A circle of moms: MAHEC finds success with group care model

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ASHEVILLE -

For Sammie Gallaway, being pregnant at 21 was terrifying. She was overjoyed about the life growing inside her but anxious that she wouldn't know what to do.

"At first I was excited, and then I was worried. I thought, 'How will I do this? What if I'm not a good mom? What if I don't know what to do because this is my first child?'" she said. "Then, I realized that everyone goes through that. Even if you are having a second baby, it's still some of the same questions."

To help ease her fears, Gallaway opted to do her maternity care in a group setting. Each month, she and nine others met at the Mountain Area Health Education Center on Hendersonville Road for the Centering Pregnancy program. There, in a warm, multicolored conference room, a doctor monitored each participant's weight and development, and the women shared their hopes and fears for the future.

MAHEC launched Centering Pregnancy, a group health care model focused on prenatal maternal wellness, in 2013. Its success led to the development of other models of group care. Last year, the regional heath care provider launched group programs for

patients dealing with diabetes, chronic pain and early childhood wellness. Plans are also in the works to develop programs for people suffering from knee pain and metabolic syndromes like cardiovascular diseases and obesity.

Physicians like group care because they can spend more time with their patients, said Dr. Amy Russell, director of MAHEC's division of health care innovations and its primary care services. Patients like it because they have time to learn successful strategies for healthy living from their doctors and peers.

The trend is a national one.

"The group concept is catching on more and more rather than care in isolation," said Susan Gullo, director of the Institute for Healthcare Improvement, a nonprofit organization based in Cambridge, Massachusetts, focused on partnering with medical professionals around the world to improve health care systems.

At MAHEC, Gallaway and others sat in a circle, unconsciously touching their swollen bellies. With the guidance of a certified nurse midwife and a wellness nurse, the expectant mothers discussed the development of the fetus inside of them.

They talked about their fears of labor and how to cope with morning sickness, fatigue, hormone changes, family and work life. They shared strategies for well-being like quick, healthy recipes the whole family would enjoy and ways to incorporate exercise into their busy schedules.

"I really liked getting the opinion of veteran moms, along with voicing my insecurities," said Gallaway, who had a baby girl in June. "It's amazing. I feel like she's the best thing I ever did."

child care in a supervised medical setting. During a group about diabetes, participants might strategize on how to find rides to the gym and stick to diet and fitness goals.

While patients are often initially apprehensive about group care, they usually leave with a sense of accomplishment and support, Knoll added. Group members all sign confidentiality agreements and there is no pressure to reveal anything. Some members just like to sit and listen.



A group of newborns rests on the floor during the last session of Centering Pregnancy, a MAHEC program. Initial results show that implementation of the national program has reduced pre-term labor and led to expectant mothers making healthier decisions. The model has inspired all types of group care at the regional medical facility. (Photo: Beth Walton / bwalton@citizen-times.com)

A circle of care

Group care improves health outcomes by promoting goal-setting and accountability, said Gullo. "It's like being on a team. When people look out for you, it raises your level of responsibility and commitment."

Patients are more engaged and empowered in group care settings, she added. They take part in the medical process documenting and tracking their own vital signs. The social infrastructure allows people to make friends and feel a level of practical, personal support that isn't always available in a clinical setting.

"Groups are effective in a way you can't be in a 20-minute visit with a patient," said Dr. Heidi Knoll, a family practice physician who is charged with figuring out how to incorporate more group care visits at MAHEC's Family Health Center at Biltmore. "It's more than a support group; it's medical care in a shared visit."

Groups allow patients to brainstorm solutions with their peers and hear questions that individual members hadn't thought of on their own, Knoll said. In Centering Parenting, for example, new moms and dads can share advice on everything from immunizations to

Started in the early 1990s by a certified nurse midwife at Yale University, Centering Pregnancy has become a national model for group care, due in part to increased federal funding from the Center for Medicare and Medicaid Innovation.

