

# **TUNE INTO LIFE COURSE HEALTH**

**For Health Care Professionals**

**TUNE**

- Describe the Life Course Health model and how it can be applied to pre- and interconception health.
- Summarize Centers for Disease Control and Prevention (CDC) “Recommendations to improve Preconception Health and Health Care” (Recommendations #1 – 6), which focus on reproductive health for women and men.
- Comprehend the importance of preconception health and health care and my role in improving pregnancy related outcomes.
- Describe how to provide TUNE resources and various approaches to increase young adults’ awareness about health and future roles as parents.
- Explain why young women and men should develop and discuss a Life Course Health Plan with their health care provider and take individual responsibility for their health management.

**LIFE COURSE HEALTH IS A MODEL THAT EXPLAINS HOW ALL ASPECTS OF A PERSON'S LIFE HAS AN AFFECT ON THEIR FUTURE HEALTH.**

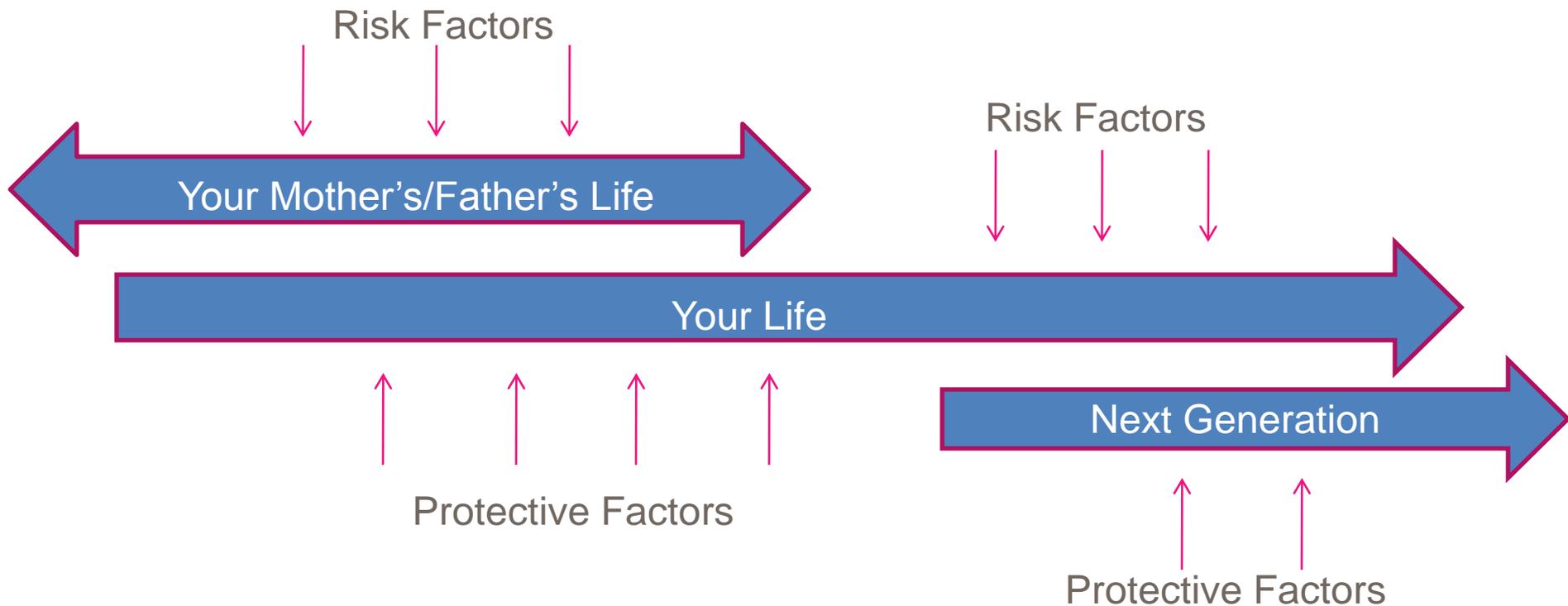


- Looks at the whole person across their entire life.
- Recognizes that what we do today affects not only us, but future generations.
- Looks at the whole person and recognizes the complex interplay of biological, behavioral, psychological, and social protective and risk factors that contribute to health outcomes.

