PRAMS Surveillance Report Alabama 2009

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PRAMS SURVEILLANCE REPORT ALABAMA 2009

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INTRODUCTION AND METHODS

INTRODUCTION

Since February 1993, the Alabama PRAMS survey has been collecting data on mothers and their newborns whose births occurred after November 1, 1992. The collected information includes responses to numerous questions about the mothers' experiences with the health care system during pregnancy and delivery, as well as postpartum care for both the mother and infant. Data are also collected on maternal behaviors and experiences which might have influenced the outcome of the pregnancy and the health of the infant.

PRAMS collects information for pregnancies resulting in live births only. No information is available through PRAMS about the characteristics of women whose pregnancies end in fetal death or induced termination of pregnancy. Data for fetal deaths and induced terminations of pregnancy are collected through the vital events system and are available in other publications.

METHODS

The survey is conducted according to the methodology developed by Donald Dillman and discussed in his book entitled *Mail and Telephone Surveys: The Total Design Method*. The survey questionnaire is sent to a sample of new mothers randomly selected from the birth certificate master file, two to four months after the baby is born. To maximize the likelihood of participation by those selected, each mother is sent up to five mailings including three copies of the questionnaire. If no response has been received after the fifth mailing, up to fifteen attempts are made to contact the mother by telephone.

Beginning with the 2000 PRAMS survey, a Spanish language survey is sent along with an English language survey to mothers who are listed as 'Hispanic' on the birth certificate. Currently, Alabama has Spanish speaking interviewers.

The sample is selected through a complex, stratified sampling design. Mothers of low birth weight infants and those whose deliveries are paid by Medicaid are over sampled. Roughly equal numbers of mothers are selected from each of four sample strata; Medicaid low birth weight, Medicaid normal birth weight, non-Medicaid low birth weight, and non-Medicaid normal birth weight.

The figures given in this publication are weighted to represent the 59,344 live births which occurred in Alabama in 2009 to women who were Alabama residents at the time of the births, excluding certain multiple births. The weights adjust for differential response rates by mother's marital status, age, and educational attainment. For infants born during 2009, 709 questionaires were completed from 1,231 sampled. The overall **unweighted** response rate was 57.6 percent, and the **weighted** response rate was 58 percent. Because the CDC requires an overall weighted response rate of 65 percent to insure data is of the highest quality, caution should be used in interpreting data reported from 2009.

This year, 95% confidence intervals have been included in the analyses. Line graphs of the major topics have been included to identify trends and to determine progress in objectives of interest. These trend charts may be useful to programs that are interested in PRAMS data.

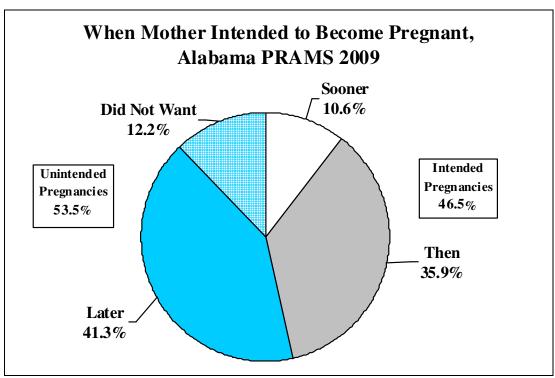
2009 Alabama PRAMS Surveillance Report Highlights

- 53.5 percent of Alabama births were unintended.
- 58.7 percent of Alabama mothers did not take any multivitamins before becoming pregnant.
- 15.8 percent of Alabama mothers indicated they continued smoking during pregnancy.
- 13.2 percent of Alabama mothers reported drinking alcoholic beverages on a weekly basis during the last three months of pregnancy.
- 73.6 percent of Alabama mothers reported having a medical problem, such as nausea or vomiting, preterm labor, high blood pressure, kidney or bladder infections, vaginal bleeding, or diabetes during pregnancy.
- 58.7 percent of Alabama mothers participated in the Supplemental Food Program for Women, Infants, and Children (WIC) during pregnancy.
- 64.8 percent of Alabama mothers initiated breastfeeding their infants.
- 54.2 percent of Alabama women who did not plan to become pregnant reported using no birth control when they became pregnant.
- At the time of the survey (postpartum), 88.1 percent of mothers were using some form of birth control.
- 36.1 percent of Alabama mothers reported they moved to a new address during their pregnancy.
- 15.8 percent of Alabama mothers reported they *always or almost always* felt down, depressed, or hopeless since the birth of their baby. 56.8 percent reported feeling this way *sometimes or on rare occasions*.
- 6.6 percent of Alabama mothers reported being *diagnosed* by their doctor or health care worker with depression since the birth of their infant.
- 32.6 percent of Alabama mothers reported having a dental cleaning during their pregnancy.
- 62.2 percent of Alabama mothers most often lay their babies on their backs for sleeping.

Mothers' General Comments

- "I feel very good that you chose me to fill out this package. I would also like to say to all the mothers/families out there that have lost a baby that you are not alone."
- "This is a good program you have going. I wished you would have sent me this package a year ago. I lost my twin boys at 22 weeks. The reason is unknown."
- "The health of mothers and babies in Alabama is good but things could be better. The health of me and my child is great and I really appreciate Alabama and its care for mothers' and babies' health."
- "Thank you for letting me fill out the survey. I'm a mother that lost her baby seven hours after delivery. It is so hard not to think about it but that's why you got family support. But I would like to know why it happens to some and not others."
- "Thank you for sending this information to me. It really helped me think about a lot."
- "I am glad to know there is a program like PRAMS. I lost my first pregnancy due to
 miscarriage, and while I know that happens more often than realized, it is still very
 difficult. I appreciate anything that is being done to help understand problems in
 pregnancies and why children are born with various issues."
- "I think it's great that someone is trying to help women and I wish someone would have helped me when I had a miscarriage with my first. I wasn't very far along, only a few weeks, but it would have been nice."

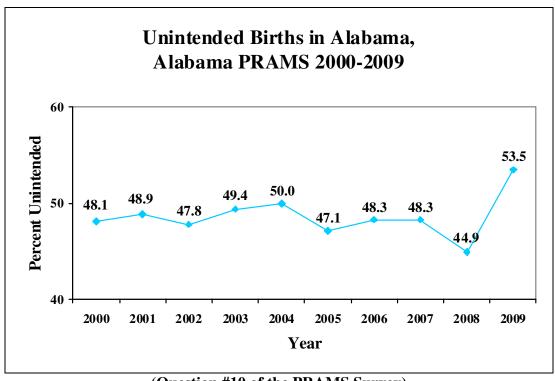
INTENDEDNESS OF BIRTHS



(Question #10 of the PRAMS Survey)

Pregnancies that are unwanted or mistimed are an important health care issue. The health of the infant is directly affected by the mother's attitude, behaviors, and experiences during the pregnancy. In 2009, 53.5 percent of Alabama mothers reported their pregnancies as *unintended*. There are 41.3 percent of Alabama women said they wanted to be pregnant *later*, and 12.2 percent said they did not want to be pregnant then or at any time in the future. On the other hand, 46.5 percent of Alabama mothers reported either wanting to be pregnant *then* (35.9 percent) or even *sooner* (10.6 percent). The Healthy People 2010 Objective is to increase the proportion of pregnancies that are intended to 70 percent. Alabama women are still far from meeting this goal.

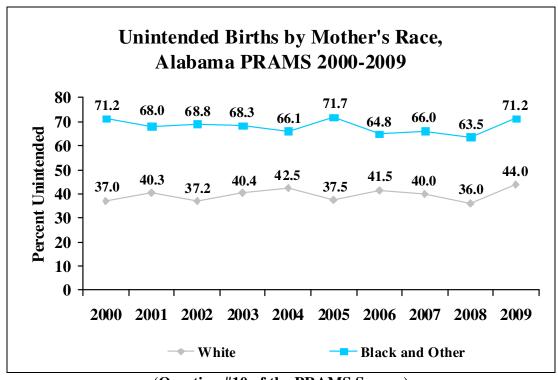
	95 % Confidence Intervals										
Intention Sooner Then Later Did Not Want Intended Unintended											
Percent	8.5-13.1	32.5-39.5	37.7-45.1	9.8-15.0	42.9-50.2	49.8-57.1					



(Question #10 of the PRAMS Survey)

From 2008 to 2009, there was a 19.2% increase in unintended births in Alabama. The difference from 2008 to 2009 is statistically significant.

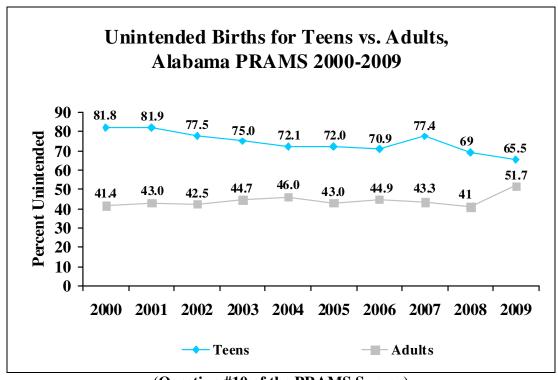
	95 % Confidence Intervals											
Year	Year 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009											
	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
%												
	45.2-51.1	46.0-51.7	44.8-50.8	46.3-52.5	46.5-53.5	43.7-50.6	44.9-51.8	44.8-51.8	41.4-48.5	49.8-57.1		
Unintended												



(Question #10 of the PRAMS Survey)

For the past ten years, the percentage of unintended births has been considerably higher among black and other race women than among white women. From 2008-2009, the percentage of unintended births to black and other women increased by 12.1 percent, and the percentage of unintended births increased by 22.2 percent from 2008-2009 among white women. The percent change in both populations is not statistically significant.

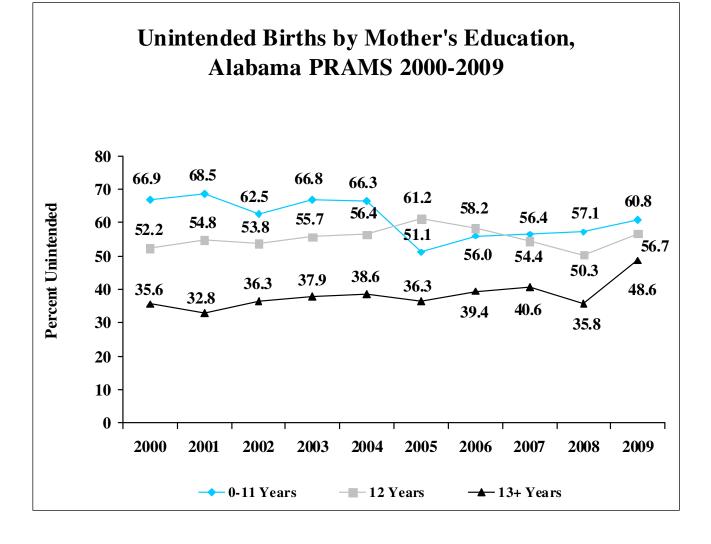
	95 % Confidence Intervals												
Year	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009			
White	33.3-40.6	36.7-43.9	33.6-40.8	36.6-44.3	38.3-46.8	33.6-41.6	37.5-45.7	35.9-44.2	32.1-40.2	39.7-48.4			
Black & Other	66.3-76.1	63.1-72.9	63.9-73.7	62.9-73.3	59.7-71.9	65.3-77.3	58.3-70.8	59.8-71.7	56.7-69.9	64.7-77.0			



(Question #10 of the PRAMS Survey)

An inverse correlation exists between unintended births and maternal age, or as maternal age increases the percent of unintended births decreases. Teens, 10 to 19 years of age, have a higher percentage of unintended pregnancies than adult women. One possible explanation for this trend is that older women are more capable of controlling the timing and spacing of pregnancies than are teenagers. From 2007 through 2008, a decrease of 10.9 percent in the percentage of unintended pregnancies among Alabama's teenagers was seen. From 2008 to 2009 there was a 5.1 percentage decrease. The highest percentage in eleven years of unintended pregnancies among adult women was reported in 2009. The increase in unintended in adults was statistically significant.

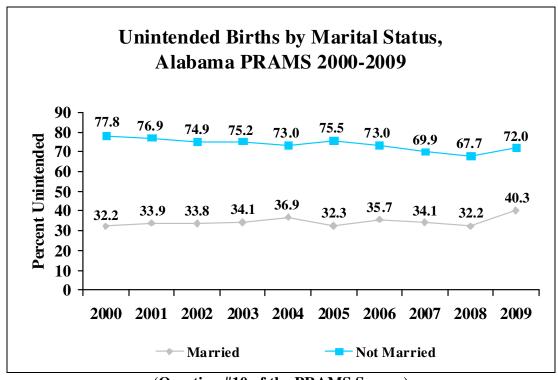
	95 % Confidence Intervals											
Year	Year 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009											
Teens	75.8-87.7	76.0-87.8	71.4-83.6	66.9-81.6	63.5-79.3	62.9-79.5	61.2-79.1	67.7-84.8	59.0-77.4	54.6-75.0		
Adults	38.1-44.7	39.8-46.2	39.2-45.8	41.3-48.1	42.3-49.9	39.3-46.8	41.2-48.6	39.7-47.1	37.3-44.9	47.7-55.6		



(Question #10 of the PRAMS Survey)

An inverse correlation exists between unintended births and a mother's education, or as the amount of formal education increases, the percent of unintended births decreases. However in 2005, a 22.9% decrease in unintended pregnancies was reported among women with the lowest level of education, but from 2005-2009, there was a 19.0% increase among women with the lowest level of education. And a slight increase was seen among women with 12 years of education. There was a 35.8% increase in unintended births among women with the highest levels of education from 2008 to 2009. This change was statistically significant.

