

Access to prenatal care and poverty in Colombian regions: before and in the pandemic





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OBJECTIVE

This study aimed to describe the relationship between poverty and access to prenatal care (APC) in Colombia. before (2019) and during the first pandemic year (2020)

METHODS

An ecological study measuring regional inequalities of access indicators to prenatal care in Colombia was carried out for the years 2019 and 2020. Adequate access to prenatal care was defined as having four or more consultations before delivery. Inequalities were measured by estimating incidence rate (IR). rates or proportion difference (DR). and Population-attributable risk (PAR). Poverty was measured using the and Multidimensional Poverty Index (MDPI) as a socioeconomic proxy. Data was obtained from the national agency for population statistics – known as DANE for its initials in Spanish.

MDPI = 5 dimensions of poverty: household education levels, children and youth conditions, work, health and public services access, evaluated by 15 questions. MDPI provides a cutoff to classify a home as multidimensionally poor when it meets the criteria for at least 5 of the 15 items. The MPI provides a cut-off point of 20% of the live births in each quintile to classify a household as multidimensionally poor when it meets the criteria for at las 5 of the 15 elements.

RESULTS

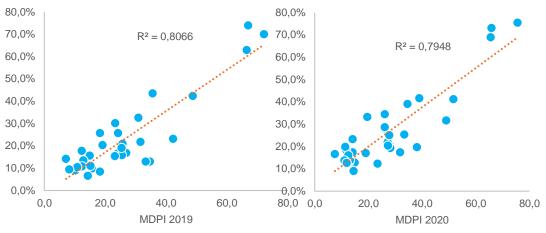
In 2019 (pre-pandemic) and 2020 (pandemics) $^{80,0\%}$ Colombia reported 642,660 and 629,402 live birth $^{70,0\%}$ (-2.1%) and APC deficit was 16.0% and 19.6% $_{60,0\%}$ respectively. In 2019 and 2020 the inequality absolute (DR) in APC deficit was 67.4% and 66.5% $^{50,0\%}$ respectively. Likewise, PAR was 59.0% and 54.1%, $^{40,0\%}$ respectively.

MDPI explained the APC deficit in 2019 and in 2020 $_{20,0\%}$ (\mathbf{R}^2 2019: 80.66% versus \mathbf{R}^2 2020: 79.48%). The β coefficient of the lineal regression for 2019 was 0,9242 (Cl95%:0.7585-1.090) and by each percent point that the MDPI decreased in the departments an increment in the APC of 0.9242 percentage points was observed. For 2020. this increment was 0.8792 (Cl95%:0.7155-1.0419).

In 2019 and 2020 departments (Q5) with more poverty had 50,541 (7,9%) and 53,096 (8,4%) out total of live birth, respectively.

In 2019 departments (Q5) (Sucre, Amazonas, Chocó, La Guajira, Vaupés, Guainía and Vichada) had an average APC deficit 52.6%, four times more than those with less poverty (Q1). In 2020 (Q5) had an average APC deficit 50.2%, or three times more than those with less poverty (Q1)

APC déficit vs poverty (MDPI) in Colombia 2019 - 2020



APC déficit by poverty quintil (MDPI) in Colombia 2019 - 2020



CONCLUSIONS

Colombia's health sector reform has been recognized for its universal health coverage (UHC) scheme. However, for 2019, the effective coverage rate was 74.4% and the regions with the highest poverty have greater access problems to health services like prenatal care.