



## Expanded Primary Health Care: Determining Need for Women's Health Services

The 83<sup>rd</sup> Texas Legislature appropriated \$100 million to the Department of State Health Services (DSHS) to expand primary health care for women. During State Fiscal Year (SFY) 2014 and SFY 2015, more women will receive family planning services, breast and cervical cancer screenings, treatment for hypertension and diabetes, as well as prenatal medical services and dental care. To determine the need for women's health services in each county, the population of females over 18 years of age was considered, along with their indigence or poverty level, as was the need for specific services. Also taken into account was the shortage of primary health care professionals. This need determination was then used by the Division for Family and Community Health Services (FCHS) as part of their strategy for allocating funds to agencies contracted to provide women's health services for the Expanded Primary Health Care (EPHC) initiative. Click [here](#) to learn more about the need for EPHC.

## Teen Births in Texas in 2011: Quick Fact Sheet

In an effort to inform fast-paced agency executives who receive numerous questions from stakeholders, the Office of Program Decision Support prepared a "quick fact sheet" on teen births in Texas in 2011, defined as births among females aged 15 to 19 years. Texas has seen a significant decline in the teen birth rate in 2011 compared to 2006 and 2007, as has the rest of the nation. Moreover, the 2011 teen birth rate declined 28 percent since 2006 among Hispanic youth in Texas, and 21.5 percent among Black youth. Follow this [link](#) to access the quick fact sheet on teen births in Texas in 2011.

## Preventive Dental Services and Basic Dental Screening: 2012-13 Satisfaction Survey

Lack of early dental care can lead to serious oral and systemic health conditions and disease. Indeed, preventive dental services and basic dental screening among children are critical for good health. By partnering with Texas schools, the Oral Health Program at DSHS provides on-going preventive dental services to children through a team of regional dentists and dental hygienists. A basic dental screening is also provided to a random sample of third grade students from schools across Texas. In an effort to assess satisfaction with these services, school nurses completed an online survey administered by DSHS. School nurses were chosen to receive the survey, as they were the contacts for the preventive dental services and basic dental screening for the regional dental teams. Although the response rate was relatively low (11.5 percent), the majority of the nurses who completed the survey reported satisfaction with the preventive dental services and basic dental screening. The majority also indicated that children at their schools benefited from the services and screening received through the Oral Health Program at DSHS. Importantly, survey results also point to specific improvements that will likely lead to greater program effectiveness and efficiency — improvements that DSHS are preparing to make. For more information see the [Preventive Dental Services/Basic Screening Survey Project Satisfaction Survey Results, 2012-2013](#).

Data is most useful when it is effectively turned into information, which is then used to take action by decision makers.

