Power Your Life Preconception
Campaign

Location: Utah
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Category: Emerging Practice

BACKGROUND
According to the Utah Department of Health Birth Defects Network, neural tube defects increased during 1999 to 2008, resulting in approximately 18-25 additional babies being born with a brain or spinal cord tubal defect in Utah each year. Analysis of Utah’s 2006 Indicator-Based Information System (IBIS) data indicated that, across ethnicities, many women from Utah do not take daily multivitamins (including folic acid); roughly 12% of all Utah women reported they smoked three months before becoming pregnant; and an average of 21% of Utah women reported they drank alcohol during the three months prior to becoming pregnant. Additionally, Hispanic women from Utah showed a higher percentage of unplanned pregnancies except in the 18-19-year age group, in which unplanned pregnancies were much higher among non-Hispanic women. This indicated a need for a culturally relevant campaign, targeted by age, to present clear messaging around preconception health.

The Utah Department of Health contracted SUMA/Orchard Social Marketing, Inc., based in Austin, Texas, to create the social marketing campaign. Social marketing is a unique discipline that uses formative research with the target audience to motivate change in behavior. (For more information on social marketing, see http://www.sumaorchard.com/how&why.htm.)

PROGRAM OBJECTIVES
The overall goals of the Power Your Life campaign were to raise awareness of preconception health and increase consumption of folic acid.

The objectives were to raise awareness of and promote healthy behaviors for young women before they become pregnant, including proper nutrition and exercise; regular consumption of vitamins with folic acid; knowledge of family history; keeping up to date on vaccinations; avoidance of tobacco, alcohol, and abuse of other substances; prevention of risky sexual behaviors leading to unplanned pregnancy or sexually transmitted infections; and sustaining healthy relationships.

TARGET POPULATION SERVED
This was a state-wide campaign for Utah. However, roughly 80% of Utah’s population resides along the Wasatch Front, and the campaign was appropriately targeted to that region. Additionally, the campaign was focused on younger (18-25), minority (African-American, Hispanic, American Indian, and Pacific Islander), and low-income women because of higher incidences of poor pregnancy outcomes.

PROGRAM ACTIVITIES
Power Your Life was developed using a social marketing model to gather information about the target audiences’ beliefs, attitudes, expectations, experiences, and knowledge, as well as their motivations and preferences in receiving information. Researchers then analyzed the data to guide program design. Prochaska and DiClemente’s transtheoretical model of change was applied during focus group meetings to assess the audience’s “place” on the continuum of change, and to set campaign objectives in order to move the target audiences from one stage to the next higher level.

A number of resources and products were developed to deliver the campaign’s messages and encourage healthy behavior change. The campaign ran from June 2010 through January 2011. During that time, radio/television/print/web advertisements and Spanish/English media were used to promote the Power Your Life website (www.poweryourlife.org) as a resource for health information. When women visited the site, they had the opportunity to register for a 90-day supply of vitamins. They also had an opportunity to view an animated video on reproduction that was very popular.
Approximately 10,000 Power Bags with a 90-day supply of folic acid vitamins and other resources, such as a health magazine (derived from Life Course topics) and campaign bracelets were distributed through the campaign.

Community outreach was conducted through health fairs, cultural celebrations and community partnerships. Additionally, a continuing medical education (CME) workshop was held for healthcare professionals to help them promote preconception health and consumption of folic acid in their daily practice.

PROGRAM OUTCOMES/EVALUATION DATA
Evaluation included a telephone survey of women in the target audience, Google Analytics, an Internet survey of those who ordered vitamins, and evaluation of the continuing education workshop. The Internet survey was completed by self-selected respondents ($N = 873$) after they re-ordered a 90-day supply of vitamins. The telephone survey was a random-digit dial of women in the target audience ($N = 804$: 402 for the pre-survey and 402 for the post-survey). There was no overlap between respondents in the pre and post telephone surveys. The CME evaluation feedback was provided by attendees. The control group, in effect, was the random-digit-dial pre-wave survey of 402 Utah women in the target audience prior to the campaign launch.

