



The Texas Policy Evaluation Project

Survey of Reproductive Health Clinics in Texas

Research Brief

THE STUDY

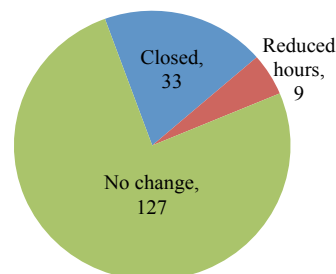
In 2011, the Texas state legislature reduced the funding for family planning by two-thirds and allocated the remaining funds through a three-tiered priority system. Public entities providing family planning services like health departments and Federally Qualified Health Centers were in Tier 1, and specialty family planning providers were in Tier 3; the remaining non-public entities that provided comprehensive preventive and primary care in addition to family planning were classified as Tier 2.

To evaluate the impact of the budget cuts and tiering system, we contacted all executive directors at organizations that received family planning funding before the budget cuts. Organizations that completed our survey between February and July 2012 served 93% of clients before the cuts. We also conducted in-depth interviews with leaders at 28 organizations.

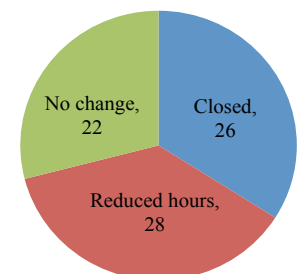
CLINIC CLOSURES AND REDUCED SERVICE HOURS

- Organizations in all tiers closed clinics and reduced hours at other locations that remained open.
- A higher percentage of Tier 3 clinics closed or had reduced hours compared with clinics operated by Tier 1 & 2 organizations. Although Tier 3 organizations accounted for a smaller number of total sites, they served about 40% of women seeking publicly funded family planning services.

Tier 1 and 2 Clinics



Tier 3 Clinics



STAFF LAYOFFS

- Nearly half the organizations reduced their staff between 9/2011 and 1/2012. Some organizations reduced total staff by more than 50%.
- 63% of Tier 3 organizations laid off staff compared with 39% of organizations in Tiers 1 & 2.
- At organizations that laid off staff, remaining employees had to take on additional duties; this and uncertainty about future employment affected morale.

CONFIDENTIAL TEEN SERVICES

- Some organizations lost their Title X funding that allowed teens to access contraception without parental consent. 40% of organizations required parental consent for teens after the budget cuts, compared to 25% before.
- Requirements to prove parental consent often involved a parent accompanying the teen to the clinic visit, which frustrated teens – and parents.

“First of all 51 people lost their job [and] that impacted their families dramatically. Then the people that are left behind... I mean it’s the extra work, but it’s the having to look at your neighbor and say ‘No, we can’t do this anymore.’”

-Administrative director, Tier 1

“The teens were furious and the mothers were furious that they had to come in with their teens ... You know because otherwise they didn’t have any other place to go, and they were very upset.”

-Executive Director, Tier 2

AVAILABILITY OF CONTRACEPTIVE METHODS

- After the funding cuts, there was more limited availability of nearly all methods. Fewer organizations widely offered long-acting methods and more Tier 3 organizations reported limited or no availability of these methods. This was primarily due to the methods' higher up-front costs.
- Limited access to long-acting methods mostly affected women whose services were covered by grant funding but not those who received contraception through the Women's Health Program (WHP). This has created a tiering system within the patient population.

"We're doing IUD's right and left on Women's Health Program [clients]... If we did an IUD for a Title X client, that's \$700 plus that will come out of that big pot of money. And for that \$700, we can actually see three women for their annual exam and birth control. And so, I mean, if there is a woman who has tried everything else and nothing, you know, this is the only option for her, then we'll do that."

-Medical director, Tier 1

CONCLUSIONS AND IMPLICATIONS

The family planning budget cuts and tiered funding allocation system have had a negative impact on organizations' ability to offer contraception and other reproductive health services to low-income groups. Although a larger percentage of Tier 3 organizations were affected by the cuts, organizations in Tiers 1 & 2 also experienced significant reductions in clinic locations, staffing and the availability of highly effective contraception. Organizations' strategies to continue offering services are not sustainable and place greater financial and logistical burdens on their low-income clients seeking care.

STRATEGIES TO CONTINUE PROVIDING SERVICES

- To continue providing services, many organizations started charging women for services if they did not qualify for the WHP or another public program.
- Organizations in Tiers 1 & 2 reported that they needed to use funding reserves to offset the budget cuts, and Tier 3 organizations expanded fund-raising and increasingly sought out in-kind donations.
- The success of these strategies varied across communities. Organizations in all tiers did not believe these strategies were sustainable.

"It's not that they're [staff] uncomfortable asking somebody to pay for their services ... But [it's hard because you] know that the day before this person didn't have a dime to put towards their health care and now they're suddenly expected to cough up 50, 60 bucks."

-CEO, Tier 1

"You can't plan for the future this way. Never even knowing almost from month to month. You don't know where you need to invest, you can't buy supplies so far in advance, you don't know if you are gonna have patients to come and use them up...And then you don't get funding so you close an entire health center and then, 'oh voila here is an extra chunk of money', well you can't just reopen the health center and rehire everybody."

-Director of PR, Tier 3



A team of researchers at the Population Research Center, the University of Texas at Austin, in collaboration with researchers at the University of Alabama at Birmingham and Ibis Reproductive Health, is studying the impact of Texas state's legislation on women's reproductive health services, enacted during the 2011 legislative session.

More details about the study can be found on the project website: www.utexas.edu/cola/orgs/txpep
For local estimates of the impact of the family planning budget cuts, visit our web app at: www.prc.utexas.edu/txpep/