



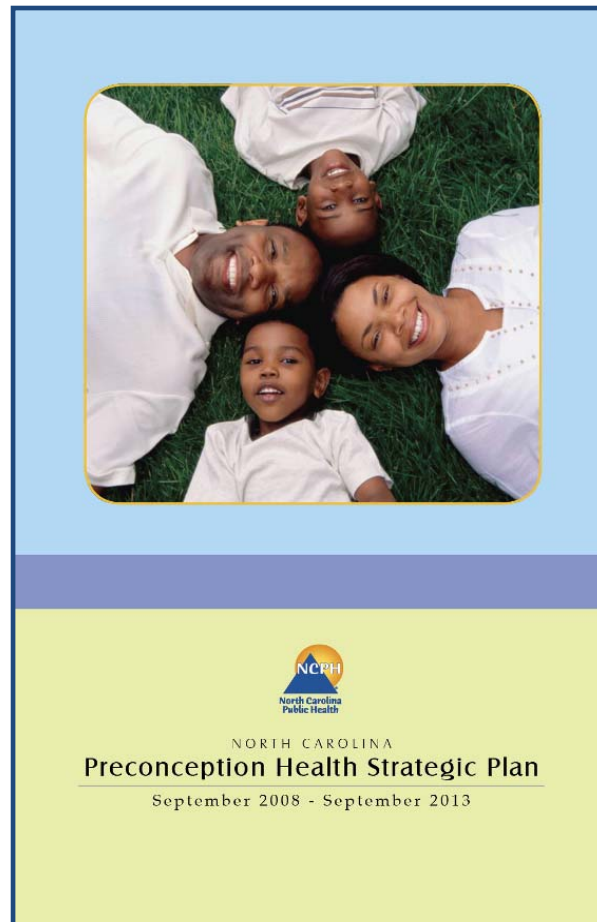
Preconception Health in North Carolina

November 15, 2011
Preconception Health Conference
Forsyth Medical Center

NC Preconception Health Coalition

- Formal efforts initiated in January 2007 - leadership team formed
- Initial focus areas - pregnancy intendedness and healthy weight
- 2 workgroups laid the groundwork for the NC Preconception Health Strategic Plan released in November 2008
- From June 2008 – July 2011: 4 workgroups meeting regularly to move from strategies to action

NC Preconception Health Strategic Plan



Preconception Health Coalition Workgroups

1. Increase Consumer and Community Awareness about Preconception Health
2. Ensure Quality Preconception Care and Practice among Health Care Providers and Community Outreach Workers
3. Expand Access and Affordability of Preconception Care
4. Advocate for Environmental and Policy Changes that Support Preconception Health

Current Coalition

- Over 150 people on coalition e-mail list
- Representatives from DPI, DHHS, local health departments, public and private universities, community based organizations, non-profit agencies and consumers
- Restructuring coalition so that instead of workgroups, the larger coalition will meet more frequently; will use webinar and videoconference to engage new participants.
- Minutes from meetings and other pertinent information available at www.everywomannc.org

NC Strategic Plan Released November 2008

- Chapter 1: Background - The Case for Preconception Health, State Initiatives, NC's History
- Chapter 2: Strategic Plan Development Process, Priority Areas, Data Review
- Chapter 3: Goals and Strategies

Workgroup Update



Increase Consumer and Community Awareness About Preconception Health



- Developed reproductive life planning booklet
- Developing toolkit of resources for providers on various topics to be available in different formats

Ensure Quality Preconception Care and Practice Among Health Care Providers and Community Health Workers

- Surveyed 50 health care providers to gather information on preferred topics, tools and learning opportunities in preconception health
- Researched and compiled recommended resources for health care providers and posted on Women's Health Branch website

Expand Access and Affordability of Preconception Care

- Initially worked with NC DMA to developing a package of core benefits for a waiver that would provide care for women with a previous high risk birth
- Affordable Care Act policies offer the opportunity for expanding coverage for women of childbearing age with increased Medicaid eligibility and SPA
- NC participated in Peer2Peer learning collaborative to examine how to implement expanded coverage for women of childbearing age

Advocate for Environmental and Policy Changes that Support Preconception Health

- Maternity Leave Checklist and Benefits List created for state employees - covers benefit and health tips for women prior to pregnancy, during each trimester and postpartum.