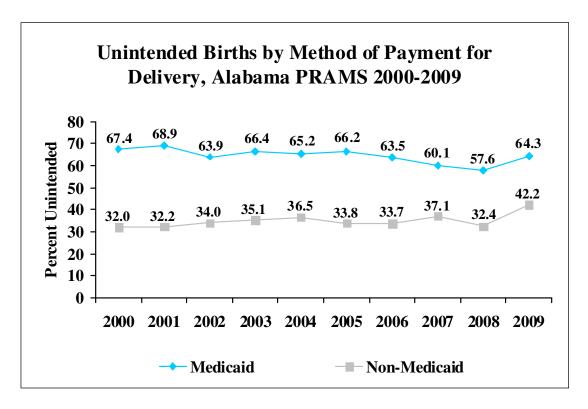
	95 % Confidence Intervals												
Year/ Educat ion	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009			
0-11 yrs.	60.5-73.2	63.0-74.0	56.4-68.7	59.9-73.0	58.2-73.6	43.2-58.8	48.0-63.8	47.6-64.9	48.4-65.3	52.0-69.0			
12 yrs.	46.9-57.4	49.3-60.2	48.2-59.3	49.9-61.4	49.9-62.6	54.8-67.3	51.4-64.8	47.9-60.8	43.6-56.9	49.8-63.3			
13 plus yrs.	31.0-40.2	28.4-37.2	31.9-40.7	33.6-42.4	33.8-43.7	31.5-41.3	34.8-44.2	36.1-45.3	31.2-40.7	43.5-53.7			



(Question #10 of the PRAMS Survey)

The percent of unintended births to unmarried women was 78.7 percent higher than that of married women. From 2008-2009, there was a 6.4 percent increase of unintended births among unmarried women and 25.2 percent increase of unintended births among married women. Abstinence, postponement of childbearing and improved contraceptive use would be instrumental in the reduction and elimination of unintended births, especially among unmarried women for whom the consequences tend to be greatest.

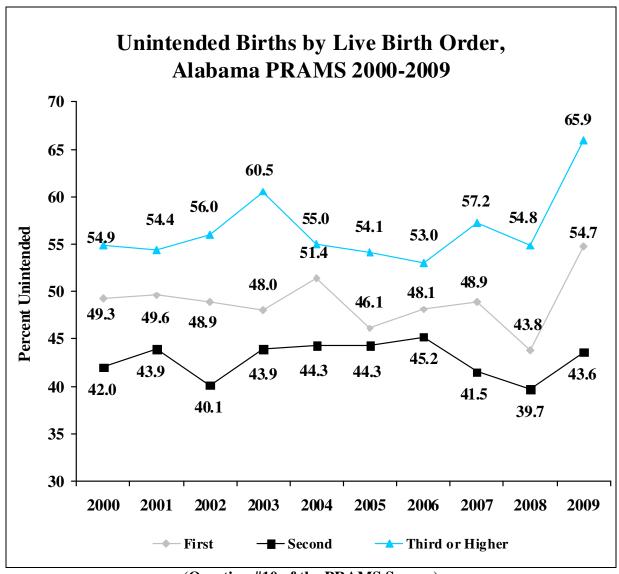
	95 % Confidence Intervals												
Year/ Marital Status	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009			
Married	28.6-35.8	30.3-37.6	30.1-37.5	30.4-38.0	32.8-41.3	28.4-36.5	31.7-39.9	30.2-38.3	28.2-36.5	35.8-44.9			
Not Married	73.4-82.3	72.7-81.1	70.5-79.4	70.1-79.6	67.3-78.0	69.8-80.3	67.1-78.2	64.0-75.3	61.5-73.4	66.1-77.2			



(Question #10 of the PRAMS Survey)

In 2009 in Alabama, 64.3 percent of births to women on Medicaid were unintended compared to 42.2 percent among non-Medicaid women. This indicates that poorer women are more likely to have unplanned births.

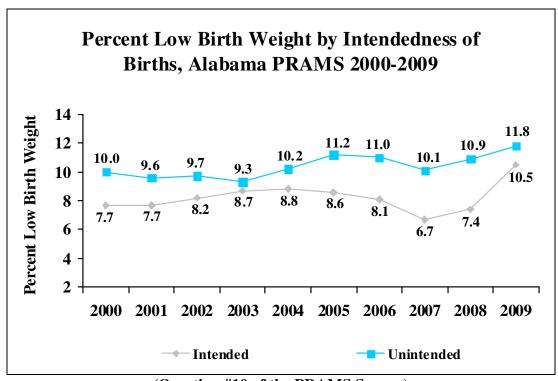
	95 % Confidence Intervals												
Year/ Payme nt	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009			
Medic aid	63.3-71.5	64.9-72.8	59.7-68.0	62.0-70.6	60.3-69.7	61.2-70.9	58.5-68.1	54.9-65.0	52.2-62.8	59.1-69.2			
Non- Medic aid	27.8-36.3	28.1-36.3	29.7-38.3	30.8-39.7	31.5-41.7	29.1-38.9	29.1-38.7	32.4-42.1	27.9-37.3	37.0-47.6			



(Question #10 of the PRAMS Survey)

The percent of unintended births was lowest among mothers who had given birth to their second child, meaning second births are most likely to be planned. From 2008 to 2009 there was a 24.9 percent increase in the percent of unintended births to mothers having their first child. In 2009, 65.9 percent of mothers having their third child were unintended. And there was a 20.3 percent increase from 2008 to 2009. All of the changes from 2008 to 2009 were not statistically significant.

95 % Confidence Intervals												
Year/ Birth Order 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009												
First	44.7-53.9	45.0-54.2	44.3-53.5	43.0-53.0	46.1-56.7	40.9-51.4	42.8-53.4	43.7-54.2	38.6-49.1	49.0-60.2		
Second	36.6-47.3	38.7-49.0	34.8-45.4	38.8-49.3	38.3-50.6	38.5-50.2	39.1-51.4	35.6-47.7	33.6-46.1	37.3-50.0		
Third +	48.4-61.4	48.4-60.5	49.7-62.3	53.9-66.8	47.4-62.3	46.2-61.8	45.8-60.1	49.5-64.5	47.0-62.5	58.3-72.8		



(Question #10 of the PRAMS Survey)

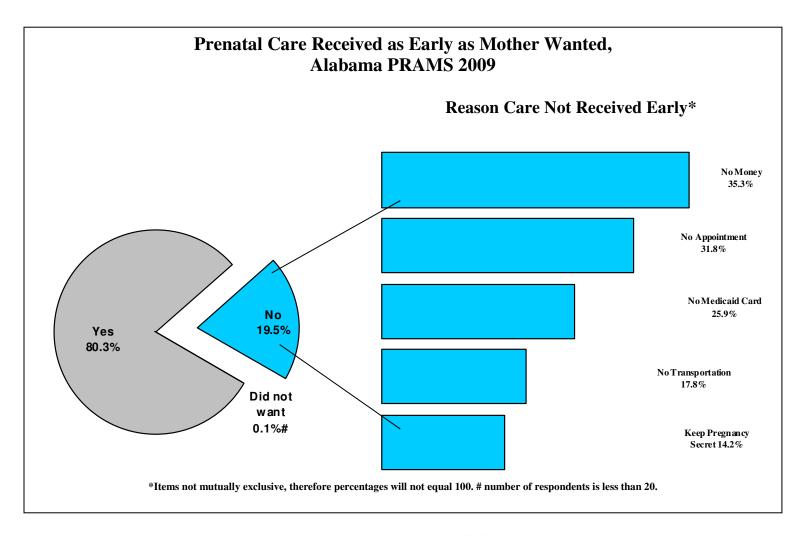
Low birth weight is defined as a birth weight of less than 2,500 grams or 5 lbs. 8oz. Infants delivered at this weight are at an increased risk of death during their first year of life or life long disabilities. Of births reported as unintended in 2009, 11.8 percent were low weight births, slightly increased from 2008. Of intended births, the percentage of low weight births increased in 2009 too. Both increases are not statistically significant.

	95 % Confidence Intervals												
Year/ Intenti on	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009			
Intend ed	7.0-8.3	7.1-8.4	7.5-8.9	8.0-9.5	8.0-9.7	7.8-9.5	7.3-9.0	4.7-9.6	5.2-10.4	7.5-14.4			
Uninte nded	9.1-10.8	8.8-10.4	8.9-10.6	8.5-10.2	9.2-11.2	10.1-12.4	9.9-12.1	7.3-13.7	7.8-15.1	8.7-15.7			

Mothers' Intendedness Comments

- "I was 37 years old when I had my 3rd child. We were not expecting to have her. I don't know if it's because I'm older, but I really enjoy her a lot. She stays with me and I notice every little thing she does."
- "Was on birth control to regulate me nothing worked. We had tried getting pregnant for six years so we just thought we weren't able."
- "All ladies make sure you have somebody to be there for you and the baby and a
 job before getting pregnant."
- "Staying with a partner just because of an unexpected pregnancy can sometimes do more harm, causing you to feel more pressured or depressed. My ex-boyfriend and I were together for five years before I got pregnant. Because of the stress from him I lost 121 lbs and struggled to gain weight. During the first three months, I saw that my health and the health of my baby were in jeopardy, so we broke up and I focused on living healthier for me and my unborn child. I have been a single parent since I was three months pregnant, and it is more rewarding and less stressful."
- "My husband and I had to go to an infertility clinic but in the end got pregnant naturally after trying infertility."
- "Thought I was going through early menopause and he told me he had had a vasectomy."
- "We both said if it happens, it happens and we will be happy no matter what."

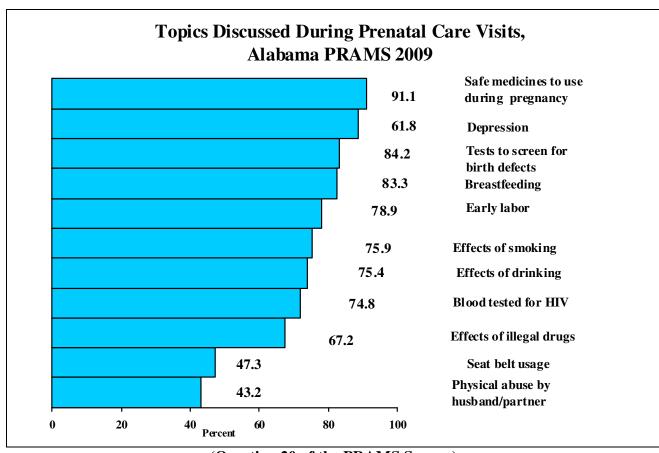
PRENATAL CARE



(Questions 17 & 18 of the PRAMS Survey)

Early and adequate prenatal care is critical in detecting problems that arise during pregnancy and in treating them before they become serious or life-threatening. In 2009, 19.5% of Alabama mothers reported they did not get prenatal care as early as they wanted. Barriers which hindered them included: no money to pay for the prenatal care visits, no Medicaid coverage yet, not able to get an early appointment, trying to keep their pregnancy a secret and no transportation available for doctor visits.

95% Confidence Intervals								
Early PNC	Yes	No	Did Not Want	No Appt.	No Money	No Medicaid Card	Secret	No Trans.
Percent	77.3-83.1	16.8-22.6	0.0-0.9	24.4-40.2	27.7-43.7	18.9-34.2	9.0-21.8	12.0-25.4

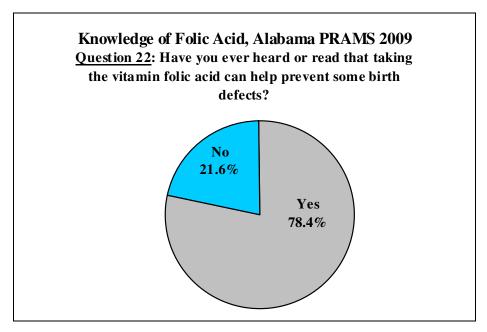


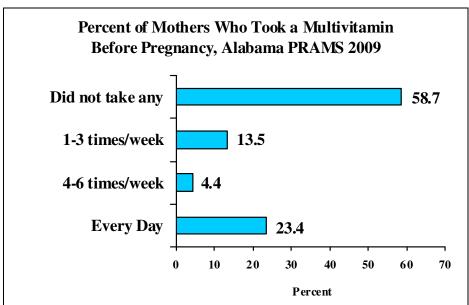
(Question 20 of the PRAMS Survey)

Mothers were asked if a doctor, nurse, or health care worker talked with them about the above topics during any of their prenatal care visits. In 2009, nine out of ten Alabama mothers reported being informed about safe medications to take during their pregnancies. Screening tests for birth defects or diseases which run in their families, breastfeeding, and what to do if premature labor occurs. Only 47.3 percent reported any discussion on seat belt usage during pregnancy, and 43.2 percent of Alabama's mothers reported having a discussion about physical abuse by a husband or partner.

95% Confidence Intervals					
Topics	Safe Medicines	Birth defects	Depression	Early labor	Breastfeeding
Percent	88.7-93.0	81.3-86.7	58.1-65.4	75.7-81.8	80.4-85.8

95% Confidence Intervals					
Smoking	HIV testing	Drinking	Illegal drug usage	Seat belt usage	Physical abuse
72.7-78.7	71.5-77.8	72.2-78.3	63.8-70.5	43.6-51.1	39.7-46.9

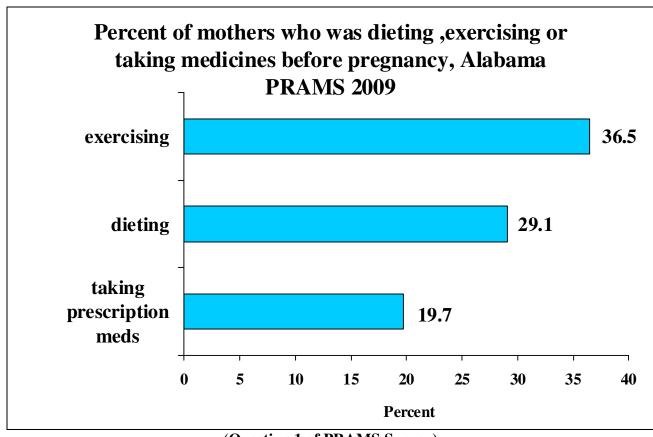




(Question 3 of the PRAMS Survey)

Studies have shown that women who consume 400 micrograms of folic acid daily <u>before</u> becoming pregnant can greatly reduce the incidence of neural tube defects, such as spina bifida and anencephaly, in their infants. In 2009, almost eight out of ten Alabama mothers reported they had either read or heard that taking folic acid could help prevent some birth defects, but this knowledge was not translated into action. Approximately 58.7 percent of mothers took no multivitamins (contains the required amount of folic acid) the month before their pregnancy occurred. And 23.4 percent of Alabama mothers consumed a daily multivitamin during the month prior to becoming pregnant.

