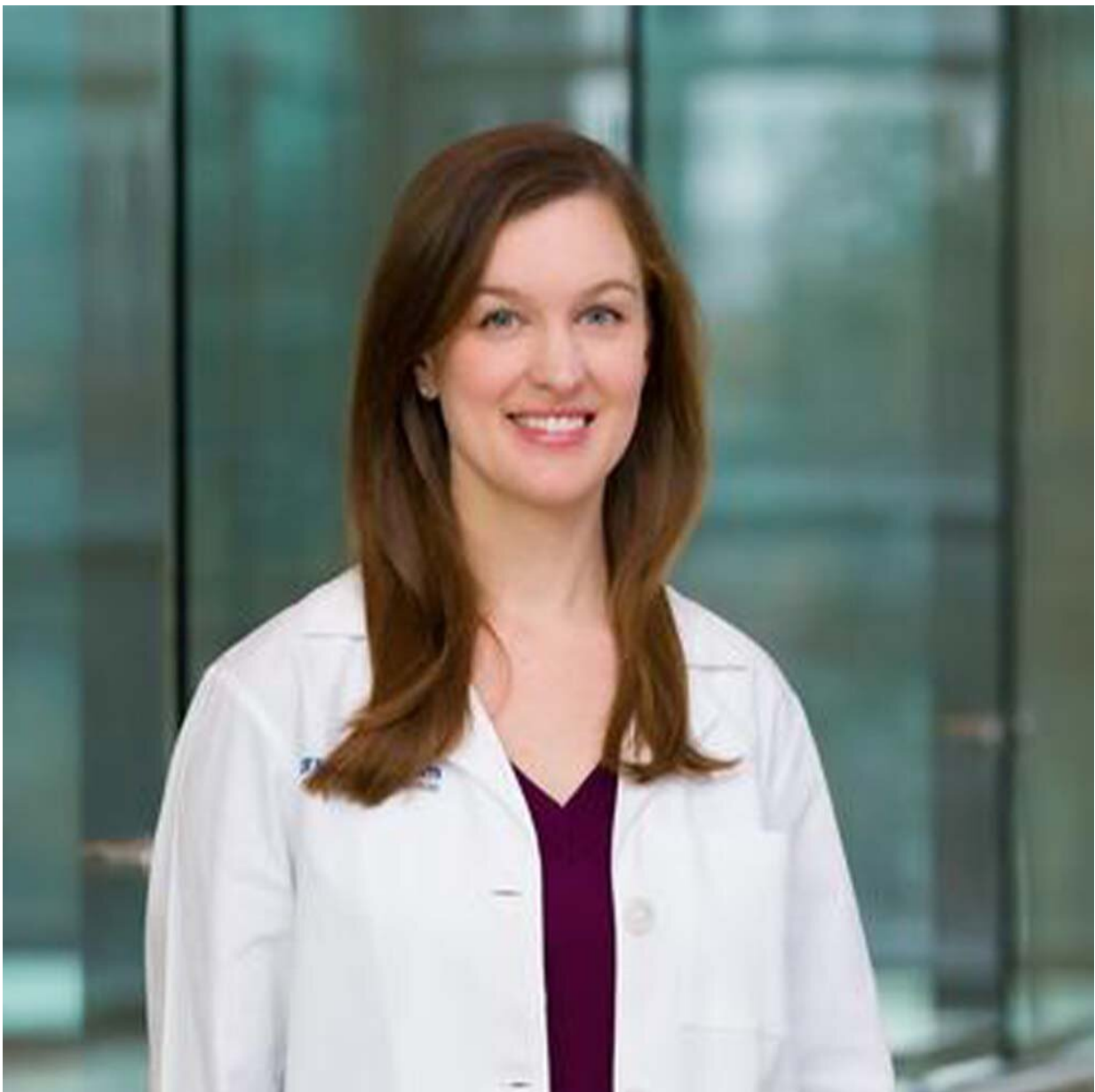


Study finds expectant women in areas with worse health disparities have greater risk of adverse pregnancy outcomes

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Elaine Duryea, M.D., Assistant Professor in the Department of Obstetrics and Gynecology. Credit: UT Southwestern Medical Center

Researchers at UT Southwestern Medical Center studied outcomes for young women at a county hospital and found that while 97% of them accessed prenatal care, those with greater social needs were associated with adverse outcomes both during pregnancy and during the early weeks of their babies' lives. The differences persisted even after adjusting for age, race, and body mass index.

"Even among [vulnerable populations](#), women in areas with worse health disparities and [social needs](#) are at greater risk of adverse outcomes," said Elaine Duryea, M.D., Assistant Professor in the Department of Obstetrics and Gynecology. "To reduce disparities, the focus must shift to include all facets of the woman's life." Dr. Duryea is also Medical Director of the Maternal-Fetal Medicine Clinic at Parkland Health & Hospital System in Dallas.

Between January 2015 and July 2020, 66,936 women delivered at Parkland Memorial Hospital, Dallas' safety net [hospital](#). Of these, 7,585 (11%) resided within the study's target ZIP codes of South Dallas, including 75241, 75224, 75216, 75215, 75203, 75172, 75154, 75146, 75141, 75137, 75134, 75115, 75232, 75237, and 75104. These women were younger, more likely to be Black, and generally had a higher body mass index (BMI). All expectant women were likely to access [prenatal care](#), with 7,320 (96.5%) in the target area and 57,677 (97.2%) outside the area attending at least one visit.

"It has become very apparent that simply addressing a new mother's

medical needs is not sufficient to help maintain her overall health and wellness after delivery," said Marjorie Quint-Bouزيد, M.P.A., RN, NEA-BC, Senior Vice President of Women & Infants Specialty Health at Parkland. "Her ongoing postpartum medical care must be in concert with an intentional attempt to assist in meeting her other social needs. Hospitals cannot do this alone but can take the lead in helping to identify the needs and collaborate with the new mother and [community partners](#) to address them."

Adverse perinatal outcomes included an increased risk of preeclampsia and abruption, as well as increased rates of preterm birth before both 28 weeks and 34 weeks. Neonatal ICU admissions and neonatal fatalities also increased.

This study follows a 2019 Community Health Needs Assessment by Parkland, which found that residents of South Dallas experience substantial health disparities. Parkland serves the medically indigent women of Dallas County and operates a neighborhood-based public health care system for pregnant [women](#).

The study is published by the *American Journal of Perinatology*.

More information: Elaine L. Duryea et al, Perinatal Outcomes among Women Identified by a Community Health Needs Assessment, *American Journal of Perinatology* (2021). [DOI: 10.1055/s-0041-1740014](https://doi.org/10.1055/s-0041-1740014)

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