# Assessing the Impact of Environmental Counseling on Pregnant Women's Perception and Behavior Regarding Chemical Hazards

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#### Abstract

The purpose of this study is to determine the importance and influence of environmental hazard counseling for pregnant women in a clinical setting. We aim to identify changes in risk perception and behavior of pregnant women after receiving educational materials describing exposure pathways, and a counseling session on recommendations and preventative measures. Specifically we will:

- Use a survey tool to asses pregnant women's baseline knowledge, perception, and behaviors in relation to select categories of known chemical contaminants in food, water, and ambient environment.
- Provide educational materials and one-on-one counseling about environmental exposures and recommendations to reduce risk.
- Conduct a post counseling survey to determine changes in knowledge, perception, and any modification of behavior
- Analyze methods and results of one-on-one environmental counseling as an intervention method

### Introduction

- The chemical industry is an integral part of the US economy importing and/or producing roughly 27 trillion pounds of chemical substances per year. These synthetic chemicals are being used in agricultural fields (e.g., pesticides, fertilizers), in our houses (e.g., oil based paints, insecticides, perchlorate), and being found in our food and water (e.g., herbicides, lead, biphenyls, mercury).
- Many organizations including the American Academy of Pediatrics, the Endocrine Society, and the President's Cancer Panel recognize that some prenatal exposure of environmental contaminants can be associated with adverse birth outcomes and abnormalities in early childhood development with the potential for long-lasting impacts.
- The National Health and Nutrition Examination Survey data demonstrated widespread exposure to environmental chemicals among pregnant women and women of child bearing age included heavy metals, volatile organic compounds, and endocrine disrupting chemicals.
- Some of the common abnormal birth outcomes experienced includes small for gestation age, low birthweight, preterm delivery, neurological disorders, and congenital defects. As development occurs in the womb, exposure to certain environmental chemicals leads to adverse health outcomes that may be exhibited across the lifetime of the individual and can possibly be passed down from generation to generation.
- One of the most effective ways to prevent exposure is through proactive communication and education. The role of public health practitioners in the prevention of chemical exposure to pregnant women and their unborn fetus is critical. However, most gynecologists often discuss diagnostic tests and risks associated with smoking and drinking.
- A recent study on obstetricians found that 78% of obstetricians agreed that they can reduce patient exposures to environmental hazards by counseling patients, but 50% reported that they rarely take an environmental health history. They also found that less than 20% reported routinely asking about environmental exposures commonly found in pregnant women.
- Currently, there is no well-organized program or system in place in a clinical setting to educate pregnant women about chemical hazards at home or in the workplace.. In order to ensure pregnant women aren't overly exposed to environmental hazards, environmental health needs to be an integral part of prenatal care and medical education for future medical students.

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#### Materials and Methods

- I. Using an evidence based approach, a literature search on human and animal toxicological studies with confirmed evidence of adverse health effects were selected to identify categories of environmental hazards.
- II. Prenatal hazards like smoking and alcohol consumption were omitted from the categories of hazards because national campaigns and health professionals adequately cover health outcomes and preventative measures to these toxicants.
- III. The gathered information from the studies was used to prepare a pre and post-counseling questionnaire, design a counseling session layout, and develop educational materials in the form of a brochure and grocery card.
  - A. The pre-survey was conducted during the patient's scheduled prenatal visit where they answered questions on demographic information, food and water intake, and general information about indoor/occupation environments
  - B. The counseling session followed the pre-survey where dissemination of educational materials and private dialogue for recommendations to influence the participants existing knowledge took place.
  - C. The post-counseling survey was conducted roughly one month after the intial visit where they will were asked questions about changes in behavior and current perception of risk related to chemical hazards during pregnancy

