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PGY-3

CenteringPregnancy® within a Community Health Clinic; Patient Characteristics and Future Considerations

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Over the past two decades, group prenatal care services have increased in popularity providing many women another option to go with other than the standard, individualized prenatal care. Prior studies have found selection bias for CP dependent on participant's age, parity and marital status with Centering® participants more likely being younger, single and nulliparous. Centering groups may differ based on location (resource-rich vs resource-poor) and socio-economic status. This study took place at the Downtown Health Plaza in Winston-Salem, NC, where prenatal care is provided through either Centering® or individual models. Women who qualified for group prenatal care were given choice to participate in Centering or continue standard care. We randomly recruited women into our study after they picked their preferred modality of prenatal care. Women with high risk pregnancies, past 24 weeks, or significant mental health concerns upon initial prenatal visit were not eligible for the group prenatal care program and thus excluded from the study. Eligible participants completed the following measures on their first prenatal visit and at 6 weeks postpartum: 1) Brief Health Questionnaire (BHQ); 2) 10-item Pregnancy Knowledge Scale (PKS); 3) Perceived Stress Scale (PSS); 4) Multidimensional Scale for Perceived Social Support (MSPSS); 5) Edinburgh Postnatal Depression Scale (EPDS). In order to adjust for differences in subject characteristics, a propensity score approach was used. First, a logistic model was fitted with outcome= 'treatment assignment', with all patient characteristics available at baseline (including age, race, prior pregnancies, planning to breastfeed, in a significant relationship).

Of the women with no prior pregnancy, 64% chose Centering®, while 36% chose IPC ($\chi^2= 8.6399$, $df=2$, $p=0.003$). Participants who chose Centering® tended to be younger, experiencing a first pregnancy, white, and unlikely to be in a significant relationship. Participants who were least likely to chose Centering® tended to be older, experienced a pregnancy before, non-white and in a significant relationship. Patients who chose CP also scored significantly higher on perceived stress scale and significantly lower on pregnancy knowledge scale at their initial prenatal visit. Supported by: Ickovics, JR, Earnshaw V, Lewis JB, Kershaw TS, Magriples U, Stasko E, et al. (2016) Cluster randomized controlled trial of group prenatal care: perinatal outcomes among adolescents in New York City health centers. *Am J Public Health*, 106:359-65