95% Confidence Intervals						
Questions	Knowledge? Yes	Knowledge? No	None Taken	1-3 times/wk.	4-6 times/wk.	Taken Daily
Percent	75.2-81.3	18.7-24.8	55.0-62.3	11.2-16.3	3.1-6.1	20.5-26.7



(Question 1 of PRAMS Survey)

In 2009, 36.5 percent of mother said they were exercising 3 or more days of the week. And 29.1 percent of mothers were dieting (changing eating habits). 19.7 percent of mothers were taking prescription medicines other than birth control.

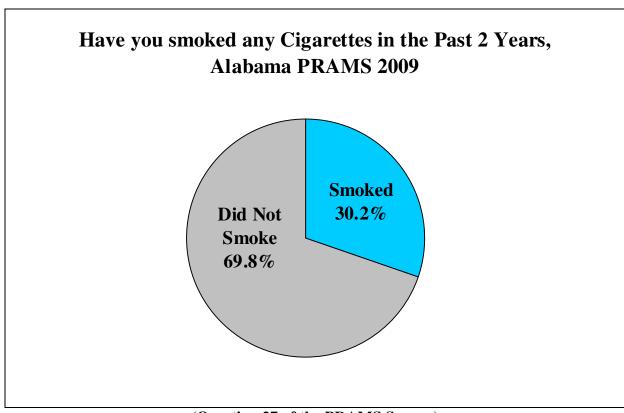
95% Confidence Intervals					
Topics	dieting	exercise	taking prescription meds		
Percent	25.8-32.5	33.0-40.2	16.9-22.8		

Mothers' Prenatal Care Comments

- "My advice is to stay in check with your doctor and keep telling them if something isn't right until they
 listen. You know your body and if something doesn't seem right don't brush off things that concern you.
 Keep your doctor informed."
- "I took my vitamins everyday during and before I got pregnant. I consumed little or no soft drinks and sugary snacks. I ate mostly fruits for snacks. I ate six small meals. I never stopped working out."
- "I had a great pregnancy, delivery and a great experience with my baby since I took my vitamins regularly. My baby is very healthy and happy."
- "Walk a lot during your pregnancy and drink a lot of fluids and it will make your pregnancy easier and watch your weight."
- "Make sure that the moment that you find out you're pregnant, you start prenatal care. Always be honest and upfront with your doctor/nurse. Don't smoke cigarettes or your baby may come out with heart and respiratory problems like my son. Always respect the fact that it's not just you anymore. Don't abuse your body while you are toting an innocent life around in your belly that is depending on you to survive and make it into the world."
- "Can't stress enough how important it is to get seen as soon as you know you are pregnant."
- "I recommend mothers to have their prenatal care and to take prenatal vitamins."
- "I stayed away from caffeine during my pregnancy; large amounts of caffeine can harm a baby."
- "Some young mothers are ashamed to let people know when they are pregnant because they are scared."
- "Exercise while pregnant, it really does make labor and delivery easier but it still hurts though...a lot!"
- "Taking prenatal vitamins is important and may help to keep high blood pressure down and your baby needs the extra vitamins. During pregnancy try not to get stressed out because it could cause problems for you and your baby."
- "Keep your appointments, stay healthy, and do what the doctors ask."
- "I just wanted all mothers that are having babies to keep a clear mind and not stress a lot and stay away
 from people that are smoking and don't drink alcohol and eat right and exercise and always go to your
 appointments and take your vitamins everyday."

NEGATIVE HEALTH BEHAVIORS:

SMOKING AND DRINKING



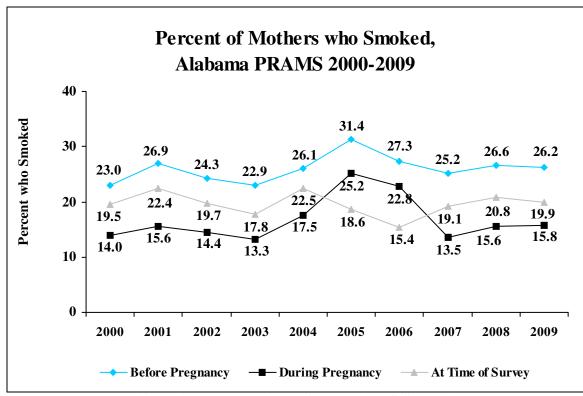
(Question 27 of the PRAMS Survey)

The Centers for Disease Control and Prevention (CDC) have reported that "Smoking during pregnancy is the single most preventable cause of illness and death among mothers and infants." They report that pregnant women who smoke are at increased risk of having an ectopic pregnancy or a miscarriage, and that approximately 8 percent of infants who die within a week after birth expire due to conditions caused by maternal smoking during pregnancy. Infants born to mothers who smoked while pregnant are more likely to be low birth weight infants, (weighing less than 2,500 grams), and may experience lifelong health problems.

In 2009, when Alabama mothers were asked if they had smoked any cigarettes in the past two years, 30.2 percent answered 'Yes'.

95% Confidence Intervals				
Smoking Status	Smoked	Did Not Smoke		
Percent	27.0-33.7	66.3-73.0		

¹ The Centers for Disease Control and Prevention (CDC). Chronic Disease- Preventing Smoking During Pregnancy. http://www.cdc.gov/nccdphp/publications/factsheets/Prevention/smoking.htm. Found May 3, 2006.

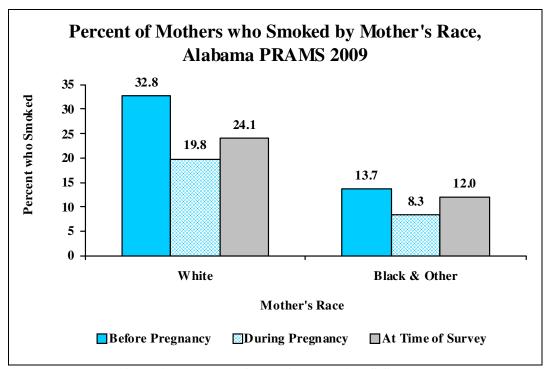


(Questions 28, 29, & 30 of the PRAMS Survey)

The Healthy People 2010 Objective is to increase abstention from cigarette smoking by pregnant women to 99 percent. Alabama is not close to achieving this goal. Historically in Alabama, smoking decreases during pregnancy in the majority of women, only to increase again after the birth of their infants. This pattern was repeated in 2009, although 15.8 percent of Alabama mothers continued to smoke while pregnant. In 2009, the increases in smoking seen during the three time periods were not statistically significant.

	95% Confidence Intervals									
Year/ Smoked	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Before Pregnanc	20.3-25.6	24.2-29.6	21.7-27.0	20.3-25.7	23.1-29.3	28.2-34.8	24.3-30.5	22.2-28.4	23.5-29.9	23.1-29.5
During Pregnanc	11.9-16.1	13.4-17.8	12.3-16.5	11.3-15.6	15.0-20.3	16.0-21.5	13.1-18.1	11.3-16.1	13.2-18.4	13.3-18.7
At Time of Survey	17.1-22.0	19.9-24.9	17.4-22.1	15.5-20.4	19.7-25.6	22.2-28.4	20.0-25.9	16.5-22.1	18.0-23.9	17.2-23.0

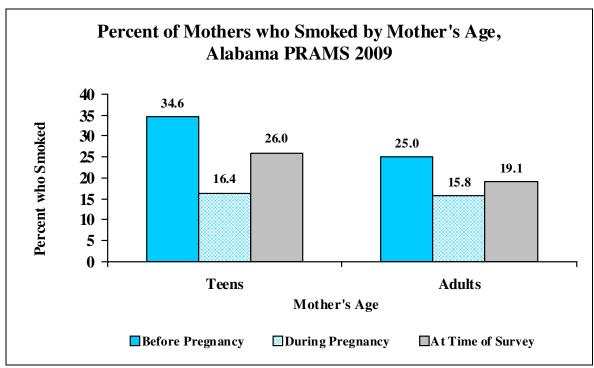
(Questions 28, 29, & 30 of the PRAMS Survey)



(Questions 28, 29, & 30 of the PRAMS Survey)

Both white and black and other smokers showed the same trend - smoking decreased during pregnancy but increased again by the time of the survey. Among white smokers, there was a statistically significant decrease in smoking from before pregnancy to during pregnancy. Among black and other race smokers, the decrease from before pregnancy to during pregnancy and the increase again at time of the survey were not statistically significant changes.

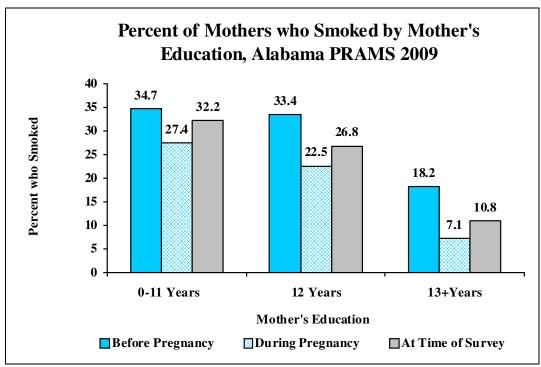
95 % Confidence Intervals						
Smoked/ Race:	Before Pregnancy	During Pregnancy	At Time of Survey			
White	28.9-37.0	16.6-23.5	20.6-28.0			
Black and Other	9.6-19.1	5.2-13.0	8.2-17.4			



(Questions 28, 29, & 30 of the PRAMS Survey)

In 2009, teen and adult women smokers followed the same pattern - decreasing smoking during pregnancy and increasing after delivery. The decrease in smoking during pregnancy among adult women was statistically significant, but among teen women, the decrease was statistically significant.

95 % Confidence Intervals					
Smoked/ Age:	Before Pregnancy	During Pregnancy	At Time of Survey		
Teens	25.3-45.4	10.1-25.6	17.8-36.4		
Adults	21.7-28.5	13.1-18.8	16.2-22.3		



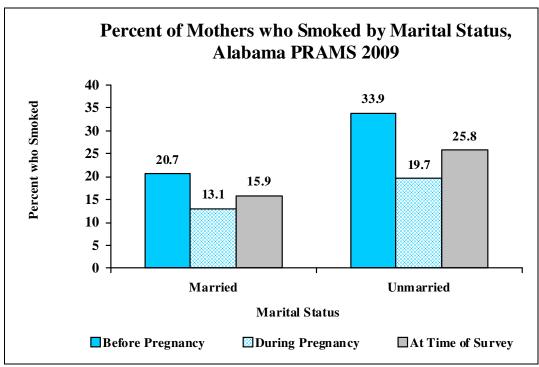
(Questions 28, 29, & 30 of the PRAMS Survey)

Generally in Alabama, there is an inverse correlation between a woman's educational attainment and smoking: as a women's level of education *increases*, smoking *decreases*. In 2009, in the percentages of women with 0-11 years of education who smoked, the decreases in smoking seen from before pregnancy and during pregnancy were not statistically significant. In fact, about one in four Alabama mothers in this educational level continued to smoke while pregnant.

In the percentages of women who smoked with 12 years of education, the decrease in smoking was almost significant from before pregnancy and during pregnancy. For this group, the increase in smoking from during pregnancy to at the time of the survey was not significant.

The lower percentages of smoking (before pregnancy, during pregnancy, and after delivery) among women with 13+ years of education were statistically significant from the other two educational groups. The drop in smoking from before pregnancy and during pregnancy was statistically significant.

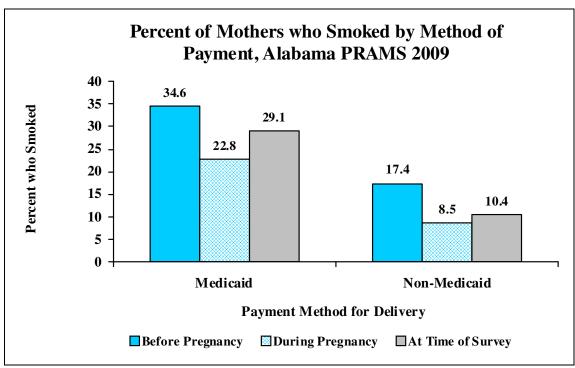
95 % Confidence Intervals					
Smoked/ Education:	Before Pregnancy	During Pregnancy	At Time of Survey		
0-11 Years	26.8-43.5	20.3-35.8	24.7-40.8		
12 Years	27.4-40.0	17.4-28.5	21.3-33.2		
13+ Years	14.5-22.6	4.8-10.3	8.0-14.5		



(Questions 28, 29, & 30 of the PRAMS Survey)

In 2009, married and unmarried mothers followed the same pattern - they decreased their smoking during pregnancy only to increase it again after delivery. During pregnancy, married women decreased their smoking by nearly 36.7 percent, which was not a statistically significant decrease. Unmarried women decreased smoking while pregnant by 41.9 percent, which was statistically significant.

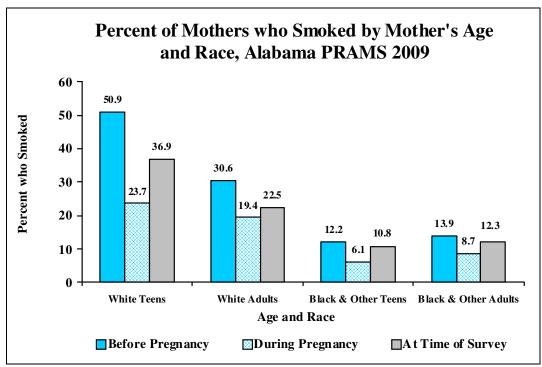
95 % Confidence Intervals						
Smoked/ Marital Status:	Before Pregnancy	During Pregnancy	At Time of Survey			
Married	17.3-24.6	10.3-16.4	12.8-19.4			
Unmarried	28.4-39.9	15.3-25.0	20.8-31.5			



(Questions 28, 29, & 30 of the PRAMS Survey)

In 2009, cigarette smoking was significantly higher among mothers on Medicaid before, during, and after their pregnancies than non-Medicaid mothers. The decreases in smoking from before pregnancy and during pregnancy among Medicaid and non-Medicaid mothers were statistically significant.