THERE ARE CUMULATIVE PROTECTIVE AND RISK FACTORS THAT BEGIN AT BIRTH AND BUILD UP OVER TIME. MORE EMPHASIS NEEDS TO BE PLACED ON PROTECTIVE FACTORS AT AN EARLIER AGE WHICH WILL HAVE A POSITIVE EFFECT ON HEALTH FOR THE FUTURE.

# LIFE COURSE HEALTH ADDRESSES THREE AREAS:

1. Your health as an individual
2. Your parents' health prior to your conception
3. Your children's health (intergenerational component)



## RISK FACTORS

•Circumstances that may increase the likelihood of engaging in risky behaviors.

- Unstable housing
- Communication barriers
- Neighborhood lacks a grocery store
- Substance abuse
- Depression
- Neighborhood unsafe
- Obesity
- Poverty

## PROTECTIVE FACTORS

•Circumstances that promote healthy behaviors.

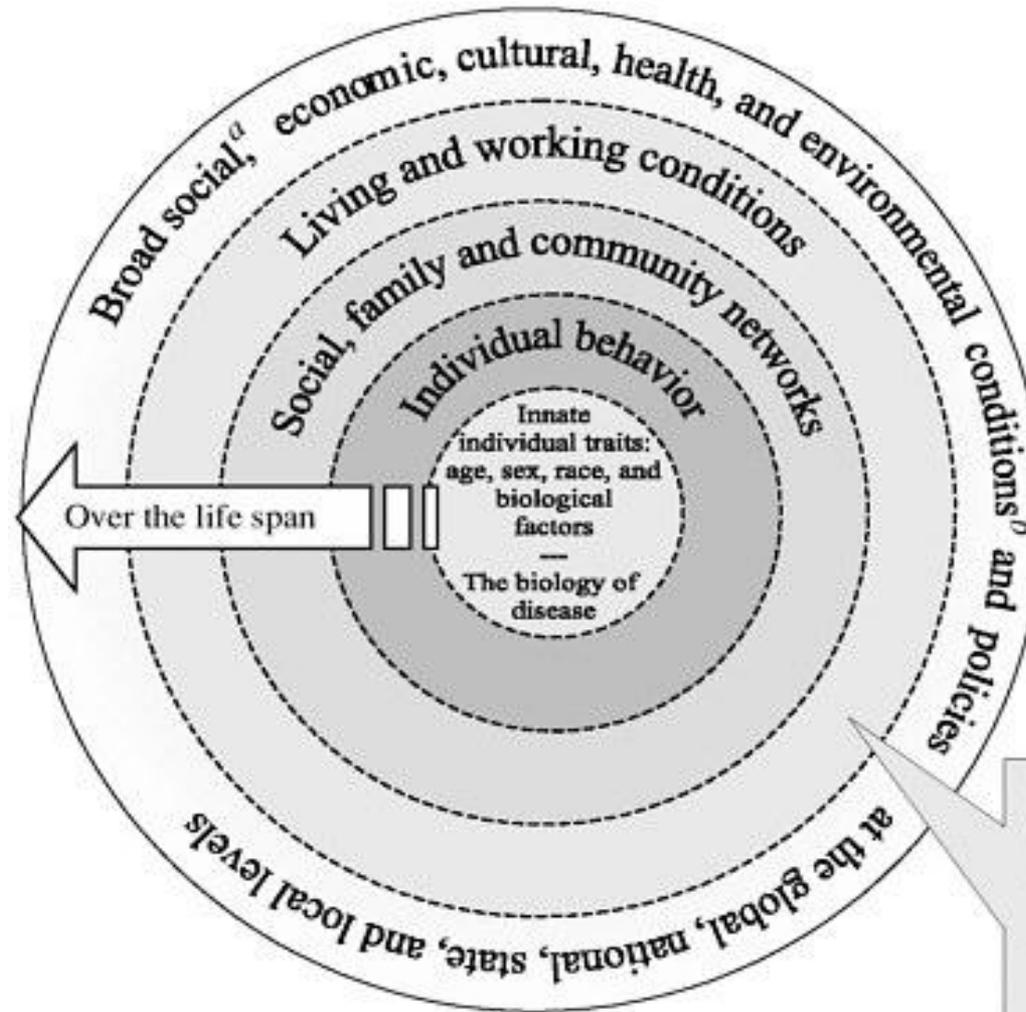
- Acceptable affordable housing
- Grocery store has fresh produce
- Support system
- Access to parks and walking trails
- Adequate health insurance
- Healthy relationships

