

# **Family Planning Special Projects Program**

JAN. 1 TO DEC. 31, 2023

### **Background**

Established by the Minnesota Legislature in 1978, the Family Planning Special Projects (FPSP) grant program supports essential pre-pregnancy family planning services for people of reproductive age who experience barriers, whether geographic, cultural, financial, or other, in access to such services. The grant program is governed by Minnesota Statute 145.925 (www.revisor.mn.gov/statutes/cite/145.925) and funds are appropriated biannually<sup>1</sup>.

### 2023 Legislative changes

In 2023, the state Legislature enacted several changes to the statute to modernize the program and support increased access to these services. Those changes were:

- Renaming the program as Sexual and Reproductive Health Services.
- Expanding eligibility to include the 12 Tribes in the geographic area of Minnesota.
- Removing the prohibition on funding services for unemancipated minors in schools.
- Adding \$7,147,125 to the program, bringing the total annual funding to \$13,500,125.
- Removing Minnesota Rule 4700.1900—4700.2500, which included a regional allocation for funding.

All changes were effective July 1, 2023.

#### **Funded services**

The program funds qualified nonprofit agencies and community health boards to support, sustain, expand, or implement reproductive and sexual health programs. The service components are:

- Education and outreach on medically accurate sexual and reproductive health information.
- Contraceptive counseling, provision of contraceptive methods, and follow-up.
- Screening, testing, and treatment of sexually transmitted infections and other sexual or reproductive concerns.
- Referral and follow-up for medical, financial, mental health, and other services in accord with a service recipient's needs.

### What is the need?

Many Minnesotans experience barriers to accessing contraceptive and sexually transmitted infections education and health care. In Minnesota, 37% of rural counties have no publicly funded sexual health clinic location in the county itself, requiring residents who need low cost or no cost health care to travel greater distances to receive it than their peers in the Metro. The 283,400 Minnesotans who could be become pregnant and need contraception live in contraceptive deserts (counties that lack reasonable access to the full range of methods) and 50,500 live in counties without a single health center that provides the full range of contraceptive methods.

Data from Minnesota PRAMS for 2016-2022 combined showed the percentage of unintended pregnancies for people less than 20 years of age in Minnesota was more than double that of people who were 20-34 years of age (47% versus 20% respectively). According to an analysis of 2022 Behavioral Risk Factor Surveillance System data, 38.3% of Minnesotans at risk of an undesired pregnancy were using contraceptive methods other than the methods they reported as preferred, were not using any method even when there was a method they preferred or were using a method when they would have preferred not to use any method.

In 2023, cases of congenital syphilis rose 44% despite a slight decrease in other sexually transmitted infections in Minnesota. A demographic shift from men who have sex with men to women was seen in cases of early syphilis. While there was a 1.6% decrease in cases of chlamydia, 59% of the cases occurred in teens and young adults ages 15 to 24 and 1 in 3 cases were in Greater Minnesota.

### **Grantees**

In 2023, 25 grantees began a five-year funding cycle (2023-2027) supporting reproductive and sexual health programs. The list of grantees can be found on the <u>sexual and reproductive health</u> <u>services</u> program webpage. Grantees are in all regions of Minnesota.

One grantee provides a statewide MN Family Planning and Sexually Transmitted Infections hotline. Individuals can call or text the toll-free phone hotline (1-800-783-2287) or access information at Minnesota Family Planning and STI Hotline.

With the additional funding from the legislature, a competitive request for proposals was issued in fall 2023. Grants were awarded early 2024. Twenty-one currently funded grantees received additional funding and 10 new grantees were added.

## **FPSP program outcomes**

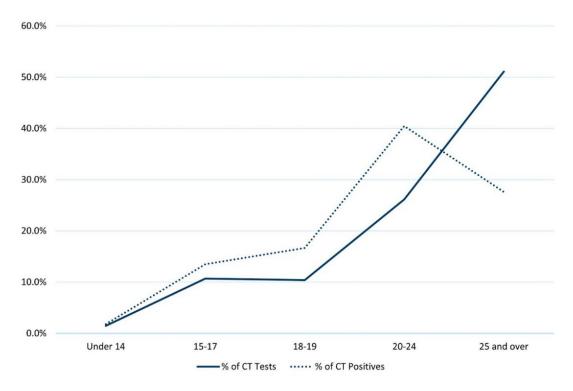
#### Service numbers

Through outreach and education activities such as small group classes and health fairs, grantees reached 91,165 individuals across the state with medically accurate information about sexual and reproductive health as well as where to access health care services.

Grantees offered a range of sexually transmitted infections testing and treatment as well as HIV testing. They tested 16,515 individuals for chlamydia with 8% (1,290) of those individuals testing positive. Grantees provide treatment for individuals with chlamydia and work to test and treat their sexual partners.

#### Chart 1. Chlamydia tests and positive results by age

Chart 1 shows the age breakdown for chlamydia tests and positive tests. As young people ages 15-24 experience many barriers to accessing sexual and reproductive health care, many grantees focus their STI testing programs on reaching that priority population.



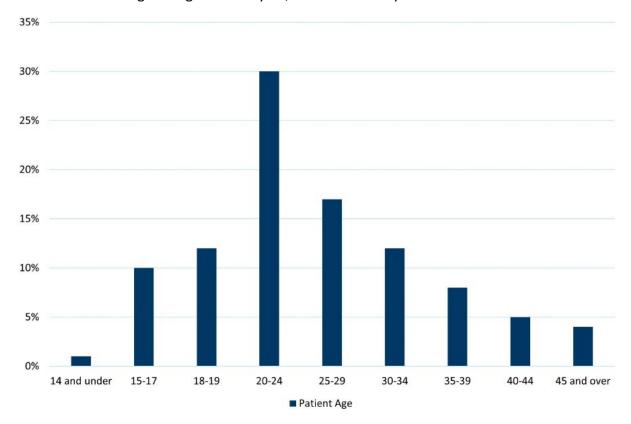
Grantees provided non-directive, patient-centered counseling to 20,562 individuals on reproductive life planning, sexually transmitted infections risk reduction, and contraceptive options. They provided 15,741 people with a range of contraceptive methods. Of those provided with a method, 20.6% chose long-acting reversible methods of contraception such as intrauterine devices.

### Chart 2. Percentage of patients receiving contraception by age group

Chart 2 shows the percentage of patients receiving contraception by age. Emergency contraception was provided to 15,065 individuals.

Age, income level, race, and ethnicity are collected for unduplicated individuals receiving contraceptive methods. Of the 15,741 individuals receiving contraceptive services, 60% had incomes below 100% of the federal poverty guidelines. Young people between ages 18 and 29 accounted for 60% of individuals who received a contraceptive method. One-third identified as Hispanic, and 32% identified their race as other than white.

Of the individuals receiving emergency contraception, 88% were 18 years or older. Of the individuals receiving testing for chlamydia, 87.7% were 18 years or older.



### For more information

The program's Statistical Report for Jan. 1–Dec. 31, 2023, provides additional details. This report can be found on MDH's <u>sexual and reproductive health services webpage</u>.

### References

Minnesota Statute 145.952 Sexual and reproductive health services grants. <u>Sec. 145.925 MN Statutes</u>, <a href="https://www.revisor.mn.gov/statutes/cite/145.925">https://www.revisor.mn.gov/statutes/cite/145.925</a>

Minnesota Department of Health. (n.d.) *Sexual and reproductive health services*. Retrieved May 30, 2024. https://www.health.state.mn.us/people/womeninfants/srhs/index.html

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