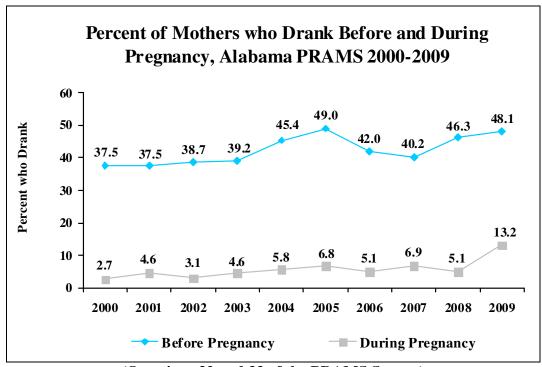
95 % Confidence Intervals						
Smoked/ Payment Method:	Before Pregnancy	During Pregnancy	At Time of Survey			
Medicaid	29.8-39.8	18.8-27.4	24.6-34.1			
Non-Medicaid	13.6-22.0	5.9-12.2	7.5-14.3			



(Questions 28, 29, & 30 of the PRAMS Survey) #Number of Respondents is less than 20

In 2009, a higher percentage of white mothers smoked than did black and other mothers. The decrease in smoking for white adults and teen mothers during pregnancy was statistically significant.

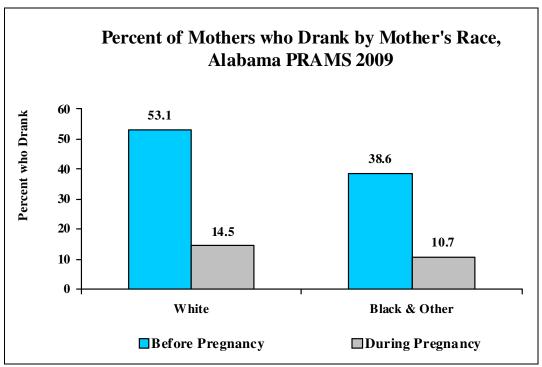
95 % Confidence Intervals									
Smoked/ Race and Age:	Before Pregnancy	During Pregnancy	At Time of Survey						
White Teens	37.7-63.9	14.3-36.7	25.2-50.3						
White Adults	26.5-35.0	16.0-23.3	18.9-26.5						
Black & Other Teens	4.5-28.7	1.5-21.8	3.5-28.4						
Black & Other Adults	9.5-20.0	5.3-14.0	8.1-18.1						



(Questions 32 and 33 of the PRAMS Survey)

From 2008 to 2009, there was an increase of 3.9 percent in drinking *before* becoming pregnant. An increase of 159 percent in drinking *during* the last three months of pregnancy was reported by Alabama mothers, and this increase was statistically significant. From 2000-2009, Alabama women did significantly decrease drinking during their pregnancies from their levels of drinking before pregnancy.

	95% Confidence Intervals										
Year/ Drank	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	
Before Pregnancy	34.4-40.5	34.5-40.5	35.7-41.8	36.1-42.5	41.8-49.0	45.4-52.6	38.6-45.6	36.7-43.7	42.6-49.9	44.4-51.8	
During Pregnancy	1.6-3.7	3.3-5.9	2.0-4.2	3.5-6.1	4.3-7.7	5.2-8.8	3.8-6.9	5.3-9.0	3.8-7.0	10.9-15.9	

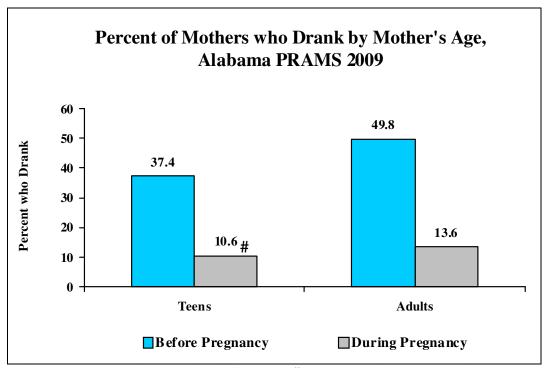


(Questions 32 and 33 of the PRAMS Survey)

In 2009, over fifty percent of white Alabama mothers reported drinking alcoholic beverages *before* becoming pregnant; however, a statistically significant decrease was observed in drinking *during* the last three months of their pregnancies.

White mothers drank significantly more before pregnancy than black and other mothers did. The difference between the races drinking during pregnancy was not significant.

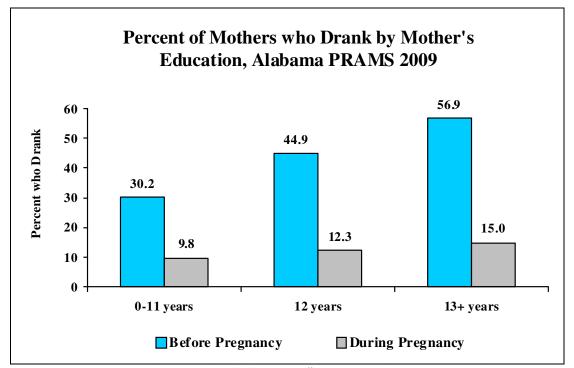
95% Confidence Intervals								
Drank / Race	Before Pregnancy	During Pregnancy						
White	48.7-57.5	11.6-17.9						
Black and Other	32.2-45.4	7.2-15.7						



(Questions 32 and 33 of the PRAMS Survey) # Number of respondents is less than 20.

As expected, a higher percentage of adult women reported consuming alcohol than teenage women. Yet in 2009, 37.4 percent of teenage mothers reported using alcohol before becoming pregnant and 10.6 percent reported drinking during their pregnancies, despite being underage. In both populations, drinking significantly declined during the last three months of their pregnancies.

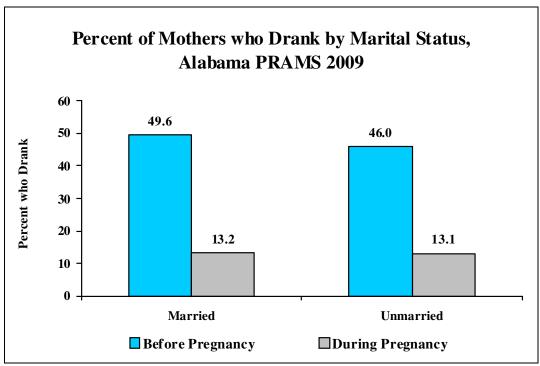
95% Confidence Intervals								
Drank / Mother's Age	Before Pregnancy	During Pregnancy						
Teens	27.7-48.2	5.8-18.7						
Adults	45.8-53.7	11.1-16.5						



(Questions 32 and 33 of the PRAMS Survey) # Number of respondents is less than 20.

In 2009, women with higher levels of education were more likely to drink than those women with lower educational attainment. This could be attributable to age; women with lower educational levels are probably younger and underage. In each educational level, drinking during pregnancy decreased significantly.

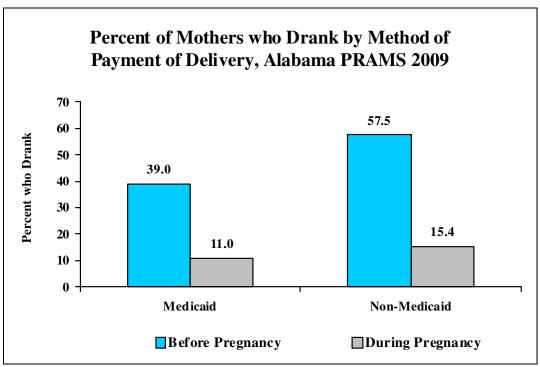
95% Confidence Intervals								
Drank/ Education	Before Pregnancy	During Pregnancy						
0-11 years	22.7-38.9	5.7-16.2						
12 years	38.3-51.8	8.5-17.5						
13+ years	51.7-61.9	11.7-19.1						



(Questions 32 and 33 of the PRAMS Survey)

In 2009, unmarried mothers were as likely to drink *before* and *during* pregnancy as married mothers, the differences were not statistically significant. Both unmarried and married mothers significantly decreased drinking during the last three months of their pregnancies.

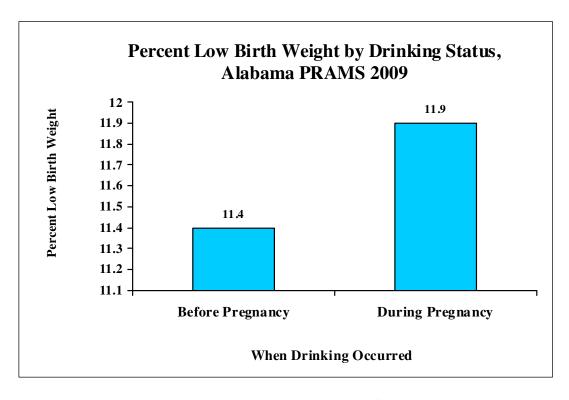
95 % Confidence Intervals								
Drank/ Marital Status	Before Pregnancy	During Pregnancy						
Married	45.0-54.2	10.4-16.7						
Unmarried	39.9-52.3	9.5-17.8						



(Questions 32 and 33 of the PRAMS Survey)

In Alabama in 2009, mothers whose delivery was not paid by Medicaid drank more *before* their pregnancies than did their Medicaid counterparts. Also, mothers whose delivery was paid by Medicaid drank less during their pregnancies than did their non-Medicaid counterparts. In both groups, a statistically significant decrease in drinking was reported during the last three months of their pregnancies.

95% Confidence Intervals									
Drank/ Payment Method	Before Pregnancy	During Pregnancy							
Medicaid	34.0-44.3	8.2-14.7							
Non-Medicaid	52.2-62.6	12.0-19.6							



(Questions 32 and 33 of the PRAMS Survey)

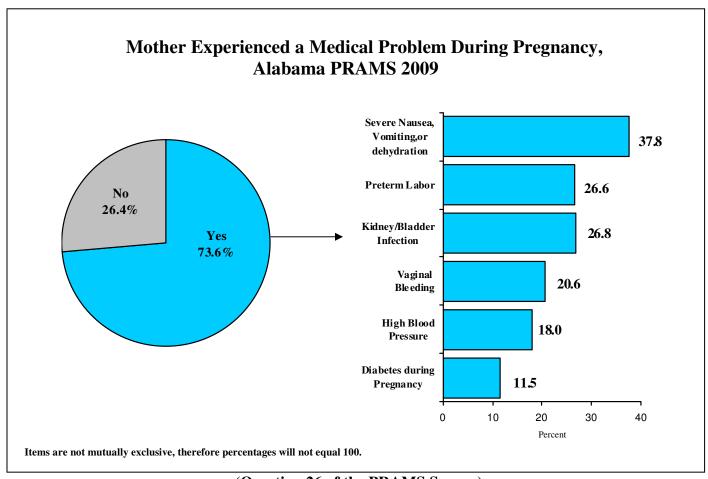
In 2009, 11.4 percent of women who drank before pregnancy had a low weight infant. Among women who drank while pregnant, 11.9 percent delivered a low weight infant. There is no statistically significant difference in the percentage of low weight births to mothers who drank before pregnancy or during pregnancy.

95% Confidence Intervals							
Drank	Before Pregnancy	During Pregnancy					
Percent LBW	8.4-15.4	6.7-20.2					

Mothers' Negative Health Behaviors Comments

- "At the time I was in act of addiction and I didn't care but now I am clean from drugs and I love my daughter with all my heart."
- "I think there should be some kind of law that prevents women from smoking and drinking during pregnancy. It is not fair to the baby. I also think smoking around a pregnant woman should be illegal.
- "Don't smoke, drink, or do any drugs that could harm you or your unborn child."
- "Provide more information about how using alcohol during pregnancy is so dangerous to the baby. Women who drink during pregnancy don't only hurt themselves they hurt the unborn."

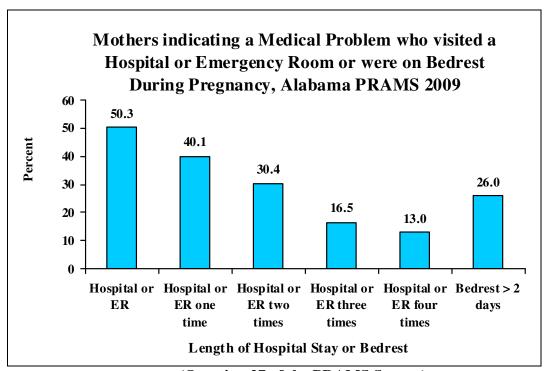
HEALTH CARE SYSTEM ISSUES



(Question 26 of the PRAMS Survey)

In 2009, 73.6 percent of Alabama Mothers reported having a medical problem during their pregnancy. Of those, the highest percentage (37.8) reported having nausea, vomiting, and/or dehydration. One in four mothers reported experiencing preterm labor or a kidney/bladder infection. 20.6 percent of mothers reported vaginal bleeding, while 18.0 percent of mothers reported having high blood pressure. In adition, 11.5 percent of mothers developed gestational diabetes.

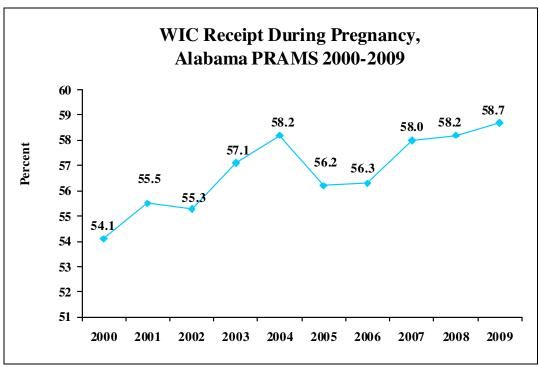
	95% Confidence Intervals												
Problems	ns Yes No		or dehydration labor		Kidney/ Bladder infection Vaginal Bleeding		НВР	Diabetes During Preg.					
Percent	70.3-76.7	23.3-29.7	34.2-41.4	23.4-30.1	23.6-30.2	17.8-23.8	15.3-21.1	9.3-14.2					



(Question 27 of the PRAMS Survey)

Mothers who answered "Yes" to experiencing at least one medical problem during their pregnancy were asked if they stayed in the hospital or were on bed rest because of the medical problem. Of those who reported at least one problem, nearly 50.3 percent of mothers visited a hospital at least once; 40.1 percent of these visited one time; 30.4 percent went to hospital two times; and 26.0 percent stayed in bed for more than two days at a doctor's or nurse's advice.

