Performance Measure 15: Percentage of women who smoke in the last three months of pregnancy.

Last Year's Accomplishments

The target for 2007 was 19 percent and for 2006 was 18.5 percent. The actual percent of women who smoked in the last three months of pregnancy in 2006 was 15.2. Note that the data source changed between 2005 and 2006, from PRAMS to the revised standard birth certificate. Ohio did meet its target for2006. Data for 2007 are not available.

Summary: Ohio did complete the activities for this performance measure as originally written.

A. Implement the 5 A's evidence-based systems approach for treating tobacco use and dependence

Accomplishments are complete. The ODH Perinatal Smoking Cessation Program (PSCP) contracted Smoke-Free Families National Dissemination Office (SFF-NDO) to pilot a systems approach for implementing the 5 A's into Ohio's WIC and Help Me Grow (HMG) Programs. Activities included: 1) needs assessments of existing provider systems and services for prenatal and postpartum tobacco treatment in 4 pilot counties; 2) developing and implementing quality improvement strategies; 3) incorporating messages that help women quit smoking, stay quit, or ask their healthcare provider for assistance with quitting (based on FFY06 Ohio's WIC & HMG focus group results); and 4) providing the tools, training and technical assistance needed to treat pregnant and postpartum smokers.

In addition, The Ohio Partners for Smoke- Free Families Pilot abstract submission entitled, "Incorporating Tobacco Treatment into Ohio's WIC and Help Me Grow Programs," was selected for presentation at both the Ohio Public Health Epidemiology Conference, August, 2007, and the 2007 National Conference on Tobacco OR Health, in Minneapolis Minnesota.

B. Monitor and analyze the prevalence of smoking among women of reproductive age, including pregnant women and the provision of the 5 A's approach.

Accomplishments are complete. Activities included: 1) monitoring baseline indices: LBW, prenatal smoking, three-month and six-month chart audits; and 2) implementing WIC and HMG data collection procedures for the provision of all components of the 5 A's in the four pilot counties (i.e., key informant interviews, baseline and provider follow-up surveys, chart audits and quitline referrals).

C. Collaborate with public-private partners to identify and implement strategies that impact the proportion of pregnant women who smoke.

Accomplishments are ongoing. PSCP received a MCH TA award to bring Cathy Melvin, PhD and Founder of the National Partnership for Smoke-Free Families to Ohio and facilitate the development of a statewide action plan to address tobacco prevention and cessation among women of

reproductive age, including pregnant women. Through the process a Perinatal Workgroup was formed and agreed the first action was to create a separate goal in Ohio's Strategic Plan addressing tobacco use and cessation specific to pregnant women.

Partners include: ODH Division of Family and Community Health Services, ODH Division of Prevention, MCH BG Birth Outcomes Workgroup; MCH Division-Birth Outcomes Improvement Initiative; National Partnership to Help Pregnant Smokers Quit: State Action Learning Lab; Ohio Partners to Prevent Birth Defects; and Ohio Tobacco Control Resource Group

D. Refer to SPM 02: Strategy C