



Preconception Health+Health Care Initiative

A National Public-Private Partnership

PCHHC Newsletter

July 2014

Preconception Clinical Care

Advancing women's health in the primary care setting.

NEW ONLINE CLINICAL TOOLKIT

Before, Between & Beyond Pregnancy

THE NATIONAL PRECONCEPTION CURRICULUM & RESOURCES GUIDE FOR CLINICIANS

beforeandbeyond.org

NEW WEBSITE NOW LIVE!

Since 2006, the National Preconception Health and Health Care Initiative's vision for improving preconception health and pregnancy outcomes has included two key components: That all women and men would have a reproductive life plan, and that all pregnancies would be intended and planned. This issue highlights several key resources that help us move this work forward in clinical and public health settings.

Before, Between, & Beyond Pregnancy: Preconception/Interconception Care Clinical Toolkit Now Available

The Clinical Work Group of the PCHHC initiative is pleased to announce the launch of the NEW [Preconception/Interconception](#)

Using a Reproductive Life Planning Tool?

[Delaware Health and Social Services](#) would like to know what tools are being used around the country to help women and men make a reproductive life plan. They have developed a very brief survey to learn more. [Please click here to participate](#). Results will be shared in a future newsletter.



Show Your Love Campaign Article Now Available

[Understanding Women's Preconception Health Goals: Audience Segmentation Strategies for a Preconception](#)

[Care Clinical Toolkit](#). Built on a woman's reproductive life plan, this [toolkit](#) provides clinical guidance to primary care providers, their colleagues and practices for reaching every woman with preconception / interconception health services, every time she presents for routine care. This will help women achieve better health, irrespective of pregnancy desires; increase the likelihood that future pregnancies are planned; and lower the risk of problems should pregnancy occur. Based on the desires and likelihood of pregnancy in the next year, the [toolkit](#) offers specific clinical recommendations for assessing and addressing ten components of routine primary care: Family planning guidance, nutrition, infectious diseases and immunizations, chronic diseases, medication use, substance use, previous pregnancy outcomes, genetic history, mental health, and intimate partner violence. For each of these components, the [toolkit](#) provides background information, clinical guidance, clinical tools, patient resources, and references. To learn more about how the toolkit was developed and how to best use it in practice, click [here](#).

The [toolkit](#) is hosted on the www.beforeandbeyond.org website, which is the home of The National Preconception Curriculum and Resource Guide for Clinicians. [Before and Beyond](#) is a partnership of the National Preconception Health and Health Care Initiative and the Center for Maternal and Infant Health at the University of North Carolina. The toolkit was developed with support from the WK Kellogg Foundation. In addition to the toolkit, [Before and Beyond](#) offers many resources for the busy clinician including: Free CME on topics relevant to preconception health, key articles, guidelines, practice resources and news relevant to preconception care and the national movement.

New Resources:

[Health Campaign](#) is now available from *Social Marketing Quarterly*. This article discusses the social marketing planning process and strategies used to design the Show Your Love campaign, launched in February 2013, and describes the two primary audiences selected for the campaign. It explores how knowledge level, motivation, the campaign product, and the campaign goals are distinct for each audience.

CHOICES Now Included in NREPP

CDC is pleased to announce that [CHOICES: A Program for Women about Choosing Healthy Behaviors](#) is now included in [SAMHSA's National Registry of Evidence-Based Programs and Practices \(NREPP\)](#).

CHOICES is an evidence-based intervention that increases motivation and commitment to reduce or stop drinking and/or use contraception effectively. It includes 2-4 counseling sessions plus a contraceptive counseling session. The program works with women before they become pregnant to reduce their risk for an alcohol-

REPORT

Women and Health Care in the Early Years of the Affordable Care Act

Key Findings from the 2013 Kaiser Women's Health Survey



May 2014

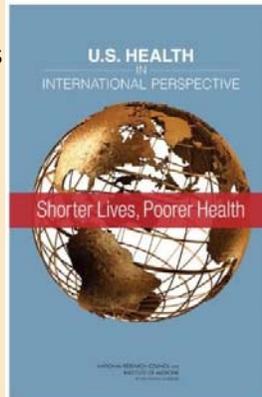


[Women and Health Care in the Early Years of the ACA: Key Findings from the 2013 Kaiser Women's Health Survey](#)

In this May 2014 report, the Kaiser Family Foundation provides results from their

2013 Women's Health Survey. The findings discuss women's coverage, access, and affordability to care, as well as their connections to health providers and use of preventive services, such as contraception, screening tests, and counseling services. The report also highlights differences for uninsured, low-income, and minority women.

The United States is among the wealthiest nations in the world and spends more per person on health care than any other nation, but it is far from the healthiest. The National Research Council and the Institute of Medicine report, [U.S. Health in International Perspective: Shorter Lives, Poorer Health](#),



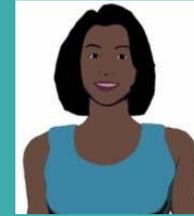
looks at this dichotomy. As reported, the NRC/IOM panel found that Americans are less healthy compared to peer countries due to factors such as a large uninsured population with limited access to primary care, the highest calories per person consumed per day worldwide, high levels of poverty - particularly child poverty - and income inequality combined with poor social mobility, and built environments that are constructed around automobiles instead of more active modes of transportation.