	95% Confidence Intervals											
Times of went to Hospital/ER or bedrest	Hospital/ER	Hospital/ER 1 time	Hospital/ER 2 times	Hospital/ER 3 times	Hospital/ER 4 times	Bedrest > 2 days						
Percent	45.7-54.9	33.9-46.6	24.8-36.7	12.2-22.0	9.3-17.9	22.2-30.2						



(Questions 23 of the PRAMS Survey)

WIC or the Special Supplemental Nutrition Program for Women, Infants, and Children is one of the nation's most successful nutrition programs, providing proper nutrition to pregnant women, breastfeeding women, women who had a baby within the last six months, infants, children under the age of five, and who meet eligibility guidelines.

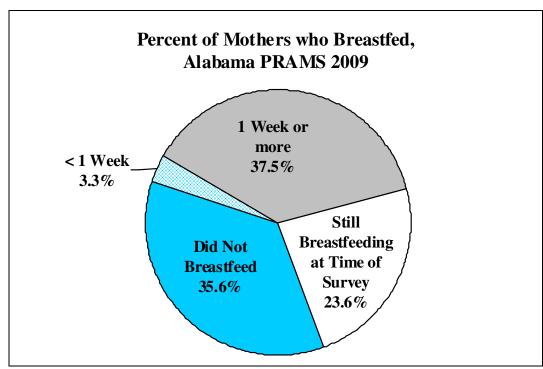
In 2009, 58.7 percent of Alabama mothers received WIC benefits.

	95% Confidence Intervals											
Year	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
Percent	51.7-56.5	53.1-57.8	53.0-57.7	54.5-59.6	55.5-60.9	53.5-58.8	53.6-58.9	55.2-60.8	55.3-61.0	55.8-61.5		

Mothers' Health Care System Issues Comments

- "The Medicaid program was very helpful for me. I am so glad that this program is available. I wanted a baby so bad but it would have put me in a bind with all of the hospital bills and because of Medicaid, I was able to save money for when my baby was born so I could spend time with him. My husband is not able to work and I am currently in school to try and raise my income. Thank you so much for Medicaid and the WIC program. It was very helpful!"
- "I wish there was more information or knowledge about preeclampsia. An organization of some sort would benefit a lot of new mothers. Lots of women have no clue what this is and the signs to look for."
- "My job does not provide any medical or dental insurance but Medicaid did not cover dental or any extra medical problems. I suffered a broken coccyx and bronchitis while pregnant. I let the doctors know about some medical problems from the past such as liver failure and a previous miscarriage. They saw no reason for me to be a high risk. I don't agree with this. I ended up having my labor induced four weeks early because my blood pressure went too high."
- "If it weren't for WIC and Medicaid we wouldn't be able to pay for anything for the babies. We appreciate it greatly."
- "People really don't know how hard it is on women who have children, being a single parent is hard. I think Medicaid should at least be offered to women for a year after babies are born. I had to go back to work ASAP after having my baby just to make ends meet and I only could find a part time job and only made \$180.00 a week and Medicaid said they couldn't help me anymore. I am more depressed, sad all the time and I feel so so so tired, no energy, no strength. I can't afford insurance and don't qualify for Medicaid. I need help with my needs and I can barely afford to pay rent! Women should be seen and treated for postpartum blues."
- "I think Medicaid and WIC should be told to expecting mothers because some people don't know
 what to do as I did not with my first pregnancy. I am glad you sent these questions for me to
 answer. I hope it helps PRAMS and future expecting mothers."
- "There should be more information about being pregnant because I have four kids and every pregnancy was different."

BREASTFEEDING

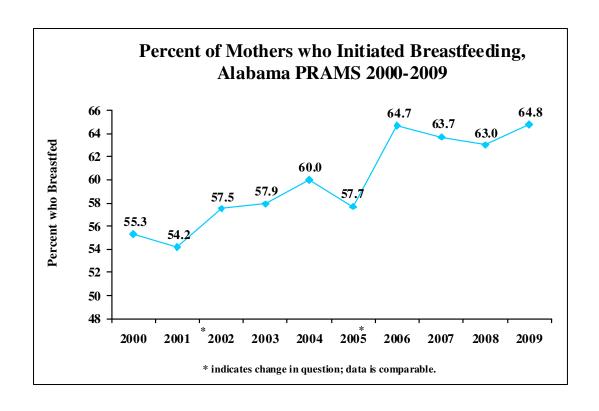


(Questions 50, 52, and 53 of the PRAMS Survey)

Numerous benefits are associated with breastfeeding, not only for the infant but for the mother as well. The Healthy People 2010 Objective is to increase the percentage of mothers who breastfeed their babies in the early postpartum period to 75 percent.

In Alabama in 2009, 35.6 percent of mothers did not attempt to breastfeed their babies. Only 23.6 percent Alabama mothers were still breastfeeding their infants at the time of the survey, two to six months after delivery.

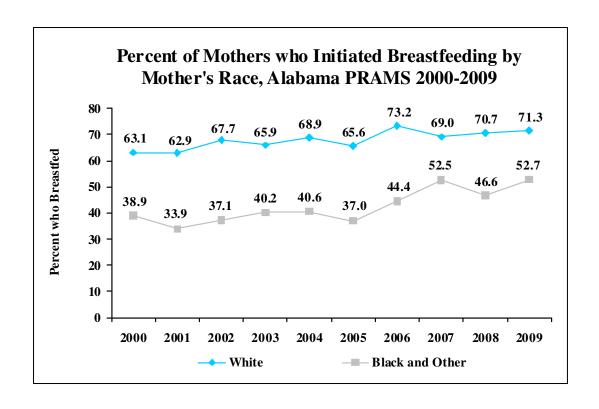
95% Confidence Intervals									
Time Breastfed	Did Not Breastfeed	<1 week	1 week or more	Still Breastfeeding					
Percent	32.2-39.2	2.2-4.9	33.9-41.2	20.6-26.8					



(Question 50 of the PRAMS Survey)

From 2000-2009, the percentage of Alabama mothers who initiated breastfeeding increased six out of the ten years. In 2009, 64.8 percent of mothers reported they initiated breastfeeding; however, from 2004-2008, the changes have not been statistically significant. Comparing 2000 and 2009 data, there has been a statistically significant increase of 17 percent in mothers who initiated breastfeeding.

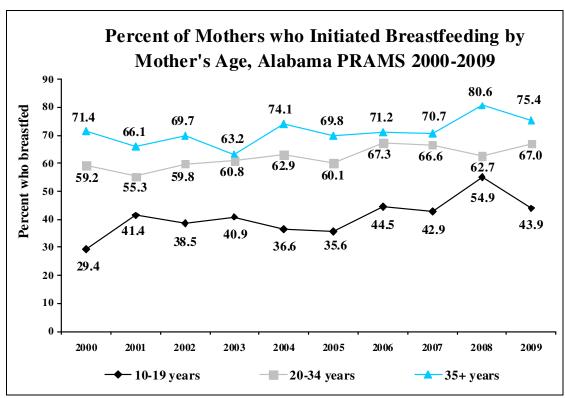
	95% Confidence Intervals											
Year	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
% Breast feeding	52.3-58.3	51.2-57.3	54.5-60.5	54.7-61.1	56.5-63.4	54.2-61.1	61.3-67.9	60.3-67.0	59.4-66.4	61.2-68.3		



(Question 50 of the PRAMS Survey)

From 2000 to 2009, there has been a statistically significant increase in breastfeeding in both racial groups. The prevalence of breastfeeding has been consistently higher among white women compared to black and other race women. The black and other race increased 13 percent from 2008 to 2009. The white race increased 0.9 percent from 2008 to 2009.

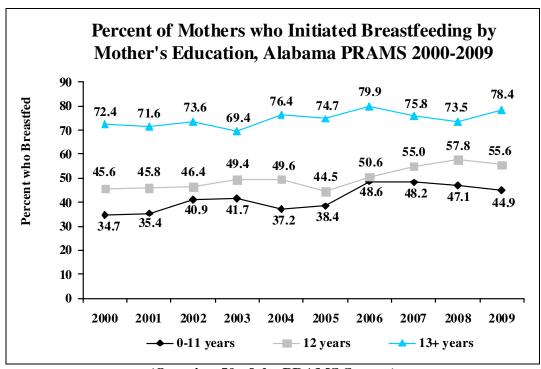
	95% Confidence Intervals											
Year/ Race	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
White	59.4-66.8	59.2-66.6	64.1-71.2	62.0-69.6	64.8-72.8	61.5-69.4	69.3-76.8	64.9-72.8	66.6-74.4	67.2-75.1		
Black and Other	33.3-44.4	28.7-39.1	31.7-42.4	34.5-46.1	34.3-47.2	30.7-43.9	38.1-51.0	46.1-58.9	39.7-53.6	45.9-59.4		



(Question 50 of the PRAMS Survey)

During the period from 2000 through 2009, the percentage of women initiating breastfeeding increased in all three age groups. When examining each group, the oldest mothers, 35 plus years, had the highest percentage of breastfeeding with teenage mothers having the lowest percentage. The percentage of mothers 10-19 years who initiated breastfeeding decreased 20 percent from 2008 to 2009.

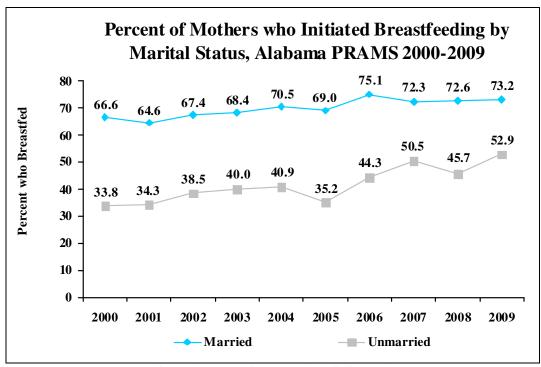
	95% Confidence Intervals											
Year/ Age	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
10-19	22.2-36.7	33.7-49.2	30.9-46.1	32.6-49.7	28.1-45.9	27.0-45.2	35.0-54.4	32.8-53.7	44.4-64.9	33.4-55.0		
20-34	55.8-62.7	51.7-58.8	56.2-63.3	57.0-64.4	58.8-66.8	56.1-64.0	63.4-70.9	62.7-70.2	58.7-66.6	62.9-70.8		
35+	60.0-82.8	56.3-76.0	59.8-79.6	51.4-73.6	62.1-83.3	58.0-79.4	60.5-80.0	59.9-79.6	67.5-89.3	63.9-84.1		



(Question 50 of the PRAMS Survey)

In Alabama, breastfeeding prevalence is highest among women with 13 or more years of education. Comparing percentages from 2000 to percentages in 2009, there have been no significant increases in breastfeeding in Alabama mothers.

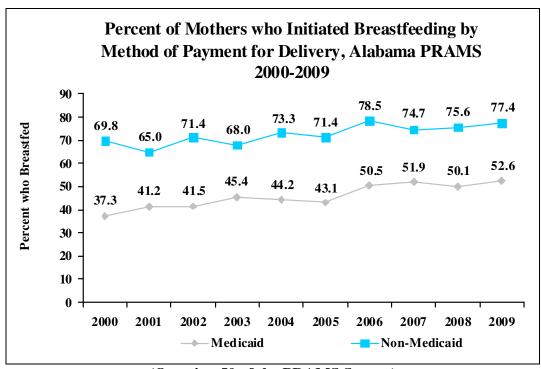
	95% Confidence Intervals											
Year/ Educ.	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
0-11 yrs.	28.0-41.4	29.6-41.2	34.4-47.5	34.4-49.4	29.6-45.6	30.8-46.6	40.7-56.5	39.4-57.2	38.5-55.8	36.3-53.9		
12 yrs.	40.2-50.9	40.2-51.5	40.7-52.0	43.4-55.5	43.0-56.2	38.2-50.9	43.7-57.4	48.3-61.5	50.9-64.4	48.7-62.2		
13+ yrs.	68.0-76.8	67.2-76.0	69.4-77.8	64.8-73.6	71.7-80.5	69.9-79.0	75.7-83.6	71.5-79.6	68.8-77.7	73.8-82.4		



(Question 50 of the PRAMS Survey)

Comparing 2000 levels to 2009 levels, there have been statistically significant increases in breastfeeding initiation in unmarried women. Over the past 10 years, the percentage of mothers who initiated breastfeeding has been significantly higher among married mothers compared to unmarried mothers. Factors affecting this trend include that married mothers may be older and have a higher educational attainment than their unmarried counterparts.

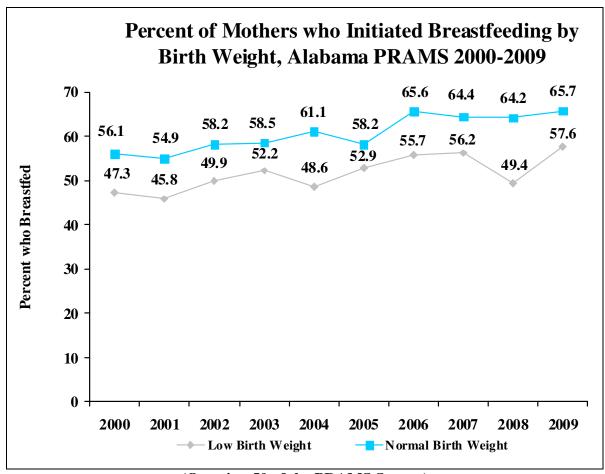
	95% Confidence Intervals											
Year/ Marital Status	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
Married	63.0-70.3	60.8-68.3	63.7-71.2	64.5-72.0	66.2-74.4	64.8-73.0	71.1-78.6	68.4-75.9	68.4-76.5	68.9-77.2		
Unmarried	28.5-39.0	29.4-39.2	33.4-43.6	34.5-45.7	34.9-47.2	29.5-41.4	38.2-50.6	44.3-56.6	39.4-52.2	46.7-59.1		



(Question 50 of the PRAMS Survey)

From 2000 through 2009 in Alabama, women whose delivery was not paid for by Medicaid were significantly more likely to breastfeed their infants than women whose delivery was covered by Medicaid. When comparing percentages in 2000 to those in 2009, only the Medicaid group has significantly increased in the percentage of women who initiated breastfeeding their infants.

