

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

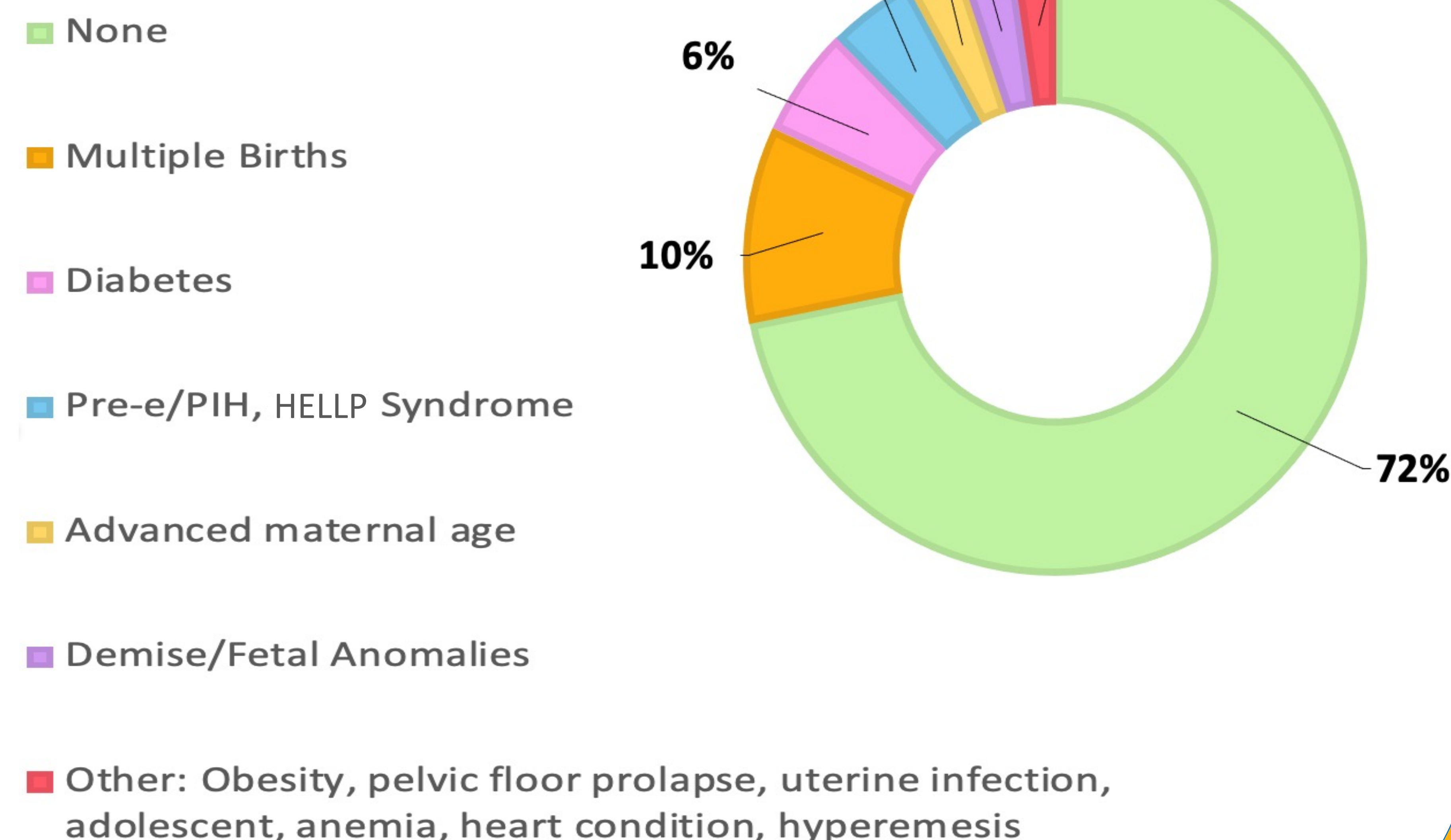
- Clinics Studied: 5 prenatal clinics affiliated with the University of Colorado Hospital
- PROMISE Clinic: IBH obstetric program for perinatal patients
- Study Design: Electronic medical record review of patients referred to PROMISE Clinic during 4/20/20 – 9/20/20
- Analysis: Frequency counts and Chi-Squares

Results

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

** p < 0.01

Pregnancy Complications



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 prenatal 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

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