

A Community-Engaged Approach to Addressing the Social Care Needs of Birthing People in Atlanta

Background: Recognizing the importance of social determinants of health, many perinatal healthcare providers are screening for social needs. However, little is known about the best practice for effective screening and referral for social needs during obstetric care.

Objective: To characterize the processes by which pregnant and postpartum people find and connect with needed social resources and identify barriers and facilitators to effective referral.

Methods: We conducted in-depth interviews with 15 key informants, including people in the Metro Atlanta area with either experience working at a community organization that provides social services or as a current or recently pregnant individual. We conducted a thematic analysis using a team-based coding approach.

Results: Participants described diverse processes of linkage to social resources, with word of mouth, the internet and self-referral as key information sources. Barriers to accessing social resources included: lack of information, financial hardship, childcare expenses, stigma, housing resources, and transportation barriers. Organizational representatives also described resource scarcity as a barrier to meeting community needs, particularly for housing. Several organizational representatives described the importance of active navigation of social resource linkages, including assisting with applications and calls and supporting with follow up. Not all organizations were able to provide that level of support, and many relied on resource lists or passive referral processes. Both organizations and participants expressed a desire for health care providers to serve as a central source of information on social resources. A few participants identified their doula as a source of information on social resources; however, no participants described an obstetric care provider as a source of information.

Conclusion: We plan to convene a year-long working group to translate the results of the interviews into a set of best practice recommendations for social risk screening and referral to resources during obstetric care.