

# Study measures impact of removing Planned Parenthood from Texas women's health program

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The public defunding of Planned Parenthood in Texas may have led to a decrease in highly effective forms of contraceptive services and an

increase in Medicaid-paid childbirths among women who previously used injectable contraception, according to a peer-reviewed study by University of Texas at Austin researchers.

The study, published in the *New England Journal of Medicine* on Feb. 3, used administrative records to assess rates of the provision of contraceptives, as well as deliveries (childbirth) covered by Medicaid from 2011 through 2014—before and after Texas excluded Planned Parenthood affiliates from a publicly funded women's [health](#) program.

The researchers found that since the exclusion, 35 percent fewer claims were made for long-acting, reversible contraceptives, such as implants and intrauterine devices; and 31 percent fewer claims were made for injectable contraceptives, such as Depo-Provera. In contrast, no significant changes were found in the provision of short-acting hormonal contraceptives, such as contraceptive pills, patches and rings.

"Providers who are mission-driven and have the requisite experience and knowledge are critical in providing the most effective methods of contraception—IUDs, implants and injectables," said Joseph Potter, director of the Texas Policy Evaluation Project and professor in the university's Population Research Center. "From a demographic perspective, this is important because these methods dramatically decrease unintended pregnancy. We also have accumulating evidence of an unmet demand for these methods in Texas."

The study also noted a 27 percent increase in the rate of deliveries paid for by Medicaid among women who received injectable contraceptives prior to funding being barred for Planned Parenthood.

"This study isolates the effect of the exclusion not only on the delivery of services, but also on subsequent deliveries paid by Medicaid," said lead author Amanda Stevenson, a Ph.D. candidate in sociology. "We

examined differences between counties that had Planned Parenthood affiliates versus those that did not to determine how the public was affected once affiliates could no longer use public funds to provide contraceptive services."

In 2013, the Women's Health Program—which was 90 percent federally funded as a Medicaid waiver program—was replaced by the wholly state-funded Texas Women's Health Program. Both programs provided services to female, legal Texas residents ages 18 to 44 who had incomes at or below 185 percent of the federal poverty level.

"The U.S. continues to have higher rates of unintended pregnancies than most rich nations, and we know that U.S. and Texas women face barriers as they try to access preventative services," Stevenson said. "It's a public health issue that Texas women struggle to achieve their reproductive goals."

Stevenson and Potter co-authored the study, "Effect of removal of Planned Parenthood from Texas women's health program," with Imelda Flores-Vazquez and Richard Allgeyer from the Texas Health and Human Services Commission, and attorney Pete Schenkkan of Graves, Dougherty, Hearon and Moody, with funding provided by the Susan T. Buffett Foundation.

Provided by University of Texas at Austin

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