

OPA RESEARCH & EVALUATION UPDATE

Office of Population Affairs, Office of Research and Evaluation

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OPA-Funded Research Publications

Significant Differences Exist in the Referral Practices of Family Planning Providers in Different Institutional Settings

A recent study examining the referral practices of 456 family planning providers in two southern states found that while almost all family planning providers referred their human immunodeficiency virus (HIV) infected patients to other providers, that a provider's institutional setting (health department, community health center, or private practice) is associated with significant differences in referral practices. The study investigators mailed a survey to all Medicaid enrolled family planning providers in Alabama and Arkansas (n=1743). Twenty-six percent of the providers returned completed surveys. The providers were asked to indicate how often they engaged in nine activities that improved referral follow-up for patients with non family planning health conditions including HIV. The activities queried included identification of a patient's usual primary care provider, writing a referral, supplying referral provider contact information, calling the referral provider, making the referral appointment, reminding patient of appointment, arranging transportation, following up with a referral provider, and following up with the patient.

The findings indicate that providers from all three settings routinely facilitate referrals, but providers from health departments and community health centers are less likely than providers in private practice to refer their patients with non family planning health conditions to another provider. Despite the lower odds of referral, providers from health departments and community health centers engaged in significantly more referral facilitation activities than private practice providers. In addition, private practice providers were less likely than their counterparts to be aware of specialized HIV resources in their local areas, and had fewer personal relationships with providers of these resources. The authors suggest that the development and distribution of a community resources directory could facilitate appropriate referrals by family planning providers.

Felix, H., Bronstein, J., Bursac, Z., Stewart, M., Foushee, H., & Klapow, J. (2010). Referral and Referral Facilitation Behavior of Family Planning Providers for Women with HIV Infection in the Southern United States. *Journal of Women's Health*, 19(7), 1385-1391. Available at <http://www.liebertonline.com/toc/jwh/19/7>.

A Clinic-Based Intervention to Improve Young Men's Sexual Health

A reproductive health education intervention for men was integrated into initial visits at the Young Men's Clinic in New York City. Male patients (n=157) completed surveys to assess their reproductive health knowledge, beliefs, attitudes, and behaviors. The participants were predominantly low-income, Latino and African American patients. The health education intervention aimed to create teachable moments during commonly occurring events such as clinic visits. The first component of the intervention, a 15-20 minute presentation on sexual and reproductive health (SRH), was delivered in the clinic waiting room while men waited for individual services. The participants also met individually with a health educator. Finally, during the clinical exam, the physicians reviewed the teaching points and looked for teachable moments while discussing the patient's medical history. The participants did not demonstrate a significant change in beliefs about health care utilization or attitudes about condom use, but significantly increased their knowledge and frequency of safer sexual behaviors during the three months following their initial visit. The authors assert that sexual health information can be effectively disseminated at various points during routine clinic visits, including down time in waiting rooms, and individual encounters with health educators and medical providers.

Armstrong, B., Kalmuss, D., Franks, M., Hecker, G., & Bell, D. (2010). Creating Teachable Moments: A Clinic-Based Intervention to Improve Young Men's Sexual Health. *American Journal of Men's Health*, (4)2, 135-144. Available at <http://jmh.sagepub.com/content/4/2/135.abstract>.

OPA-Funded Research Publications (*continued*)

Withdrawal is Still a Popular Contraceptive Method among Young Adults

Researchers conducted interviews with 95 ethnically diverse males and females aged 18–25 in the Philadelphia area, recruited through family planning clinics and community outreach, to examine issues around contraceptive attitudes, norms, and experiences. The findings indicate that while some participants, especially women, expressed doubt about the effectiveness of withdrawal as a contraceptive method, that they still reported using withdrawal often. Participants' reasons for using withdrawal were varied but included convenience and dissatisfaction with hormonal contraceptives and condoms. Few participants reported having discussed withdrawal with their health care providers. The authors suggest that provider initiated discussions of withdrawal as a contraceptive method may offer opportunities to educate clients about more effective methods of birth control.

Whittaker, P., Merkh, R., Henry-Moss, D., & Hock-Long, L. (2010). Withdrawal Attitudes and Experiences: A Qualitative Perspective among Young Urban Adults. *Perspectives on Sexual and Reproductive Health*, 42(2), 517-524. Available at <http://www.guttmacher.org/pubs/journals/4210210.html>.

Related Research in the Professional Literature

Female Adolescents Less Likely to Report Discussing Birth Control Methods with Parents in 2002 than in 1995

The authors examine trends in adolescents' reports of discussions with parents about sexually transmitted diseases (STDs) and birth control methods from 1988 to 2002 using data from the 1988 and 1995 National Survey of Adolescent Males, and the 1988, 1995, and 2002 National Survey of Family Growth (NSFG). The sample includes never married males and females aged 15–17 years. Male adolescents' discussions of birth control methods with their parents appear stable over time, but female adolescents were less likely to report having a discussion with a parent about STD or birth control methods in 2002 than they were in 1995. The proportion of female adolescents reporting no discussion of either topic with their parents in 2002 increased by almost 50% compared to 1995. The authors suggest that consideration of the role of parents in adolescent sexual decision making is an important component of a comprehensive prevention strategy.

