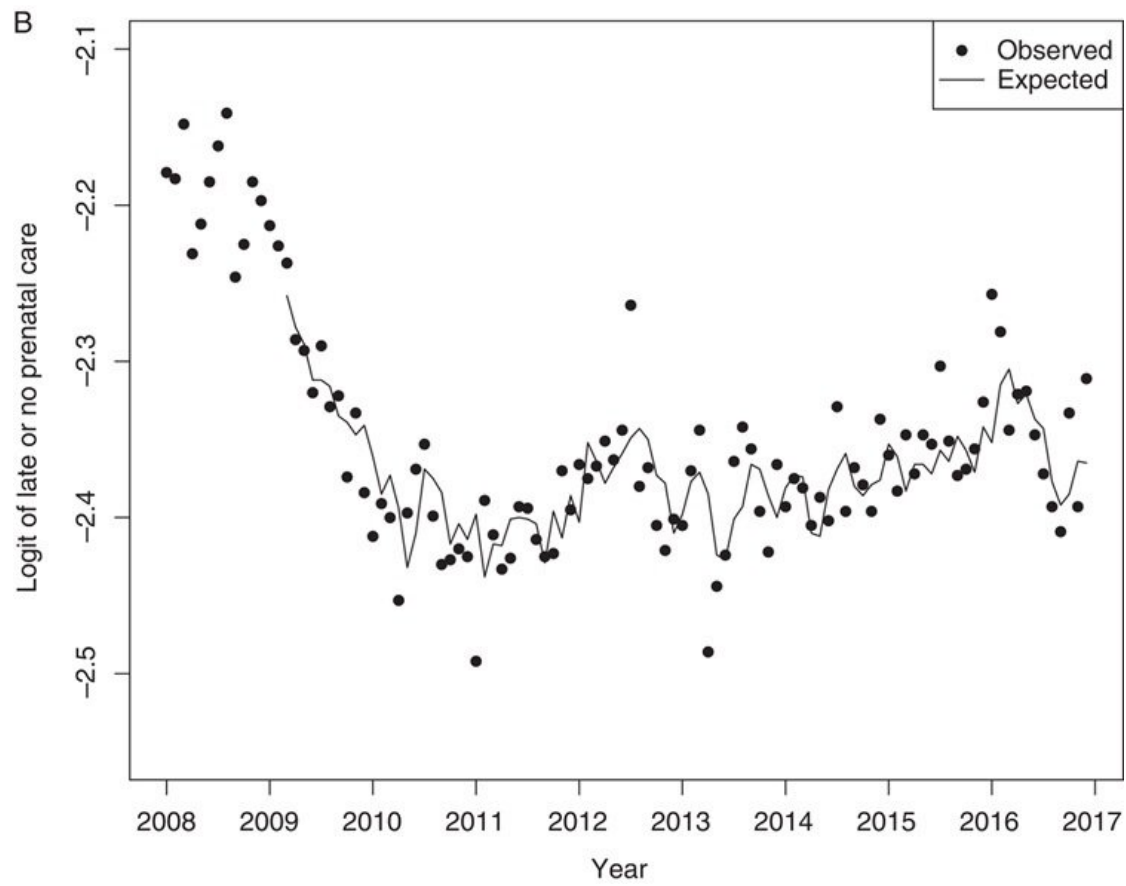
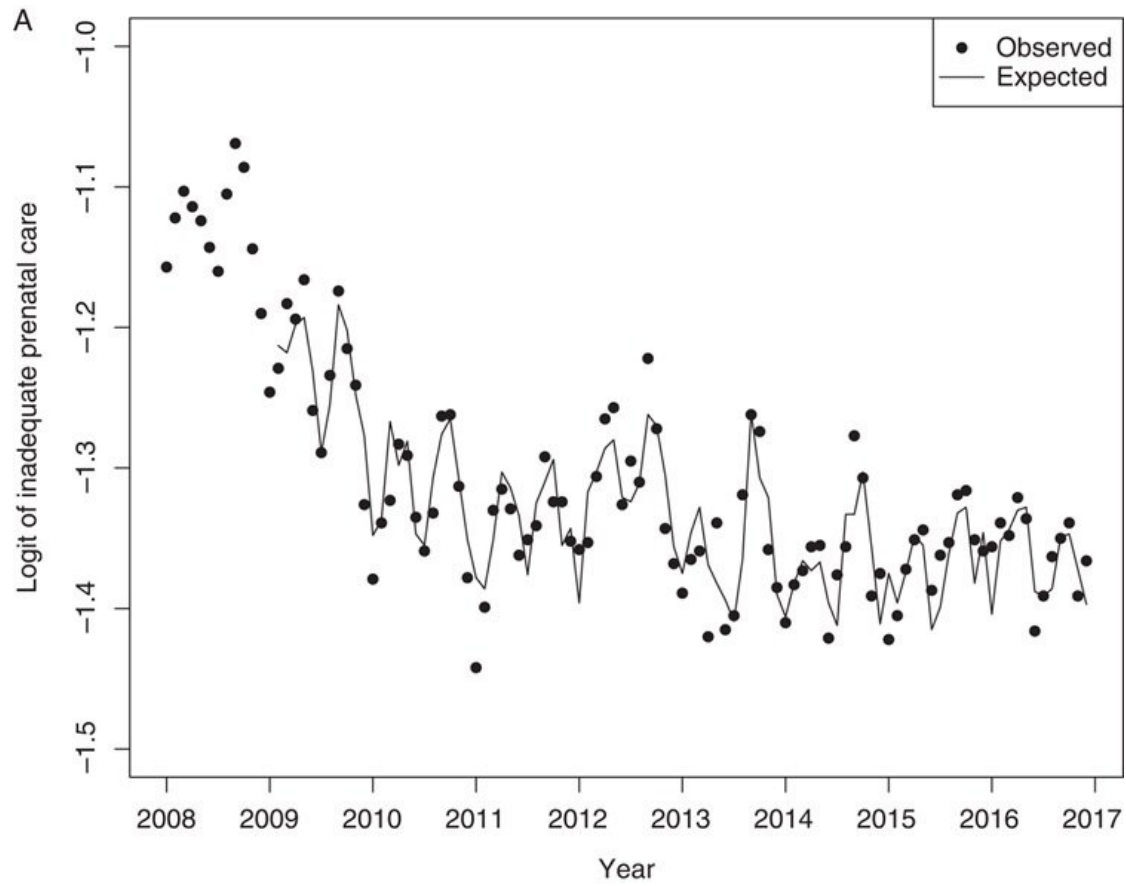


