Prenatal Care Experiences among Pregnant Women with Obesity: A Qualitative Quality Improvement Assessment

Primary Author: Danielle Hurst, BS
Organization: UW-School of Medicine and Public Health
Email: dhurst2@wisc.edu

Additional Authors: Nicholas B. Schmuhl, PhD; Corrine I. Viols, PhD; Kathleen M. Antony, MD, MSCI

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Introduction or statement of problem: Stigma and bias experienced during prenatal care can affect quality of care and, ultimately, the health of pregnant women with obesity and their infants.

Objective: We sought to 1) better understand the bias and stigma that women with BMIs ≥40 kg/m² experience while receiving prenatal care, 2) gauge women’s interest in group prenatal education for women with obesity, and 3) gather feedback about their preferred weight-related terminology.

Methods/design: We conducted and thematically content-analyzed 30 semi-structured interviews of women with BMIs ≥40 kg/m² who received prenatal care at a university-affiliated teaching hospital in the Midwest region of the United States.

Results: All women recalled positive experiences during their perinatal care during which they felt listened to and respected by providers. However, many also described a fear of weight-related bias or recalled weight-based discrimination. Women reacted favorably to a proposed group prenatal care option for pregnant women with obesity that focused on nutrition, physical activity, and weight management. Women rated “weight” and “BMI” as the most desirable terms for describing weight, while “large size” and “obesity” were rated least desirable.

Conclusions: Many pregnant women with BMIs ≥40 kg/m² experience bias in the prenatal care setting. Potential steps to mitigate bias towards weight include improving provider awareness of the experiences and perspectives of this population, expanding prenatal care options targeted towards women with high BMIs, including group care, and using patient-preferred weight-related terminology. Through the remainder of this manuscript, wherever possible, the term “high BMI” will be used in place of the term “obesity” to describe women with BMI ≥ 30 kg/m² in order to respect the preferred terminology of the women we interviewed.