

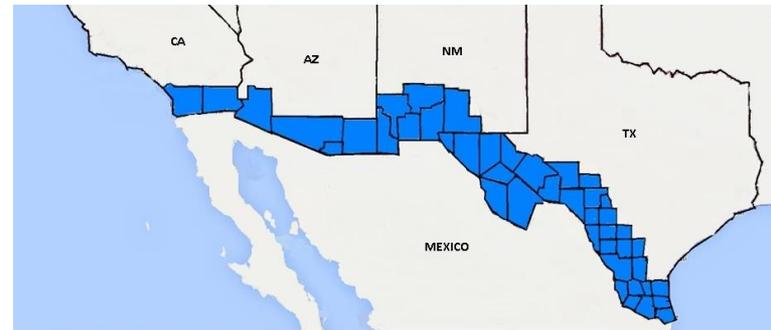
# Quality of prenatal care information on birth certificates in border communities

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# Problem



- Hispanic women living in the US-Mexico border region have higher rates of late/no prenatal care (PNC), according to US birth certificate data<sup>1-3</sup>
  - 11% of border Hispanic vs. 8% of US Hispanic women
  - 5% of border non-Hispanic white (NHW) vs. 5% of US NHW women
- Late/no PNC may contribute to maternal and infant health problems
- Hispanic women in the region have higher rates of other adverse birth outcomes<sup>1,3</sup>
  - Low birth weight
  - Preterm birth
  - Cesarean birth
  - Adolescent birth

<sup>1</sup>Preventing Chronic Disease 2013;10:130019

<sup>2</sup>Medical Care 2015;53:700–707

<sup>3</sup>Plos One, Sept 5, 2018. doi.org/10.1371/journal.pone.0203550



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# Could poor birth certificate data be part of the problem?

- Birth certificates are a critical source of information about maternal and infant health in border counties
- All PNC, regardless of where it occurred, should be recorded <sup>4</sup>
- Anecdotal reports raise questions about the accuracy and completeness of PNC information recorded on birth certificates in border counties
- Cross-border travel for health services is common <sup>5-7</sup>
- Residents have records in two countries and in two languages

<sup>4</sup>Rev Panam Salud Publica 2015;37(2):76–82

<sup>5</sup>Rev Panam Salud Publica. 2009;26(2):95–100

<sup>6</sup>J Immigrant Minority Health 2011; DOI 10.1007/s10903-011-9453-x

<sup>7</sup>National Vital Statistics System. <https://www.cdc.gov/nchs/nvss/facility-worksheets-guide.htm?Sort=URL%3A%3Aasc>

# Study objective

- Explore prenatal care recording practices on birth certificates at hospitals in the region

## Method

- Online survey of birth clerks at border county birthing facilities, Oct-Dec 2019
  - 17 birth clerk/hospital practices and assessments
  - 30% participation (17/57)

# Results

Practices/assessments	Response	N	%
'0' or 'None' PNC is recorded on the birth certificate	Only when mother says none, doctor notes none, or provider states none received	6/17	38
	When there is no record in chart or the only record is from Mexico/other country	10/17	59
Translation available for PNC records	Yes	13/17	76
% of women who receive some PNC in Mexico/ other country (median)			40
Changes needed to improve accuracy of PNC variables on BC	Improved administrative/hospital policies	4/17	24
	Better information from PNC providers	10/17	59
	Clear state level policies	3/17	18
	More training from state registrar's office	3/17	18
	Other	4/17	24

# Conclusions

- Wide variation in recording practices
- CDC guidance to include PNC received in Mexico/other countries inconsistently followed
- Policies that discount such PNC overestimate rates of late/no PNC
- Negative perceptions of Mexican PNC expressed by some clerks (not shown) suggest biases that may impact health data beyond PNC

# Limitations

- Small number of hospitals and low response (30%)

# Question

- How can we best use what we learned here to examine the broader issue of recording, coordinating and monitoring cross-border care for the border MCH population?