A growing body of research shows it has the potential to reduce health care spending while improving health outcomes, said John Craine, regional director for the Centering Healthcare Institute, a Boston-based nonprofit with the mission of improving maternal and child health by transforming care through Centering groups.

The 10-session curriculum is being implemented at nearly 400 sites in 37 states. Participation in Centering Pregnancy reduces preterm labor by 30-50 percent, depending on the population being served, he said. New research also suggests that the model could have the potential to eliminate health care outcome disparities by race and class.

Statewide, the preterm birth rate is around 12 percent. Statistics collected

during MAHEC's Centering Pregnancy's program show preterm labor at just 7.2 percent. Locally, preliminary data also show women in the program are making healthier choices. They are smoking less and breast-feeding more.

Centering Pregnancy is simply a framework for the delivery of care, said Craine. It's highly customizable to a group's particular interests and needs. Patients talk about everything from tobacco cessation to breast-feeding and domestic violence. "The women are given the opportunity to talk about what's important to them," he said. "We don't try to dictate what the topics are; we just provide a curriculum, a syllabus. It's really the women who drive it."

A circle of friends

Last month, Gallaway and others met for the last time. There were 10 new participants in the room. On each woman's lap was a tiny baby. The women, some joined by their partners and other children, shared their stories of labor. They took turns holding each other's newborns and talked about their child's weight and height at birth.



Missy Tomberlin comforts her 2-month-old baby, Maliegha Ingle, at their home in Candler. Tomberlin took part in the Mountain Area Health Education Center's Centering Pregnancy program. The model has inspired all types of group care at the regional medical facility. (Photo: Angeli Wright/awright@citizen-times.com)

Some of the babies were crying. Others were sound asleep. One child wailed when he was briefly taken away from the comfort on his mother's breast to pose for a photo. "It's fantastic seeing everyone's baby because we went through it all together," Gallaway said. "It's like we were all one little family."

Some of the women were even in the hospital giving birth at the same time.

Five weeks ago, Emily Abernathy, of Candler, went through a very difficult 34 hours of labor. A member of the Centering Pregnancy group, Abernathy was texting the other new moms she met in the program from her hospital bed.

Like others, Abernathy was hesitant to go to MAHEC for her maternal care. Large medical facilities are usually sterile, she said. Patients get handed off from person to person. They are poked and prodded and there is no assurance that you will see the same doctor every time.

The program exceeded her expectations. "Being in the same room with the same people knowing what to expect takes the anxiety out of the medication portion of your care, and there is someone to turn to and say, 'Oh my God, did they find your vein on the first time? They stuck me three times.'"

During her pregnancy, Abernathy was also raising a 3-year-old daughter. "I looked forward to the appointments where I could socialize and get out of the house and leave my kid at home and do nothing but share about being a woman and being pregnant

with other people who are in the same place," she said.

"There is something about sharing your stories, your fears, your moments, your ups and downs. The modern world is so insulated. It's important to reach out and make those connections. I met people from all different walks of life."

One of those people was Missy Toberlin.

Toberlin, also of Candler, says Centering Pregnancy changed her life.

When she was pregnant with her third child, Tomberlin's life was a mess. She was in a violent relationship. Both she and her boyfriend of 12 years had spent time in jail. Child Protective Services had been to the family's trailer in Candler.

Despite all this, both parents were determined to be better, a task that sometimes seemed

impossible. The father of her children was absent by her second month of pregnancy, and Tomberlin was left to care for her 7- and 9-year-old sons pregnant, anxious and alone.

"I understand now that I have to take care of myself to take care of them," said Tomberlin last week, as she nursed her 2-monthold baby in a living room cluttered with clean laundry and plastic toys. "All three of my kids are miracles, but she ... I always wanted a girl."

With a newborn at home, Toberlin said the children's father is seeking help. Meanwhile, she is focused on incorporating what she learned in Centering Pregnancy.

"We have both come a long way in life, and I feel like it's going to get better with time," she said. "The love I felt from those women. They were just so amazing. I began to realize, 'Missy, you are not alone. You have support. You have help. Just ask.'"