

An Equity-Focused Evaluation Design for a Multipronged Intervention to Promote Planned Pregnancies

The Missouri Foundation for Health launched The Right Time initiative in early 2019. A one-year planning phase led to the initiative design and prospective monitoring, evaluation, and learning framework of the initiative. Aligned with the Foundation's core values, the evaluation approach purposefully considers equity as a key underlying principle. This issue brief provides a summary of the evaluation design against which the Foundation will assess its progress and contributions to health and health equity.

The Missouri Foundation for Health (MFH) supports innovative solutions to improve health in its service communities. In keeping with this pursuit, MFH is launching a six-year, multipronged effort, called The Right Time, to address barriers to access comprehensive contraceptive care services. Planned pregnancies increase well-being, financial security, and autonomy. By increasing women's ability to choose if and when to become pregnant, MFH hopes to create healthier and happier families and strengthen communities.

To design the initiative, MFH brought together several partners with expertise along its three envisioned prongs—supply (clinical), demand (communications), and social and policy environment (advocacy)—and recruited an evaluation and learning partner. Embedding an evaluation into the initiative enables the generation of substantial learning, helping to build an understanding of whether and why the program had the anticipated outputs and outcomes (or why it did not), including those related to health equity, and informing future initiatives in Missouri and elsewhere. This brief discusses how the evaluation design explicitly incorporates health equity into each component of its framework.

Benefits of incorporating equity in evaluation

By incorporating health equity into every aspect, the evaluation design of The Right Time demonstrates clear intent to assess the initiative's effects on health equity. Without purposeful incorporation of health equity, monitoring and evaluation runs the risk of misunderstanding the conditions and factors underlying the observed outcomes. These underlying factors might include for whom, where, when, and how the intervention had a best or worst effect. Exploring these factors will assist in unmasking inequities, improve the lessons learned, and lead to strong intervention and outcomes for The Right Time.







