

DATE: August 17, 2012
TO: Office of Information and Regulatory Affairs, OMB
FROM: Reports Clearance Officer, HRSA
SUBJECT: HRSA Request for Non-Substantive Change to the Evaluation of the Text4baby Program (OMB Control No. 0915-0347)

The Health Resources and Services Administration (HRSA) is requesting Office of Management and Budget (OMB) review and approval of a non-substantive change to the Evaluation of the Text4baby Program.

Justification for New Questions on Pregnant Women’s Perceptions of Full-term Delivery

The federal government is engaged in a public-private partnership to reduce early elective deliveries to improve both maternal and infant outcomes and to reduce health care costs.¹ Recent research has also shown that academic achievement varies with gestational age, even among children born at earlier normal term (37-38 weeks) versus full term (39-41 weeks).² Consistent with this research, the March of Dimes has implemented a campaign promoting that it’s “best to wait” until at least 39 weeks to deliver if there are no medical complications.³

Recognizing the importance of encouraging full-term delivery, the text4baby program is introducing new messages on elective delivery:

- (1/2) Free msg: Counting down the days until your due date? These last weeks are worth the wait -- your baby’s brain and organs are still developing. (2/2) Reply MORE to learn more about the importance of your last weeks of pregnancy.
- (1/2) Free msg: Every week of pregnancy is important for your baby’s development. So if you have a healthy pregnancy, wait for labor to begin on its own. (2/2) For more info, watch this video from March of Dimes at www.youtube.com/watch?v=2-hJ596IvLQ.

As part of the text4baby evaluation, HRSA has an opportunity to include two new questions in the Healthy Pregnancy and Parenting Survey to assess women’s perceptions of full-term delivery and when it is safe to deliver an otherwise healthy pregnancy (at least 39 weeks). A study by Goldenberg et al. (2009) found that one out of four women considered a birth at 34 to 36 weeks full term, and another two out of four women considered a birth at 37 or 38 weeks full term. Even more surprising, 93 percent said it was safe to deliver before 39 weeks if there were no

¹ For further information, see <http://innovations.cms.gov/initiatives/Strong-Start/Public-Private-Partnership-to-Reduce-Early-Elective-Deliveries.html>.

² Noble, K.G., W.P. Fifer, V.A. Rauh, Y. Nomura, and H.F. Andrews. “Academic Achievement Varies with Gestational Age Among Children Born at Term.” *Pediatrics* 2012; 130:1-8.

³ http://www.marchofdimes.com/pregnancy/getready_atleast39weeks.html.

medical complications. The study took place among an insured population and demonstrated a lack of knowledge about the definition of full term and safety of delivering before 39 weeks.⁴

HRSA proposes to include two new questions in the survey to assess knowledge of full-term/safe delivery among pregnant women that receive prenatal care in community health centers in four selected communities. (See Questions 5.16 and 5.16a in the Healthy Pregnancy and Parenting Survey.) The questions were adapted from the Goldenberg et al. (2009) study, and were modified to reflect a lower literacy level within the target population of the survey.

HRSA will compare women's perceptions of full-term delivery between text4baby and non-text4baby subscribers, controlling for a variety of demographic, health status, and pregnancy characteristics. This analysis will provide insight into the level of knowledge among text4baby and non-text4baby users and what other factors are associated with this knowledge (such as parity, education, or other sources of health information). While this analysis will not indicate the impact, per se, of text4baby on the level of knowledge, it will provide evidence of factors associated with knowledge on this important topic.

HRSA has estimated that the addition of these two questions will result in a minimal increase in burden of approximately one minute (or less) per respondent.

Please let me know if you have any questions.

Thank you.

Carla Haddad

Carla Haddad, MPH
Public Health Analyst
Office of Planning, Analysis and Evaluation
Health Resources and Services Administration
5600 Fishers Lane, Rm 10-49
Rockville, MD 20857
Phone: (301) 443-0165
Email: CHaddad@hrsa.gov

⁴ Goldenberg, R.L., E.M. McClure, A. Bhattacharya, T.D. Groat, and P.J. Stahl. "Women's Perceptions Regarding the Safety of Births at Various Gestational Ages." *Obstet Gynecol* 2009; 114: 1254-8.