

PRENATAL CARE IN RURAL GEORGIA

ANALYZING ACCESS AND INNOVATIVE INITIATIVES



Maternity care deserts are areas where access to maternity care services, including birthing hospitals and centers, as well as practicing obstetricians and certified nurse midwives, is limited or absent. In Georgia, 55 of Georgia's 159 counties (34.6%) are defined as maternity care deserts compared to 32.6% of counties nationally (see Figure 1). An additional 25 of Georgia's 159 counties (15.7%) have low access to maternity care.

In Georgia, there are 6,571 babies born in maternity care deserts annually, representing 5.3% of all births. Only 3.2% of Georgia's maternity health care providers practice in maternity care deserts.¹³

Figure 1: Access to Maternity Care by County

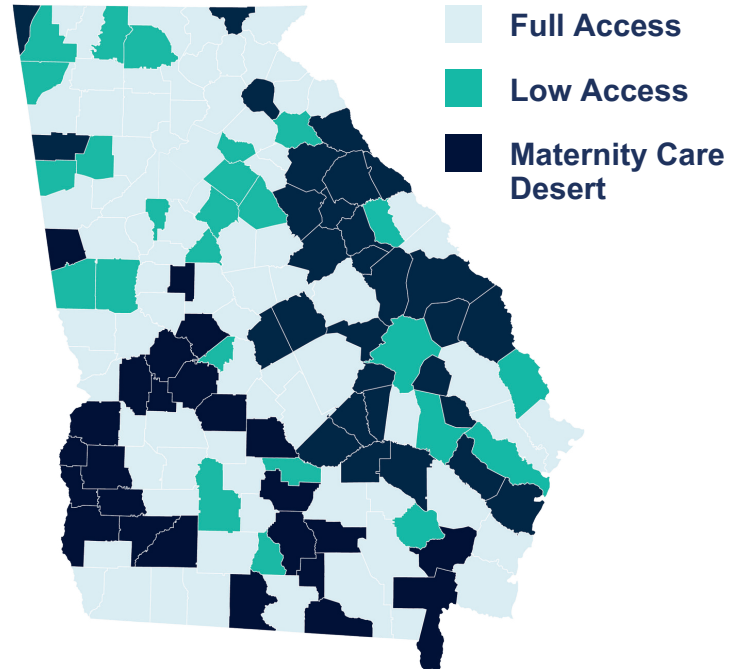
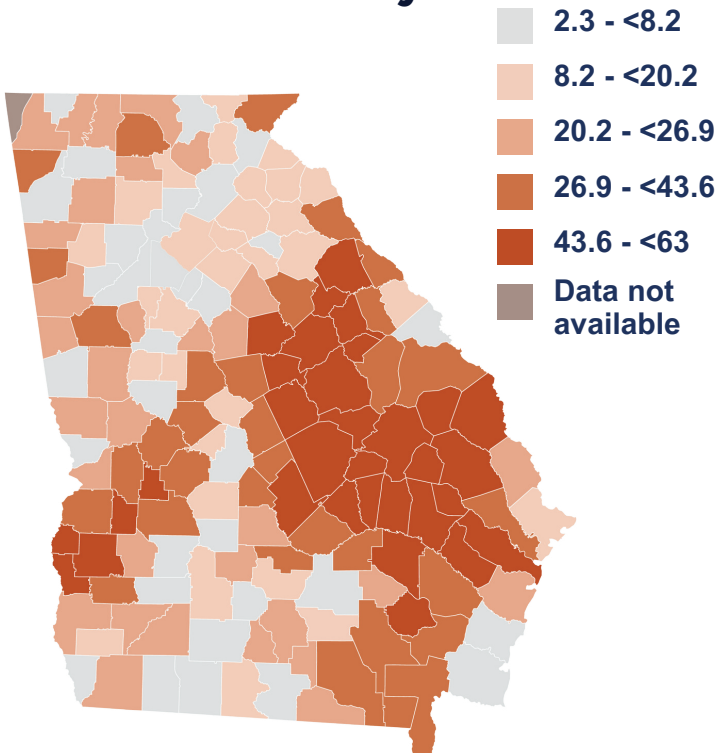


Figure 2: Average Distance in Miles to Birthing Hospital by County



Nationwide closures of birthing hospitals have contributed to increased distance and travel time to care, especially in rural areas. Overall, in the U.S., women travel 9.7 miles to their nearest birthing hospital, but in the state of Georgia, women travel 13.5 miles, on average, to their nearest birthing hospital (see Figure 2).

- Women living in counties with the highest travel times (top 20 percent) could travel up to 63 miles, on average, to reach their nearest birthing hospital.
- 15.8% of women in Georgia have no birthing hospital within 30 minutes of where they live.
- In rural areas across Georgia, 61% of women live over 30 minutes from a birthing hospital compared to 13% of women living in urban areas.
- Women living in maternity care deserts traveled three times farther than women living in areas with full access to maternity care in Georgia.¹⁴

Existing Initiatives

Numerous initiatives from a variety of stakeholders, including state government, CMOs, and nonprofits, that seek to improve maternal and infant health outcomes are underway across the state, including many specifically focused on access to prenatal care and/or rural Georgia. The most relevant initiatives are highlighted below in two categories:

The Development and Preparation of Georgia's Prenatal Care Workforce

- Service Cancelable Loans for Rural Health Care Professionals
- Rural Physician Tax Credit
- Doula Medicaid Coverage Pilot
- Implicit Bias Training in Birthing Hospitals

Increasing Access to Services that Support Healthy Pregnancies

- Georgia's Home Visiting Programs
- PEACE for Moms: Perinatal Psychiatry Access Program
- Healthy Start Programs
- Uber Health Transportation Pilot

Opportunities to Improve Prenatal Care Access in Rural Georgia

In addition to existing initiatives, the authors identified potential opportunities to improve access to prenatal care in rural Georgia. The opportunities outlined here are relevant to a diversity of stakeholders, acknowledging that the severity of the problem and complexity of the barriers call for a cross-sector, collaborative approach. These opportunities are grounded in research and seek to capitalize on Georgia's unique strengths while addressing challenges to improve health outcomes for all.

1. Increase strategies within Georgia's institutions of higher education to recruit a diverse health care workforce
2. Increase access to telehealth
3. Identify and address barriers to providing group prenatal care
4. Increase access to transportation
5. Create special focus on maternal mental health within existing Certified Peer Specialist (CPS) model
6. Simplify and streamline the process for eligible pregnant women to be enrolled in the Special Supplemental Assistance for Women, Infants, and Children (WIC) program
7. Implement a multifaceted, multiplatform outreach campaign

Read more about these existing initiatives and opportunities in the full report at: <https://bit.ly/3Vrjgcl>