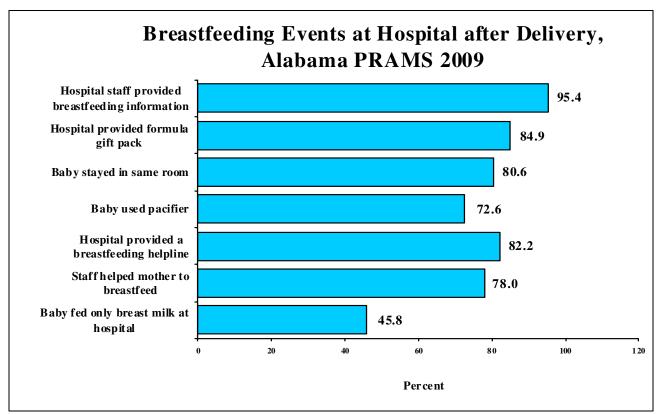
	95% Confidence Intervals											
Year/ Payment	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009		
Medicaid	33.0-41.7	36.9-45.5	37.1-45.8	40.8-50.2	39.2-49.3	38.1-48.2	45.5-55.5	46.7-57.1	44.6-55.5	47.2-57.9		
Non- Medicaid	65.6-74.0	60.7-69.3	67.2-75.5	63.5-72.2	68.4-77.7	66.5-75.9	73.9-82.5	70.3-78.7	70.9-79.7	72.6-81.6		



(Question 50 of the PRAMS Survey)

Of babies born in 2009 at a normal birth weight, 65.7 percent were breastfed. Of low birth weight babies, that is, weight less than 2,500 grams, 57.6 percent were breastfed, which may be related to a separation from the mother if the infant was admitted to the neonatal intensive care unit. Comparing 2000 percentages with 2009 percentages, there have been statistically significant increases in the normal birth weight group.

	95% Confidence Intervals											
Year/ BW 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009												
LBW 43.7-50.8 42.4-49.1 46.3-53.5 48.6-55.8 44.8-52.5 48.8-57.0 51.6-59.7 43.6-68.1 36.6-62.2 45.6-68.										45.6-68.8		
NBW	52.8-59.4	51.6-58.3	54.9-61.5	55.0-62.0	57.3-64.8	54.3-61.9	61.9-69.1	60.8-67.8	60.5-67.8	61.9-69.3		



(Question 55 of the PRAMS Survey)

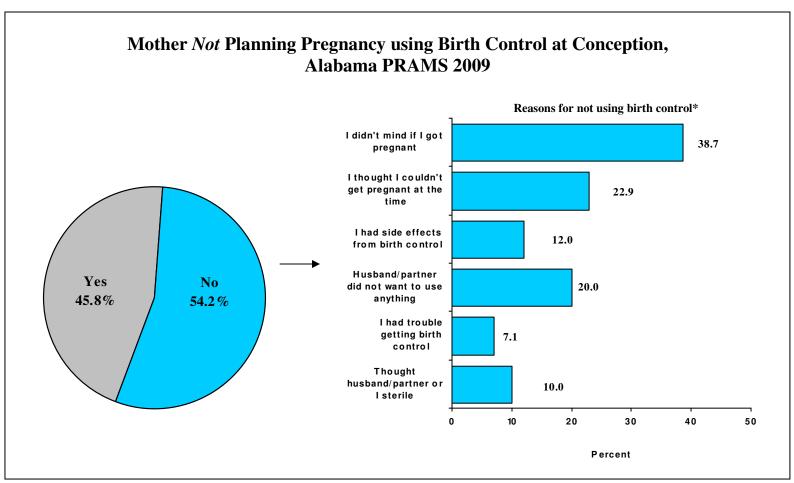
One Healthy People 2010 objective is for at least 75 percent of mothers to breastfeed their infants in the first six weeks after delivery. In 2009, 78.0 percent of mothers reported they received direct help from hospital staff in learning how to breastfeed their babies, while 95.4 percent reported the hospital provided them information on breastfeeding. Only 45.8 percent reported that their infants received breast milk exclusively while in the hospital, and 84.9 percent were given a formula gift pack to take home upon discharge.

	95% Confidence Intervals										
Events	Given gift pack	Breastfeeding information	Baby in room	Baby used pacifier	Breastfeeding helpline	Staff helped	Fed only breast milk in hospital				
Percent	81.2-87.9	93.0-97.0	76.6-84.0	68.3-76.6	78.4-85.5	73.9-81.6	41.3-50.5				

Mothers' Breastfeeding Comments

- "Much misinformation is being given to new mothers about breastfeeding and the exclusive use of formula This is happening in hospitals in Alabama and is perpetuated by a number of pediatricians. New mothers are being told things such as formula-fed babies gain weight faster than breastfed babies...Breastfed babies must be checked by their pediatricians earlier than formula-fed babies because they are breastfed. These false/misleading assertions lead new mothers to believe formula-feeding is as good as or better than breastfeeding and this certainly is not true. Why is formula freely given and aggressively pushed by hospitals and medical personnel?"
- "I had tried to breastfeed with my first and was unable to. I felt less of a mom and did not want that again. Milk didn't come in until three days."
- "At three and a half months, I began bottle-feeding my baby; usually only substituting a bottle for one feeding during the day. It was easier for him to get milk from a bottle than a breast."
- "More needs to be done to encourage all moms to breastfeed (or at least try). Advice usually says to give it two weeks, but from my experience and others, it takes two months. Instead of pushing the line 'it's best for babies', go with 'it's better on your wallet'."
- "I breastfed full time for six weeks, went back to work part time, then slowly weaned down to one feeding
 each evening by four months. Then my baby wanted more than I could give for that feeding so it was time
 for him to be fully weaned."
- "I was successful at breastfeeding only because my partner got involved. I knew enough about myself to know that I would be frustrated if latching were a problem. I had him read different positions and info on latching in the weeks prior to my baby's birth. He positioned her for me the entire time we were in the hospital and it made all the difference."
- "Breastfeeding was hard to do in public. It was like I had to plan everything around him eating, how long I
 was at the store, car trips, and going to visit friends. I wish it was more accepted, with people other than
 mothers and healthcare workers."
- "Breast pumps should be given to mothers for 3-4 months after delivery. Mothers should only need to buy the tubing kit."
- "He got used to the milk given to me by WIC."
- "I think that the hospital should provide all nursing mothers with pumps/latch or nipple covers to help with some breastfeeding issues. Also, show how to properly use these items."
- "I had a loss of appetite and was not supplying my baby with proper nutrients."
- "I was on blood pressure medicine she could not have. Pumping, feedings and a 3 ½ year old became too much to handle. Doctor put me on an antidepressant also which she could not have in breast milk."
- "I think more needs to be done to teach mothers about breastfeeding. If it weren't for my mother's
 encouragement, I wouldn't have done it. No one at the hospital taught me anything about breastfeeding. I
 am a mother of three healthy babies."

CONTRACEPTION

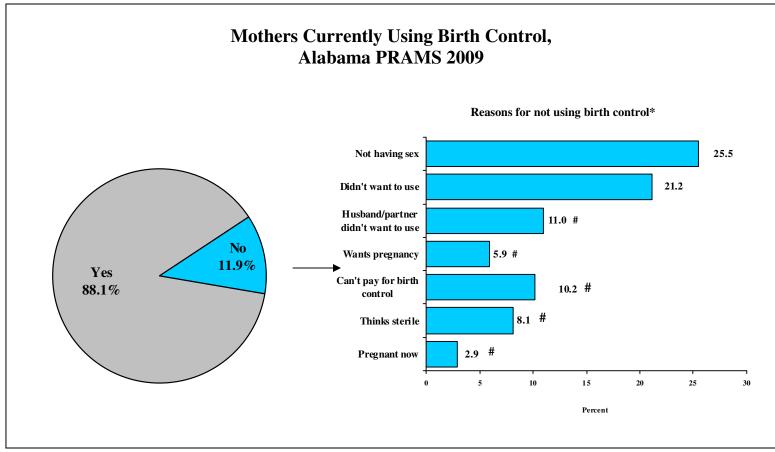


(Questions 13 & 14 of the PRAMS Survey) * Items are not mutually exclusive.

In 2009, 54.2 percent of Alabama mothers *who did not want a pregnancy* answered "no" to using any kind of birth control to prevent it. A Healthy People 2010 objective is to increase the proportion of females at risk of unintended pregnancy who use contraception to 100 percent.

Not minding a pregnancy was the main reason for not using birth control. Almost one in three mothers stated they did not realize they were at risk for a pregnancy therefore they used no contraception.

	95% Confidence Intervals										
Birth Control	Yes	No	Didn't mind	Thought I couldn't	Husb/partner didn't want to use anything	Side effects	Trouble getting birth control	Thought sterile			
Percent	40.9-50.8	49.3-59.1	32.6-45.2	17.9-28.9	15.2-25.8	8.4-17.0	4.4-11.2	6.7-14.7			

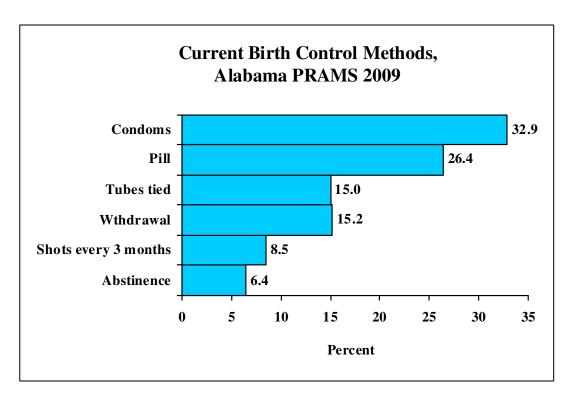


(Questions 61 & 62 of the PRAMS Survey) *Items are not mutually exclusive. # Number of respondents is less than 20.

The correct usage of contraception is invaluable in preventing unintended pregnancies. Almost 90 percent of Alabama mothers in 2009 reported they *were* using some sort of birth control at the time they participated in the survey. Of those who were not using birth control, 21.2 percent women said they did not want to use anything, 25.5 percent reported they were not having sex, 5.9 percent were wanting to be pregnant, and 11.0 percent reported their spouse or partner did not want to use any contraception. 2.9 percent reported that they were already pregnant again.

	95% Confidence Intervals									
Birth Control Yes No Didn't want to use anything Not having sex Wants a pregnancy										
Percent	85.5-90.3	9.7-14.5	14.2-30.5	17.6-35.3	2.7-12.6					

95% Confidence Intervals								
Birth Control Husb/partner didn't want to use Pregnant now Can't pay for birth control Thinks sterile								
Percent	6.0-19.4	1.0-8.7	5.5-17.9	3.9-16.2				



(Question 63 of the PRAMS Survey)

In 2009, 32.9 percent of women reported condom usage as the preferred method of contraception. 26.4 percent reported they were taking the pill. Sterilization was the choice of 15.0 percent of women who had their tubes tied after delivery.

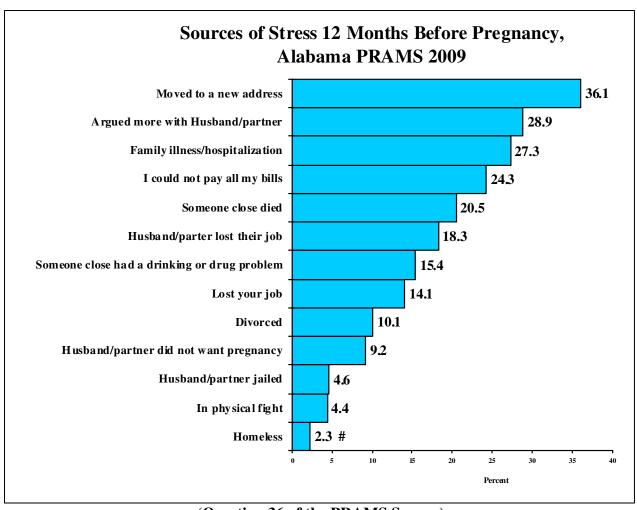
95% Confidence Intervals								
Method of Birth Control Condoms Pill Tubes tied								
Percent 29.3-36.7 23.1-30.0 12.4-18.1								

95% Confidence Intervals								
Method of Birth Control Withdrawal Shots every 3 mos. Abstinence								
Percent 12.6-18.2 6.4-11.1 4.6-8.7								

Mothers' Birth Control Comments

- "I had just got my IUD taken out because of pain and it happened so fast I really wasn't trying to have a baby."
- "Fixing to start the patch. I was told that it might dry my milk up so I was waiting to stop pumping."
- "I did not like condoms or birth control and did not know about the Mirana at the time."
- "Doctor told me I had to wait until the eighth week to do birth control."
- "I wasn't consistent with taking birth control, so I stopped."

MISCELLANEOUS

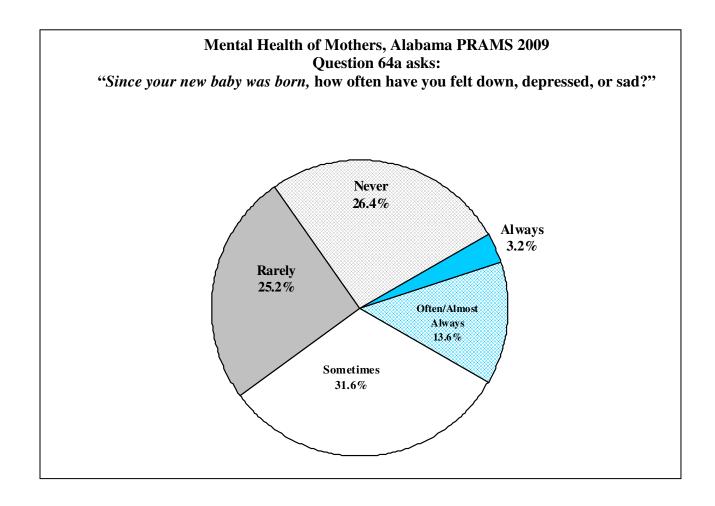


(Question 36 of the PRAMS Survey)

Stressful events experienced during pregnancy can have negative effects on the health of the expectant mother and her unborn baby. When asked about various sources of stress during the twelve months preceding delivery, 36.1 percent of Alabama mothers reported they had moved to a new address, 28.9 percent reported they argued more with their husband/partner, about 27.3 percent had a family illness or hospitalization, and 24.3 percent reported they were unable to pay all of their bills. About one in five mothers suffered the loss of someone close to them.

