

## **Association of Exposure to Trump's Presidency on the Perinatal Health of Minoritized Populations**

**Background** Recent research suggests that chronic stress associated with Donald Trump's political career has had repercussions on the health and well-being of marginalized groups. During his political career, negative rhetoric around immigration and support of White Nationalism surged. The impact of sociopolitical stress can affect the health of mothers of minoritized racial and ethnic groups, amplifying the vulnerability of pregnant women who experience race-based discrimination.

**Methods** We used publicly available US birth certificate data for 11,158,445 mother-infant dyads to explore racial and ethnic disparities in the occurrence of adverse perinatal outcomes including preterm birth (PTB), small for gestational age (SGA), and Neonatal Intensive Care Unit (NICU) admission during the Trump candidacy and presidency. We used multivariable logistic regression models for each outcome and year of exposure to the Trump candidacy/presidency, comparing minoritized mothers to their Non-Hispanic White counterparts. All models controlled for maternal age, educational attainment, and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) enrollment.

**Results** Hispanic White mother exhibited a slight overall increase in the odds of PTB over the Trump era (aOR 1.02 to 1.10). Their odds of SGA fluctuated from year to year, ultimately increasing from the pre-Trump year of 2014 (aOR 9.96 to 1.09). Their advantage of lower odds of NICU admission grew wider in comparison to Non-Hispanic White mothers (aOR 9.084 to 0.93). Non-Hispanic Black mothers saw no substantial changes in PTB or NICU admission rates, but their odds of SGA significantly rose (aOR 1.70 to 1.87). The Hispanic Black group, while the smallest studied, showed some variation in odds of PTB, SGA, and NICU admission, but with no statistically significant shifts.

**Conclusions** The association of year of Trump candidacy/presidency with perinatal health disparities were variable across the study period. The US population was exposed to a sociopolitical setting of hateful and threatening rhetoric about minoritized groups that could be associated with the increase in PTB and SGA births among Hispanic White mothers. As we look toward the possibility of another Trump presidency it is important for healthcare institutions to be aware of the potential impact of the sociopolitical stressors associated with his presidency on the perinatal health of vulnerable minoritized populations and take proactive steps to support their needs during pregnancy.