Additional outcomes

- Birth outcomes (preterm, birthweight, size at birth)\(^1\text{-}^5\)
- More prenatal care visits\(^1\text{,}^3\)
- Better prenatal knowledge\(^1\)
- Increased readiness for childbirth\(^1\)
- Greater satisfaction with care\(^1\)
- Higher rates of breastfeeding initiation\(^2\text{-}^6\)
- More frequent use of condoms\(^3\text{,}^12\)
- Fewer acts of unprotected sex\(^3\text{,}^12\)
- Fewer rapid repeat pregnancies\(^3\text{,}^12\)
- Greater use of contraceptives\(^13\text{,}^14\)
- Mental health\(^7\text{,}^15\)
- Other\(^7\text{-}^15\)

\(^1\text{Rising 1998; }^2\text{Grady and Bloom 2004; }^3\text{Ickovics et al. 2007; }^4\text{Teate 2009; }^5\text{Klima 2009; }^6\text{Ickovics et al. 2016; }^7\text{Ickovics 2011; }^8\text{Baldwin 2006; }^9\text{Bloom 2005; }^{10}\text{Robertson 2009; }^{11}\text{Shakespeare 2009; }^{12}\text{Kershaw 2009; }^{13}\text{Trotman; }^{14}\text{Hale 2014; }^{15}\text{Felder 2017}
Malawi & Tanzania

[Map showing the location of Malawi and Tanzania in Africa with their respective flags.]
Research from sub-Saharan Africa

- In Malawi and Tanzania, group ANC was feasible and acceptable to pregnant women and their providers.
- Group ANC could be conducted with fidelity to the core components of the CP model while meeting country guidelines for ANC.
- Growing number of studies taking place in Africa:
  - Kenya, Rwanda, Ghana.

Pilot Study: Outcomes

- Does Group ANC increase healthcare utilization?
  - ANC
  - 6-wk postpartum visit

- Does Group ANC improve the following outcomes?
  - Satisfaction
  - Pregnancy-related empowerment
  - HIV-related knowledge
  - Mental distress
Pilot Study: Recruitment & Retention

**Malawi**
- Recruited (n=112)
  - Individual PNC (n=58)
    - Lost to follow-up (n=18)
      - Unreachable (n=18)
    - Analyzed (n=40)
  - Group PNC (n=54)
    - Lost to follow-up (n=3)
      - Unreachable (n=2)
      - Moved (n=1)
    - Analyzed (n=51)

**Tanzania**
- Recruited (n=111)
  - Excluded (n=5)
    - Ineligible (n=1)
    - Withdrew (n=4)
  - Individual PNC (n=50)
    - Lost to follow-up (n=2)
      - Unreachable (n=1)
      - Fetal demise (n=1)
    - Analyzed (n=48)
  - Group PNC (n=56)
    - Lost to follow-up (n=3)
      - Unreachable (n=1)
      - Fetal demise (n=2)
    - Analyzed (n=53)
Results

REGARDLESS OF COUNTRY: HEALTHCARE UTILIZATION AND SATISFACTION
Attendance: 4 ANC Visits

Malawi
OR 16.58 (4.02, 68.42)  
p<0.001

Tanzania
OR 6.673 (2.14, 20.77)  
p<0.001
Attendance: 6-week postnatal care

- Total sample: 50.0% (OR 2.89, 95% CI 1.57, 5.29, p < 0.001)
- Malawi: 61.9% (OR 3.529, 95% CI 1.30, 9.60, p = 0.014)
- Tanzania: 39.6% (OR 2.676, 95% CI 1.20, 5.99, p = 0.012)

Individual ANC: n=90, n=42, n=48
Group ANC: n=102, n=49, n=53

Legend: Individual ANC (red), Group ANC (orange)
Satisfaction with ANC: 10-item index
(range 10-50; mean = 33.9 (SD 8.8)

- Total sample: 39.2
- Malawi: 39.8
- Tanzania: 38.7