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Agenda

- Background

- Project Goal and Activities

- Learning objectives

- Defining and categorizing innovation

- Lessons learned

Project Goal

Identify and share innovative approaches to providing family planning services for underserved young people in school-based health settings

Project Activities

1. Identify innovative strategies that programs or providers use to improve family planning service delivery to school-based populations

2. Explore facilitators and barriers to developing and sustaining these innovative strategies

3. Develop and disseminate practical guidance on implementing innovative practices for family planning programs

Learning Objectives

1. List three approaches to defining "innovation" and identifying innovative family planning practices in educational settings.

2. Explain how factors such as local culture, stakeholder buy-in, political climate, and financial resources influence the degree to which practitioners perceive family planning service delivery practices as innovative.

3. Describe three innovative strategies for delivering school-based family planning services to underserved adolescents at SBHCs.

How did we define innovation in our proposal?

An intentional and focused approach that reaches underserved populations.

Our preliminary areas of service delivery innovation involve providers that:

Use telehealth or mobile clinic services

Incorporate technology into service delivery

Deliver comprehensive family planning services to underserved or resource-limited populations (rural, migrant, Tribal)

Incorporate approaches that make clinics more adolescent- and young adult-friendly

How did the concept of innovation evolve _through literature review_?

Strategies to improve access to sexual and reproductive health services

- On-campus STI screening
- Condom availability programs
- Online contraceptive providers
- Mobile health clinics
- Telehealth services
- School-clinic partnerships
- Providing contraceptives on campus

Strategies to improve the quality of sexual and reproductive health services

- Contraceptive counseling apps
- Texting for communication & education
- Peer education programs
- Tailoring services for diverse students

How did the categories of innovation evolve *through interviews*?

1 We asked providers about innovation
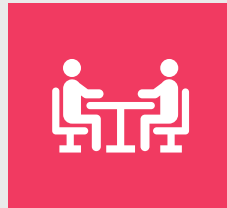
How did the categories of innovation evolve _through interviews_?

② We revised the language in the interview protocols

Original Question

"Can you share examples of **innovative programs or strategies** your site implemented to **provide contraceptive services to underserved populations of adolescents**?"

- _Used the word "innovative"_
- _Used the word "underserved" without context_

Revised Question

"I'd like to hear about the work your site is doing. We are particularly interested in **strategies or practices** you put into place to **provide family planning services to youth**?"

- _Removed "innovative"; focus is on FP practices_
- _Added another question earlier that focuses solely on their work with underserved populations_

How did the categories of innovation evolve _through interviews_?

3 We created screening procedures

Screening checklist

1. **Populations served:**
   - ☐ Rural communities
   - ☐ People of color
   - ☐ Members of American Indian Tribes
   - ☐ People with limited English proficiency
   - ☐ People experiencing or at risk of experiencing homelessness
   - ☐ Communities that do not have an accessible family planning clinic located in their neighborhood
   - ☐ A mix of different populations (for example, people of different racial, ethnic, and socioeconomic backgrounds; or both rural and urban communities)

2. **Hormonal and/or long-acting contraceptives:**
   - ☐ The site prescribes and dispenses contraceptive services on site
   - ☐ The site offers prescriptions to be filled off-site
   - ☐ The site refers youth or young adults to other sites where they can obtain prescriptions

3. **Innovative (i.e., new or improved) strategies:**
   - ☐ Telehealth and/or mobile clinics
   - ☐ Technology that improves the patient experience or increases the sustainability of the clinic
   - ☐ Provide comprehensive family planning services to resource-limited and/or rural areas
   - ☐ Taking a holistic approach to care (for example, by addressing social or economic factors that impact health)
   - ☐ Clinics that are particularly adolescent- and young-adult friendly

How did the categories of innovation evolve *through interviews*?

4 We debriefed on innovative strategies as a team

- Focused on sites that successfully solved a problem

- Our partner, SBHA, took a **"what's working, what's effective?"** approach to define innovation and screen sites

- Focused on strategies that were relatable or transferable to other SBHCs or CCHCs

Lessons Learned

1 **Innovation doesn't have to be fancy or financially expensive. Problem solving is innovation!**

Hire SBHC staff who speak languages spoken by students or parents and are from the geographic community they are serving

Help HS seniors identify where they will get birth control after high school

Provide drive-by birth control pick up times, provide depo shots in the parking lot (during COVID)

Lessons Learned

② **Innovation is context/site dependent**

Community colleges can partner with a local FQHC or Planned Parenthood or with mobile clinics

Responsible messaging from SBHCs for parents is needed – in conservative communities

When on-site provision isn't possible, offering transportation vouchers to community sites

Lessons Learned

3 **Innovation can be high-quality care**

- Incorporate an understanding of Social Determinants of Health for ALL clinic staff

- Use an app for education and screening while youth are waiting for appointments

- Screen for mental health and student's environment during family planning visits
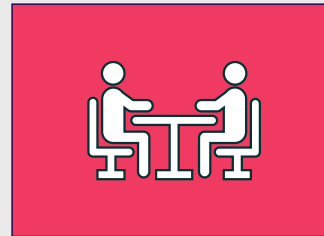
Definition of Innovation

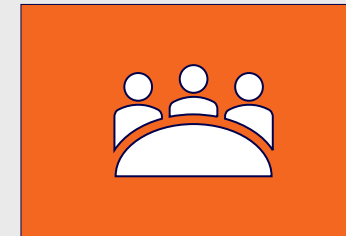**Evolved as a result of our findings from three sources:**

Literature Review
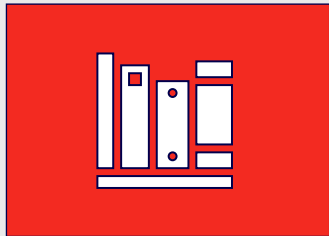
Interviews

Advisory Group

Authors

Jenita Parekh, Ph.D.

Elizabeth Cook, M.S.P.H

Jennifer Manlove, Ph.D.

Anushree Bhatia, B.A.

Emily Baldi, M.S.W

Hannah Lantos, Ph.D.

Sydney Briggs, M.P.A

Suzanne Mackey, M.P.H

Samantha Ciaravino, M.P.H