

## **CONFERENCE ABSTRACT**

## Development of the Centering-Based Group Care Adaptation Framework, a supporting tool when implementing Centering-Based Group Care

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**Background:** Centering-Based Group Care (CBGC) is an alternative way of delivering antenatal and/or postnatal care, and includes three core components: (1) health assessment, (2) interactive learning, and (3) community building. Despite the increasing interest in CBGC worldwide, implementation can be challenging and adaptations are required for sustainable implementation while maintaining the core components. Examples of site-specific adaptations for implementation are documented but are scattered and a hands-on tool for practice has not been created. This study aims to develop a CBGC adaptation framework that supports sustainable implementation within and across different contexts.

**Methods:** We conducted a context-analysis using a Rapid Qualitative Inquiry (RQI) approach in 26 sites in seven participating countries (Belgium, Ghana, Kosovo, South Africa, Suriname, The Netherlands, and United Kingdom) during the pre-implementation phase. We conducted 335 semi-structured interviews with service users (n=150) and with key stakeholders such as politicians, health care managers, health care providers, religious leaders (n=185). 10 focus group discussions with service users and 56 review meetings with the local research teams were included. In addition, national guidelines and documents were analysed for their CBGC-relevant content. RQI included data triangulation and investigator triangulation. We incorporated data from the RQI into the iteratively evolving adaptation framework and systematically discussed preliminary versions with country-specific research teams. Insights and feedback from these teams were incorporated to create the final version of the CBGC adaptation framework.

**Results:** We identified six universal surface adaptations categories (content, materials, timing, location, group composition, facilitators), and five universal deep structure adaptations categories (self-assessment/medical check-up, scheduling CBGC into regular care, enrolment, (possible) partner organisations, financials). The CBGC Adaptation Framework provides an overview of the site's adaptation needs, expected barriers and facilitators, and encourages the development of an action plan to apply these adaptations in practice.

**Conclusion:** The Adaptation Framework is a useful tool to identify surface and deep structure adaptation categories. In this way, it serves as a useful tool to provide the necessary support during the complex implementation of CBGC. Completing the framework raises awareness of multiple levels of adaptations that must be considered if sustainable implementation of CBGC is to be achieved.