Advocate for Environmental and Policy Changes that Support Preconception Health

- *Healthy Babies Healthy Business*, a free intranet-based tool from March of Dimes now posted on the state health plan website
- Promote BMI assessment and healthy weight guidance in the family planning and maternity clinics
- Promoting appropriate gestational weight gain through trainings and/or web materials for public and private providers

Advocate for Environmental and Policy Changes that Support Preconception Health

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Advocate for Environmental and Policy Changes that Support Preconception Health

- Emphasizes raising awareness about adverse maternal and birth outcomes related to overweight/obesity
- Participating in local and state coalitions promoting breastfeeding, community and school gardens, and access to local produce
- Women's Health Breastfeeding group promotes breastfeeding awareness and policies

Incorporation of Preconception Health into Title V Programs



- BMI calculation and healthy weight counseling during prenatal and postpartum visits
- 5A's tobacco cessation counseling for pregnant and postpartum women
- Referral of all women receiving Medicaid prenatal case management to postpartum clinic visit

Incorporation of Preconception Health into Title V Programs

- Follow-up with pregnant women interested in contraception/sterilizations per ACOG recommendations
- 3 recommended ACOG screening questions for domestic violence for pregnant and postpartum women
- Provision of 17P to women who had a prior preterm birth and meet the criteria for use of this medication

Title V Funded Programs

- 12 Healthy Beginnings projects provide home visiting and support for minority pregnant women and up to 2 years after delivery
- Projects focus on reproductive life planning, healthy weight, folic acid consumption, tobacco cessation breastfeeding, safe sleep and well child care
- Projects foster cooperation among community-based groups, health care providers, businesses, churches, and schools with strong roots in minority communities

Incorporation of Preconception Health into Title X Programs

- BMI calculation and counseling about healthy weight for both men and women
- Educational materials provided to health departments and other cbos include healthy weight brochures and reproductive life planning brochures individualized for men and women
- Counseling to delay pregnancy 18 months after previous delivery
- Provision or referral of emergency contraception
- Assessment for rubella and tetanus/diphtheria immunity and provision of vaccine where indicated

Title X Programs

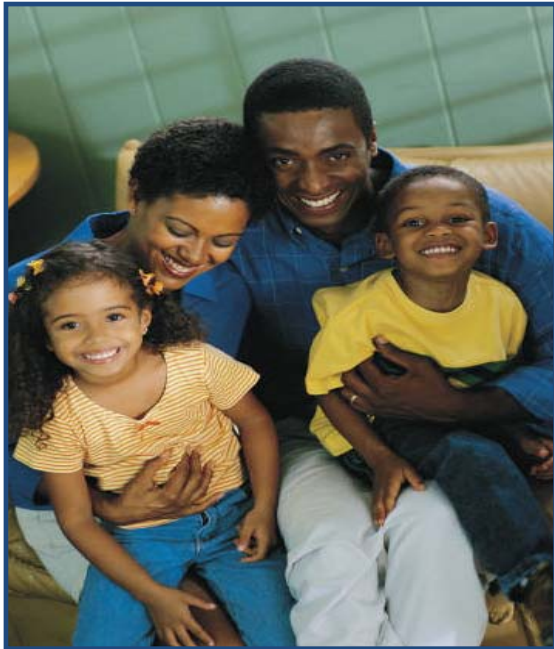
- Smoking cessation counseling **recommended** using 5 A's method recommended by ACOG
- Medicaid Family Planning Waiver in effect in N.C. since 2005; requesting 3 year renewal and will apply for State Plan Amendment in place of continued waiver



Title V and Title X

- Staff from both programs are members of Workgroups
- Title X and Title V Trainings cover preconception health and include diabetes, healthy weight genetics, and contraception methods update
- Staff from family planning and maternity units present at other trainings on healthy weight, integrating wellness into Title X services, FP Waiver, reproductive life planning

