

Pregnant woman with limited English speaking skills find comfort in prenatal support groups

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After meeting through a prenatal group that was part of a U-M study in Ann Arbor, Mich., new moms Mako Hoshino (left) and Rika Kihara still meet for playdates with Hoshino's son Koita and Kihara's daughter Ayaka. Credit: University of Michigan Health System



Far away from home and family, pregnant Japanese women who met with each other for prenatal group visits felt less anxious and better prepared for childbirth and motherhood, says a new University of Michigan Health System study.

The women, who spoke limited English, were able to connect with peers with similar due dates and cultural backgrounds to discuss such topics as nutrition, labor, breastfeeding and newborn care. A year later, several moms stayed friends and continued to share issues that came up with their babies.

The study, led by Japan native Sahoko Little, M.D., Ph.D., physician in the Family Medicine Department in the U-M Medical School, appears in the *Journal of the American Board of Family Medicine*. The findings demonstrate how a supportive prenatal group can help optimize pregnancy care for minority populations in a <u>family medicine</u> setting.

"It was very valuable to have a place to talk to people with a similar background going through similar experiences," says participant Mako Hoshino through an interpreter. Hoshino and her husband moved from Japan to Michigan in 2011. "Being in a different country and part of a different culture, these connections help make you feel less isolated and alone."

The new study offers the first known research on how prenatal groups benefit expectant Japanese women. Unlike the prenatal group model it was based on, the U-M Japanese prenatal group program benefits not only first-time moms-to-be but women who already had children in Japan, as pregnancy care between Japan and U.S. are significantly different. In Japan for example, epidural anesthesia is rarely offered and hospital stays tend to be longer after birth.



"Prenatal groups offer all women a strong social support system during what can be a stressful time as they prepare for the uncertainty of childbirth and starting a family – this is particularly true for women who are simultaneously adjusting to life in a new country and also face linguistic and cultural obstacles," says Little, one of four physicians who provides care at the U-M Japanese Family Health Program clinic that offers bilingual physicians, nursing, counseling, parenting education and other approaches to culturally competent care.

"These group visits connected women with shared experiences, allowing them to get the story from each other, not from lectures."

Once a month, six to twelve women meet for the two-hour prenatal group visits that include basic exams documenting weight, uterus size, and the baby's heartbeat. Participants were also able to take each other's blood pressures and take notes in notebooks, encouraging them to take control of their own pregnancy, which follows the Centering Healthcare Institute's Centering Pregnancy model.

Groups also discuss personal goals, nutrition, exercise, pregnancy-related discomfort and relaxation techniques, danger signs and flow of labor and delivery, birth planning, car seat instruction, breastfeeding, baby care and postpartum care. The majority of participants in the study said the atmosphere was relaxed and they found it easy to ask questions and discuss topics freely. Overall depression, anxiety and stress scores were low.

Many women, such as Hoshino and fellow participant Rika Kihara, remained friends, meeting for playdates and continuing to share experiences in the first year of motherhood. On a recent afternoon, Hoshino's son Koita and Kihara's daughter Ayaka played while the women chatted. They said it was helpful to be connected to other Japanese women with similarly-aged children.



Authors say prenatal group visits could also help reinvigorate interest among family physicians to provide birth care, as the numbers of family doctors doing so continues to decline.

"Family medicine offices that provide such novel opportunities may attract more patients while enhancing the experience for both pregnant <u>women</u> and their care providers," Little says. "We hope our experience inspires other <u>family</u> physicians to take advantage of the benefits and fun these group visits can bring."

More information: Journal of the American Board of Family Medicine, "Family Medicine-Based Prenatal Group Visit Program for Population with Limited English Proficiency: Evaluation of a Program for Japanese Women," <u>DOI: 10.3122/jabfm.2013.06.130005</u>

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