Prenatal care for foreign-born Latinx people dropped during 2016 presidential campaign

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A, Counterfactual (solid line; 13 mo lost to modeling) and observed (points) values of logits for inadequate prenatal care among monthly conception cohorts among foreign-born Hispanic pregnant people (n=108 mo, cohorts conceived from January 2008 to December 2016). B, Counterfactual (solid line; 13 mo lost to modeling) and observed (points) values of logits for late or no prenatal care among monthly conception cohorts among foreign-born Hispanic pregnant people (n=108 mo, cohorts conceived from January 2008 to December 2016). Credit: *Medical Care* (2022). DOI: 10.1097/MLR.0000000000001753

Rates of prenatal care among foreign-born Latinx pregnant people decreased below expected levels during the 2016 presidential campaign—likely reflecting the effects of harmful anti-immigrant rhetoric, reports a study in the November issue of *Medical Care*.

"The worsening shifts in [prenatal care](#) utilization we observe may serve as a bellwether for worsening outcomes among immigrant women and their families," according to the new research by Alison Gemmill, Ph.D., MPH, of Johns Hopkins Bloomberg School of Public Health, Baltimore, and colleagues.

For Latinx immigrants, rising trend in prenatal care reversed during 2016 campaign

Previous studies have found increased rates of preterm births among Latinx people following the 2016 [presidential election](#)—"perhaps the most explicit anti-immigration campaign in modern history," according to Dr. Gemmill and colleagues. They write, "Candidate Trump labeled immigrants as threats to [public safety](#) and [economic stability](#) and pledged to expand and enforce numerous anti-immigration policies,

including forced deportation of undocumented individuals."

Such racialized and anti-immigrant political discourse "may have unique deleterious effects on the health and well-being of pregnant people from targeted populations," the researchers add. One potential explanation is a "chilling effect" of anti-immigrant rhetoric, leading to underuse of timely and adequate prenatal care—particularly among pregnant people who fear deportation of themselves or their family members.

Analysis of trends before and after the 2016 presidential campaign

To assess trends in prenatal care before and during the 2016 [presidential campaign](#), the researchers analyzed national data on prenatal care use and birth certificate data from 2008 to 2017. Rates of adequate prenatal care in "monthly conception cohorts" were compared for Latinx foreign-born pregnant people and a [control group](#) of native-born, non-Latinx White pregnant people. The analysis included nearly 12.4 million deliveries in 23 states.

The foreign-born Latinx group had a higher rate of inadequate prenatal care: average 21.3%, compared to 12.6% for the non-Latinx control group. Average percentage of births with late or no prenatal care was 8.7% versus 4.6%, respectively. From 2008 to 2016, prenatal care use increased for both groups, with much larger improvements among foreign-born Latinx pregnant people.

Analysis of the seven monthly conception cohorts exposed to the election before the third trimester showed "no unexpected changes" in rates of inadequate prenatal care. However, for foreign-born Latinx pregnant people exposed to the Trump campaign, the likelihood of inadequate prenatal care increased beginning in June 2015. In the same

group, the rate of late/no prenatal care increased beginning in January 2016.

The odds of both inadequate and late/no prenatal care increased by nearly 5%. The upward shifts persisted through the remainder of the study period, which ended with pregnancies conceived around December 2016. Inadequate prenatal care did not appear to explain the previously reported increase in preterm births among Latinx people associated with the 2016 election, the researchers note.

"Nevertheless, we find that prenatal care utilization among this group declined below expected levels during the presidential campaign and remained below expectation through the end of our study period, which gives cause for concern," Dr. Gemmill and coauthors write. They add, "[P]olicy makers, [health care providers](#), and public health leaders must work to combat harmful anti-immigrant rhetoric, policies, and enforcement practices to ensure safer and healthier living environments for immigrants and their families."

More information: Anna Marie Pacheco Young et al, The 2016 Presidential Election and Prenatal Care Utilization Among Foreign-born Hispanic Pregnant People, *Medical Care* (2022). [DOI: 10.1097/MLR.0000000000001753](#)

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