Implementing the New Family Planning Recommendations: Lessons from Florida

The release of two MMWRs - [Providing Quality Family Planning \(QFP\) Recommendations](#), from the US Office of Population Affairs and the CDC, and the [Core State Preconception Health Indicators -- PRAMS and BRFSS, 2009](#) - on the same day this past spring offered public health professionals and clinicians the opportunity to assess

exposed pregnancy.



Archived Webinar Now Available

[Archived webinar about innovative preconception care programs in the US](#), with a focus on the "Gabby" online preconception care system, is now available. Results from previous studies and opportunities for involvement in the current Gabby study are presented.



Sign Up for Bi-Weekly Preconception Updates to Your In-Box

To receive a bi-weekly media and literature update on preconception and interconception health through a listserv, please [email Cheryll Robbins](#).

About the

the current state of preconception health, then utilize a new tool to address the issues raised. The [Core State Preconception Health Indicators](#) reports on the nationally recognized set of preconception health indicators established in 2010, underscoring opportunities for improving the preconception health of US women. The [QFP](#) provides evidence-informed recommendations for the delivery of family planning services (including preconception care), defines what services to offer in a family planning visit, and includes information on services both to prevent and to achieve pregnancy.

[Florida's Maternal, Infant and Early Childhood Home Visiting \(MIECHV\) Initiative](#) has been working to incorporate the new [QFP recommendations](#). Below, Carol Brady, MIECHV Project Director, shares Florida's experience with integrating preconception care and reproductive health services into home visiting programs. The lessons are applicable to Federal Healthy Start and other community initiatives.

Why did MIECHV incorporate family planning and preconception care into its program?

Family planning and preconception health are key areas addressed by the federal MIECHV benchmarks, which are intended to measure program impact. Our initial challenge was to get home visiting programs to understand why the mother's health and her access to quality primary care, preconception care and birth spacing impacts the health and development of the baby. People need to understand the link between planned pregnancy and preventive health services for the mother and the whole family's wellbeing. This will impact the children more than anything else we do. That's what I love about the recommendations. They are so clear about how all this relates.

How important was staff development and training to implementation?

Professional development has been key to helping home visitors implement the broader focus on the parents' health, reproductive life planning and birth spacing. Home visitors need to understand the Recommendations. They need to be able to ask more than "Are you taking folate once a day?" We need to make sure that they can do supportive counseling around reproductive life planning, as well as link women to family planning and preventive services in the community. Home visitors need to be knowledgeable about all contraceptive options including LARCs (long-acting reversible contraception-IUDs and contraceptive implants) and convey that information to clients. LARCs are an important tool in helping women with planning their pregnancies. Home visitors also need to be knowledgeable about community resources so they know they

Newsletter

Thanks for reading! Is your organization doing exciting work to promote preconception health? We would love to feature you in an upcoming newsletter. [Email us](#) for details, or if you have any questions about the newsletter.

Do you work on issues related to preconception clinical care?

Please [email us](#) - we would love to know more about your work and to connect you with the PCHHC Initiative.

Newsletter

This e-newsletter is archived. Find back issues of the newsletter and more information about improving preconception health and health care [here](#).

are referring to providers who offer quality family planning, primary care and other services.

So they need to be advocates for the women they serve?

Yes, an important role for home visitors is to advocate for the women and for quality services at the community level. We need to be advocates ourselves at the community, state and federal levels. Florida didn't expand Medicaid [when the Affordable Care Act was implemented]. Title X [clinics] and Federally Qualified Health Centers are basically all the health care there is for low-income, uninsured women in the state. We need to make sure these programs implement QFP because they are the only source of health care for many women. QFP really sets the standard of care for family planning and reproductive health for all health providers and we need to support and promote its adoption.

What else has been critical to incorporating preconception care and family planning?

In Florida, we are using the benchmarks to frame everything we do with the initiative. The benchmarks are critical for our accountability and effectiveness. They set expectations and standards for care. We are actively tracking performance around them, building accountability at all levels. They help us make sure we are all focusing on factors that make a difference in outcomes.

What's the next step for MIECHV and Florida?

We are now working on building core competencies for home visitors around the benchmarks. This ensures we are comprehensive and don't leave out the "M" in MIECHV. One of the values of QFP is that it provides an opportunity to fully integrate our efforts. We are fortunate to have a strong partnership at the state level with our Title X program which help us be successful!

Carol Brady is the Project Director of the [Florida Maternal, Infant and Early Childhood Home Visiting Initiative of the Florida Association of Healthy Start Coalitions, Inc.](#) MIECHV is funded by the Health Services and Resources Administration's Maternal, Child and Infant Home Visiting program. The program provides evidence-based home visiting programs aimed at improving outcomes for children age 0-5. Thank you to Sima Michaels Dembo, MPH, with the Office of Population Affairs for proposing and conducting this interview.