# THERE ARE CRITICAL TRANSITION PERIODS IN A PERSON'S LIFETIME

**TUNE**

- **In utero**
- **Preschool**
- **Middle school**
- **Entering/leaving the workforce**
- **Leaving the “nest”**
- **Marriage**
- **Pregnancy**
- **Chronic condition (obesity, diabetes, high blood pressure)**





- Living and working conditions may include:
- Psychosocial factors
  - Employment status and occupational factors
  - Socioeconomic status (income, education, occupation)
  - The natural and built<sup>c</sup> environments
  - Public health services
  - Health care services

# WHO ARE THE LEADING RESEARCHERS IN THIS FIELD?

TUNE

- Neal Halfon
- Michael Lu
- Dawn Misra

In 2005 and again in 2007, the Centers for Disease Control and Prevention met with many other organizations and experts in the National Summit on Preconception Health and Health Care. Ten recommendations were formed for the nation.

These recommendations identified strategies and interventions that could be adopted by health care providers, private practices, individuals, and others that could lead to improved preconception health and health care nationwide.

CDC Morbidity and Mortality Weekly Report  
Recommendations to Improve Preconception Health and Health Care  
United States, April 21, 2006  
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5506a1.htm>

1. Improve the knowledge, attitudes, and behaviors of men and women related to preconception health.
2. Assure that all women of childbearing age in the United States receive preconception-care services that will enable them to enter pregnancy in optimal health.
3. Improve interventions following an adverse pregnancy outcome in order to reduce risk during subsequent pregnancies.
4. Reduce disparities in adverse pregnancy outcomes.

1. Encourage men and women to have personal reproductive life plans.
2. Increase public awareness about preconception health.
3. Provide risk assessment and counseling during primary-care visits.
4. Increase the number of women who receive interventions after risk screening.
5. Use the time between pregnancies to provide intensive interventions to women who have had a pregnancy that resulted in infant death, low birth weight, or premature birth.
6. Offer one pre-pregnancy visit.

7. Increase health insurance coverage among low-income women.
8. Integrate preconception health objectives into public health programs.
9. Augment research.
10. Maximize public health surveillance.

Preconception health is the care of women of reproductive age before the first pregnancy or between pregnancies (commonly known as interconception care) to ensure that conditions and behaviors which may pose a future risk to mothers and infants are identified and managed.



- 1 in 14 babies are low birth weight in Nebraska
- 1 in 10 babies are born preterm
- Over the past 12 years, low birth rate in Nebraska increased 12% and preterm infants increased 25%

Nebraska 2008 Vital Statistics

<http://www.dhhs.ne.gov/ced/vs.htm>

APPLYING THE LIFE COURSE HEALTH MODEL TO  
PRECONCEPTION AND INTERCONCEPTION HEALTH CARE  
BROADENS THE APPROACH TO IMPROVING BIRTH  
OUTCOMES BEYOND CLINICAL CARE.



# WHY IS PRECONCEPTION HEALTH SO IMPORTANT?

TUNE

- Poor birth outcomes continue to be a problem in the United States
- Prenatal care comes too late to prevent a number of serious maternal and child health problems

# WHY IS PRECONCEPTION HEALTH SO IMPORTANT?

TUNE

**Risk behaviors associated with poor pregnancy outcomes remain prevalent among women of reproductive age including:**

- Smoking
- Alcohol consumption
- Obesity: Inadequate physical activity and unhealthy nutrition
- Failure to take folic acid

# PRECONCEPTION HEALTH CAN BE USED TO:

TUNE

- Reduce adverse birth outcomes (low birthweight, spina bifida, or fetal alcohol syndrome)
- Reduce infant and maternal mortality
- Decrease compromises to maternal health (such as gestational diabetes)

# ELEMENTS OF PRECONCEPTION CARE IN PRIMARY CLINICAL PRACTICE

TUNE

## Assessment and Screening

- Medical and reproductive history
- Genetic and family history
- Infectious diseases
- Environmental and occupational exposures
- Family planning and pregnancy spacing
- Nutrition and weight management
- Prescription and over the counter medications
- Substance use (alcohol, tobacco, and cocaine)
- Psychosocial (e.g. depression, domestic violence, housing)

## Health Promotion and Counseling

- Nutrition and healthy weight
- Preventing STD and HIV infection
- Family planning methods
- Abstaining from tobacco
- Managing alcohol and drug use
- Consuming folic acid daily
- Controlling existing medical conditions
- Risks from prescription drugs
- Genetic conditions

