Centering Pregnancy for Women of Color

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BACKGROUND

- African American women experience adverse perinatal outcomes such as preterm birth, gestational diabetes, cesarean sections, and maternal and neonatal deaths at higher rates than any other racial class, even when matched with women of the same socioeconomic status.  
- In 2015, the preterm birth rate for African Americans was 13.4. This marks an increase from 13.23 in 2014. For Non-Hispanic White women, the preterm birth rate is not only significantly lower, but the rate has also declined from 9.91 in 2014 to 8.88 in 2015.  
- Causes are multifactorial and include both psychosocial determinants as well as lifestyle behaviors.

- Centering Pregnancy is a model of group prenatal care that has been shown to be effective in improving maternal and perinatal outcomes. Its focus on education and socialization creates a comprehensive approach to prenatal care that can positively impact maternal health disparities.

- Despite effectiveness in decreasing adverse birth outcomes, widespread participation in the group prenatal care model by African American women is lacking.

OBJECTIVES

- To establish a focused Centering Pregnancy program that:
  - Actively recruits women at highest risk – African Americans.
  - Incorporates culturally appropriate care.
  - Includes other beneficial health activities such as yoga, mindfulness, and connection to nature.
  - To conduct a systematic review of the literature in order to understand potential barriers to African American enrollment in group prenatal care models.

METHODS

- Literature Review
  - Primary search was conducted in the PubMed database using keywords (“centering pregnancy”) OR (“racial disparity group prenatal care”)
- Inclusion criteria:
  - Study is designed using quantitative or qualitative methodology.
  - Study is conducted using qualitative or quantitative methodology.

RESULTS

<table>
<thead>
<tr>
<th>Study Title</th>
<th>Authors</th>
<th>Publication Year</th>
<th>Study Design/Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group Prenatal Care and Perinatal Outcomes: A Randomized Controlled Trial</td>
<td>Davanzo JR, Raschke TL, Moseley C, et al.</td>
<td>2007</td>
<td>Quantitative, Randomized Controlled Trial</td>
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<td>Women's Expectancy in Public Health Care</td>
<td>When C, Non P, Sandeloff S, Handler A.</td>
<td>2009</td>
<td>Qualitative, Focus Groups</td>
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<tr>
<td>Racial Disparities in Prenatal Care</td>
<td>Gaskin E, et al.</td>
<td>2009</td>
<td>Qualitative, Logistical Ethnographic Study</td>
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<td>African American Attitudes towards Prenatal Care</td>
<td>Johnson AA, Wolsey BD, D-Fordney NN, et al.</td>
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<td>Perceptions of Prenatal Care Experiences among African American Women and Nurses</td>
<td>Ward DDS, Nash M, Nagy EM, Bridgewater TD, Hartley AL</td>
<td>2012</td>
<td>Qualitative, Focus Groups</td>
</tr>
<tr>
<td>Group Prenatal Care Compared with Traditional Prenatal Care</td>
<td>Parks KN, Dombo SL, Ziegler F, Johnson AA</td>
<td>2016</td>
<td>Quantitative, Systematic Review</td>
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</tbody>
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CONCLUSIONS

- Group prenatal care is a promising intervention to improve African American perinatal outcomes. More effort should be targeted towards creating a protocol for group prenatal care that will specifically appeal to African American women.

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