for the years 2000-2003 demonstrated that 86% of live births among teens 15 to 17 years of age were unintended, and that 80% of live births for 18-19 year olds were unintended . Identification of model methods appropriate for determining rates of unintended pregnancy in Ohio at the state and county levels remains ongoing.

B. Assess population groups and geographic areas at risk for poor birth outcomes.

Updated analysis for risks of unintended pregnancy and poor birth outcomes was completed using PRAMS and Vital Statistics data. Qualitative analysis of focus group data was competed and summarized, with implications of these findings currently under review.

C. Identify and apply appropriate, evidence-based practice standards and interventions for the target population.

Applying ODH data, efforts to reach at risk populations has focused on building capacity for cultural competency. The ODH family planning project implemented a tool for assessment of cultural competence within delegate agencies (See http://www.odh.ohio.gov/odhPrograms/cfhs/famx/familyx1.aspx). The completed assessments have progressed toward implementation of strategic plans to improve culturally competent policies and health services.

Literature review of evidence-based practice and interventions to decrease rates of unintended pregnancy is ongoing. The planning process is applying evidence-based criteria to identify model programs of outreach and preventive education within Ohio. Best practice criteria have been distributed for clinical protocols and program guidelines through technical assistance visits with 53 delegate agencies. Resources have been identified toward improved program evaluation, including assessment of consumer satisfaction and outcome measures.

D. Implement a Family Planning Medicaid Waiver

ODH is collaborating with Ohio Department of Job and Family Services toward submission of a Family Planning Medicaid Waiver to the Centers for Medicaid & Medicare Services (CMS). This waiver would provide family planning services to cover men and women ages 18 to 44 whose incomes were at or below 250% poverty and would increase eligibility for family planning services that would include natural family planning along with HIV testing. The goal of these services would be to increase the preconception/interconception care for men and women in order to improve general health and birth outcomes.