

Those interested in state-level preconception health initiatives can learn from New Jersey.

The New Jersey Prenatal Care Task Force report can be found at: http://www.state.nj.us/health/fhs/documents/task_force_report.pdf

In September 2008, in recognition of Minority and Multicultural Health Month, the NJ Department of Health and Senior Services (NJ DHSS) issued its Prenatal Task Force report which pointed to the state's need to promote preconception care and family planning services among women before they get pregnant, to ensure a healthy pregnancy and a healthy baby. This report and the approach used to release its recommendations provides an excellent example of how to weave together concerns about infant mortality, prenatal care, preconception health, and family planning. (See goals below.)

The state has been ranked 40th in rate of early prenatal care. The Prenatal Task Force also found that nearly one third of all pregnancies in New Jersey are unintended, mistimed or unwanted. It recommended increased education of the public as well as health care professionals about the importance of preconception and inter-conception health.

Commenting at the time of the report's release, NJ Governor Jon S. Corzine said: "All children deserve a healthy start in life. The recommendations of the Prenatal Task Force have laid the foundation for New Jersey to improve access and reduce barriers to early prenatal care and help to diminish racial disparities in birth outcomes. We also must ensure that there is a sufficient network of obstetricians and other medical professionals to provide prenatal care to those who seek services."

As national spokesperson for the US DHHS Office of Minority Health campaign A Healthy Baby Begins with You, Tonya Lewis Lee, author, producer and wife of filmmaker Spike Lee, highlighted the importance of working at the grass root level to address and help reduce the high infant mortality rates among African Americans. "As we begin Infant Mortality Awareness Month this September," said Lewis-Lee, "this conference in New Jersey allows us to explore further how to improve preconception health and care for minorities, and discuss models that have worked and are promising practices for other communities."

"One of the most important ways we can narrow the gap of health disparities is to provide meaningful family planning services for women," said Department of Human Services Commissioner Jennifer Velez. "DHS is working to secure a federal waiver that will permit women, who would otherwise be ineligible for Medicaid, to access preconception counseling and other family planning services."

In a related action in December, the State of New Jersey awarded The Horizon Health Center will receive a \$300,000 grant to help the center expand prenatal care services in Hudson County, NJ. The Governor said in his statement: "During these extremely difficult economic times, more people will turn to community health centers for care. It is critical that we strengthen the health care safety net by helping centers to expand their facilities, hours and services to better serve

their communities." As part of an ongoing campaign to raise awareness of the importance of preconception and prenatal health, NJ DHSS Commissioner Heather Howard visited the Horizon Health Center. Since October, Howard has visited health centers, Women, Infants and Children clinics, college campuses and a community baby shower to urge women to maintain a healthy lifestyle before, during and in between pregnancies. "Horizon applauds the Commissioner's commitment to preconception and prenatal health and will continue to provide services to the women of Hudson County," said Marilyn Cintron, Chief Executive Officer for Horizon Health Center. (December 22, 2008, Reena Rose Sibayan;The Jersey Journal)

The Prenatal Care Task Force report, released in September recommends raising awareness of preconception care and family planning services among women before they get pregnant, to ensure women enter pregnancy in optimal health. Key goals related to preconception care mirror the CDC national recommendations but have specific state and local level actions to accompany each recommendation. The following examples illustrate the scope of this excellent report.

GOAL I. Increase public awareness of the importance of preconception health.

Recommendation: Increase public awareness of the importance of preconception health behaviors and preconception care services by using information and tools appropriate across various variables, such as age; literacy level, including health literacy; and cultural/ linguistic contexts.

Sample Action Steps:

- Utilize social marketing campaigns to develop messages for promoting preconception health knowledge, attitudes and behaviors among women of childbearing age and their partners.
- Engage media partners to assist in depicting positive role models for lifestyles that promote reproductive health.

GOAL II. Improve community, consumer and healthcare professional knowledge of risks and behaviors that impact preconception health.

Recommendation: Each woman, man and couple should be encouraged to have a reproductive life-plan.

Sample Action Steps:

- Identify and disseminate reproductive life planning tools for females and males respecting variations in age, literacy and cultural and linguistic context.
- Establish at least one, no cost prepregnancy risk assessment and education site in each county for women of childbearing age and their partners.
- Integrate preconception health education and counseling as a core service at each of the six Maternal and Child Health Consortia (MCHC).

GOAL IV. Assure that all females of childbearing age in New Jersey receive preconception care services that will enable them to enter a planned pregnancy in optimal health.

Recommendation: As a component of primary care visits and school-related health contacts, provide risk assessment, education and health promotion counseling to all women of childbearing age to reduce reproductive risks and improve pregnancy outcomes.

Sample Action Steps:

- Identify and implement curricula on preconception care for use in clinical education at the graduate, post-graduate and continuing education levels.
- Standardize and promote a brief risk assessment tool to be used by all health care professionals who have contact with women of childbearing age.
- Create a fee code for preconception care to encourage provider participation and provide reasonable reimbursement.

Recommendation: Offer as a component of reproductive health care, one pre-pregnancy visit for women of childbearing age and their partner planning a pregnancy.

GOAL V. Reduce risks indicated by a previous adverse pregnancy outcome through interventions during the interconception period, which can prevent or minimize future health problems.

Recommendation: Increase the proportion of women who receive interventions as a follow-up to preconception risk screening, focusing on high priority interventions (i.e., those with evidence of effectiveness and greatest potential impact).

Recommendation: Use the interconception period to provide additional intensive interventions to women who have had a previous pregnancy that ended in an adverse outcome (i.e., infant death, fetal loss, birth defects, low birth weight, or preterm birth).

Recommendation: Integrate components of preconception health into existing local public health and related programs, including emphasis on interconception interventions for women with previous adverse outcomes.

GOAL XIII. Assure a system of data collection and evaluation for all preconception care strategies.

Recommendation: Promote the use of evidence based interventions and evaluation methods to improve preconception care.

Recommendation: Maximize public health surveillance and related research mechanisms to monitor preconception health.

GOAL XIV. Evaluate all data which is collected to assure a thorough, comprehensive and equitable development and implementation of all preconception care strategies.

Recommendation: Include information on existing disparities in all preconception and prenatal education outreach activities