North Carolina Programs



- NC Preconception Health Campaign
(formally NC Folic Acid Campaign)
- UNC Center for Maternal and Infant Health – Postpartum Plus Project and Mother’s Matter Project
- Federal Healthy Start Programs – Baby Love Plus

North Carolina Programs

- North Carolina Healthy Start Foundation
- North Carolina March of Dimes
- Pregnancy Care Medical Home
- Teen Pregnancy Prevention Initiatives



North Carolina Programs

- Pitt County PIMPAC
- Forsyth County Infant Mortality Reduction Coalition
- Hertford County Preconception Health Coalition
- First Time Motherhood New Parent Initiative
- Young Moms Connect

Moving Forward



- Track women's health indicators during the reproductive years
- Workgroup action steps
- Seek funding opportunities
- Share findings and best practices

NC SCHS Webpage and Fact Sheet

Tracking Preconception Health in North Carolina

<http://www.schs.state.nc.us/SCHS/data/preconception.html>

The State of Preconception Health in North Carolina

http://www.schs.state.nc.us/SCHS/pdf/Preconception_WEB_110310.pdf

Quantitative Data Review 2007 - 2010

NC Women Age 18 – 44 years:

Intended Pregnancy*: 62% (NC PRAMS 2006)
55% (NC PRAMS 2009)

Takes folic acid at least 5 days a week:

29% (NC BRFSS 2007)

28% (NC BRFSS 2009)

43% (Take MVI daily BRFSS 2010)

Quantitative Data Review 2007 - 2010

Short Birth Interval: 41% (2006) and 38% (2010)
(does not include first pregnancies)

Postpartum Depression*: 8% (2006) and 13% (2009)
(feeling depressed often/almost always after birth of baby)



Quantitative Data Review 2007 – 2010

Overweight/Obesity: 54% (2007) and 55% (2010)

Women who participate in recommended amount of physical activity: 42% (2005) and 45% (2009)

Women who eat at least 5 servings of fruits and vegetables daily: 24% (2005) and 22% (2009)

Quantitative Data Review 2007 – 2010



Hypertension: 13% (2007) and 16% (2009)

Diabetes: 6% (2007) and 6% (2010)

Poor Mental Health: 14% (2007) and 18% (2010)

Quantitative Data Review 2007 - 2010

Tobacco Use:* 24% (2007) and 17% (2010)

Binge Drinking: 11% (2007) and 9% (2010)

Uninsured: 25% (2007) and 25% (2010)

Annual Routine
Check-up: 71% (2007) and 73% (2010)

Quantitative Data Review 2007 - 2009

Case Rate per 100,000 for
NC Women Ages 18-44 years



Early Syphilis (PSEL)	7.1 (2007)	11.0 (2009)
Gonorrhea	445.5 (2007)	407 (2009)
Chlamydia	1218.6 (2007)	1671.1 (2009)
Living with HIV/AIDS	240 (2007)	330.5 (2009)

The NC Leadership Team

Corrine Giannini, RD, Nutrition Consultant,
Women's Health Branch, NC Division of Public Health

Amy Mullenix, MSW, MSPH, State Coordinator, NC Folic Acid Campaign

Cindy Haynes Morgan, MSA-PA, BS HEd, RHEd, Interim Branch Head,
Asthma, NC Division of Public Health

Judy Ruffin, MPA, Program Manager,
Women's Health Branch, NC Division of Public Health

Sarah Verbiest, MSW, MPH, DrPH, Executive Director of the University
of North Carolina's Center for Maternal and Infant Health

Alvina Long Valentin, RN, MPH, Women's Health Network Supervisor,
Women's Health Branch, NC Division of Public Health

Thank you for your attention!

Alvina Long Valentin RN MPH
Women's Health Network Supervisor
Women's Health Branch
NC DHHS, Division of Public Health
alvina.long@dhhs.nc.gov
919-707-5708

