EPI-AID: 2010-024

DATE: December 3, 2009

TO: Director, Centers for Disease Control and Prevention (CDC)

FROM: Director, Division of Reproductive Health, National Center for Chronic Disease

Prevention and Health Promotion (NCCDPHP)

SUBJECT: Surveillance of U.S. Family Planning Providers' Use of Contraception Guidelines

and Practices Related to Contraceptive Use for Women with Specific

Characteristics or Medical Conditions

LOCATION: Nationwide

Nature of Problem:

The expected release of the *United States Medical Eligibility Criteria for Contraceptive Use (US MEC)*, developed by CDC and adapted from the 4th Edition of the *World Health Organization MEC*, has generated considerable anticipation by family planning provider organizations nationwide, including the Office of Population Affairs, American College of Obstetricians and Gynecologists, and Planned Parenthood Federation of America. The *US MEC* is the first evidence-based national guideline on the safety of contraceptive methods for women with specific characteristics and medical conditions. Because the guidance has generated considerable interest and anticipation from family planning provider organizations that are eager to disseminate the guidelines to their members and/or incorporate the guidance into practice protocols, CDC is making every effort to release these guidelines as soon as possible (planned release date, January 2010).

WHO has a strong interest in evaluating the impact of the MEC guidelines in different settings. In order to measure the impact of the *US MEC*, it is necessary to establish baseline attitudes and practices of U.S. family planning providers before the *US MEC* is released. WHO has requested CDC's assistance to gather information on the current attitudes and practices of U.S. family planning providers related to the provision of contraception to women with specific medical conditions, as well as current use of contraception guidelines.

Date Problem First Identified by Requesting Agency:

September 25, 2009

Date of Initial CDC Contact:

October 12, 2009

Initial CDC Contact:

Kathryn M. Curtis, PhD, Epidemiologist, Fertility Epidemiology Studies Team, Women's Health and Fertility Branch (WHFB), Division of Reproductive Health, NCCDPHP

Caller/Correspondent:

Dr. Catherine d'Arcangues, Deputy Director, Department of Reproductive Health and Research, World Health Organization

Sources of Invitation:

World Health Organization

CDC Staff Contacted

CIO/Division/Branch/Section:	Name/Title:
NCCDPHP/DRH/OD	Lee Warner, PhD, Associate Director for Science
NCCDPHP/DRH/WHFB	Maurizio Macaluso, MD, DrPH, Branch Chief Kathryn Curtis, PhD, Epidemiologist Suzanne Folger, PhD, Epidemiologist Susan Hillis, PhD, Nurse Epidemiologist Polly Marchbanks, PhD, Epidemiologist Naomi Tepper, MD, Medical Officer Crystal Tyler, PhD, MPH, EIS Officer Maura Whiteman, PhD, Epidemiologist Lauren Zapata, PhD, Epidemiologist
OWCD, CDD, EIS	Doug Hamilton, MD, PhD, Director Rachel Avchen, PhD, MS, Senior Scientist Mary Dott, MD, MPH, Medical Officer

Other Persons Contacted

State and Local Health Officials:

None

Other (non-CDC) Federal Officials:

None

Others:

None

Nature and Timing of Response:

On December 7, 2009, Epidemic Intelligence Service Officer Dr. Crystal Tyler will begin working from Atlanta to respond to the WHO request to conduct surveillance of U.S. family planning providers' use of contraception guidelines and practices related to contraceptive use for women with specific characteristics or medical conditions.

Anticipated Duration of Field Investigation:

30 days

Branch/Division/CIO Providing Primary Oversight of Investigation:

WHFB/DRH/NCCDPHP

Branch/Division/CIO Sharing Oversight:

None

<u>CDC Supervisors Responsible for Technical Supervision of Investigator and EPI-AID Trip</u> Report:

Lauren Zapata, PhD, Epidemiologist Kathryn Curtis, PhD, Epidemiologist Maura Whiteman, PhD, Epidemiologist Polly Marchbanks, PhD, Epidemiologist Susan Hillis, PhD, Nurse Epidemiologist

Objectives of the EPI-AID Mission:

- 1. Among U.S. family planning providers, estimate the prevalence of key contraceptive practices, including use of contraception guidelines.
- 2. Establish baseline attitudes on the safety of contraceptive methods for women with specific characteristics or medical conditions to measure impact after the release of the U.S. family planning guidelines.
- 3. Assess differences in practices and attitudes between public and private family planning providers.
- 4. Identify gaps between evidence and practice to guide development of educational interventions and provider tools to improve service delivery.

John Lehnherr Acting Director, DRH, NCCDPHP