



T E X A S  
Women's Healthcare  
COALITION

**House Public Health Interim Hearing: Improving Birth Outcomes  
Testimony of the Texas Women's Healthcare Coalition  
May 19, 2016**

Good afternoon, Chair Crownover and members of the committee. Thank you for this opportunity to provide testimony today on this important issue. My name is Dr. Carl Dunn. I am past president of the Texas Association of Obstetricians and Gynecologists and currently the vice chair of the Texas District of the American College of Obstetricians and Gynecologists (ACOG). I have practiced general OBGYN in Texas for the last 26 years. Today I am representing the Texas Women's Healthcare Coalition (TWHC) in my role as the Coalition's Vice Chair.

The Texas Women's Healthcare Coalition (TWHC) and its 62 healthcare, faith, and community-based member organizations are dedicated to improving the health and well-being of Texas women, babies, and families by ensuring access to preventive healthcare for all Texas women. Access to preventive and preconception care—including health screenings and contraception—leads to better birth spacing, greater access to prenatal care, and healthier babies.

Though Texas has made great strides in recent years to improve infant and maternal health outcomes, our state's rates of prematurity and low birthweight are above the national average.<sup>i</sup> Racial/ethnic and geographic disparities in infant health remain stark, with an infant mortality rate for African American babies that is nearly twice that of White and Hispanic babies.<sup>ii</sup>

One of the greatest strategies we have to improve health outcomes for moms and babies is to ensure that moms receive the healthcare they need before, during, and after pregnancy. Extensive research shows that when women are able to plan and space their pregnancies, moms, babies, and families experience a wide array of benefits. Unfortunately, in Texas over half of pregnancies are unintended, and too many moms miss out on the critical health benefits associated with adequately spaced pregnancies.<sup>iii</sup>

Increasing access to family planning is a key tool for improving birth outcomes in the state.

### **Planning for a Healthy Pregnancy Leads to Better Birth Outcomes**

- When women experience intervals between pregnancies that are too short, they have an increased risk of preterm birth, low birthweight, slow neonatal growth, and infant death.<sup>iv</sup>
- Studies show that women who have at least 18 months between pregnancies have healthier babies and are less likely to deliver early. Optimal birth spacing also improves maternal health. Women whose pregnancies are unintended are much more likely to have a short interval between pregnancies.<sup>v</sup>
- One study showed that optimal birth spacing was nearly four times higher among women using the most effective forms of contraception (IUDs or implants).<sup>vi</sup>

### **Having a Planned Pregnancy Increases the Likelihood of Accessing Preconception and Prenatal Care**

- Women whose pregnancies are unplanned often miss out on critical preconception services and early prenatal care. One study showed that 19% of women whose pregnancies were unplanned lacked prenatal care in the first trimester; this number fell to 8% for women whose pregnancy was planned.<sup>vii</sup>
- Studies show that prenatal care can improve maternal and infant health outcomes, reducing the risk of still birth, premature birth, neonatal death, and infant death.<sup>viii</sup>
- Receiving prenatal care enables doctors to identify and address health risks such as hypertension, diabetes, nutrition, and depression before they become more entrenched and difficult to treat.

### **Access to Preventive Healthcare Contributes to Healthier Behavior**

- When women are able to plan and space their pregnancies, they are less likely to participate in unhealthy behavior during pregnancy, such as smoking or consuming alcohol.<sup>ix</sup>
- Conversely, women whose pregnancies are planned are more likely to participate in positive behavior such as breastfeeding. The Centers for Disease Control and Prevention found that 74% of babies born following planned pregnancies were breastfed, compared to 61% of births that were not planned.<sup>x</sup>

### **Access to Preventive Healthcare Saves the State Money**

- Ensuring women have access to contraceptive care and basic health screenings not only improves the health of moms and babies; it also reduces costs associated with poor birth outcomes. The health risks associated with unintended pregnancy – such

as prematurity and low birthweight – lead to substantial costs in Texas, where Medicaid pays for 54% of the state’s births.<sup>xi</sup>

- Unplanned Texas births cost \$1.34 billion annually.<sup>xii</sup> Every dollar spent on contraceptive care leads to savings of over \$7.<sup>xiii</sup>

### Recommendations

- **Increase funding for women’s preventive healthcare, including contraception, to fully meet the growing need among low-income uninsured Texas women.** Nearly 1.8 million Texas women are in need of publicly funded preventive services.<sup>xiv</sup> Less than a quarter of these women currently receive the services they need.
- **Increase provider participation in the state’s women’s health programs.** Texas needs more providers to deliver preventive care to women, especially in rural areas. The launch of the state’s new women’s health programs – Healthy Texas Women and the Enhanced Family Planning Program – represents an opportunity to strengthen provider engagement throughout the state.
- **Increase access to the most effective forms of contraception – implants and intrauterine devices (IUDs).** These forms of contraception are twenty times more effective than other methods, but their high upfront cost can be a barrier to providing them.
- **Maximize the ability of the women’s healthcare safety net to reach more women and save Texas taxpayer dollars.** Developing a workable solution for the coverage gap will maximize federal funding and substantially increase the number of women able to access a medical home where they can receive critical preventive care and family planning services.

