Access is Paramount



When it comes to accessing healthcare, there should be no wrong door. But in Texas, there are many wrong doors—and arriving at the right door is often a matter of luck.

Healthcare and service providers we interviewed pointed to a number of barriers related to accessing services, including policies requiring parental consent, funding gaps, and confusion about a complex payer system. Texas is the largest state in the country to not expand Medicaid, and the result is a complicated patchwork of programs and payer sources that both youth and providers struggle to fully understand.

Even for youth who do have health insurance, the state has some surprising coverage gaps. Texas is one of just two states in the nation to not cover contraception for purposes of pregnancy prevention in the Children's Health Insurance Program, leaving thousands of teens at risk.

Additionally, Texas has some of the most confusing laws in the nation around the rights of legal minors to consent to healthcare. For example, a pregnant 17 year old may consent to prenatal care, but after the delivery she cannot legally consent to her own postpartum care. Additionally, she can consent to all medical care for her baby, but under state law, she needs her parents to authorize birth control to prevent a repeat pregnancy. In Texas, minors can consent to screening and treatment for certain sexually transmitted infections, such as HIV, chlamydia, and gonorrhea, but not others, such as herpes or HPV.

As a result, many young people in Texas are on their own to figure it out. As one young person in a listening session

Public health in general has just been decimated in our state...and especially now given COVID, access has gotten even more tenuous.

Young people (need) access to medical services easily and in a way that's approachable for them so that they know where to go, they feel comfortable going, and when they get there, there's funding to provide it for them.

ADULT LISTENING SESSIONS

noted, "When it comes to certain resources, they're not shown to us. You have to look for it yourself. Like, it's not talked about often, you have to do your own research and find ways to get services." Another stakeholder emphasized the complicated policy landscape, "I think Texas excels at administrative burden. Sure, there's access, but is there really? How can you have a system that is so complicated to navigate?"

Adults who work in the healthcare space may struggle to understand what funding sources exist to pay for reproductive healthcare for teens and adults, and often are not well-versed in the confusing laws that govern consent to medical care. And if the adults can't navigate this complex landscape, how can we expect that of the youth? In listening sessions with young adults, an oftenrepeated theme was a lack of understanding about where to go for contraception, what methods are available, and what the costs would be.

We don't know where they are, and we don't know what (the) requirements are; if we need an adult, if we can just go by ourselves. It's scary because if we do need an adult we'd have to talk to a parent, and we don't know if we have that support.

I don't think any of us would go to a doctor... because we don't know how to approach anyone about sexual health or how to start the conversation.

In a complex landscape, federally-funded Title X clinics are a simple option for Texas youth to access reproductive healthcare. Texas teens and adults can receive confidential reproductive healthcare for free or on a sliding scale at one of the 200 Title X clinics statewide. Youth-serving professionals should be able to make referrals to Title X clinics within the community. We recognize that policy changes at the state level, coupled with the bureaucracy of multiple payer sources, aren't likely to change very quickly. In the meantime, all of the caring adults in the lives of young people must step up to help them navigate a complex pathway to access reproductive healthcare.

UNINSURED TEXAS RESIDENTS WHO DO NOT QUALIFY FOR MEDICAID MAY BE ABLE TO ACCESS SEXUAL HEALTHCARE THROUGH THESE PROGRAMS:

Healthy Texas Women

Medicaid waiver program that covers preventive reproductive healthcare for low income women who are citizens or long-term legal residents. Teens need parental consent to access most services. About 3,000 providers.

Family Planning Program

State-funded program that provides preventive reproductive healthcare for low income Texas residents. Teens need parental consent to access most services. About 200 locations across Texas.

Title X

Federal funding stream that covers reproductive health services for all regardless of gender or citizenship status. Minors can consent to their own family planning services at Title X clinics. About 200 locations across Texas.

PATH TO PREVENTION

Making the decision.

My partner and I are thinking about having sex. Are we ready? **Good news:** 85% of young adults feel they can talk openly with their partner about birth control. **Bad news:** the journey is just beginning. What happens now for young adults in Texas?



What do I know? 77% had abstinence only sex ed or don't remember sex ed at all.

35% did not talk or don't remember talking with their parents about these issues.

Who do I talk to?

68% talk to their friends when they need information about sexual health.

45% don't think they can talk openly with their parents about birth control.

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How am I going to pay?

Do I have insurance? Am I covered under Healthy Texas Women? What if I can't afford contraception? What is Title X?

Where do I go?

Good news: 73% say they know where to get birth control.

Bad news: many family planning clinics have closed in the last decade.

Worse news: 82% of young adults in Texas "Google it" when they need information about sexual health.

Finally here. Now what?

Both young people and providers describe a policy and practice environment that is too often <u>unfriendly</u> and <u>unsupportive</u> of young adults who are seeking care.





All research reported is from a Gap Analysis conducted by 1000 Feathers, LLC unless otherwise noted.



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