

Patient-centered approaches to addressing unmet social needs in pregnancy: a survey of patients’ preferences

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BACKGROUND

Social determinants of health (SDoH) are the conditions where people live, work, and play, and include:

- Material needs (tangible): including housing, food, and baby supplies
- Support needs (relationship-based): childcare, intimate partner violence and social isolation

Social determinants of health (SDoH) affect 40% to 80% of healthcare outcomes.

SDoH are inconsistently screened and addressed in routine prenatal care.

One key limitation in implementing social needs screening and management is lack of knowledge of how pregnant people prefer to receive social needs screening and connection to resources.

OBJECTIVE

To describe pregnant people’s preferences for addressing unmet material and support needs in pregnancy to improve connection to resources and health outcomes.

STUDY DESIGN AND ANALYSIS

Cross-sectional online survey of pregnant and postpartum people.

Survey administered using Centiment, an online survey panel.

Purposefully sampled equal numbers of publicly and privately insured participants, given differences in social needs and access to supportive resources.

Key domains:

- Demographic and pregnancy characteristics
- Social needs
- Preferences for screening for social needs
- Preferences for managing social needs

All data were summarized using basic descriptive statistics and tests of comparison across three key groups:

- Insurance type
- Presence of any social need
- Race

RESULTS

Figure 1. Unmet social needs

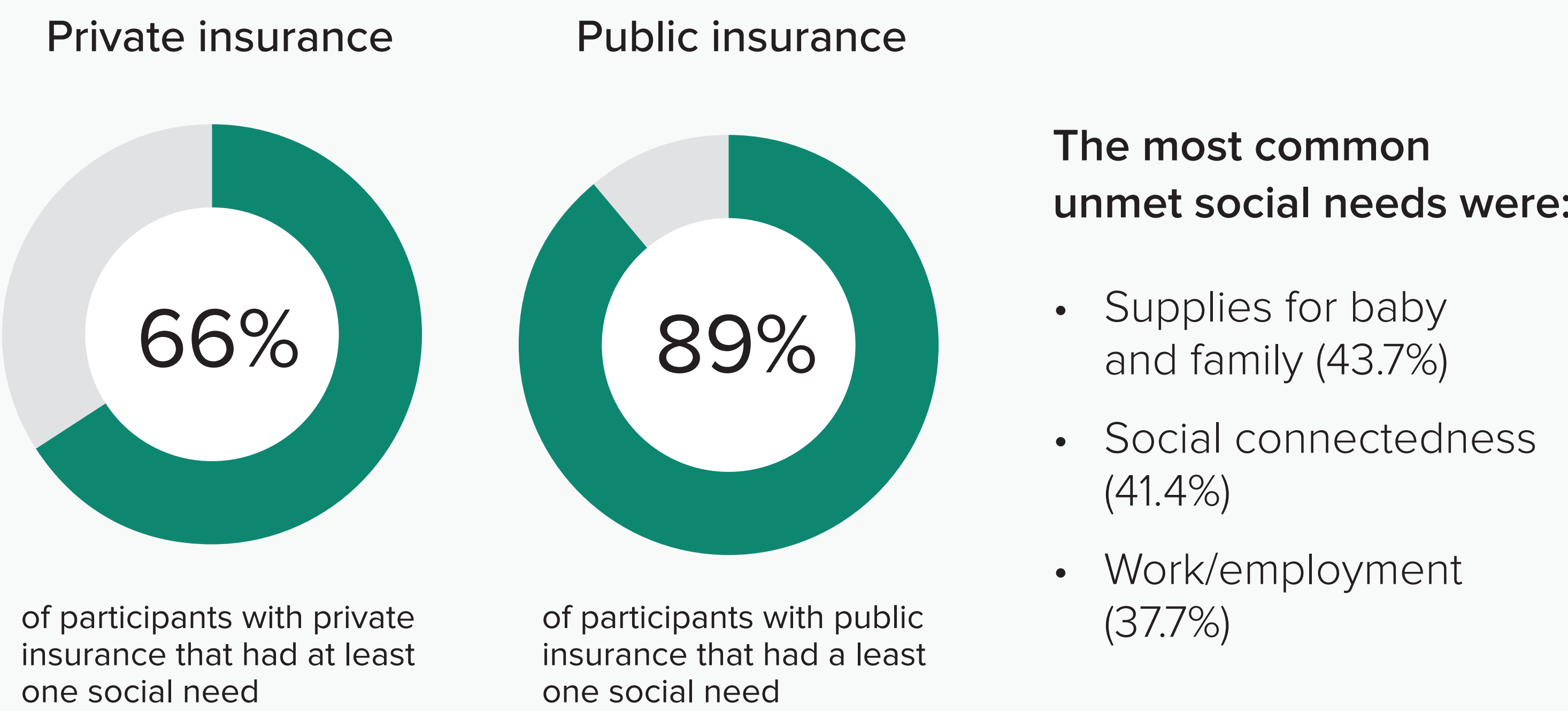
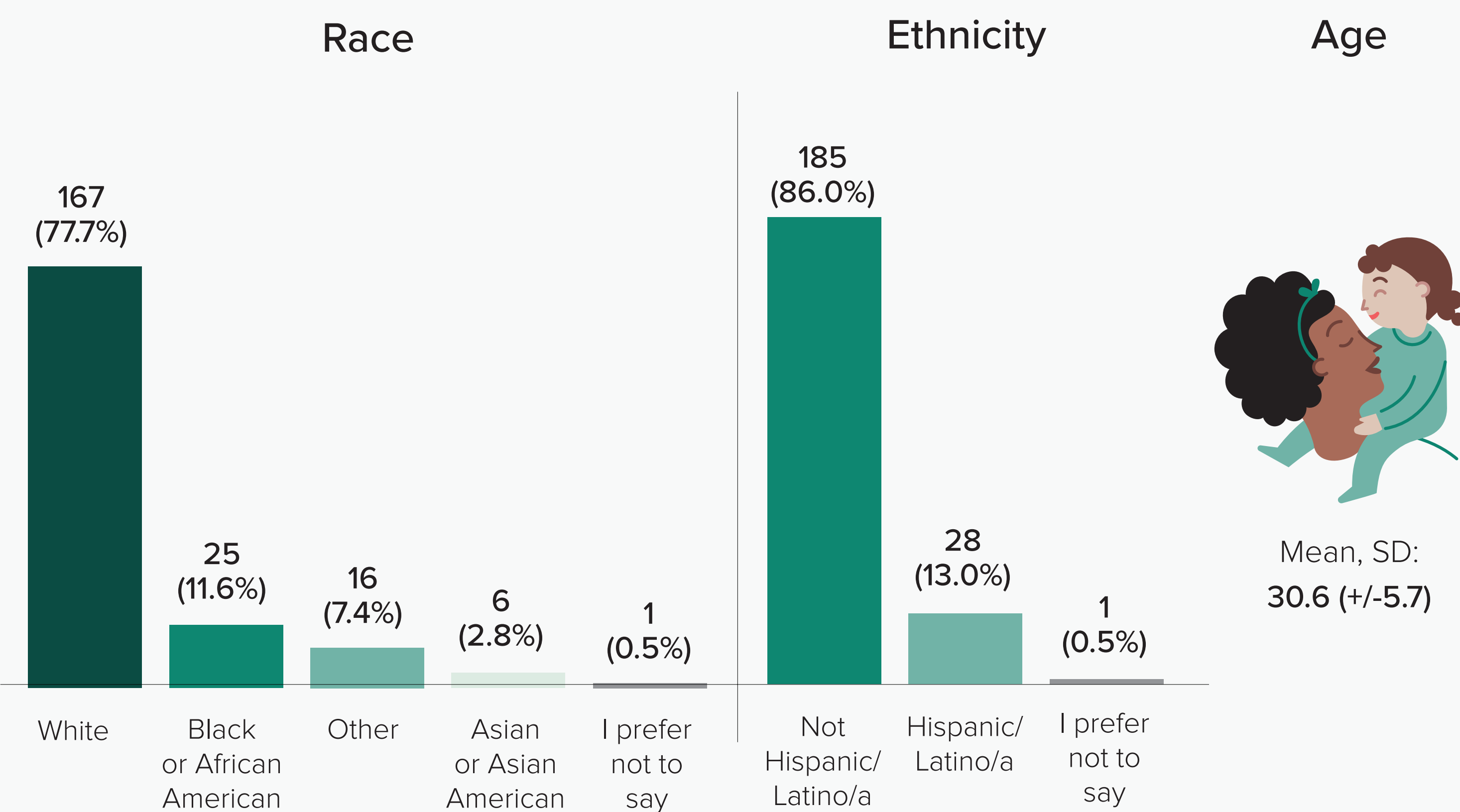
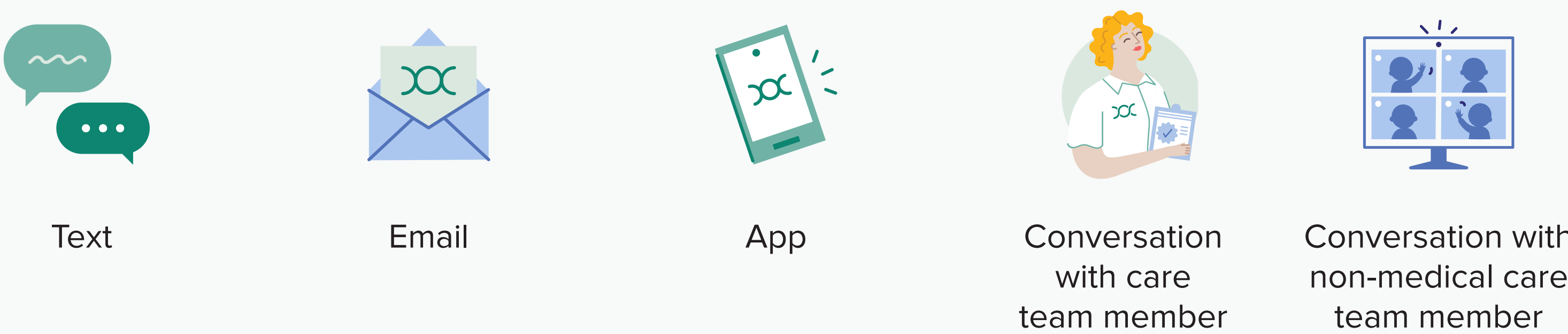