Post-wave telephone survey results were compared to those of the pre-wave telephone survey. The state-wide telephone survey findings indicated that awareness of folic acid advertisements increased by 13 percentage points between pre-wave and post-wave. Respondents aware of the campaign were three times more likely to consider “taking folic acid” important and seven times more likely to be taking a daily vitamin with folic acid than those who were not aware of the campaign. Respondents from the campaign’s target audiences reported significantly higher rates of daily vitamin intake in the post-wave than in the pre-wave: 18-25 year-olds’ daily intake increased by 20% (14% to 34%); those from non-white, minority groups increased intake by 35% (9% to 44%), and pregnant respondents reported a 60% increase in intake between pre- and post-campaign surveys (35% to 95%).

The vast majority of CME attendees completed evaluations subsequent to the two-hour training. One hundred percent of attendees completing the evaluation rated the event good to excellent, and 80% indicated that attending the CME would result in a change in their practice.

PROGRAM COST
The Power Your Life campaign and evaluation were budgeted at approximately $500,000 and reached, conservatively, 15,000 people indicating an approximate cost of $33 per person. The campaign was funded through a federal Health Resources and Services Administration First Time Motherhood Initiative grant.

ASSETS & CHALLENGES
Assets
The primary factor influencing the launch of this campaign was concern on the part of the Utah Department of Health Maternal and Child Health Program that, although Utah has the lowest infant mortality rate in the United States, there is a stark disparity in birth outcomes between minority communities and others. In addition, many Utah providers expressed concern over the close spacing of pregnancy in Utah and wanted to offer their patients information on the benefits of pregnancy spacing.

Challenges
Challenges included interfacing with and receiving collaborative buy-in from numerous minority organizations that had previously worked on this issue with Utah Department of Health officials. Another challenge was the lack of ongoing funding to maintain the campaign after the end of the grant.

Overcoming Challenges
SUMA/Orchard’s researchers are skilled at creating meaningful, collaborative relationships. During the early phases of the project, researchers met with each of the minority community leaders, who quickly became important collaborators. They were trained on recruiting, hosted focus groups, and attended community events and liaisons.

LESSONS LEARNED
The post-campaign telephone survey, which was a duplication of the pre-campaign survey with fewer questions, was not as useful to the overall campaign evaluation as was the Internet survey of people who visited the website. Also, Google Analytics showed that the site received the heaviest traffic on days when bloggers put links online for a “free 90-day supply of vitamins.” On average, visitors who came to the site from the blogs spent a full minute less on the site and looked at almost two fewer pages than those who came to the site organically. In the future, the website could require visitors to take a quiz or read a fact sheet before ordering the free materials.
FUTURE STEPS
The campaign website (including the video, life plan magazine, brochures, fact sheets, and quiz) is currently maintained by the Utah Department of Health.

COLLABORATIONS
The campaign was successful because of the many partnerships that existed prior to and were established as part of the campaign. For example, Medicaid provided a direct mailing to approximately 5,000 women enrolled in Medicaid who were turning 18 during the campaign; the Salt Lake City Indian Walk-In Center hosted a focus group and in-depth interviews and distributed materials to rural reservations; a local community-based organization, Comunidades Unidas, distributed materials at the Mexican Consulate and several health fairs attended by Hispanic populations; and Intermountain Healthcare sponsored the CME presentation. The campaign partnered with many local health departments and health organizations to distribute materials.

PEER REVIEW & REPLICATION
This practice had not undergone peer review or replication at the time of submission.

RESOURCES PROVIDED
Resources from the campaign include:
- An educational animated video on the female reproductive system and birth control methods
- *Power Your Life Power Your Health* – a reproductive life plan magazine in Spanish and English
- *Power Your Next Pregnancy* – an interconception pregnancy spacing brochure in Spanish and English
- Preconception Health CME – A life-course perspective on treating women in Utah CME materials including a CD with campaign materials and a CME speaker PowerPoint presentation
- *Plan Your Health Live Your Life* – a teen reproductive life plan magazine

These can be found at [http://www.poweryourlife.org](http://www.poweryourlife.org).

For any additional questions regarding this project, please call SUMA/Orchard Social Marketing at (512) 371-7585 or contact Melanie Susswein at melanie@sumorchard.com.

Key words: Preconception Health, Birth Outcomes, Folic Acid, Social Marketing

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🌟 This program was highlighted at AMCHP’s 2012 Annual Conference with an Emerging Practice award.