TARRANT COUNTY PUBLIC HEALTH

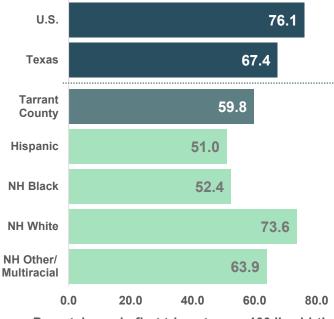
DATA BRIEF



Prenatal Care in Tarrant County

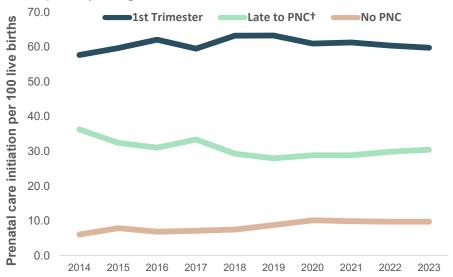
- In 2023, **59.8%** of Tarrant County live births received prenatal care (PNC) in the first trimester
- The percentage of **Tarrant County** live births that received prenatal care in the first trimester was significantly lower than Texas and the United **States**
- Compared to non-Hispanic Whites, the percentage of Tarrant County live births that received prenatal care in the first trimester was significantly lower among those who were Hispanic, non-Hispanic Black, and non-Hispanic Other/Multiracial
- In 2023, 60.4% of Tarrant County live births had adequate or more prenatal care utilization?, which was below the Healthy People 2030 goal of 80.5%
- Live births with inadequate prenatal care utilization?, compared to adequate prenatal care utilization, had significantly higher rates of:
 - Prematurity
- NICU admission
- Low birth weight
 Infant mortality

Figure 1. Prenatal care in first trimester among live births, Tarrant County, Texas, and the United States, 2023*



Prenatal care in first trimester per 100 live births





The proportion of live births that received prenatal care in the first trimester increased significantly from 2014-2023*; However, so did the proportion of live births that received no prenatal care during pregnancy

*2022 and 2023 data are provisional and subject to change, Prenatal care utilization categories are defined at the top of page 2, Late to PNC = starting prenatal care in the 2nd or 3rd trimester, NH = Non-Hispanic; All significant differences detected with a p-value < 0.05 Data sources: Texas Department of State Health Services, Centers for Disease Control and Prevention OCTOBER 2025 TARRANT COUNTY PUBLIC HEALTH Data Brief provided by: Statistical Analysis Team

The Adequacy of Prenatal Care Utilization Index was calculated to examine the use of prenatal care among Tarrant County live births. This index classifies the overall **utilization** of prenatal care during pregnancy into **1 of 4 categories** based on the timing of prenatal care, the number of visits, and the infant's gestational age. The index **does not measure the quality** of prenatal care.

Figure 3. Prenatal care utilization among Tarrant County live births,

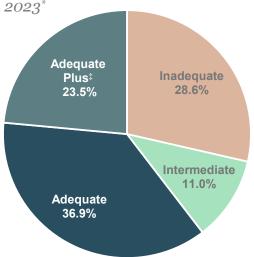


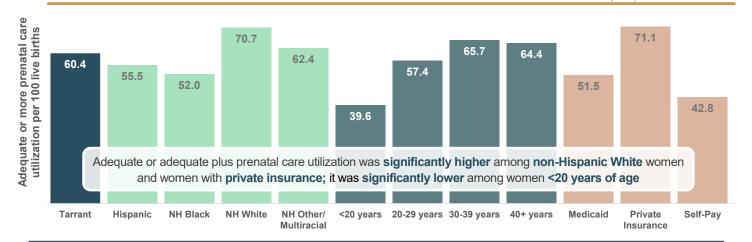
Figure 4. Birth characteristics and outcomes among Tarrant County live births with adequate and inadequate prenatal care utilization 2023*

care attitzation, 2023	Prenatal Care Utilization		
	Adequate	Inadequate	Difference
1st born child	40.1%	39.8%	
Preterm (<37 weeks gestation)	4.9%	11.7%	
Low birth weight (<2,500 grams)	4.5%	10.1%	
Cesarean section	31.9%	31.8%	
Maternal labor and delivery complications	0.5%	0.5%	
Infant NICU admission	5.3%	11.1%	
Infant mortality rate, 2019 (infant deaths per 1,000 live births)	2.38	6.63	1

Note: Any up or down arrows denote statistically significant difference between infants with adequate prenatal care utilization vs inadequate prenatal care utilization (p<0.05)

Figure 5. Adequate and adequate plus[‡] prenatal care utilization among Tarrant County live births by select characteristics, 2023*

Healthy People 2030 Goal: 80.5



With regular prenatal care women can:

- Reduce the risk of pregnancy complications by discussing and managing healthy lifestyle choices, potential exposures, and existing conditions
- Reduce the fetus's and infant's risk for complications by discussing strategies to promote healthy fetal development
- Help ensure the medications they take are safe, including dietary and herbal supplements

Resources:

- Help Me Grow North Texas Perinatal Connections: [helpmegrownorthtexas.org] support and connections to community resources during pregnancy and through one year after delivery
- North Texas Area Community Health Centers -Joyful Beginnings: [ntachc.org] support and resources for expectant mothers and their families up to a year postpartum
- 2-1-1 Hotline: [call 2-1-1] connects people in need to the services that can help

^{*2022} and 2023 data are provisional and subject to change, ‡ Adequate Plus could be a result of high risk pregnancy requiring additional care NH = Non-Hispanic; All significant differences detected with a p-value < 0.05