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LETTER

How to Support the Referral Towards Group Antenatal Care in Belgian Primary Healthcare Organization: A Qualitative Study [Letter]

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Dear editor

We have read the paper by Florence Talrich et al on How to Support the Referral Towards Group Antenatal Care in Belgian Primary Healthcare Organizations: A Qualitative Study. This study supports increased utilization of antenatal health services.¹ We would like to share our views on this study as well as provide input for developing this research if it is to be continued by other researchers who wish to conduct the same study in the future.

The study conducted by Florence Talrich et al aims to understand what factors determine and have a role for health service providers to refer pregnant women to Group Antenatal Care (GANC). Florence Talrich et al in their research obtained results indicating that before health workers decide to refer pregnant women, they need to undergo a fairly complex process. This is influenced by the characteristics of the referrer, the characteristics of the GANC facilitator, the characteristics of the health service provider organization and the characteristics of the pregnant women themselves.¹ It should be considered as an effort to motivate referrers (which consist of potential referrers, GANC facilitators and other stakeholders) to be more active in referring pregnant women to participate in GANC, referrers need to increase collaboration between referrers, get more detailed knowledge about what it is GANC, as well as incentives for every pregnant woman they successfully refer.²

The study conducted by Florence Talrich et al used a qualitative approach to explore the experiences and perceptions of service providers regarding referral of pregnant women to GANC and the Theoretical Domain Framework (TDF) which focuses on individual-level behavior change, which is useful for understanding service provider referral behavior.¹ The method used is correct in assessing and understanding the referral behavior of service providers, but we would like to provide input regarding other methods that can also be considered in this study, namely by using Internet-based Centering Pregnancy which can be applied in hospitals and primary health care where the sample is purposive. Sampling which was then conducted semi-structured interviews to collect qualitative data results in data on empowerment, psychological and social support that can influence the decision-making of pregnant women to be referred to GANC.³

In conclusion, we agree that GANC can be a new innovation to improve the health of pregnant women in a sustainable manner.¹ However, it is also necessary to consider the geographical conditions between the location of the pregnant woman and also the place where the GANC can be a factor in decision-making. In addition, the involvement of the closest family such as husbands or parents of pregnant women to participate in GANC also needs to be considered. Because during pregnancy, pregnant women not only have an impact on physiological changes but also on psychosocial aspects. So that they not only need medical treatment but also attention and support from those closest to them so that they are able to live a happy and prosperous pregnancy.⁴

Disclosure

The author reports no conflicts of interest in this communication.

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