

Implementation Recommendations

Preconception Health:The Role of Nutrition

his document outlines ways WIC programs may include an interconception care approach within their services. It is meant as a guide for WIC professionals who wish to develop an approach that will work for their clinic.

Background

WIC is ideally positioned to support interconception care as the program already addresses most aspects of this care. It is only necessary to review processes and "repackage" them.

While WIC cannot provide a complete interconception care visit, staff are able to take the lead in sharing messages regarding healthy eating, choosing foods, weight, postpartum weight loss, folic acid intake and nutrition aspects of chronic health conditions. Staff also play an important role in screening and referring women for other needed services.

The interconception care the woman receives from referrals will be dependent upon her health care providers' awareness and practices in this area. WIC staff may share information and resources about preconception/interconception care with providers, especially colleagues housed within the same agency, as well as referral offices/programs, hospitals, the community and other WIC programs. Many public health partners are involved in preconception efforts and will welcome the involvement of WIC. These partners can serve as resources for referral, training and support.

WIC-Based Activities to Support Interconception Care

The National Preconception Health and Health Care Initiative list the following factors as components of routine well woman and preconception care. Some are WIC priorities such as healthy diet and achieving a healthy weight. Other factors are addressed primarily through screening and referrals. Following are examples of how these factors are addressed within WIC.

✓ Nutrition

- Support the consumption of a varied and healthful diet through counseling and provided food benefits.
- Discuss weight management recommendations and achievement of a healthy weight.
- Recommend continued use of folic acid through a daily multivitamin with 400 micrograms of folic acid.

✓ Chronic Diseases

- Ensure woman is receiving needed health care.
- Discuss medical nutrition therapy topics as appropriate to WIC and discuss implications for future pregnancies.

✓ Family Planning and Contraception

- Address the impact of short interconception period.
- Assess if and when a next pregnancy is planned.
- Raise issue of reproductive life planning.
- Make referrals to family planning provider.

Medication Use

- Discuss as appropriate to WIC including offering needed referrals.
- ✓ **Substance Use** (tobacco, alcohol, over the counter, prescription and street drugs)
- Discuss as appropriate to WIC including offering needed referrals.

✓ Previous Pregnancy Outcomes

 Address possible impact on future pregnancy and the importance of clinical care. Discuss as appropriate to WIC including offering needed referrals.

✓ Mental Health

• Discuss as appropriate to WIC including offering needed referrals.

✓ Interpersonal Violence

 Discuss as appropriate to WIC including offering needed referrals.

— Implementation Recommendations —

Interconception Care Implementation Tips

The following suggests actions to take to include an interconception approach within WIC visits.

✓ Actions — External Environment

- Assess if a preconception/interconception approach is being used within your agency and seek support from senior staff.
- Approach colleagues working with women's health and determining how to better integrate this approach with the agency. Share resources, engage in conversations and participate in planning.
- Raise awareness of and facilitate approach among referral partners, WIC colleagues, and others that work to improve pregnancy outcomes and/or women's health.

✓ Actions — WIC Clinic Processes

- Determine the expected outcomes of including an interconception approach and identify evaluation criteria.
- Review current practices and determine how to integrate relevant elements of interconception care into existing services. This will include looking at screening, counseling recommendation, tools and resources materials. Ensure all are culturally appropriate.
- Develop an interconception intervention and seek feedback.
- Set expectations with staff. Offer training regarding the importance and components of interconception care and the chosen intervention. Provide assistance with how to phrase questions and messages. Include opportunities to practice.
- Implement intervention, monitor and adapt as needed. Evaluate impact on regular basis.

✓ Actions — Clinic Visit

- Review screening question on future pregnancy intention. Tailor information based upon the woman's response.
 - Women indicating they want a future pregnancy or if they are unsure should be offered interconception messages tailored to her interest and needs.
 - Women not wanting a future pregnancy should be given an abbreviated message and an offer of future discussion as needed.



- Introduce the <u>reproductive life planning</u> concept and advise women to seek contraception from health care provider. Offer needed referrals.
- Encourage women to attend their postpartum and family planning provider visits as well as routine medical and dental care.
- Screen for and address modifiable nutrition-related risk factors, especially those that can impact future pregnancies such as weight.
- Address ongoing medical nutrition therapy needs.
- Reinforce
 - Daily physical activity
 - Mental health messages as appropriate
 - Avoidance of harmful substances (smoking, alcohol, prescription, street and other drugs) when planning next pregnancy.
 - Interconception messages received in other clinics.
- Assist woman with prioritizing her interconception needs and tailor advice accordingly.
- Follow-up on goals that were set and referrals at subsequent visits.



This project was supported in part by the Health Resources and Services Administration, Maternal and Child Health Bureau (contract # T79MC00007) through a grant provided to the University of Minnesota, School of Public Health. 12/8/2015