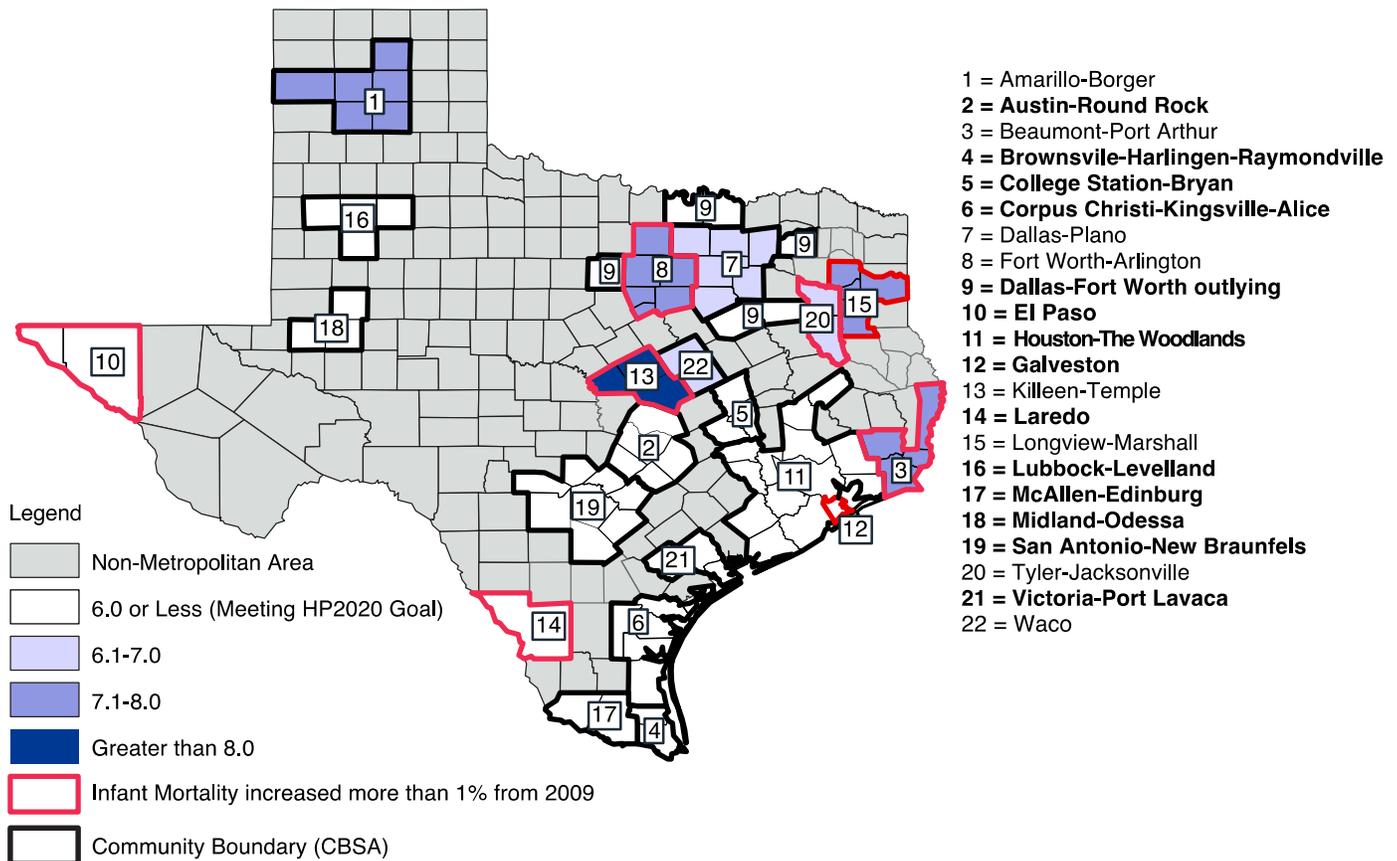
The *Data to Action Bulletin* (bi-annual) shows you how data from the Office of Program Decision Support is used to inform policy and practice in Family and Community Health Services.

## 2013 Healthy Texas Babies Databook

The *Healthy Texas Babies Databook* provides a detailed analysis of infant and maternal health in Texas. The [2013 Databook](#) integrates multiple sources of data to arrive at a more nuanced view of infant and maternal health. Data analyzed are from vital records, including the Birth, Death, Fetal Death, and linked Birth-Death Files. The findings from vital records are supported with results from the Pregnancy Risk Assessment Monitoring System (PRAMS). (PRAMS is a surveillance system designed to monitor maternal attitudes and behaviors before, during, and after pregnancy.) The outcomes examined include infant mortality, preterm births, and low birth weight. Additionally, infant mortality, including fetal death, is assessed by focusing on care received during perinatal and maternal periods of risk. Also presented is how diabetes, hypertension, obesity, and newborn care predict infant mortality, preterm births, and/or low birth weight. Finally, the impact of smoking during or after pregnancy is shown.

The *2013 Databook* uses advanced statistics and surveillance maps to highlight important trends in health outcomes, and where more resources are needed to positively affect change. For example, it is clear from the *2013 Databook* that Texas, as a whole, is moving towards a decrease in infant mortality. Yet, *Figure 3* shows that some communities are still lagging behind this state-level trend. In 2011, 14 of the 22 largest communities in the state met the Health People 2020 (HP2020) goal. Of the ten communities not meeting the HP2020 goal, five of them had more than a one percent increase in the infant mortality rate from 2009 to 2011. In addition, five communities had infant mortality rates above 7.0 infants per 1,000 live births in 2011.

**Figure 3. Infant Mortality Rate by Select Communities, 2011**



Prepared by: Texas Department of State Health Services, FCHS/OPDS, 10/04/2013

The *2013 Databook* was presented to an expert panel in November so that they have the necessary information to focus on improving the health of babies and mothers in Texas. View the [2013 Healthy Texas Babies Databook](#) for more details.