

# Preconception Health Promotion Utilizing Behavioral Theories

## “Are You Ready?” Preconception Workshop

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### MCH Concern:

- Health status of parents prior to pregnancy affects birth outcomes
- Knowledge of health information is not enough
- Behavioral changes to improve health status before couples become pregnant have potential to improve birth outcomes

### Specific Aim:

- "Are You Ready?" is a preconception workshop for to-be parents and the topics included: environmental contaminants to avoid, nutrition & supplementation, and vaccinations
- No tool exists to assess the participants' motivation to engage in health promoting behaviors prior to conception

### Objectives:

- Assess participants' intention to make behavioral changes for preconception health
- Understand factors that facilitate or discourage participants from engaging in health promoting behaviors
- Elicit feedback to help improve the Workshop for the future

### Approach: Evaluation Tool

- Survey methods were used to achieve the stated objectives
- The survey items consisted of statements that pertain to lifestyle or behavioral changes
- The attendees were asked to list any lifestyle or behavioral changes they want to make as a result of what they learned at the Workshop
- Seven statements regarding lifestyle or behavioral changes were presented and the participants were asked to rate their level of agreement to each statement
- The seven statements were developed from the following four theories:
  - Social Learning Theory (Items 1-3)
  - Health Belief Model (Items 4-5)
  - Theory of Planned Behavior (Item 6)
  - Ecological Model (Item 7)

### Evaluation Tool (modified)

List lifestyle or behavioral changes you want to make as a result of what you've learned today.

Please rate the following statements on a scale of 1 (strongly disagree) through 5 (strongly agree)

1. I believe that the behavior changes I listed above will lead to improving the likelihood of having a healthy baby.
2. I feel I am capable of making behavioral changes I listed above.
3. I highly value improving my own health in order to give my baby a healthy start in life.
4. I feel that if I don't make the choices I listed above, I am susceptible to having an unhealthy baby.
5. I feel that continuing my old habits can result in negative health outcomes for both my future baby and me.
6. I believe that important others (peers/family) value the behaviors I listed above.
7. My surrounding environment is conducive to carrying out the behaviors I listed above.

### Findings:

Sample size: 8  
Lifestyle or behavioral changes participants listed were (verbatim):

- Eating
- Exploring more green products
- Take omega 3
- Highest rating: Perceived outcome expectancy and favorable outcome incentive (Social Learning Theory)
- Moderate rating: Self-efficacy (Social Learning Theory & Theory of Planned Behavior) and subjective norm (Theory of Planned Behavior)
- Lowest rating: Perceived severity/susceptibility (Health Belief Model)

### Recommendations:

1. While the presentation included suggestions on specific actions individuals can take, self-efficacy scores were relatively low
  - It would be beneficial to make suggestions more tangible and state them in concrete terms so that the audience feels that their attempts to make behavioral changes are attainable
2. Attendees rated the constructs of susceptibility and severity low
  - Include specific health effects on the child as a result of an adverse outcome. (e.g. What are the consequences if an infant is born prematurely? What are the consequences of not taking the recommended dose of folic acid prior to and during pregnancy?)
3. For returning participants, development of a new tool would provide a more complete picture and profound insight in evaluating the following:
  - What are you doing differently since the last Workshop?
  - Are you maintaining those behaviors?
  - What factors encouraged you to continue to practice health promoting behaviors?
  - Did you revert back to old behaviors after having made behavioral changes?
  - What factors contributed to reverting to old ways?

### Reference:

Glanz, K; Rimer, BK; Lewis, FM (Eds). (2002). *Health Behavior and Health Education: Theory, Research, and Practice*. 3<sup>rd</sup> Edition. Jossey-Bass.



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