



# The Decline of Maternity Care in Family Medicine

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The *Annals of Family Medicine* encourages readers to develop a learning community of those seeking to improve health care and health through enhanced primary care. You can participate by conducting a RADICAL journal club and sharing the results of your discussions in the *Annals* online discussion for the featured articles. RADICAL is an acronym for Read, Ask, Discuss, Inquire, Collaborate, Act, and Learn. The word *radical* also indicates the need to engage diverse participants in thinking critically about important issues affecting primary care and then acting on those discussions.<sup>1</sup>

## HOW IT WORKS

In each issue, the *Annals* selects an article or articles and provides discussion tips and questions. We encourage you to take a RADICAL approach to these materials and to post a summary of your conversation in our online discussion. (Open the article online and click on "TRACK Comments: Submit a response.") You can find

discussion questions and more information online at: <http://www.AnnFamMed.org/AJC/>.



## CURRENT SELECTION

### Article for Discussion

Cohen D, Coco A. Declining trends in the provision of prenatal care visits by family physicians. *Ann Fam Med*. 2009;7(2):128-133.

### Discussion Tips

This article was recommended for discussion by the student and resident members of the *Annals* Editorial Advisory Board. It includes an analysis of a large nationally representative dataset showing a substantial downward trend in prenatal care by family physicians. The article by Coco<sup>2</sup> in this issue may provide some additional useful context for your discussions.

### Discussion Questions

- What question is addressed by the article? How does the question fit with what already is known on this topic?

- How strong are the study design and data source for answering the question?
- To what degree can the findings be accounted for by:
  1. How participants were selected?
  2. How outcomes were measured?
  3. Confounding (false attribution of causality because two variables discovered to be associated actually are associated with a 3rd factor)?
  4. Chance?
- What are the main findings? What are the findings of subgroup analyses?
- What do you think of the extrapolation of the findings from 6,203 visits to the entire population?
- What are the implications of the findings for health care policy? At what level are policy changes needed (local, state, national; personal, by professional organizations and/or government)?
- How do the findings of the study by Coco<sup>2</sup> (also in this issue of the *Annals*) affect your interpretation of the policy implications?
- What are the implications for the field of family medicine?
- What are the implications of the findings for your training and practice plans? (Do you want to zig when many are zagging, or go with the trend?)
- What creative solutions do you see for meeting the maternity care needs of underserved women?
- What are some action next steps for you and other leaders and policy makers based on this study?

## References

1. Stange KC, Miller WL, McLellan LA, et al. *Annals Journal Club: It's time to get RADICAL.* *Ann Fam Med*. 2006;4(3):196-197. <http://annfammed.org/cgi/content/full/4/3/196>.
2. Coco A. How often do physicians address other medical problems while providing prenatal care? *Ann Fam Med*. 2009;7(2):134-138.