



# AMCHP Fact Sheet

Association of Maternal & Child Health Programs

## MCH & CHRONIC DISEASE

September 2008

### INTRODUCTION

In the past decade, chronic disease has emerged as one of the most serious public health problems facing Americans today. Nearly half of Americans are living with at least one chronic disease, accounting for more than 75 percent of the nation's medical care costs.<sup>1</sup> While chronic disease is costly to treat, many chronic conditions can be prevented by maintaining a healthy lifestyle and adopting healthy behaviors.

### Effects of Chronic Disease on Women of Reproductive Age

Women of reproductive age face unique challenges when preventing and treating chronic disease. Over half of all women of child bearing age have one or more serious risk factors for developing a chronic disease. The annual medical costs for treating pregnancy-related complications prior to delivery total over one billion dollars. In addition to monetary expense, chronic conditions experienced during pregnancy take a great toll on the health of a mother and her baby.

As the prevalence of obesity and diabetes continues to grow and an increasing number of women choose to delay pregnancy, women may become increasingly vulnerable to risk factors that can complicate pregnancy, including obesity, diabetes, smoking and high blood pressure. Women who are not at a healthy weight *prior* to pregnancy are at a higher risk for pregnancy-related complications including, gestational diabetes, cesarean section, fetal distress and early neonatal death. The most common pregnancy related chronic condition is Gestational Diabetes Mellitus (GDM), a form of glucose intolerance which occurs during pregnancy. As the leading cause of hospitalizations before delivery for pregnant women, GDM complicates 4 percent of pregnancies annually. Early detection through screenings is an effective way to prevent many of the negative health outcomes associated with chronic disease, particularly with GDM.

### MCH and Chronic Disease: An Integrated Response

For many women, pregnancy often serves as the gateway into health care. By the time a woman starts thinking about becoming pregnant, it is often too late to prevent many of the risk factors associated with chronic disease. If a woman is overweight before her pregnancy, her children are three times more likely to also be overweight before the age of seven.<sup>2</sup> Supporting preconception care throughout the lifespan is critical to combating these trends. By educating women about chronic disease early and in a variety of

settings, primary care providers, public health professionals and others can help to reduce pregnancy-related issues associated with chronic disease and promote healthy pregnancies and birth outcomes. Several states have also adopted state performance measures that address the prevention of chronic disease by promoting healthy behaviors among women of reproductive age.

State Title V agencies have an important leadership role in working with other state agencies and community partners. Collaboration between state agencies and integration of work with local programs can expand the reach, efficiency and cost effectiveness of states' programs. Examples of programs that make effective partners include:

- ▶ School Health
- ▶ Title X and Family Planning Clinics
- ▶ Tobacco Prevention
- ▶ Injury Prevention
- ▶ Chronic Disease Prevention
- ▶ Minority Health
- ▶ Local Health Departments and Communities (work with faith based entities community, community centers, town halls)

State and local MCH and Chronic Disease Programs have come up with effective and efficient ways to integrate their work.

### Examples of MCH and Chronic Disease Integration Projects include the following:

- ▶ Sharing data sources and reports such as PRAMS and BRFSS
- ▶ Developing task forces and work groups such as a gestational diabetes collaborative
- ▶ Jointly publicizing wellness messages
- ▶ Establishing/promoting comprehensive programs like worksite wellness
- ▶ Incorporating messaging about physical activity, nutrition and obesity prevention to promote preconception wellness throughout the lifespan



### State Performance Measures on Chronic Disease

The Maternal Child Health Bureau requires all state Title V departments to report on a core set of measures developed by each state to address their state priority needs. Many states have adopted performance measures that address the risk factors associated with chronic diseases. Some of those performance measures are highlighted below:

#### Arkansas Performance Measure # 10

- ▶ Aims to increase the percentage of women who have their BMI measured and receive nutritional counseling during their initial or annual visit to DOH Family Planning clinics.
- ▶ Collaborates with the Family Planning clinics to promote the lifespan approach to preconception health and healthy weight.

#### Texas Performance Measure #2

- ▶ Aims to decrease the percent of obese women in Texas ages 18 to 44.
- ▶ Recognizes that decreasing the rate of obesity in women will have a positive impact on maternal, perinatal and child health outcomes.
- ▶ Connects chronic disease to health disparities by linking the higher incidence of obesity among African American women to the infant death disparity

#### Utah Performance Measure #4

- ▶ Aims to increase the percentage of women who are at a healthy weight prior to pregnancy.
- ▶ Recognizes that "prepregnancy weight is a proxy measure of the overall weight status of women."

### AMCHP's Role

Women's preventive health is a specific focus area delineated as part of AMCHP's strategic plan to support state MCH programs. AMCHP is pursuing numerous activities to promote the integration of MCH and Chronic Disease. AMCHP has partnered with the National Association of Chronic Disease Directors (NACDD) in an effort to nationally promote the collaboration between MCH and Chronic Disease programs. At the 2008 Annual Conference, AMCHP hosted an emerging issues roundtable around Chronic Disease to encourage conversation among members about current activities and best practices. From 2006-2008, AMCHP and CityMatCH supported a Health Weight Action Learning Collaborative which promoted the integration of chronic disease and healthy weight among women. In addition, the Women's Health Info Series Call in July 2008 focused on the link between MCH and Chronic Disease.

[http://www.amchp.org/events/womens\\_series.php](http://www.amchp.org/events/womens_series.php)

### REFERENCES

<sup>1</sup>Center for Disease Control. "Chronic Disease Overview."  
<http://www.cdc.gov/nccdphp/overview.htm>  
(assessed August 18, 2008)

<sup>2</sup> *Ibid.*

### ACKNOWLEDGMENT

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