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Understanding factors that influence pregnant and parenting teenagers to seek medical care for themselves and their children in the emergency room versus with their primary care providers

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INTRODUCTION

- ❖ Emergency room (ER) overuse is an increasingly important topic for healthcare systems in light of high costs and a shortage of primary care providers (PCPs).
- ❖ Teen Living Program (TLP) is a resident shelter in Worcester for pregnant and parenting teenagers. These teens have reported frequent use of the ER.
- ❖ Little is known about what factors influence patients to visit the emergency room, and no studies have focused on adolescents.
- ❖ We explored the social, emotional and economic factors that influence how teens at TLP use the medical system.
- ❖ We hypothesized that they seek medical care at the ER instead of their PCPs because of convenience, cost, and trust.



Figure 1: Pros and Cons of ER vs. PCP

Pro PCP	Pro ER
They know you, More personal, Feel more comfortable, Because it's faster, Closer, Less wait time, Nice, Clean, Not crowded	Available 24/7, Convenient, serious injury, good when PCP has no appointment, responds to children quickly no matter what, more doctors, very thorough
Con PCP	Con ER
Back up doctors, No available appointments, Because they give you a different doctor, Take forever to wait, Not available when you need them	Germs, Longer wait, Takes forever, less personal, billing, they don't know your history, a lot of people, dirty, not knowing the doctors

METHODS

- ❖ **DESIGN**
 - Two focus groups
 - Semi-structured interview guide
 - Digitally recorded
 - Transcribed verbatim
- ❖ **PARTICIPANTS (N=10)**
 - Recruited from TLP
 - Age: 17 to 21 years
 - Gender: Female
 - Race/Ethnicity: 40% White, 20% Black, 20% Hispanic, 10% Multiracial, 10% other
- ❖ **ANALYSIS**
 - Data categorized using qualitative content analysis techniques
 - Transcripts coded by 1 investigator, through which major themes were identified and exemplary quotes selected

RESULTS

THEMES	EXEMPLARY QUOTES
Positive Perceptions of Providers	
Trust	<ul style="list-style-type: none"> • "Like I would give them my 100% trust but once I found out that you did something that I can't trust you no more you lost my complete trust because I feel like if he's gonna be a doctor, you have to trust em." • "Like I trust someone until like they give me a reason not to trust them."
Respect	<ul style="list-style-type: none"> • "To have a physician that actually shows that they actually care and when they walk in the room they're like oh how are you? Last time that you said you were how's college? Like they know about you, that's when I'm more comfortable. ...That's a good doctor." • "That they show that they care and they actually want to get to know me. Not – they're not just that position and whatever. Like ya know."
Time	<ul style="list-style-type: none"> • "Like no, I like a doctor that gets it done. Like they say they're gonna do it, they're gonna do it and it's gonna be done right then and there." • "I loved them. You would call – it would be like 3:30 in the morning and they would call you back like that [snap] like mad quick cause my daughter used to be like constantly like...so I used to call a lot."
Negative Perceptions of Providers	
Respect	<ul style="list-style-type: none"> • "But my doctor now, she – she'll come in, real quick, 5 seconds, she's done. Like no! Sit down and listen to what I have to tell you and get to know what I'm tryin to say." • "She doesn't listen! It goes in one ear, out the other. Like I can't stand that. Repeating questions. Ughh. Can't stand my doctor sometimes."
Incorrect medical advice	<ul style="list-style-type: none"> • "I was so mad so then I followed up with the doctor 2 days after and he was like I'm so sorry about that and I was like yeah? Well I'm not comin to you no more. I'm finding another doctor." • "I had the same doctor and as soon as I heard that I switched me and my son outta there. I was like this lady is crazy she doesn't know what she's talking about."
Inconsistent Providers	<ul style="list-style-type: none"> • "I had a doctor but my doctor was so booked all the time that I always had to see another doctor and I hated that." • "It was kinda like different – I mean it was the nurses, but I consider all of them doctors and there was different ones coming in and out and no I don't like that."
Process of seeking Medical Care	
Visit vs. Call	<ul style="list-style-type: none"> • "My son when he's not feeling good – once that I see that it's like one hundred I run to the emergency room. And that only happened twice and it's really not that serious, I just get scared." • "I don't wanna wait a half hour for somebody to call me back I wanna go as soon as possible to make sure that if he's sick like whatever he has gets like better quick or whatever. I don't know." • "That's how I feel too. Like I'd rather be dyin in bed than go to the hospital."
Family	<ul style="list-style-type: none"> • "like when my son gets sick I feel like I know what to do already cause like I just think back to what my mom did to me." • "I do it the Spanish way. Drink some tea, put a little bit of this, a little bit of that, you're good. ...Those natural things that like Spanish people tend to do. ...Natural remedies."

SUMMARY

- ❖ Choice is predominantly influenced by positive personal relationships and negative experiences.
- ❖ Family and friends' experiences also shape perception of care options.
- ❖ Participants largely based their decisions on trust and convenience, as opposed to cost, since they all have comprehensive insurance.

IMPLICATIONS

- ❖ Efforts are needed to help adolescents understand the process of where to go for medical care.
- ❖ Providers and the medical system also should be aware of the value of trust in choosing medical care and develop strategies to improve trust with patients.

LIMITATIONS

- ❖ Focus group participants all recruited from one city and one program
- ❖ Small sample size
- ❖ Findings may not be generalizable