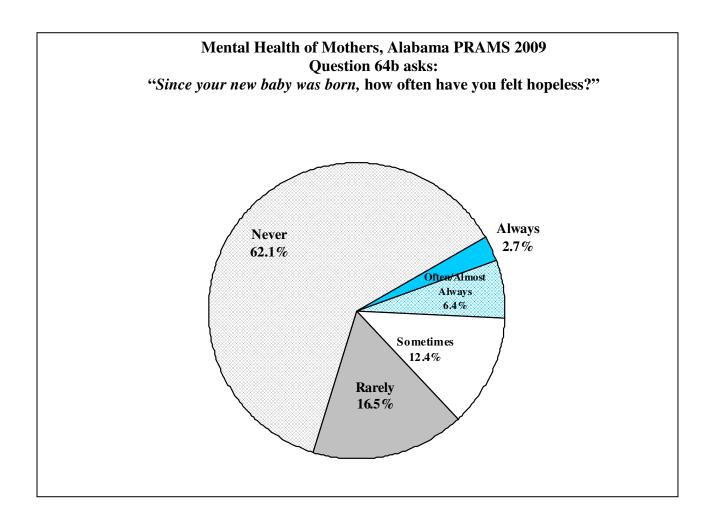
	95% Confidence Intervals									
Source of Stress	Moved									
Percent	32.5-39.7	25.6-32.4	24.1-30.8	21.2-27.6	17.6-23.7	12.9-18.3				

95% Confidence Intervals							
Source of Stress	Divorced	Lost job	Husb/partner lost their job	Husb/partner did not want preg.	In physical fight	Husb/partner jailed	Homeless
Percent	8.0-12.7	11.8-16.8	15.6-21.4	7.3-11.7	3.0-6.2	3.2-6.4	1.4-3.8



In 2009, 16.8 percent of Alabama mothers reported they always or almost always felt down, depressed, or hopeless since the birth of their baby. About 56.8 percent reported feeling this way sometimes and on rare occasions.

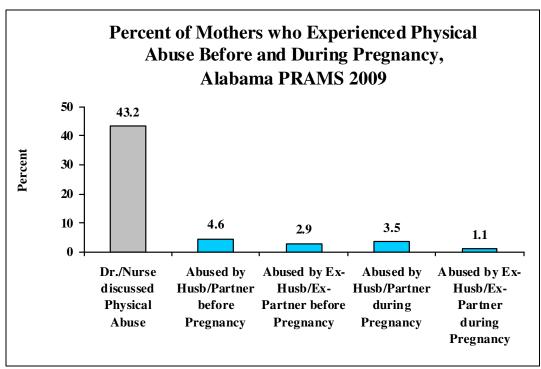
95% Confidence Intervals					
Depression	Never	Always	Often/Almost Always	Sometimes	Rarely
Percent	23.2-29.9	2.0-5.0	11.2-16.4	28.2-35.2	22.1-28.6



In 2009, When Alabama mothers were asked how often they felt hopeless, 9.1 percent responded they felt this way **always or almost always.**

Depression among women who have recently given birth has become an important healthcare issue. Some women experience feelings of sadness, anxiety, or irritability within hours to a few weeks after giving birth (called Baby Blues). However in some women, these feelings and mood swings do not disappear in a few weeks, but instead intensify and may last up to a year after giving birth. This type of depression is called postpartum depression. This more serious form of depression requires medication and possibly counseling to deal with the symptoms. In 2009 in Alabama, 6.6 percent of mothers reported their doctor or other health care worker had diagnosed them with depression since the birth of their baby.

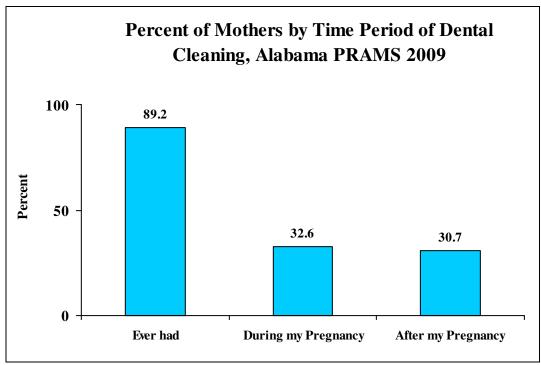
95% Confidence Intervals					
Depression	Never	Always	Often/Almost Always	Sometimes	Rarely
Percent	58.4-65.7	1.6-4.2	4.7-8.5	10.1-15.2	13.9-19.5



(Questions 20, 37, 38, 39 & 40 of the PRAMS Survey)

One Healthy People 2010 Objective is to reduce the incidence of physical assault by a current or former husband or partner to 3.3 assaults per 1,000 persons (or 0.3 percent), aged 12 years or older. In 2009, 4.6 percent Alabama mothers reported physical abuse by their *current* husband/partner and 2.9 percent mothers reported abuse by a *former* husband/partner twelve months before becoming pregnant. The abuse decreased **during pregnancy** by 23.9 percent by *current* spouse/partner and 62 percent by *former* husband/partner. All of the decreases in abuse reported **during pregnancy** are not statistically significant.

95% Confidence Intervals					
Physical Abuse	Abuse Discussed At Prenatal Visits	Abused by Current Husb/partner 12 mos. Before pregnancy	Abused by Former Husb/partner 12 mos. Before pregnancy	Abused by Current Husb/partner <u>During</u> pregnancy	Abused by Former Husb/partner <u>During</u> pregnancy
Percent	39.7-46.9	3.2-6.5	1.9-4.5	2.3-5.3	0.6-2.2

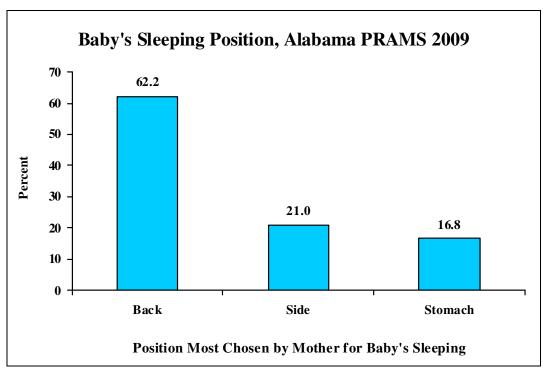


(Question 67 & 68 of the PRAMS Survey)

Periodontal diseases are serious dental infections caused by bacteria. Periodontal diseases can destroy bone and other structures that support the teeth. Pregnant women who have periostitis are at increased risk of having a premature or preterm delivery. Non-surgical dental procedures are available to safely treat this condition in pregnant women.

In 2009 when Alabama mothers were asked, "When did you have your teeth cleaned by a Dentist or dental hygienist?" 89.2 percent reported having had their teeth cleaned, 32.6 percent had their teeth cleaned *during* their pregnancy, and 30.7 percent reported a cleaning *after* their most recent pregnancy. Nearly 10.8 percent of Alabama mothers had never had a dental cleaning. If following the recommended guidelines for good dental health, all mothers should have visited the dentist at least once during their pregnancy for a check and cleaning.

95 % Confidence Intervals				
When cleaning was performed	Before Pregnancy	During Pregnancy	After Pregnancy	
Percent	86.7-91.3	29.0-36.3	27.1-34.5	



(Question 57 of the PRAMS Survey)

Health providers suggest placing an infant on his/her back (face up) for resting, sleeping, or when left alone can reduce the risk of Sudden Infant Death Syndrome or SIDS. A Healthy People 2010 objective is to increase the percentage of healthy full-term infants who are placed on their backs for sleeping to 70 percent.

In 2009 in Alabama, 37.8 percent of mothers reported placing their babies *most often* on their side or stomach for sleeping.

95% Confidence Intervals					
Sleep Position	Back	Side	Stomach		
Percent	58.3-66.0	17.9-24.4	14.0-20.0		

TECHNICAL NOTES

Survey Questions

The PRAMS survey was developed by representatives of several states and researchers from the Centers for Disease Control and Prevention (CDC). The methodology generally follows techniques developed by Donald Dillman and outlined in his book, <u>Mail and Telephone Surveys: The Total Design Method</u>. Great care was used in designing the questions and in making them as non-threatening as possible to the respondent. All questions were worded so that a person with a ninth grade reading level should be able to easily comprehend them.

There is a set of core questions in the survey that are included in questionnaires from all states participating in the PRAMS project. A set of state-specific questions are included in questionnaires if each PRAMS state chooses to include them. A few questions were developed by the Alabama PRAMS Steering Committee and the Alabama PRAMS staff with the assistance of CDC staff.

The major objective of the project is to provide data for planners so that they can target and evaluate programs designed to improve the health of mothers and babies. The data in this report have been presented in a format which is easily useable and understandable by policy makers.

A significant feature of the PRAMS survey is that numerous attempts are made to contact each mother selected for the survey. Mothers are mailed up to three questionnaires at one-week intervals. If the mother does not respond to the mailings, then up to fifteen attempts are made to contact her by telephone. These numerous attempts are helpful in reaching the required 70% overall response rate for statistical reliability.

The survey has gone through four revisions, or phases, since Alabama began using the PRAMS survey: 1993 to 1995 data were gathered in the Phase 2 survey; 1996 to 1999 data were gathered from the Phase 3 survey; and in 2000, the Phase 4 survey began. In 2002, a slight revision was made to Phase 4. In 2004, the Phase 5 survey was implemented. The phase 6 survey was implemented in 2009. Changes in the wording of a question from one phase to another, such as the breastfeeding question, are noted in the chart.

Weighting

Statistics in this report are based on weighted data. The weights were developed by CDC to adjust for nonresponse and noncoverage to give unbiased estimates of population parameters. The first element of the weight is the sampling weight which is the reciprocal of the sampling fraction for each stratum. The second element is a nonresponse adjustment factor. Finally, the third element is a sampling frame noncoverage weight which reflects a less than 0.1 percent rate of omission from the sampling frame. The resulting sampling weight used in analysis of the survey data is the product of these three elements and includes an adjustment for nonresponse and noncoverage*.

The nonresponse portion of the sampling weight was developed through a logistic regression analysis of variables related to nonresponse performed by CDC staff. These variables included mother's marital status, race, age, and education. The adjustment reflects the inclination of women possessing certain characteristics to repond at different rates than women not possessing those characteristics. For example, the response rate for married women is higher than that for unmarried women.

^{*}For 2009, there was no adjustment for noncoverage.

Calculation of Confidence Intervals

The 95% confidence intervals (CI) presented at the bottom of each page were computed using the formula [CI = percent +/- (1.96 x standard error)]. Percents and standard errors were calculated using the SAS and SUDAAN statistical packages provided by CDC. The confidence intervals are included to determine significance of trends. Generally, for simple univariate percentages, the standard errors should be reasonably small. However, for cross-classifications involving several variables, cell frequencies can be quite small and the standard errors quite large, resulting in a large confidence interval around the estimate.

Limitations

Because the mother is first contacted two to four months after giving birth, her responses may be subject to recall bias. She may have forgotten certain dates or what was discussed during pregnancy. Some questions ask the mother to remember up to 12 months before she became pregnant. The mother may also not respond truthfully if the question is asking about events that may not be socially acceptable; i.e. smoking, drinking, use of birth control.

The Sample

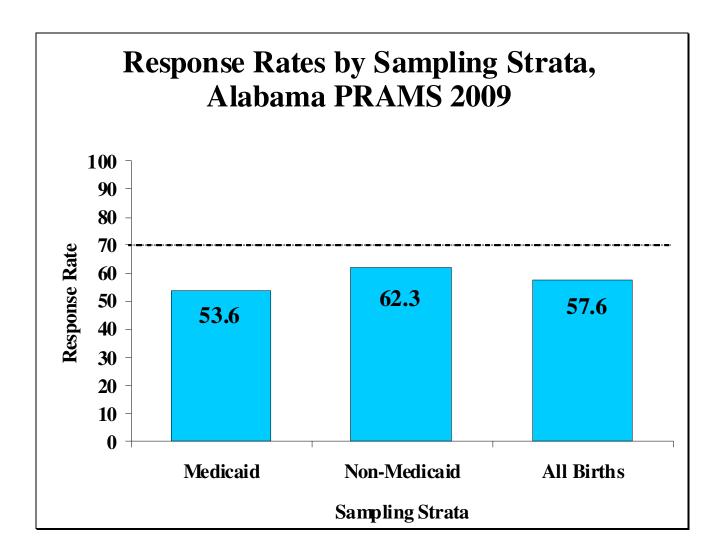
Each month approximately 100 women who have given birth two to four months before the sampling date are selected for the sample. The survey is divided into two strata: Medicaid and non-Medicaid normal birth weight. Women in each of these strata have a different probability of being chosen. Samples are selected so that roughly equal numbers of women are chosen from each strata. The odds of being selected in 2009 were approximately as follows:

Medicaid 1:46 Non-Medicaid 1:51

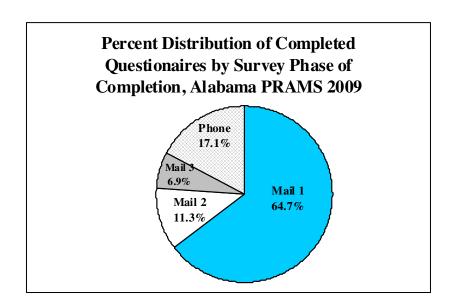
Selection probabilities are adjusted annually to take into account the changes in the distribution of births over time and the response rates of mothers in each strata. The goal is to obtain at least 400 completed questionnaires from each strata.

Strata were chosen to allow for oversampling of mothers who give birth to low birth weight babies and mothers whose birth was paid for by Medicaid. Both low birth weight births and Medicaid births are of special interest to the state of Alabama. Oversampling allows for large enough numbers of births that are low birth weight and Medicaid to be able to perform analyses.

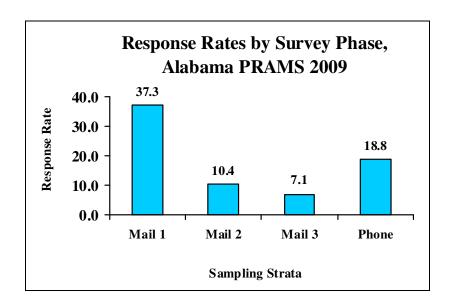
Response Rates



As a rule of thumb, CDC requires at least 400 completed questionnaires and a response rate of 70 percent in each stratum. In 2009, the response rates for two of the strata were <u>below</u> 70 percent, with the higher rate of 62.3 percent among non-Medicaid births and the lower rate of 53.6 percent for Medicaid NBW births. The overall response rate for the two strata was 57.6 percent. Because the CDC requires an overall weighted response rate of 65 percent to insure data is of the highest quality, caution should be used in interpreting data reported from 2009.



