Evaluation of the CARE Program at Goodall Hospital’s Center for Women’s Health

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One in five pregnant women experience depression, though few seek treatment despite the direct and indirect risks associated with depression during pregnancy. Premature labor, low birth weight, and long-lasting psychological and behavioral health problems are all risks to the unborn child when a pregnant woman is depressed (Field et al., 2004). Women who are compliant with prenatal care show improved outcomes in maternal parenting practices, health behaviors, and child health (Reichman et al., 2010). Prenatal care has been found to encourage use of pediatric care after delivery, making these families less likely to visit the emergency room for an illness that can be treated by a primary care doctor (Reichman et al., 2010).

The purpose of this descriptive study is to gain a better understanding of the characteristics that can affect depression and overall compliance in prenatal care. Researchers anticipate that women's involvement in the CARE Program will lead to a decrease in depression scores measured between the first and second trimester. The continued assessment and support provided by the CARE Coordinator is also expected to lead to fewer untreated cases of perinatal and postpartum depression.

Evaluation of the CARE Program

This study examines the effectiveness of the program’s interventions which assess and treat depression and encourage engagement in prenatal care. Primary data was collected from health records of women enrolled in the CARE Program at Goodall Hospital’s Center for Women’s Health. This study extracts data related to demographics, compliance with prenatal care, use of the emergency department for non-emergency care, and number of meetings with the CARE Coordinator (CC). The data was analyzed as it relates to Edinburgh Postnatal Depression Scores (EPDS) collected in the first and second trimester during meetings with the CC. An EPDS score of 10 or more has been shown a reliable, cost-effective screening point to identify symptoms of depression (Bergink et al., 2009).

The interventions used in The CARE Program identified many women in need of resources and experiencing symptoms of depression that may have otherwise been overlooked and untreated. Tobacco and drug use were also indicated in a substantial amount of women and should not be overlooked when revising the focus and goals of the program. Using this evaluation as a guideline, the CARE Program at Goodall Hospital will be able to provide effective, individualized support that can help to empower pregnant women in their community.

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