

Living longer in poor neighborhoods, tied to higher risk of not gaining healthy pregnancy weight

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The longer a woman spends living in a neighborhood low on the socio-economic scale, the more likely she is to not gain enough weight during pregnancy, according to a new study.

Irene Headen, Ph.D., now a postdoctoral research fellow in Drexel University's Urban Health Collaborative led the study—which was published in *Health & Place* - while at the University of California, Berkeley. She and her colleagues looked at associations between time spent living in socioeconomically "deprived" neighborhoods and non-optimal [weight gain](#) during pregnancy.

Neighborhood deprivation was measured on a socio-economic scale that included measures such as poverty and unemployment. The researchers found that if a woman—from the start of the study to the beginning of her pregnancy—lived in a neighborhood one step down on the scale from the average level of deprivation, she had an 8 percent increased risk of gaining less than the recommended pregnancy [weight](#).

"One of the most important takeaways from this study is how critical it is to consider the full life course of women when thinking about how to support them through a healthy pregnancy," Headen said.

Non-optimal pregnancy weight gain has been defined by the Institute of Medicine as less than 25 pounds or more than 35 pounds for "normal

weight" women—as defined by body mass index.

Not gaining this advised amount of weight during pregnancy has been tied to low birth weights and preterm birth. So Headen and her fellow researchers used a nationally representative survey conducted between 1979 and 2012 to analyze the residential circumstances of roughly 3,300 women and 5,600 pregnancies.

Since the analysis was tied to a study that spanned so many years, it presented a broad perspective of how changes in a woman's circumstances over decades might have influenced her health—and subsequently, that of her baby's—during pregnancy.

The researchers examined results by race but found no significant difference for white, black or Latina women in how long-term residence in low-income neighborhoods affected pregnancy weight. Thus the impact seemed to be linked to where they lived, regardless of race.

The study also looked at "excessive" weight gains during pregnancy—more than 35 pounds among those of "normal" weight. In this case, there was a difference by race.

It was found that long-term residence in poor neighborhoods had less of an impact for black and Latina women than for white women. While black and Latina women who lived in more impoverished neighborhoods longer did not appear to have an extra risk for [excessive weight gain](#) compared to the black and Latina mothers living in less impoverished areas, white women in more impoverished neighborhoods actually had an 11 percent greater risk compared to whites in less impoverished neighborhoods.

While this was a somewhat unexpected finding for the study's authors, Headen suggested that historical, racial residential segregation may

explain these findings.

"Black and Latino people are often restricted to certain residential areas based on histories of redlining and other types of racial/ethnic exclusion. Thus, there is less variability in the types of neighborhood environments that black and Latina women reside in, especially in terms of access to resources, such as healthy foods, which would help to avoid gaining too much weight in pregnancy." Headen said.

However, white mothers might live in a wider variety of neighborhoods, allowing for the greater differences seen in excessive pregnancy weight gain when comparing women living in high- and low-poverty areas.

Overall, Headen said her findings should encourage the public health community to find more ways to support women through healthy pregnancies that are tailored to the specific realities of their neighborhood experience.

"We need to understand that the disadvantaged [neighborhoods](#) that girls and [women](#) live in as they grow up and transition into early adulthood have long-lasting impacts for them and their children through the experience of [pregnancy](#)," Headen explained. "This places an even greater importance on striving to design equitable neighborhood environments that allow access to opportunity for all."

The Urban Health Collaborative is a part of Drexel's Dornsife School of Public Health.

Those interested in the full study, "Associations between cumulative neighborhood deprivation, long-term mobility trajectories and gestational weight gain," can read it [here](#).

More information: Irene Headen et al, Associations between

cumulative neighborhood deprivation, long-term mobility trajectories, and gestational weight gain, *Health & Place* (2018). DOI: [10.1016/j.healthplace.2018.05.007](https://doi.org/10.1016/j.healthplace.2018.05.007)

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