Referrals to Integrated Perinatal Mental Health Services: Impact of race, poverty, and pregnancy complications

Mona Eyghanifard, B.S.¹, Bethany Ashby, Psy.D.²,³
University of Colorado Hospital and University of Colorado School of Medicine
¹The Psychiatry Undergraduate Research Program and Learning Experience (PURPLE), Office of Education and Training ²Department of Psychiatry, ³Department of OBGYN

Background

• Up to 20% of women in the U.S experience perinatal mood and anxiety disorders (PMAD)
• Gestational diabetes, thyroid disorders and pre-eclampsia more common in women with PMAD
• Rate of PMAD has increased during the pandemic; 37% of perinatal women reported depressive symptoms, 57% reported anxiety symptoms
• Little is known about the impact of the pandemic on pregnancy complications and referrals to integrated behavioral health (IBH) services among racially diverse groups.

Objectives

• Examine rate and type of pregnancy complications in patients referred for IBH treatment
• Determine differences across demographic group in provider referrals to IBH services

Methods

• Clinics Studied: 5 prenatal clinics affiliated with the University of Colorado Hospital
• PROMISE Clinic: IBH obstetric program for perinatal patients
• Study Design: Electronic medical record review of patients referred to PROMISE Clinic during 4/20/20 – 9/20/20
• Analysis: Frequency counts and Chi-Squares

Results

<table>
<thead>
<tr>
<th>Patient Demographics</th>
<th>Prenatal Clinics (N = 1,312)</th>
<th>Referred to PROMISE (N = 167)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race (Black)</td>
<td>215 (16.39%)</td>
<td>34 (20.36%)</td>
</tr>
<tr>
<td>Race (White)</td>
<td>688 (52.44%)</td>
<td>79 (47.31%)</td>
</tr>
<tr>
<td>Race (Native American)</td>
<td>7 (0.53%)</td>
<td>3 (1.8%)</td>
</tr>
<tr>
<td>Race (Asian/Pacific Islander)</td>
<td>118 (9.0%)</td>
<td>4 (2.40%)**</td>
</tr>
<tr>
<td>Race (Other/multiple race)</td>
<td>370 (28.2%)</td>
<td>46 (27.54%)</td>
</tr>
<tr>
<td>Ethnicity (Hispanic)</td>
<td>381 (29.04%)</td>
<td>49 (29.34%)</td>
</tr>
<tr>
<td>Public Insurance</td>
<td>579 (44.13%)</td>
<td>96 (57.4%)**</td>
</tr>
</tbody>
</table>

** p <0.01

Pregnancy Complications

- None
- Multiple Births
- Diabetes
- Pre-e/PIH, HELLP Syndrome
- Advanced maternal age
- Demise/Fetal Anomalies
- Other: Obesity, pelvic floor prolapse, uterine infection, adolescent, anemia, heart condition, hyperemesis

Discussion

• 12.7% of prenatal patients referred for IBH treatment
• Differences in referral rates of Asian patients and public insurance status is consistent with the literature
• Referral rate for publicly insured patients
• Referral rate for Asian women
• Studies of Asian patients indicate mental health stigma is widespread; preference for help from peers/family
• 50% of perinatal women living in poverty have PMAD symptoms
• Studies report 6-10% of pregnancies have PIH and 11.9-18.6% diagnosed with GDM

Implications

• Analyze additional demographics of referred patients to better understand perinatal provider patterns
• Study how PMAD affects pregnancy complications during/after birth
• Make changes in clinical practice so referrals are aligned with patient needs
• Statistical significance for pregnancy complications couldn’t be determined; additional analyses needed

Acknowledgements & References

• Patients and providers in the Promise Clinic, ZOMA Foundation
• Purple Program
• University of Colorado Anschutz Medical Campus