

Los Angeles Best Babies Collaborative First 5 LA: Healthy Births Initiative

Approach 6

Interconception Care



Approach (6)

Interconception Care

Goal: To reduce the recurrence of adverse birth outcomes.

Objectives: To provide interconception care to women whose prior pregnancy was affected by one of the following:

- 1. Prior early preterm or VLBW birth
- 2. Fetal or infant death
- 3. Pregnancy affected by preventable congenital anomalies
- 4. Adolescent pregnancy
- 5. Diabetes
- 6. Other chronic health problems associated with adverse pregnancy outcomes

Rationale

Women who have had a poor birth outcome are at risk for having another poor birth outcome during their subsequent pregnancy. Many biobehavioral risk factors (i.e., poor nutrition, substance use, psychosocial stress) are carried from one pregnancy to the next. The interconception period offers an important window of opportunity for optimizing women's health prior to their next pregnancy. Presently, most women do not receive interconception care. Further, those women whose care was provided for under the Medi-Cal system lose coverage/benefits at 60 days postpartum, even if they have had a poor birth outcome. In a five-year interconception demonstration program, women participating for at least six months had 34% fewer subsequent LBW infants, no infants requiring NICU admission, and fewer closely spaced pregnancies (241). The goal of this strategy is to reduce the recurrence of adverse birth outcomes by providing interconception care to the aforementioned target populations.

Implementation

The core components of interconception care consist of the following:

1) Risk Assessment

- Medical and obstetrical assessment
- Psychological assessment
- Nutritional assessment
- Reproductive health assessment
- Periodontal disease assessment
- Social service needs assessment

2) Health Promotion

- Provision of information about medical and psychological factors that may impact pregnancy and parenting;
- Provision of information on preventive health measures;
- Promotion of healthy behaviors:
- Advice and information on pregnancy preparedness, family planning and pregnancy spacing;
- Advice and information about need for on-going care for chronic health conditions; and
- Support of healthy parenting behaviors and practices.

3) Medical and Psychosocial Interventions

- Primary preventive healthcare and treatment for mothers and infants;
- Nutritional screening, treatment and referral;
- Genetic screening, treatment and referral;
- Screening, treatment and referral for mental health conditions including stress, depression and pregnancy anxiety;
- Screening, treatment and referral for intimate partner violence;
- Gynecological health including screening and treatment for genitourinary tract infections and cervical cancer screening;
- Screening for immunity to communicable diseases including rubella, hepatitis, HIV, gonorrhea, chlamydia and other sexually transmitted infections, and bacterial vaginosis;
- Referrals to appropriate treatment of medical, nutritional, genetic, dental, and mental health conditions through established referral networks;
- Family planning services; and
- Referral for treatment of adverse health behaviors.

4) Outreach and Case Management

- Psychosocial assessment for personal resources and social stressors;
- Assist clients to increase self-efficacy in health behaviors;
- Assist clients to identify personal and community resources;
- Assist clients to develop a set of health goals and objectives;
- Provide health information;
- Provide care coordination and case management;
- Counseling and referral; and
- Assist clients to identify and overcome personal barriers.

A brief for implementation of interconception care can be found under Resources.