Addressing Prenatal Care for HOPE Clinic Patients and Immigrant Asian American Women
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### Background

**HOPE Clinic**
- Established as a Federally Qualified Health Center in 2012
- Has four locations in Houston (Alief, West, Main, Aldine)
- Has Obstetrics and Gynecology services at all locations (pregnancy testing, prenatal care, family planning counseling)

**Maternal Upstream Management (MUM) Project**
- Purpose of project is to address high maternal mortality and poor birth outcomes in the Alief area of southwest Houston (Zip codes: 77407, 77083, 77077, 77099, 77072)
- Began in October 2019, and paused in March 2020

*Health Resources and Services Administration Data showed that at HOPE Clinic from 2016 to 2018:*
- **Prenatal care access** decreased from 68.69% to 53.83%
- Percentage of **newborns with low and very low birth weight** increased from 3.25% to 10.14%

### Research Goals

1. Address the research question:
   **What are disparities in prenatal care for ethnic minorities in Houston, Texas?**

2. Analyze MUM survey responses
3. Engage in extant research on perceptions of prenatal care for Asian American immigrant women

### Methods

**MUM Project**
- Survey questions were based on the Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences (PRAPARE)
- HOPE Clinic volunteers surveyed women in the waiting room of HOPE Clinic Main on an iPad
- Surveying was paused in March 2020 due to COVID-19 pandemic with 32 survey responses

**Immigrant Asian American Women Perceptions**
- Determining surveying locations in Houston (Chinese Community Center Early Learning Center, Progress Beauty College, Glitter Nails, YMCA International)
- IRB study was imagined to have a 10 minute survey, and an optional 30-minute semi-structured interview

### Barriers to Prenatal Care

Barriers include: language, culture, socioeconomic factors, access to technology/Internet

### Summary of Findings

**Existing Data** from the Health of Houston Survey, and HOPE Clinic can better align survey questions and understand which factors are greatly associated with worsening maternal health outcomes.

Using a **multifaceted approach** by both surveying and interviewing (individual, focus groups) can provide a better understanding how factors like housing, ethnicity, and insurance can affect prenatal care behaviors and perceptions.

**Disaggregation** of data by ethnicity can prevent misleading data that overlooks low performing ethnic groups. This has been the case for Asian Americans.

**Varied Accessibility** to healthcare information and telemedicine can further strengthen healthcare disparities during the pandemic for those without Internet/technology.

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