

Group prenatal care shows promise in reducing maternal health disparities

July 2 2024, by Eva Cornman



Credit: Amina Filkins from Pexels

In the fight to reduce longstanding maternal health disparities, group prenatal care programs could be an effective tool, say researchers from Yale School of Medicine (YSM) and Yale School of Public Health.

Based on their earlier studies, the researchers described many possible benefits of group prenatal care programs in a [perspective article](#) that was published June 8 in the *New England Journal of Medicine* as part of the journal's call for papers discussing health interventions to reduce inequities.

Jeannette Ickovics, Ph.D., Herman Professor of Social and Behavioral Sciences at Yale School of Public Health, and Jessica Lewis, Ph.D., research scientist at Yale School of Medicine, responded to the call by discussing their group prenatal care program "Expect With Me," which they founded in 2014, proclaiming the urgency of the profound and life-threatening racial disparities that persist in perinatal and [maternal health](#).

"Maternal morbidity and mortality for Black women are very different [from that of other racial groups], and so when we were developing Expect With Me and studying group models, we were finding that we could actually mitigate those disparities in group prenatal care," says Lewis.

Group prenatal care benefits

The Expect With Me model consists of 10 two-hour group sessions with eight to 12 participants who are due in the same month. Led by an obstetrician or a midwife, sessions focus on nutrition, [physical activity](#), mental health, and sexual health, in addition to standard prenatal content. Facilitated group discussions allow patients to interact, garner social support, and normalize their pregnancy symptoms by sharing their experiences with one another.

Lewis and her team tested Expect With Me in more than 2,400 participants between 2014 and 2018. They found that, when compared to the standard model of individual prenatal care, participants in group care had significantly lower risks of delivering [premature infants](#), delivering

low birth weight infants, and having an infant admitted to the [neonatal intensive care unit](#). [Their study](#) was published in 2021 in the journal *Preventive Medicine*.

While studying earlier models of group prenatal care, Lewis and her team found that while group care reduced the risk of these outcomes overall, the effect was even greater for Black women. These differences were a major consideration when testing Expect With Me: the participants in the study were 60% Black and 15% Latina.

"Knowing that there are these differences in outcomes, especially for Black women," Lewis says, "we were really targeting clinics that would give us that kind of diversity so that we could look at how effective it is among especially higher-risk populations."

Consistency, constancy, and technology

While standard individual prenatal care occurs along the same timeline and covers much of the same core content as group care, patients tend to meet with their providers for only about 10 to 15 minutes at a time and may see a different provider each visit. Group care, on the other hand, is two hours long, and each session is led by the same providers. Lewis believes that this consistency and the lengthy session times are key components of group care's success.

"It gives providers an opportunity to really hear about the issues that patients are struggling with and to get to know their patients. It also gives patients an opportunity to not only hear the answers to their own questions, but also questions [from others] that either they haven't thought to ask or were maybe too embarrassed to ask," says Lewis.

Another key component of the program is its technology. Expect With Me differs from other group prenatal care programs through the

incorporation of an IT platform that allows patients to use a website to track their weight and [blood pressure](#), communicate with providers and other group members, and access a variety of educational materials.

In fact, Lewis and her team found that Expect With Me patients who regularly used the website had significantly lower risk of delivering an infant with low birth weight than those who didn't use the website.

Implementation is going to be one of the biggest challenges for group prenatal care. Besides up-front investments in training, there may also be logistical issues around scheduling and space. However, this is something that Lewis believes Expect With Me will be able to address through the IT platform's scheduling tool.

Ultimately, she says, the success of the program and the urgency of finding solutions to reduce perinatal and maternal health inequities should outweigh the challenges in its implementation.

"We hear that on the delivery floor you can tell who's been through group [prenatal care](#) and who hasn't because they are more informed, they speak up about what's going on, [and] they're more empowered to ask for what they want," says Lewis. "This is a model that has a lot of potential to help reduce disparities."

More information: Jessica B. Lewis et al, Expect With Me — Group Prenatal Care to Reduce Disparities, *New England Journal of Medicine* (2024). [DOI: 10.1056/NEJMp2400482](https://doi.org/10.1056/NEJMp2400482)

Provided by Yale University

Citation: Group prenatal care shows promise in reducing maternal health disparities (2024, July

2) retrieved 2 July 2024 from <https://medicalxpress.com/news/2024-07-group-prenatal-maternal-health-disparities.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.