



# Family PACT Program Evaluation:

Findings from the 2008 Survey of Community-Based Organizations

## Overview of the Study

Increasing access to the Family PACT Program is an essential goal of the Centers for Medicare and Medicaid Services (CMS) waiver demonstration project being implemented in California. Among its efforts to achieve this goal, California's Office of Family Planning (OFP) seeks to coordinate with community-based organizations (CBOs) throughout the state to facilitate referrals of low-income women, men and adolescents to Family PACT services. Reaching out to CBOs is likely to be an effective strategy for increasing access for Family PACT-eligible populations. These organizations are, as the name implies, centered within the community and, therefore, attuned to the particular issues and needs of that community. They have established track records of addressing the needs of low-income residents, and often serve as a critical gateway between their clients and needed health and social services.

The 2008 Family PACT Survey of Community-Based Organizations was developed to assess the extent to which California CBOs – particularly those based in counties where access to family planning services is poor – are positioned to refer their clients to Family PACT providers. The study examined the extent to which CBOs are knowledgeable about the Family PACT Program and its services, refer their clients to Family PACT providers, and are involved in collaborative partnerships with providers. Surveys were collected from 209 Executive Directors of CBOs that serve clients likely to be eligible for Family PACT service and these organizations have in their mission statements an aim to connect clients to needed health services.

## Key Findings

**Most CBOs serve populations who are in need of family planning services and are likely eligible for the Family PACT Program; however, very few had heard of the Family PACT Program prior to the survey.**

- All CBOs reported serving at least some segment of Family PACT eligible populations (women, men and/or teens), and many (83%) perceive their clients to be in need of free or low-cost family planning services.
- Only 29% of CBOs had heard of the Family PACT Program prior to the survey; an additional 5% were unsure. Of those who had heard of Family PACT, 47% could name at least one Family PACT provider in their community.
- CBOs that receive funding through the California Department of Public Health for a variety of programs were more likely to have heard of Family PACT than those that do not (50% vs. 28%,  $p < .05$ ). Levels of awareness varied by service type, with organizations focused on immigrants and refugees (45%), child abuse prevention (42%), health education (39%), and domestic violence services (39%) being more knowledgeable than other organizations.

**Among CBOs that had heard of Family PACT, most had some understanding of the program's eligibility criteria and available services.**

- Most CBOs knew that uninsured, low-income individuals (80%), women of reproductive age (77%), and teens (73%) are eligible for Family PACT; fewer realized that services are available for men (57%). Many mistakenly believed that Medi-Cal recipients (60%) and pregnant women (57%) are eligible for Family PACT.
- Almost all CBOs could correctly identify that pregnancy testing (90%), contraception (85%), and STI testing/treatment (85%) are offered by Family PACT. However, many CBOs incorrectly thought that prenatal care (50%) and primary care check-ups (45%) are covered as well.

**CBOs have experience with referrals and collaboration, and are well-positioned to provide clients with referrals to Family PACT.**

- Nearly all (98%) CBOs surveyed currently provide referrals to clients for outside services; 61% provide referrals to half of their clients or more. The most common type of referral made is to health services (67%).
- CBOs use a variety of established referral sources, including county guides (73%) and the United Way's 2-1-1 directories (59%), to facilitate referrals when seeking a source of care for their clients.
- Nearly all (93%) CBOs surveyed are currently involved in coalitions and partnerships with organizations in their community, including organizations that offer clinical health care services (70%).

**While most CBOs have not referred clients to or collaborated with Family PACT providers, those that do are satisfied with the process.**

- Only 13% of CBOs in the study reported having referred clients to Family PACT providers, although this may be an underestimate if the organization did not realize a referring organization offered Family PACT services.
- The most commonly reported challenges in making Family PACT referrals are lack of information about eligibility criteria (41%) and about which providers offer Family PACT services in the community (33%). No CBOs, including those from faith-based organizations, reported that family planning referrals were contrary to their mission.
- Among those that had previously referred clients to Family PACT providers, most found the process to be very easy (63%) or somewhat easy (30%). Most feedback from staff and clients was positive.
- Of those that do collaborate with Family PACT providers, most are satisfied with the experience, believing it helps them better meet the needs of clients (89%) and coordinate services (61%).

**CBOs are eager to learn more about the Family PACT Program and are interested in receiving information about the program and local providers.**

- When asked about challenges in partnering with, or referring clients to, Family PACT providers, CBOs largely mentioned issues of lack of knowledge about the program, not lack of the organizations' interest or need.
- Most CBOs expressed interest in receiving materials from OFP to facilitate referrals, including written materials describing eligibility criteria (89%), promotional materials to give to clients (89%), and lists of providers in their community (85%) – all straightforward methods which are currently available and/or relatively inexpensive to prepare.

## **Conclusions**

Improving access to family planning services for eligible populations will continue to be an essential goal of the Family PACT Program. Encouraging partnerships and referrals between Family PACT providers and community-based organizations is likely to be a fruitful effort, as both aim to improve the health and well-being of common target populations.

---

Source: Schwartz S and Brindis C. (2009). *Findings from the Family PACT Evaluation: 2008 Survey of Community-Based Organizations*. UCSF: San Francisco, CA.

This research was conducted by the University of California, San Francisco (UCSF), Bixby Center for Global Reproductive Health and was supported by funds from the State of California, Department of Public Health, Office of Family Planning. All analysis, interpretations, or conclusions reached are those of UCSF, not the State of California.

**Created July 2009**