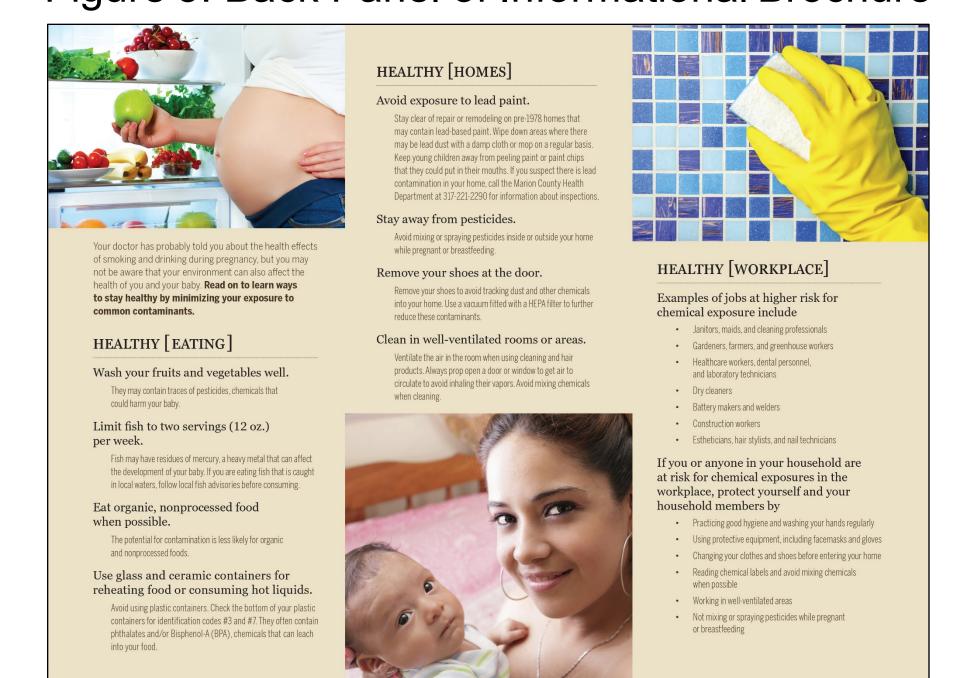
Figure 1: Grocery Card

#### **The Dirty Dozen** The Clean Fifteen Fruits Veggies **Fruits Veggies** Celery Avocados Apples Asparagus Potatoes Cantaloupes Cabbage Cherry Snap Peas Grapefruits Cauliflower Tomatoes Spinach Kiwis Eggplant Cucumbers Sweet Bell Mangoes Frozen Grapes Sweet Peas Nectarines Peppers Papayas Peaches Pineapples Onions Sweet Corn Strawberries Sweet **Potatoes**

Figure 2: Front Panel of Informational Brochure



Figure 3: Back Panel of Informational Brochure

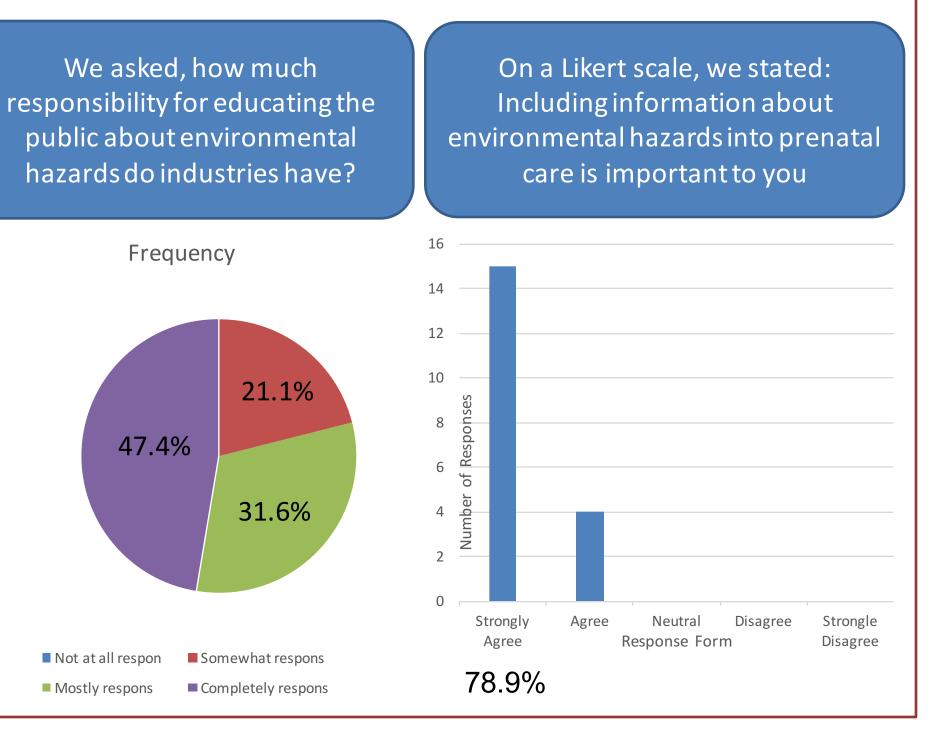


### **Current Status of Research**

The pilot study is currently on-going with an anticipated goal of 40 participants. The study was conducted in a clinic that predominantly serves minority patients and those of low socioeconomic status. The following are initial observations of participants pre-survey:

- Current environmental disasters like in lead in drinking water in Flint, MI has gained the attention of expecting mothers
- When biological samples are not being taken, participants were more willing to engage in the study
- Language barriers were present as most participants were minorities from low socioeconomic status which may have reduced the quality of the counseling session and create hias
- Indiana's WIC nutritional program had pre-exposed participants to healthy nutrition, however it is plausible they did not educate them on the environmental hazards associated with unhealthy nutrition.
- Mothers who had multiple children were reluctant to be a part of the study because they perceived they wouldn't learn anything new due to their experience with prenatal health care

Of the 40 enrolled, 20 participants completed their pre-survey responses where their results have been put in graphical form based on their answer choices.



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