Robert, A., Sonenstein, F. (2010). Adolescents' Reports of Communication with Their Parents about Sexually Transmitted Diseases and Birth Control: 1988, 1995, and 2002. *Journal of Adolescent Health*, 46, 532-537. Available at [http://jahonline.org/issues/contents?issue_key=S1054-139X\(10\)X0007-6](http://jahonline.org/issues/contents?issue_key=S1054-139X(10)X0007-6).

Demographic Factors and Policy Changes Associated with Increase in Teen Birth Rates

The birth rate for adolescents in the United States aged 15-19 years increased in 2006 by 3% and in 2007 by an additional 1%. The authors examine demographic and policy factors that may explain the recent increase in the adolescent birth rate in the United States using data from multiple sources. The factors assessed include impact of the distribution of teen birth rates, access to sex education, family planning service policies, and demographic features across each state in 2006. The findings indicate that the Medicaid family planning waivers were associated with reductions in teen birth rates across all ages and races, while abstinence only education programs were associated with an increase in teen birth rates among white and black teens. The increasing Hispanic population was also found to be associated with an increase in teen birth rates. The authors conclude that future pregnancy prevention efforts should focus on the provision of contraception and specifically address the needs of teens from different cultural backgrounds.

Yang, Z., & Gaydos, L. (2010). Reasons for and Challenges of Recent Increases in Teen Birth Rates: A Study of Family Planning Service Policies and Demographic Changes at the State Level. *Journal of Adolescent Health*, 46(6), 517-524. Available at [http://jahonline.org/issues/contents?issue_key=S1054-139X\(10\)X0007-6](http://jahonline.org/issues/contents?issue_key=S1054-139X(10)X0007-6).

News from Federal Agencies

Affordable Care Act Initiatives

The Office of Adolescent Health will award grants to states, territories, and tribes in FY2010 for two new programs authorized by the Affordable Care Act. The Personal Responsibility Education Program will support strategies to educate youth on the prevention of pregnancy and sexually transmitted infections. The Pregnancy Assistance Fund will support services for pregnant and parenting teens and women; including services for pregnant victims of domestic and sexual violence. Additional information is available at http://www.hhs.gov/oph/oah/prevention/grants/announcements/pregnancy_assistance_foa.pdf.

HHS Poverty Guidelines Updated

Updated poverty guidelines were published in the Federal Register on August 3rd 2010. This notice provides a delayed update to the Department of Health and Human Services (HHS) poverty guidelines for the remainder of 2010. They will remain in effect until the 2011 poverty guidelines are published in late January 2011. The Federal Register notice is available at <http://aspe.hhs.gov/poverty/10fedreg.shtml>.

New NSFG Report Released

The National Center for Health Statistics released a Vital and Health Statistics Series Report describing the new continuous sample design of the 2006–2010 National Survey of Family Growth (NSFG), and its implications for statistical research. The report is available at http://www.cdc.gov/nchs/data/series/sr_02/sr02_150.pdf.

New Online Course on Sex and Gender in Human Health

The NIH Office of Research on Women's Health (ORWH), in collaboration with the Food and Drug Administration (FDA), and the Office of Women's Health (OWH), announced the launch of a new online course, "The Science of Sex and Gender in Human Health." The course offers participants a basic scientific understanding of the major physiological differences between the sexes, their influence on illness and health outcomes, and their implications for policy, medical research, and health care. For more information, visit <http://sexandgendercourse.od.nih.gov/>.

Action Agenda and Recommendations Available Online

The Department of Health and Human Services (HHS), Coordinating Committee for Women's Health (CCWH) published a summary of discussions, and recommendations for Women's health entitled "A Summit for Action: The Health of Women and Girls beyond 2010." The report identifies opportunities and strategies to advance the status of the health of women and girls. The report is available at <http://www.womenshealth.gov/owh/pub/womens-summit-summary-060810.pdf>.

News from National Organizations

Emergency Contraception Fact Sheet Updated

The Kaiser Family Foundation has provided an updated emergency contraception fact sheet which provides information on emergency contraception use, costs, and insurance coverage. It also reviews current national and state policies around emergency contraception, including new methods, recent research findings on access and availability, and user and provider knowledge. The fact sheet is available online at <http://www.kff.org/womenshealth/upload/3344-04.pdf>.

Summary of New Health Reform Law Available Online

The Kaiser Family Foundation has made available a concise but thorough summary of the New Health Reform Law including an implementation timeline. The report and the timeline are available at <http://www.kff.org/healthreform/upload/8061.pdf> and <http://www.kff.org/healthreform/upload/8060.pdf>.

In Memoriam Lorraine Klerman (1928-2010)

Lorraine Klerman was a graduate of Cornell University and the Harvard School of Public Health. She initiated her research on adolescent childbearing in 1965 when she was at the Department of Epidemiology and Public Health at the Yale School of Medicine. She and her colleagues studied one of the first comprehensive service programs for school-age mothers, the Young Mothers Program. The five-year research project, supported by the Federal Children's Bureau, resulted in many journal articles and a book, *School-Age Mothers: Problems, Programs, and Policy*. Although Dr. Klerman continued to study adolescent sexuality, pregnancy, and parenting; her research interests expanded to other aspects of maternal health, such as prenatal care and family planning. Over the course of her 50 year career, she published extensively in professional journals, served on numerous advisory committees and received many awards. Lorraine collaborated with OPA on many initiatives. Her contributions to the field are innumerable and she will be missed.

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