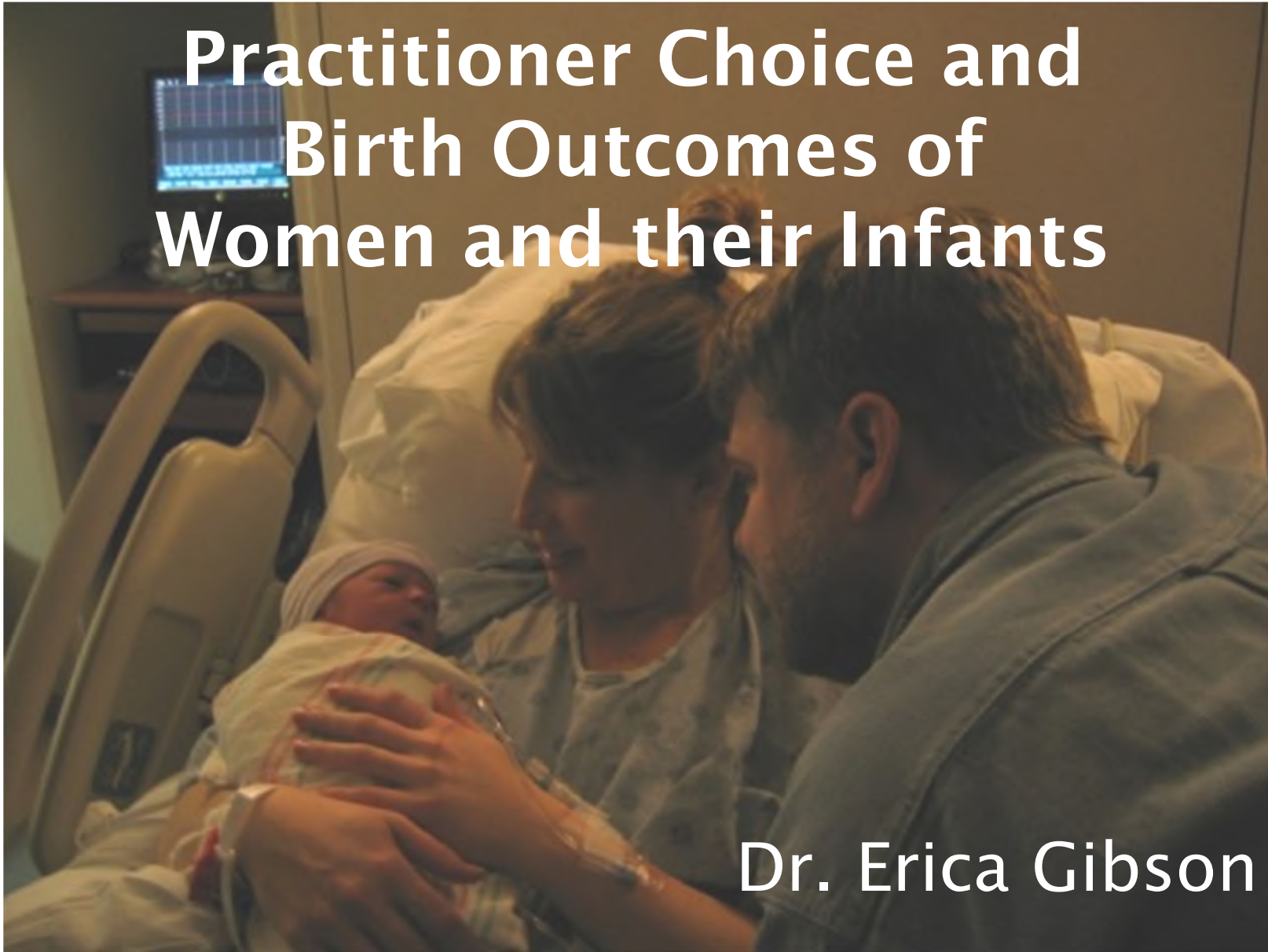


Practitioner Choice and Birth Outcomes of Women and their Infants



Dr. Erica Gibson

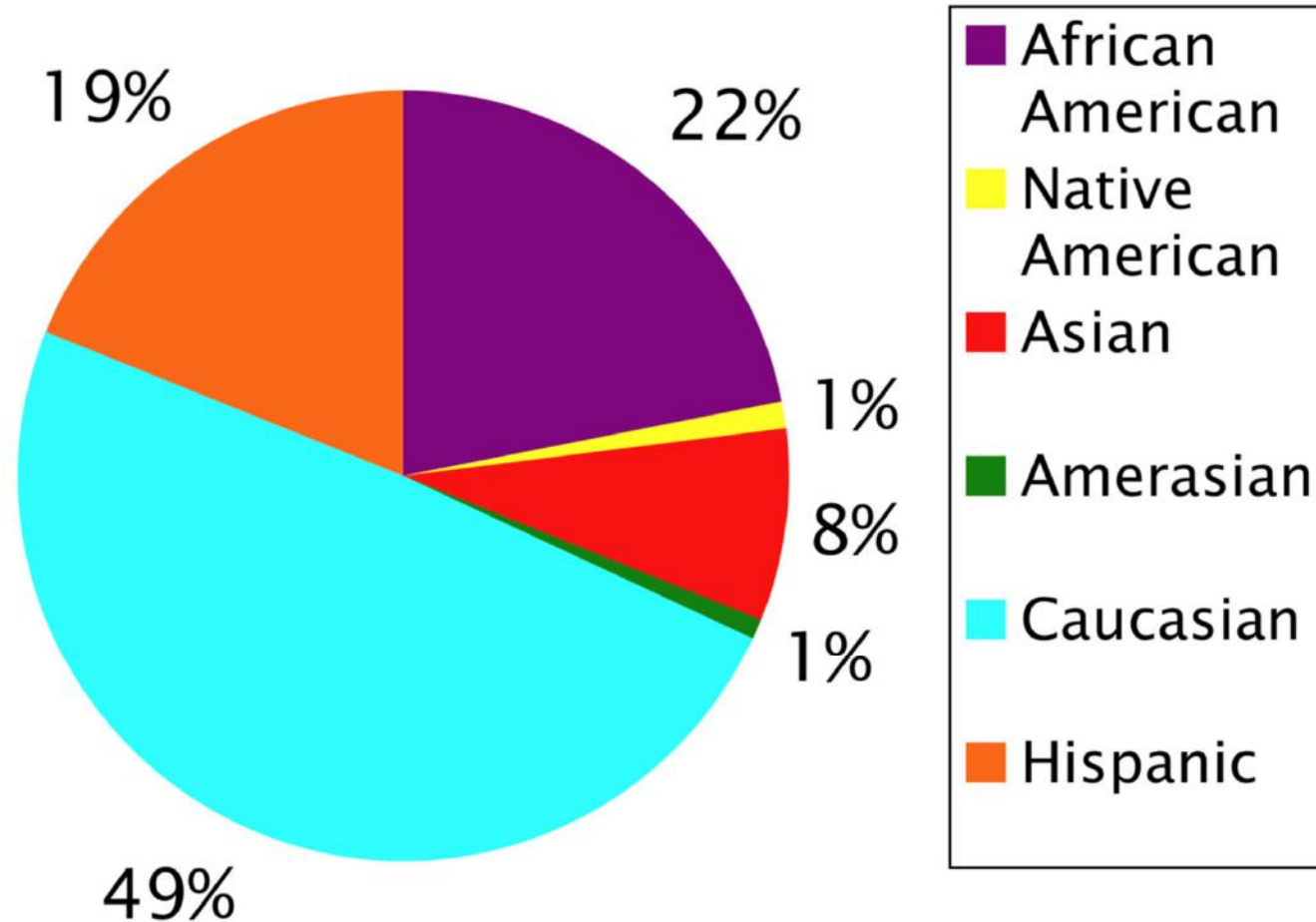
Hypotheses

- Shared beliefs about pregnancy/birth between clients and practitioners should result in better birth outcomes for the mothers and the infants.

Demographic Data

- Age range: 18-45 (mean 27.7)
- Annual household income levels: \$0-180,000 (mean \$42,500)
- Education level: 9th grade – Ph.D.
- Previous pregnancies: 0-8 (mean 1.3)
- Religion: 68% varying forms of Christianity, 26% no religion, 6% other religions
- Marital status: 58% married, 37% single, 5% divorced

Ethnicity



Consensus Model Statements

- Examples of agree/disagree statements include:
 - “A pregnant woman should not have to be in pain during her labor.”
 - “I believe that the mind is separate from the body.”
 - “I believe that IV’s are necessary for women in labor.”
 - “Birth is best managed by technology.”

Consensus

- Clients of both the doctor and the midwives shared consensus with their chosen practitioner, although the midwives and clients had higher levels of agreement on the answers than the doctor and his clients
- Women who had higher levels of agreement with their practitioner had higher birthweight babies ($p=.04$)

Means of Health Behaviors and Birth Outcomes of Doctor and Midwife Clients

	MD Clients	Midwife Clients			Total
		MW	Bio	Total	
EPDS Score	6.0	7.7	5.8	6.5	6.2
Birth weight grams	3400	3780	3346	3513	3462
Apgar 1	7.8	7.9	8.8	8.4	8.0
Apgar 2	9.0	9.1	9.5	9.3	9.0
Prenatal visits	10.7	12.4	12.6	12.5	11.7
Weight gain	32.1	35.8	36.4	36.2	34.3
Body Mass Index	24.6	23.5	22.5	22.9	23.7