**The (re)establishment of trust: An ethnographic study on perinatal care for families with psychosocial vulnerability factors**

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**Background**The first years of a child’s life has impact on their future health and well-being. Within maternity health care focus is on early detection and prevention to promote social equity in pregnancy. In Denmark, the maternity health care sector aims at offering individualized services to families depending on their needs where families facing social, medical or psychological challenges are viewed as particularly vulnerable. The aim of this study was to how families living with psychosocial vulnerability experience receiving targeted maternity health care, and how trust and mistrust shape these experiences.

**Method**The study is set in a Danish municipality and has a longitudinal ethnographic field design. Participant observation and semi-structured interviewing has been conducted between April 2018 and September 2019. In this period, twenty-five families with psychosocial vulnerability factors have been followed and interviewed throughout their care pathways.

**Findings**Preliminary findings suggest that trust and mistrust play a central role on the journey through the maternity health care sector. Some are afraid of being judged on their parenting skills or viewed as unstable or unfit parents. In some cases, this comes down to fear of having their child removed, whereas others associate vulnerability with shame and stigma. Hence, there may be a constant negotiation between telling and withholding information in encounters with health professionals due to the uncertainty about the consequences of being honest. This may be a barrier to offering and accepting help as well as for families to disclose their problems. Thus, the analysis points to how the (re)establishment of trust is seen as crucial for families to feel supported.

**Conclusion**This study may play an important role in improving the future of maternity health care services targeted at families living with psychosocial vulnerability factors. Final conclusion and recommendations will be ready for presentations in October 2019.