First Trimester Prenatal Care Initiation Among Hispanic Women along the U.S.-Mexico Border: An Investigational Study to Inform Collaborative Strategies

Presenters

Kara Bower, LBSW, Welcome Baby Program; kbower@bahcnm.org
Yara Castro, BS, Santa Cruz County Healthy Start; ycastro@mariposachc.net
Araceli Flores, RN, BSN, Healthy Start Laredo; AF1713@bcfs.net
Jonah O. Garcia, LISW, La Clinica De Familia Healthy Start Program; jogarcia@lcdfnm.org
Dr. Maria Reyes, MD, MPH, California Border Healthy Start+; mreyes@pciglobal.org
Yvonne Rojas, M.Ed., MMFCT, La Clinica De Familia Healthy Start Program; yrojas@lcdfnm.org
Katherine Selchau, MA, California Border Healthy Start+; kselchau@pciglobal.org

Presentation Objectives

• Describe the regional approach used by the Healthy Start Border Alliance (HSBA)
• Share results and key findings of the HSBA prenatal care initiation study
• Discuss how study findings can be used to inform practice across sites and collaborative partners

Session Description

Based on their research, this session will examine the knowledge, attitude and behaviors related to prenatal care seeking among Hispanic women of reproductive age in communities served by five border Healthy Start sites in four U.S.-Mexico border states. Border Healthy Start sites formed a regional alliance called the Healthy Start Border Alliance, with the purpose of turning a common vision for border-wide impact with shared practices, performance standards and measures. The study illuminated several barriers to first trimester prenatal care initiation among women in the U.S.-Mexico border region as well as differences in access to care across different subgroups. Data on prenatal care initiation and utilization, information sources on prenatal care and key barriers will be presented. The presentation will discuss key
findings and also share the process that was used to design, develop and implement the study across multiple project sites. Barriers and opportunities for influencing policy and practice will be identified.

**Study Objectives**

- Analyze barriers to early PNC entry among Hispanic women of reproductive age along the U.S.-Mexico border.
- Inform coordinated implementation and evaluation of strategies to increase early PNC entry among Hispanic women of reproductive age.

**Target Population**

- **Surveys**: Hispanic women who were current or potential HS participants along the U.S.-Mexico border that lived in the area served by each of the HS project sites and of reproductive age (15 to 44 years).
- **Focus Groups**: Hispanic women currently or recently pregnant (up to 6 months postpartum), who initiated PNC after the first trimester, and met the above survey criteria. Healthy Start participants were limited to those who had been enrolled within the prior two months.
- Across the five project sites, 536 women participated in surveys and 38 women participated in focus groups.

**Key Findings**

- Women who were pregnant for the first time were significantly less likely to start first trimester prenatal care (FTPNC) than women with multiple pregnancies (87% vs. 95%).
- The most significant reason for late PNC was not knowing they were pregnant (70%).
- The most significant reasons for delayed PNC among women who found out they were pregnant in the first trimester were fear or shame related to an unintended pregnancy; and lack of support among family or partners.
- Approximately 14% of women accessed all or some of their PNC in Mexico, ranging from 29% of respondents in Arizona to 7-9% in New Mexico.
- Nearly 25% had not received information from any sources regarding when to start PNC, regardless of whether they had been to the doctor at any point.