

# CORE State Preconception Health Indicator Initiative

## *Beyond Data : Program and Policy Implications*

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# Where do we start?

- Data availability and nuances not well known by MCH Program Administrators.
- What are the best preconception measures based on data reliability, validity and availability?
- How and by whom are the various preconception measures collected?



# How do we prioritize?

- Concept of Preconception Health is a cumbersome, “fruit basket” of issues.
- Which preconception health issues are the highest priority for our state?
- Competing priorities and limited funding = need for data to target most critical issues for best outcomes.



# Is there an impact?

- There is a need for states to evaluate program interventions to assure limited funding is well spent.
- Solid, reliable, consistent data are needed for evaluation of interventions.



# Standardization of measures

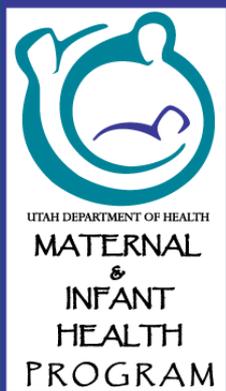
Use of Core Indicators allows:

- Comparison of rates and trends among different states,
- Ability to evaluate program interventions and policies among different populations,
- National funders to utilize uniform measures to estimate greatest need.



# MCH Block Grant State Performance Measures

- The percent of women of reproductive age (18-44) who are uninsured.
- The proportion of pregnancies that result in a live birth that are intended.
- The percent of women with normal prepregnancy weight who deliver a live born infant.
- The percent of pregnant women with appropriate weight gain who deliver live born infants.
- The proportion of women who deliver a live born infant reporting moderate to severe postpartum depression who seek help from a doctor or other health care worker.



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: General Health Status & Life Satisfaction*

- Percentage of women who report good, very good or excellent health (BRFSS)



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: Social Determinants of Health*

- Education: Percentage of women with a high school education/GED or greater (BRFSS)
- Poverty: Percentage of women who live at or below 200% of the federal poverty level (ASEC)



# 5 Year Needs Assessment

## Preconception Core Indicators

### *Domain: Health Care*

- Percentage of women who currently have some type of health care coverage (BRFSS)
- Percentage of women having a live birth who had health care coverage during the month prior to pregnancy (PRAMS)



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: Health Care (cont.)*

- Percentage of women having a live birth who had a postpartum checkup (PRAMS)
- Percentage of women having a live birth who received preconception counseling about healthy lifestyle behaviors and prevention strategies from a health care provider prior to pregnancy



# 5 Year Needs Assessment

## Preconception Core Indicators

### *Domain: Reproductive Health & Family Planning*

- Percentage of women having a live birth who reported having an unintended or unwanted pregnancy (PRAMS)
- Percentage of women having a live birth who were not trying to get pregnant at the time of conception and neither they nor their husbands or partners were doing anything to keep from getting pregnant (PRAMS)



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: Reproductive Health & Family Planning (cont.)*

- Percentage of women having a live birth who reported that they or their husbands or partners were currently doing something to keep from getting pregnant (PRAMS)
- Percentage of women having a live birth who used fertility drugs or received any medical procedures from a doctor, nurse, or other health care worker to help them get pregnant (PRAMS)



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: Tobacco, Alcohol & Substance Use*

- Percentage of women having a live birth who smoked cigarettes during the three months prior to pregnancy (PRAMS)
- Percentage of women having a live birth who drank any amount of alcohol during the 3 mos. prior to pregnancy (PRAMS)



# 5 Year Needs Assessment

## Preconception Core Indicators

### *Domain: Nutrition & Physical Activity*

- Percentage of women having a live birth who were overweight or obese based on BMI at the time they became pregnant (Vital Records)
- Percentage of women having a live birth who took a multivitamin, prenatal vitamin, or folic acid supplement everyday in the month prior to pregnancy (PRAMS)



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: Mental Health*

- Percentage of women having a live birth who experienced depressive symptoms after pregnancy (PRAMS)



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: Emotional and Social Support*

- Percentage of women having a live birth who were physically abused by their partner during the 12 months prior to pregnancy (PRAMS)



# 5 Year Needs Assessment

## Preconception Core Indicators

*Domain: Infections*

- Percentage of women who received an influenza vaccination within the past year (BRFSS)



# First Time Motherhood/New Parent Initiative

- Utah was one of 12 states to receive funding from HRSA
- Core Indicators used in grant proposal
- These same Core Indicators will be used to evaluate the impact of the Campaign



# First Time Motherhood Grant

Core Preconception Indicators used:

- Pregnancy Intention
- Tobacco, Alcohol and Substance Use
- Folic Acid Supplementation



# First Time Motherhood Grant

Interconception issue →

Inter-pregnancy Interval/Birth Spacing

- Percentage of women having a live birth who had less than 18 months between their previous live birth and the start of the most recent pregnancy (NVSS)



# Assessing, monitoring and evaluating preconception health

- What are our most pressing needs in the preconception health area?
- How are those needs worsening or improving over time?
- How are our policies, programs and/or interventions working?



# Questions?

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