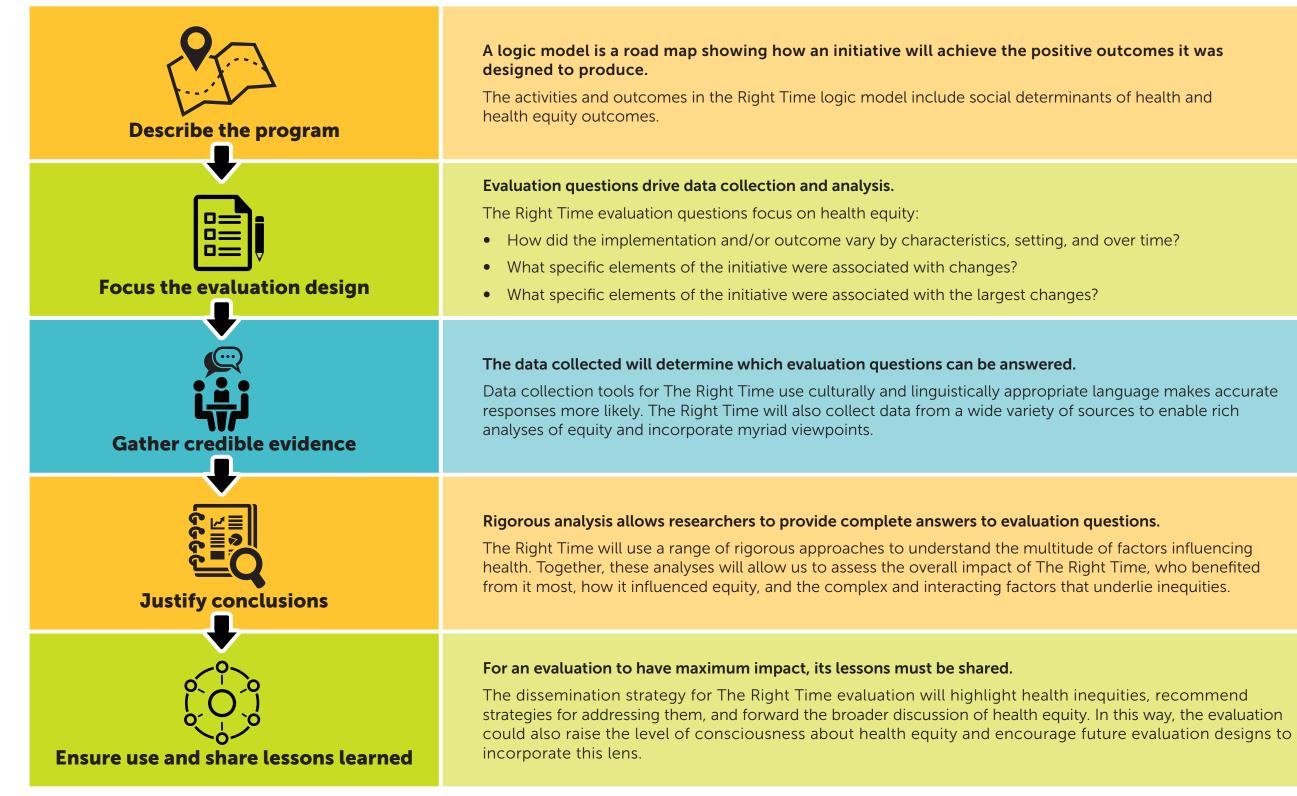












Note: Steps in the framework were adapted from The Centers for Disease Control and Prevention (CDC) Framework for Program Evaluation in Public Health (CDC 1999).



The Right Time initiative, a multipronged intervention to prevent unintended pregnancy

Central to The Right Time is a strong commitment to equity and ensuring that women, regardless of circumstances, have the opportunity to obtain effective contraceptive care. Accordingly, a year before implementing the initiative, the Foundation engaged stakeholders from across the state to understand the social, economic, and systems inequities that might affect women's access to and use of contraceptive care. In addition, MFH also hired an evaluation and learning partner

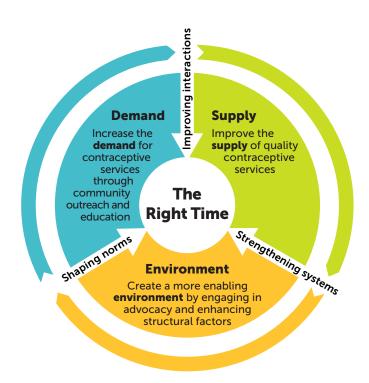
Component	Objective and design
Supply	Working with health care professionals to increase the supply and availability of quality contraceptive services and reduce barriers to quality care
	 Provide technical assistance and funding to three cohorts of 7 health centers, including Title X clinics, federally qualified health centers (FQHCs), county health departments, hospital-based clinics, and other entities providing funding to expand access to the full range of contraceptive methods in the communities served
Demand	Reaching families in need of information and options, and empowering patients to make informed decisions through education and awareness.
	 Use social media (owned, paid, and earned) to promote positive messages and norms around reproductive health planning
Environment	Influencing the environment to advocate for, and enhance, structural factors essential to providing accessible, high quality contraceptive care.
	• Use partnerships and advocacy to increase funding and support for the Women's Health Services Program and implement policy changes for "confidentiality billing" by insurers, stocking and reassignment of long-acting reversible contraceptives, reimbursement for contraceptives, and expansion of contraceptive coverage.

Source: Missouri Family Health Council 2018.

^a MFH's overarching approach to the initiative components was based on the Supply-Enabling Environment-Demand (SEED) Programming developed by Engender Health (EngenderHealth 2011). This type of programming has successfully lowered the rates of unintended pregnancy, abortion, and teen pregnancy; decreased the number of poor birth outcomes; and lowered state costs for reproductive health care.

^b More than 1,500 stakeholders were engaged through a provider survey for clinical assessment, stakeholder listening sessions, client focus groups, policy analysis, and statewide polling. These stakeholders included county health departments, Title X clinics, FQHCs, and other safety net providers; policy-makers; and community members.

to identify populations at highest risk for unintended pregnancy within the state and enable coordination of the initiative's implementation and evaluation designs (Kranker et al. 2019). The result of the oneyear planning process was the design specification of the initiative's three core components: clinical (supply), community awareness and education (demand), policy and systems change (environment) as summarized in the table below.^{a,b}



References

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- Kranker, K., S. Bardin, D. Lee Luca, and S. O'Neil. "Preventing Unintended Pregnancy in Missouri: Potential Hot Spots for Intervention." Research brief submitted to the Missouri Foundation for Health. Cambridge, MA: Mathematica Policy Research, 2019.
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This research was commissioned by Missouri Foundation for Health. The contents of this brief are solely the responsibility of the authors and do not represent the official views of MFH. So O'Neil and Dana Rotz at Mathematica Policy Research prepared this brief.

