

POSTER ABSTRACT

Targeted social care for highly vulnerable pregnant women: design of the Mothers of Rotterdam cohort study

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Introduction: Evidence shows that low socioeconomic status SES is related to decreased mental health of the individual. Exposure to determinants such as low income, unemployment, being a single parent, and living in a deprived neighbourhood increases levels of chronic stress. This results in diminishing overall resources to cope with stressful situations, making them more vulnerable for unhealthy and unfavourable behaviour, and a decreased health status of the individual. These negative effects do not only create a vulnerability in the individual for poor health, but effect the next generation already during pregnancy. Therefore, policies targeting highly vulnerable pregnant women potentially have far-reaching effects.

Within the Netherlands, Rotterdam has the highest percentage of children growing up in poverty 25%, in a family living on welfare 19%, with a low parental level of education 20%, and with one or both parents being unemployed 10%. Furthermore, 57% of the children in Rotterdam grow up in a deprived neighbourhood.

Description of policy context, objective and targeted population: In the Netherlands, social care is usually carried out by a community social care team: a multidisciplinary team of professionals located in the neighbourhood of their clients. Based on the needs of the client, care is either focused on adult issues such as financial problems or problems regarding children and adolescents such as underperformance at school. This strict separation of the social care in adult- and child-care is suboptimal in the care of highly vulnerable pregnant women, since impact of risk and adversity is not limited to one generation and can simultaneously affect both parents and children.

Within Rotterdam, the Erasmus Medical Centre, the municipality, and a non-profit organization are combining their expertise to improve the psycho-social situation of highly vulnerable pregnant women. Ultimately, this will result in a healthy development of the unborn child. This targeted social care integrates medical and social care in a long-term and intensive support program. This support focusses on all issues a women and her child can encounter during pregnancy and after giving birth: health, housing, employment, social functioning,

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mother-child interaction and child development. In the “Mothers of Rotterdam” study, we aim to prospectively evaluate the effectiveness of the holistic approach compared to regular care provided by the community social care teams.

Highlights and transferability: This program promotes societal valorisation of knowledge through valuable collaboration between academics, government and a non-profit organization by supporting the healthy development of future generations. Due to the pragmatic character of the study, randomization of participants is not possible, but is determined by a natural experiment. Therefore, this ecologically valid study design allows for results directly generalizable to the actual population, although it increases the risk of true effects being masked by unmeasured confounders.

Conclusion: This study will provide unique insights into a notoriously difficult to reach population of highly vulnerable pregnant women, their problems and potential care pathways for these problems.

Keywords: pregnant women; vulnerable populations; social problems; community care; child development
