Preconception Counseling in California: Women Ages 18-44, 2009-2010

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PURPOSE: To determine a baseline frequency of preconception counseling among California women of reproductive age

Background: Preconception Health is for All Women

Preconception Health refers to a woman’s non-pregnant health and is important because maternal and infant outcomes are impacted by the health of the woman over the course of her life. Poor health before pregnancy increases the risk for preterm births, low birth weight babies, major birth defects, pregnancy complications, and deaths of women and infants. The goal of preconception health activities is to prevent or treat conditions and behaviors before pregnancy that could pose a health risk to a woman or her infant. Since 85% of women will give birth during their lifetime, preconception health is a critical 20% factor in population health. Over the past decade, the number of women with prenatal complications or pregnancy-associated mortality has increased because of poor preconception health. Among pregnant California women of reproductive age in 2009-2010, 28% were overweight, 22% were obese, 13% were current smokers, 9% had been diagnosed with diabetes, and 63% did not consume folic acid daily.

A major provision of the Patient Protection and Affordable Care Act is the annual well-woman preventive care visit that includes preconception and prenatal care with no cost-sharing.

CDC Recommendations for Preconception Clinical Care

The Centers for Disease Control and Prevention recommends that professional guidelines for clinicians who provide the majority of primary care to women should include routine risk assessment through screening:

1. Reproductive history
2. Environmental hazards and toxins
3. Medications that are known teratogens
4. Nutrition, folic acid intake, and weight management
5. Genetic conditions and family history
6. Substance use, including tobacco and alcohol
7. Chronic diseases (e.g., diabetes, hypertension, and oral health)
8. Infectious diseases and vaccinations
9. Family planning
10. Social and mental health (e.g., depression, social support, safety, and housing)

Methods: California Women’s Health Survey

The California Women’s Health Survey was established in 1997 to provide information to serve as a catalyst for innovative solutions to sustain and improve the health of California’s women. It is an annual, random-digit-dialed telephone survey conducted in English, Spanish, and Mandarin, that collects information from a sample of approximately 4,000 women ages 18-44 years and older. Data are weighted to State of California Department of Finance population numbers to produce statewide estimates.

For this report, data from 2009-2010 were analyzed for the 2,807 non-pregnant women ages 18-44 years who reported a routine visit in the past twelve months to determine whether health care providers had talked about the following preconception health topics during their most recent routine visit: diet or exercise, pregnancy plans, smoking, dental care, and folic acid use.

Results: Frequency of Addressing Specific Topics by Health Providers

The preconception health topic reportedly addressed with the most women was diet or exercise. Only 17% of women reported that their provider talked about folic acid use.

Women who reported that their health care provider talked to them about specific preconception health topics at their most recent routine visit, 2009-2010

<table>
<thead>
<tr>
<th>Topic</th>
<th>2009-2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diet/Exercise</td>
<td>59.9%</td>
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<tr>
<td>Pregnancy Plans</td>
<td>41.6%</td>
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<tr>
<td>Smoking</td>
<td>41.1%</td>
</tr>
<tr>
<td>Dental Care</td>
<td>28.8%</td>
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<tr>
<td>Folic Acid</td>
<td>17.2%</td>
</tr>
</tbody>
</table>

Guide: Preconception Health Topics

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References