



Iowa

Summer 2011

Title V Women's Health-Related Priority Needs:

- ▶ Lack of adoption of quality improvement methods within maternal and child health practice.
- ▶ Racial disparities in maternal and child health outcomes.
- ▶ Lack of coordinated systems for preconception and interconception care for high-risk and low-income women.
- ▶ Barriers to access to health care, mental health care, and dental care for low-income pregnant women.
- ▶ Lack of access to preventive and restorative dental care for low-income pregnant women.

State Performance and Outcome Measures Associated with Women's Health-Related Priority Needs

State Performance Measure 4: Increase the percent of family planning clients (men and women) who are counseled about developing a reproductive life plan.

Data Source: Ahlers and Associates Integrated Solutions Family Planning Data System

Measure Definition: Percent of family planning clients (men and women) who are counseled about developing a reproductive life plan.

Additional Data Associated with Women's Health-Related Priority Needs

This section lists other data sources that Title V agencies included in their 2010 Needs Assessments regarding the status of women's health outside of pregnancy.

Percent of unintended pregnancies by age and income level.

Data Source: Iowa Barriers to Prenatal Care Survey

Percent of women with unintended pregnancies who reported not using any form of birth control at the time of conception, regardless of marital status.

Data Source: Iowa Barriers to Prenatal Care survey

Number of counties served by the Iowa Department of Public Health Family Planning Program; of these counties, number that have full service clinics that are available at least once per week; number of counties that have no family planning services available.

Data Source: Iowa Department of Public Health

Number of Iowa hospitals that have stopped providing obstetrical care in the past ten years.

Data Source: Not specified

Percent of non-Hispanic Blacks, non-Hispanic persons of other races, and Hispanics who received Medicaid-reimbursed live births.

Data Source: State Medicaid claims data

The information presented here reflects only women's health-related content reported by the Title V agency in its FY 2011 MCH Block Grant Application, FY 2009 Annual Report and 2010 Needs Assessment. This information, as well as all Title V agencies' most current priority needs, performance and outcome measures, can be found at: <https://perfddata.hrsa.gov/MCHB/TVISReports/MeasurementData/MeasurementDataMenu.aspx>