


An evaluation of sexual and reproductive health (SRH) service provision in the School-Based Health Center Reproductive Health Project (SBHC RHP)

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Presenter Disclosures

- Presenter: Rebecca Fisher MPH, MA
- (1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:
 - No relationships to disclose



School Based Health Center Reproductive Health Project (SBHC RHP)

- Joint initiative of the NYC Department of Health and Mental Hygiene's (NYC DOHMH) Office of School Health (OSH) and Bureau of Maternal, Infant and Reproductive Health (BMIRH)
 - The SBHC RHP is a program that to reduce unintended teen pregnancy in participating NYC high schools with SBHCs
 - The project is currently in 40 SBHCs run by 17 different sponsoring institutions
 - SBHCs are in about ~25% of NYC public high school campuses
 - Five-year privately funded project; 8/2008-6/2013
 - Project administered through the partnership between NYC DOHMH and the Fund for Public Health-NY (FPHNY)



School Based Health Center Reproductive Health Project (SBHC RHP)

- The project's goal is to reduce unintended teen pregnancy in participating NYC high schools with SBHCs
 - Standardize, increase access to, and assure the quality of SRH services provided in SBHCs serving NYC public high schools
 - Provision of training and technical assistance
 - Provide reimbursement for contraceptive and pregnancy test supplies to participating SBHCs

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School Based Health Center Reproductive Health Project (SBHC RHP)

- Presentation overview
 - Methods
 - Data sources
 - Demographics
 - Intermediate evaluation outcomes
 - Adoption of standard protocols/best practices in adolescent SRH
 - Onsite availability of contraceptives
 - Pregnancy testing
 - STI/HIV screening
 - Dispensing and use of contraceptives
 - Conclusions

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Methods

- **Data Source 1: Annual Site Visit Data**
 - Assessed adherence to standard protocols via in-person interviews at clinic sites (baseline-Year 3)
- Data included:
 - Baseline: 29 participating sites
 - SBHCs participating in EC Awareness Project
 - Year 1: 32 participating sites
 - Year 2: 36 participating sites
 - Year 3: 38 participating sites

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Methods (2)

- **Data Source 2: Clinic Visit (CV) Data**
 - CV data from January 1, 2009-June 30, 2011
 - Includes sites submitting encounter-level data

	Year 1 Jan'09-Jun'09	Year 2 Jul'09-Jun'10	Year 3 Jul'10-Jun'11
Sites submitting encounter-level data	19	23	38
Sites submitting summarized data	13	13	0

- Data included: 187,767 SBHC visits for all services by 42,546 unique patients

	Year 1 Jan'09-Jun'09	Year 2 Jul'09-Jun'10	Year 3 Jul'10-Jun'11
Patients	9,790	14,864	28,157
Visits	26,594	49,661	111,512

*Analyses on CV data conducted using SAS 9.2

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Demographics of SBHC Patients

		SBHC Patients (Average Years 1-3)	NYC High Schools
		%	%
Sex	Female	65%	48%
	Male	32%	52%
	Unknown/Missing	3%	--
Race/ Ethnicity	Black/non-Hispanic	43%	30%
	Hispanic	42%	39%
	White/non-Hispanic	3%	13%
	Asian/Pacific Islander	1%	17%
	Other	3%	1%
	Unknown/Missing	8%	--
Age	14 and under	17%	--
	15-17	68%	--
	18+	14%	--
	Unknown/Missing	1%	--

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History of Sexual Activity of SBHC Patients

- From Year 1 to Year 3, an average of 66% of clinic patients were ever sexually active
 - This is higher than the NYC public high school population in general
 - Based on the 2011 YRBS, 38% of NYC public high school students have ever been sexually active
 - Sexually active students utilize the SBHC

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SBHC RHP Evaluation Results

- ▣ Adoption of standard protocols/best practices in adolescent SRH
- ▣ Onsite availability of contraceptives
- ▣ Pregnancy testing and STI/HIV screening
- ▣ Dispensing and use of contraceptives

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Adoption of SRH Protocols at SBHCs

Protocol	Baseline (% of clinics)	Year 3 (% of clinics)
Pregnancy testing on demand	17%	100%
Advance EC provision	24%	97%
EC to Quick Start	69%	100%
Quick Start all hormonal methods	72%	89%
Urine STI screen	59%	97%
HIV counseling and testing	83%	95%
LARC Screening/Referral *	34%	100%

* LARC Screening/Referral increased in conjunction with the development of the LARC Regional Referral Network, which consists of 8 community based clinics that provide LARC to adolescents and receive reimbursements for the devices from the SBHC RHP

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Chlamydia/Gonorrhea, HIV and Pregnancy Testing among SA Patients at SBHCs

SA Females

Year	CT/GC (%)	HIV (%)	Pregnancy (%)
Year 1†	28%	11%	38%
Year 2‡	37% [^]	17% [^]	45% [^]
Year 3‡	59% [^]	36% [^]	38% [^]

SA Males

Year	CT/GC (%)	HIV (%)	Pregnancy (%)
Year 1†	16%	10%	10%
Year 2‡	24% [^]	11%	11%
Year 3‡	39% [^]	27% [^]	27% [^]

NOTE: SA is ever sexually active
[^]Significant change between years (p<0.05)
[†]Year 1 data is from January-June 2009; Year 2 data is from July 2009-June 2010; Year 3 data is from July 2010-June 2011

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Evaluation of SRH Service Provision in the SBHC RHP: Conclusions

- In the first 3 years, the SBHC RHP has led to:
 - Improved and standardized SRH service provision for adolescent clients among participating SBHCs in NYC public high schools
 - Adoption of protocols/standard best practices in adolescent SRH
 - Availability of contraceptive methods onsite
 - Increased provision of SRH services among participating SBHCs to sexually active patients including:
 - Pregnancy testing
 - Chlamydia/Gonorrhea testing
 - HIV testing
 - Increased use of regular hormonal contraceptive methods among sexually active SBHC patients
 - IUD use has increased significantly in each year of the project

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Limitations

- Composition of sites varied between years
- Summarized data submitted by 13 sites (3 sponsors) not included
 - Some of these sites were among the largest SBHCs participating in the project
- Data collection system changed throughout project
 - In years 1 and 2 encounter data collected with paper forms
 - In year 3 encounter data collected with web-based data collection and management system

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Questions?

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