## Brief Interventions

- Immunizations
- Smoking cessation
- Alcohol misuse
- Weight management
- Family planning

Kay Johnson. The Second National Conference on Preconception Health and Health Care, September 2007

## **If each individual woman and man in America:**

- maintained a healthy weight
- ate nutritious food
- exercised regularly
- used alcohol in moderation
- didn't use tobacco
- followed medical advice

**many health disparities and issues could be resolved.**



- Time demands – balancing school, sports, jobs, sleep
- Lack of money
- Friends and other relationships
- Lack of self-esteem
- Lack of future goals
- Being in transition: Finding a job/graduating/knowing what they want
- Feeling they can deal with these things later in life

- “We don’t really know the future; we’re just kind of waiting to see what happens and how things turn out.”
- “They don’t realize there’s a connection between bad habits and bad health.”
- “They’ve got time to do it later, when they’re older.”
- Invincibility: “It’s not going to happen to me.”

2009 Nebraska Life Course Health Qualitative Research Study



**NOTHING WOULD BE MORE POWERFUL IN REDUCING POOR BIRTH OUTCOMES THAN THE DEVELOPMENT OF EACH INDIVIDUAL'S SENSE OF RESPONSIBILITY FOR HIM/HERSELF.**

**THE WAY TO GET STARTED IS A LIFE COURSE HEALTH PLAN.**

**TUNE**

# PROVIDERS CAN ENCOURAGE RESPONSIBILITY BY MODELING FOUR BASIC ACTIVITIES:

**TUNE**

1. Have a Life Course Health Plan
2. Become health literate
3. Manage your health
4. Communicate with your doctor or other health care provider

**A Life Course Health Plan** allows women and men to think about how today's health practices influence tomorrow's outcomes.

A Life Course Health Plan can take many forms. For some individuals, the life plan is a set of decisions and goals that are mapped out and used as a guide. The plan can also act as a "personal contract" that supports healthy practices. For others, life plans are ongoing conversations.

- Diet
- Nutrition
- Weight/Exercise
- Folic Acid
- Domestic Violence
- Alcohol, Tobacco, Drugs
- Medical Conditions
- Vaccinations
- Infections/STD's
- Family Health History
- Stress/Emotional Health
- Plan for a future family

**Health literacy is the ability to understand basic health information so that people can make appropriate decisions about their health.**

Health literacy also includes:

- the ability to read health materials
- active interactions with physicians
- understanding health brochures, ads, labels (over-the-counter drugs, prescription containers, etc.)
- understanding the importance of health visits and follow-up appointments.

## **Managing your health means:**

- Know your body
- Recognize the physical cues and symptoms your body produces when it is in trouble and adjust your behavior
- Sense symptoms early and take appropriate action
- Be responsible for your actions including routine health practices to ensure healthy outcomes

**As a health provider, it is important to facilitate ongoing conversations so that young adults are comfortable in all of these situations:**

- Talking with your health care provider about health issues that affect you and your family
- Seeking information from reliable sources about health topics important to you
- Learning to be your own advocate
- Asking a lot of questions

**HOW CAN HEALTH CARE PROVIDERS  
INCREASE AWARENESS OF LIFE COURSE  
HEALTH WHEN WORKING WITH YOUNG  
ADULTS?**



A Nebraska Department of Health and Human Services initiative using music to inspire young women and men and to empower them to take an active role in their health.



- Need to bring information in ways that connect with young adults. They get information online and through friends.
- TUNE, along with the new tools available to you through Tune Into Life Course Health can help you reach youth in a new way.



- Physical Health
- Emotional Well-Being
- Friends and Family
- Dating
- Education



- TUNE MY LIFE website - [www.tunemylife.org](http://www.tunemylife.org)
- Life Course Health Plan
- Library of resource information - [www.dhhs.ne.gov/tune](http://www.dhhs.ne.gov/tune)
- Life Course PowerPoint

As a health care provider, you have unique opportunities to connect with young adults. One vital tool that is available to you is the Life Course Health Plan. The Life Course Health Plan will give you the opportunity to start conversations with young adults and help them realize that health is a resource for their life.

- You can start conversations now, long before pregnancies occur
- You can talk about Life Course Health with young women and men
- You can bring a new emphasis to earlier planning, risk assessment, decision-making and prevention