Thank you for your consideration, and for your commitment to improving the lives of babies and families in Texas. If you have any questions or we can provide you with further information, please contact me at [Carl.Tony.Dunn@gmail.com](mailto:Carl.Tony.Dunn@gmail.com).

Respectfully,

C. Tony Dunn, MD, FACOG

Texas Women’s Healthcare Coalition Steering Committee Members

Texas Medical Association  
 District XI (Texas) American Congress of Obstetricians and Gynecologists  
 Texas Academy of Family Physicians  
 Texas Association of Community Health Centers  
 Methodist Healthcare Ministries  
 Teaching Hospitals of Texas  
 Texans Care for Children  
 Center for Public Policy Priorities  
 Healthy Futures of Texas

Texas Women’s Healthcare Coalition General Members

Access Esperanza Clinics Inc.	North Harris Montgomery Advanced Practice Nurse Society
Amistad Community Health Center	North Texas Alliance to Reduce Teen Pregnancy
Austin Advanced Practice Nurses	North Texas Nurse Practitioners
Austin Physicians for Social Responsibility	Panhandle Nurse Practitioner Association
AWHONN Texas	People’s Community Clinic
Brazos Valley Nurse Practitioner Association	Port Arthur Housing Authority
Cardea	SALVERE (Striving to Achieve Literacy via Education, Research, and Engagement)
Center for Community Health, UNTHSC	San Antonio Metro Health Clinic
Central Texas Nurse Practitioners	San Antonio Nurses in Advanced Practice
Children’s Hospital Association of Texas	Schneider Communications
Coalition for Nurses in Advanced Practice	South Plains Nurse Practitioner Association
Coastal Bend Advanced Practice Nurses	South Texas Family Planning & Health Corp.
Consortium of Texas Certified Nurse Midwives	Southeast Texas Nurse Practitioner Associates
Department of Ob/Gyn of UNTHSC and the ForHER Institute	St. David’s Foundation
El Paso Area Advanced Practice Nurse Association	Susan Wolfe and Associates
Fort Worth Region Nurse Practitioners	Texas Association of Obstetricians and Gynecologists
Gateway to Care	Texas Campaign to Prevent Teen Pregnancy
Good Neighbor Health Center	Texas Council on Family Violence
Healthy Futures Alliance	Texas Health Institute
Hill Country Advanced Practice Nurses & Physicians	Texas Hospital Association
Assistants Association	Texas Medical Association Alliance
Houston Area Chapter of NAPNAP	Texas Nurse Practitioners
Houston Area Nurse Practitioners	Texas Nurses Association
League of Women Voters of Texas	Texas Pediatric Society
Legacy Community Health Services	Texas Unitarian Universalist Justice Ministry
National Council of Jewish Women—Texas State Policy	University Health System
Advocacy Network	Women’s & Men’s Health Services of the Coastal Bend, Inc.
National Latina Institute for Reproductive Health	

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- <sup>ii</sup> Mandell, D.J. & Kormondy, M. *2015 Healthy Texas Babies: Data Book*. Austin, TX: Division for Family and Community Health Services, Texas Department of State Health Services, 2015.
- <sup>iii</sup> Kost K, "Unintended Pregnancy Rates at the State Level: Estimates for 2010 and Trends Since 2002," New York: Guttmacher Institute, 2015, <http://www.guttmacher.org/pubs/StateUP10.pdf>.
- <sup>iv</sup> Gemmill, A., & Lindberg, L.D. "Short Interpregnancy Intervals in the United States." *Obstetrics and Gynecology*, 122(1), 64–71, 2013; Conde-Agudelo, A., Rosas-Bermudez, A., & Kafury-Goeta, A.C. "Birth Spacing and Risk of Adverse Perinatal Outcomes: A Meta-analysis." *JAMA*, 295(15), 2006.
- <sup>v</sup> Gemmill, A., & Lindberg, L.D. "Short Interpregnancy Intervals in the United States." *Obstetrics and Gynecology*, 122(1), 64–71, 2013
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- <sup>vii</sup> Mosher, W.D., Jones, J., & Abma, J.C. "Intended and Unintended Births in the United States: 1982-2010." *National Health Statistics Reports*, 55, 2012.
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- <sup>xi</sup> Janek, Kyle et al. "Presentation to Senate Committee on Health and Human Services: Texas Women's Health and Family Planning Programs," February 20, 2014.
- <sup>xii</sup> Sonfield, A., & Kost, K. "Public Costs from Unintended Pregnancies and the Role of Public Insurance Programs in Paying for Pregnancy and Infant Care: Estimates for 2008." New York, NY: Guttmacher Institute, 2013. Retrieved from <http://www.guttmacher.org/pubs/public-costs-of-UP.pdf>.
- <sup>xiii</sup> Frost J, et al. *Return on Investment: A Fuller Assessment of the Benefits and Cost Savings of the US Publicly Funded Family Planning Program*. New York, Guttmacher Institute, 2014.
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