Figure 2. Participant demographic characteristics



All modes of screening and linkage to resources were acceptable



>75% of participants were accepting of each modality, with conversation with Care Team as most acceptable (>92% of participants)

Attitudes and preferences for screening for SDoH among participants with social needs

>80% of participants believed it was important for their care team to know their social needs

>80% were comfortable sharing their needs with their care team if assistance was available

>50% were comfortable sharing their needs with their care team if assistance was NOT available

“Questions about the safety of my home already come up...and questions about mental health as is related to perinatal/postpartum depression are already asked so it isn’t that big a stretch to ask whether I feel isolated from my community.”

Differences in preferences emerged between groups

“[I’m] afraid social services could possibly try to take my child.”

“[I worry] that it will cause me to lose my child even though it’s not my fault and I’m doing the best I can right now.”

- More participants with public insurance vs. private insurance preferred text-based screening

Material: private 72.6%, public 85.3% (p=0.02)
Support: private 77.4%, public 87.2% (p=0.06)

- More participants with any social need vs. no social needs preferred text-based screening

Material: any need 81.4%, no need 70.8% (p=0.11)
Support: any need 86.2%, no need 68.8% (p=0.005)

- Fewer Black vs white participants expressed a preference for conversations with care team or non-medical care team members

Material: Black 87.0%, white 94.6% (p=0.03)
Support: Black 87.0%, white 93.9% (p=0.12)

- Only participants with social needs expressed concerns about retribution for sharing their social needs:

8/167 people with social needs expressed a fear of retribution compared to 0/48 people with no social needs

CONCLUSIONS



Pregnant and postpartum people reported that it was important for their pregnancy care team to know about their social needs.



Many, but not all, pregnant and postpartum people were open to sharing their needs even if their care team cannot provide assistance.



Future work is needed to better understand pregnant and postpartum people’s view of assistance for social needs, and if care adaptations and checkin in may help participants feel more comfortable sharing their needs even in the absence of tangible assistance.



Offering multiple options for screening and linkage to social resources may help ensure social needs screening is accessible and acceptable to all patients, particularly those from historically marginalized groups.

IMPLICATIONS



A short-form SDoH screener has been made publicly available. Scan the QR code to learn more.

CONFLICT OF INTEREST

This research was funded by Maven Clinic through the employment of authors. LRM, HJ, A. Plough, NH, CM, and NS hold positions at Maven Clinic and have equity in Maven Clinic, and A. Peahl and VP are paid consultants for Maven Clinic.