

CenteringParenting: Transforming Pediatric Care for Children and Families

The Opportunity: Group Pediatric Care, Lifelong Impact in Family

Every family deserves high-quality, supportive pediatric care that builds community and addresses the needs of both parents and children. CenteringParenting is an evidence-based model that transforms traditional well-child visits into group sessions—creating a dynamic space for learning, peer support, and holistic health.¹

The Problem: Under-Investment in Family-Centered Care

The earliest years of a child's life are a critical window for healthy development, but too often, families navigate this period without the emotional, social, and systemic support they need. Despite regularly attending pediatric visits, many parents experience a decline in their emotional well-being during the early years of their child's life. Parents across the United States also reported feeling stressed, lonely, anxious, and depressed.²

Conventional models of care focus primarily on the child, leaving family well-being, and parental mental health, as secondary. A lack of integrated support can lead to missed opportunities for early intervention and prevent caregivers and children from achieving optimal outcomes.



How it works: Families with infants of similar ages meet together with health care providers for well-child visits. Each session combines standard clinical care with interactive discussions on child development, parenting, and family wellness. **The group setting fosters connection, reduces isolation and stress, and empowers parents with knowledge and confidence.**

What makes it unique: CenteringParenting is inclusive, trauma-informed, and designed for diverse communities. The model strengthens social support and improves clinical outcomes by promoting shared learning among parents and integrating routine pediatric care.

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In New Jersey, CenteringParenting has been implemented through private philanthropy support.³ Today, the model is implemented in sites including Jane H. Booker Family Health Center, AtlantiCare Health Services, Foundation Pediatrics, and University Hospital Department of Pediatrics.

The Impact: Fewer Gaps in Care, Stronger Families, Better Outcomes

Evidence shows CenteringParenting:

- **Boosts well-child visit and immunization rates:**

In a U.S. urban pediatric practice, children participating in CenteringParenting were more likely to be up-to-date on well-child visits and vaccinations compared to those in traditional care.⁴

- **Improves maternal health and screening:**

CenteringParenting groups have higher rates of maternal depression screening and documentation, supporting early identification and intervention for parental mental health needs.⁴

- **Increases parental confidence and support:**

Parents report receiving greater social support, increased confidence in their parenting abilities, and high satisfaction with care. Many parents preferred CenteringParenting over traditional visits, with high attendance and engagement.¹

For New Jersey, this means:

- Higher rates of on-time well-child visits, immunizations, and breastfeeding.
- Better maternal mental health screening and support—critical for early detection and intervention.
- Fewer isolated, overwhelmed families—more parents connected to their providers and each other.

What Comes Next: Building the Infrastructure

CenteringParenting is a proven, scalable model for pediatric care that integrates social support and developmental guidance into a group care experience that reduces gaps in care for children and parents. To ensure that more New Jersey families have access to this benefit:

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- Establish Medicaid and commercial insurance reimbursement for group well-child care.
- Support provider training and implementation in pediatric practices, Federally Qualified Health Centers (FQHCs), and community health centers to facilitate adoption of group-based pediatric primary care.

CenteringParenting is more than an innovative approach to delivering well-child visits—it's an effective health care delivery strategy with tangible benefits for families and communities.

¹Jones, K. A., Do, S., Porras-Javier, L., Contreras, S., Chung, P. J., & Coker, T. R. (2018). Feasibility and acceptability in a community-partnered implementation of CenteringParenting for group well-child care. *Academic Pediatrics*, 18(6), 642–649. <https://doi.org/10.1016/j.acap.2018.06.001>.

²Latest Data & Trends. RAPID Survey. <https://rapidsurveyproject.com/explore-our-work/latest-data-trends/>.

³ Funding support for CenteringParenting includes the Burke Foundation, the Henry and Marilyn Taub Foundation, and The Nicholson Foundation.

⁴Shah, S., et al. (2022). CenteringParenting: Implementation and outcomes in an urban pediatric practice. *Journal of Primary Care & Community Health*, 13, 1–8. <https://doi.org/10.1016/j.pedhc.2022.09.012>.