The majority of completed surveys, 64.7 percent, were received as a result of the initial mailing or mail 1. The mail 2 accounted for 11.3 percent of completed questionnaires, and mail 3 accounted for 6.9 percent. Of the total number of completed surveys, 17.1 percent resulted from phone phase.



The response rate is the percent of surveys sent which are completed. Of all women who received the first mailing, 37.3 percent responded. The second mailing had a 10.4 percent response rate. The response rate for the third mailing was 7.1 percent in 2009, and the response rate for the phone phase was 18.8 percent. One source of bias in the survey is the possibility that mothers may answer some of the questions differently depending upon whether they respond by mail or telephone.

PRAMS

SURVEY

QUESTIONS

Please mark your answers. Follow the directions included with the questions. If no directions are presented, check the box next to your answer or fill in the blanks. Because not all questions will apply to everyone, you may be asked to skip certain questions.

BEFORE PREGNANCY

First, we would like to ask a few questions about *you* and the time <u>before</u> you got pregnant with your new baby.

At any time during the 12 months before you got pregnant with your new baby, did you do any of the following things? For each item, circle Y (Yes) if you did it or circle N (No) if you did not.

	•		
		No	Ye
a.	I was dieting (changing my eating		
	habits) to lose weight	N	Y
b.	I was exercising 3 or more days		
	of the week	N	Y
c.	I was regularly taking prescription		
	medicines other than birth control	N	Y
d.	I visited a health care worker to		
	be checked or treated for diabetes	N	Y
e.	I visited a health care worker to		
	be checked or treated for high		
	blood pressure	N	Y
f.	I visited a health care worker to		
	be checked or treated for depression		
	or anxiety	N	Y
g.	I talked to a health care worker		
	about my family medical history	N	Y
h.	I had my teeth cleaned by a dentist		
	or dental hygienist	N	Y

						you covered by nce plans?	y
					Ch	eck <u>all</u> that ap	ply
		par He pai Me TR All	the job ents alth in d for (s dicaid ICAR) Kids	of you surance not froi E or oth	r husb that y m a jol	your job pand, partner, or you or someone b) litary health care Please tell	e
			d not l		y heal	th insurance bet	fore
3.	with wee	h yo k di	ur nev id you	w baby take a	, how : multi	you got pregnar many times a vitamin, a c acid vitamin?	
		vita 1 to 4 to	amin, o o 3 tim o 6 tim		acid v eek eek	amin, prenatal ritamin at all	
4.						ant with your n weigh?	ew
			Pound	s OR		Kilos	

2. During the month before you got pregnant

5.	How tall are you without shoes?	The next questions are about the time when you got pregnant with your <i>new</i> baby.		
	Feet Inches OR Meters	11. Thinking back to just before you got pregnant with your new baby, how did you feel about becoming pregnant?		
6.	What is your date of birth?	Check one answer		
7.	Month Day Year Before you got pregnant with your new	 ☐ I wanted to be pregnant sooner ☐ I wanted to be pregnant later ☐ I wanted to be pregnant then ☐ I didn't want to be pregnant then or at any time in the future 		
,.	baby, were you ever told by a doctor, nurse, or other health care worker that you had Type 1 or Type 2 diabetes? This is not the same as gestational diabetes or diabetes that	12. When you got pregnant with your new baby, were you trying to get pregnant?		
	starts during pregnancy.	No Yes — → Go to Question 15		
8.	Yes Before you got pregnant with your new baby, did you ever have any other babies who were born alive?	13. When you got pregnant with your new baby, were you or your husband or partner doing anything to keep from getting pregnant? (Some things people do to keep from getting pregnant include not having sex		
V	□ No → Go to Question 11 □ Yes Did the baby born just before your new	at certain times [natural family planning or rhythm] or withdrawal, and using birth control methods such as the pill, condoms, vaginal ring, IUD, having their tubes tied, or their partner having a vasectomy.)		
<i>J</i> .	one weigh <i>more</i> than 5 pounds, 8 ounces (2.5 kilos) at birth?	No Yes Go to Question 15		
	□ No □ Yes	Go to Question 14		
10.	Was the baby <i>just before</i> your new one born <i>more</i> than 3 weeks before his or her due date?			
	□ No □ Yes			

		J
14.	What were your reasons or your husband's or partner's reasons for not doing anything to keep from getting pregnant?	DURING PREGNANCY
	Check <u>all</u> that apply	The next questions are about the prenatal care you received during your most recent
		The next questions are about the prenatal care you received during your most recent pregnancy. Prenatal care includes visits to a doctor, nurse, or other health care worker before your baby was born to get checkups and advice about pregnancy. (It may help to look at the calendar when you answer these questions.) 15. How many weeks or months pregnant were you when you were sure you were pregnant? (For example, you had a pregnancy test or a doctor or nurse said you were pregnant.) Weeks OR Months I don't remember 16. How many weeks or months pregnant were you when you had your first visit for prenatal care? Do not count a visit that was only for a pregnancy test or only for WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children). Weeks OR Months I didn't go for prenatal care Go to Page 4, Question 18 Go to Page 4, Question 17

4					
17.	Did you get prenatal care as early in yo	our		l any of these healt	
	pregnancy as you wanted?		hel	p you pay for your	prenatal care?
Г	No				Check <u>all</u> that apply
	☐ Yes	n 19		Haalth ingunanaa fr	rom vous ich
10					nusband, partner, or
18.	Did any of these things keep you from			parents	iusband, partner, or
	getting prenatal care at all or as early a wanted? For each item, circle T (True) if	-			nat you or someone else
	was a reason that you didn't get prenatal of			paid for (not from	-
	when you wanted or circle \mathbf{F} (False) if it w			Medicaid	
	not a reason for you or if something does				military health care
	apply to you.			All Kids	
	-11 7 7 -			Other source(s) —	→ Please tell us:
	True	False			
a.	I couldn't get an appointment				
	when I wanted one	F		I did not have heal	th insurance to help
b.	I didn't have enough money or	E		pay for my prenata	
C	insurance to pay for my visits T I had no transportation to get to	F			
c.	the clinic or doctor's office T	F			
d.	The doctor or my health plan	•			
٠.	would not start care as early				
	as I wanted	F			
e.	I had too many other things				
	going on	F			
f.	I couldn't take time off from work				
	or schoolT	F			
g.	I didn't have my Medicaid cardT	F			
h.	I had no one to take care of my	E			
i.	children	F F			
j.	I didn't want anyone else to know	1			
J.	I was pregnant T	F			
k.	I didn't want prenatal care T	F			
	1				
Te	2				
1	you did not go for prenatal care, go to uestion 21.				
Q	uestion 21.				

20.	During any of your prenatal care visits, d a doctor, nurse, or other health care won talk with you about any of the things list	rker ted	At any time during your most recent pregnancy or delivery, did you have a test for HIV (the virus that causes AIDS)?
	below? Please count only discussions, no reading materials or videos. For each item circle Y (Yes) if someone talked with you about it or circle N (No) if no one talked wyou about it.	1,	NoYesI don't know
a.	No How smoking during pregnancy could affect my baby	Yes 22.	. Have you ever heard or read that taking a vitamin with folic acid can help prevent some birth defects?
b. c. d.	Breastfeeding my baby N How drinking alcohol during pregnancy could affect my baby N Using a seat belt during my	Y Y	□ No □ Yes
e. f.	pregnancy	Y 23.	During your most recent pregnancy, were you on WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children)?
g. h.	affect my baby	Y Y	□ No — Go to Question 25 ☐ Yes
i.		Y Y	When you went for WIC visits during your most recent pregnancy, did you receive information on breastfeeding?
j. k.		Y	□ No □ Yes
1.		Y 25.	During your most recent pregnancy, were you told by a doctor, nurse, or other health care worker that you had gestational diabetes (diabetes that started during this pregnancy)?
			□ No □ Yes

d e	Did you have any of the following probl Juring your most recent pregnancy? Fo ach item, circle Y (Yes) if you had the problem or circle N (No) if you did not.		27c. How many times did you go to the hospital or emergency room because of the problem(s)?
a. V b. K iii c. S d d d. C ((e. H coor) f. F a g. L b b coor f. V b b r r i. I I	No Vaginal bleeding	Yes Y Y Y Y Y Y Y Y Y	☐ 1 time ☐ 2 times ☐ 3 times ☐ 4 or more times The next questions are about smoking cigarettes around the time of pregnancy (before, during, and after). 28. Have you smoked any cigarettes in the past 2 years? ☐ No — Go to Question 32 ☐ Yes 29. In the 3 months before you got pregnant, how many cigarettes did you smoke on an average day? (A pack has 20 cigarettes.) ☐ 41 cigarettes or more ☐ 21 to 40 cigarettes ☐ 11 to 20 cigarettes ☐ 6 to 10 cigarettes ☐ 6 to 10 cigarettes
	ou did <i>not</i> have any of the problems lis ve, go to Question 28.	ted	☐ 1 to 5 cigarettes ☐ Less than 1 cigarette ☐ I didn't smoke then
1	Did a doctor, nurse, or other health car worker tell you to stay home in bed for more than 2 days because of any of the problem(s) listed above?		30. In the <u>last 3</u> months of your pregnancy, how many cigarettes did you smoke on an average day? (A pack has 20 cigarettes.)
	□ No □ Yes		 □ 41 cigarettes or more □ 21 to 40 cigarettes □ 11 to 20 cigarettes
	Did you go to the hospital or emergenc room because of any of the problem(s) listed above?		 6 to 10 cigarettes 1 to 5 cigarettes Less than 1 cigarette
Go 1	No — Go to Question Yes to Question 27c	28	☐ I didn't smoke then

31.	How many cigarettes do you smoke on an average day now? (A pack has 20 cigarettes.)	34a. During the 3 months before you got pregnant, how many alcoholic drinks did you have in an average week?			
	 □ 41 cigarettes or more □ 21 to 40 cigarettes □ 11 to 20 cigarettes □ 6 to 10 cigarettes □ 1 to 5 cigarettes □ Less than 1 cigarette □ I don't smoke now 	14 drinks or more a week 7 to 13 drinks a week 4 to 6 drinks a week 1 to 3 drinks a week Less than 1 drink a week I didn't drink then Go to Question 35a			
32.	Which of the following statements best describes the rules about smoking <i>inside</i> your home <i>now</i> ?	34b. During the 3 months before you got pregnant, how many times did you drink 4 alcoholic drinks or more in one sitting:			
	Check one answer	A sitting is a two hour time span.			
	 □ No one is allowed to smoke anywhere inside my home □ Smoking is allowed in some rooms or at some times □ Smoking is permitted anywhere inside my home 	☐ 6 or more times ☐ 4 to 5 times ☐ 2 to 3 times ☐ 1 time ☐ I didn't have 4 drinks or more in 1 sitting			
	e next questions are about drinking ohol around the time of pregnancy	35a. During the <u>last 3</u> months of your pregnancy, how many alcoholic drinks did you have in an average week?			
	fore, during, and after).	14 drinks or more a week			
33.	Have you had any alcoholic drinks in the past 2 years? A drink is 1 glass of wine, wine cooler, can or bottle of beer, shot of liquor, or mixed drink. Go to Page 8, Question 36	7 to 13 drinks a week 4 to 6 drinks a week 1 to 3 drinks a week Less than 1 drink a week I didn't drink then — Go to Page 8, Question 36			
G	o to Question 34a	35b. During the <u>last 3 months</u> of your pregnancy, how many times did you drink 4 alcoholic drinks or more in one sitting? A sitting is a two hour time span.			
		☐ 6 or more times ☐ 4 to 5 times ☐ 2 to 3 times ☐ 1 time ☐ I didn't have 4 drinks or more in 1 sitting			

Pregnancy can be a difficult time for some women. The next questions are about things that may have happened before and

	ngs that may have happened <u>before</u> and <u>ring</u> your most recent pregnancy.	ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?
36.	This question is about things that may have happened during the 12 months before you new baby was born. For each item, circle Y (Yes) if it happened to you or circle N (No	Yes
	if it did not. (It may help to look at the calendar when you answer these questions.)	your husband or partner push, hit, slap, kick, choke, or physically hurt you in any
	No Y	es other way?
a.	A close family member was very sick and had to go into the hospital N	Y No Yes
b.	I got separated or divorced from my	
c.	1	40. During your most recent pregnancy, did an
d.		ex-husband or ex-partner push, hit, slap,
e.		kick, choke, or physically hurt you in any
f.	I lost my job even though I wanted	other way?
σ	to go on working	Y No
g.		Y Yes
h.	My husband or partner said he	The next questions are about your labor
	1 6	
i. j.	1 3	and delivery. (It may neep to look at the calendar when you answer these questions.)
j. k.	My husband or partner or I	tateman when you also were most questionary
	-	41. When was your baby due?
1.	Someone very close to me had a	41. When was your baby duc.
m.		/ 20
111.	Someone very close to me died	Month Day Year
37.	During the 12 months before you got	
	pregnant with your new baby, did your	42. When did you go into the hospital to have
	husband or partner push, hit, slap, kick,	your baby?
	choke, or physically hurt you in any other	/ / 20
	way?	/ 20
	□ No	Month Day Year
	☐ Yes	☐ I didn't have my baby in a hospital
		-

38. During the 12 months before you got pregnant with your new baby, did an

43.	When was your baby born?	AFTER PREGNANCY
	$\frac{1}{\text{Month}} / \frac{1}{\text{Day}} / \frac{20}{\text{Year}}$	The next questions are about the time since your new baby was born.
44.	When were you discharged from the hospital after your baby was born?	46. After your baby was born, was he or she put in an intensive care unit?
	Month Day / 20 Year ☐ I didn't have my baby in a hospital	□ No □ Yes □ I don't know
45	Did any of these health insurance plans help	47. After your baby was born, how long did he or she stay in the hospital?
75.	you pay for the <i>delivery</i> of your new baby? Check <u>all</u> that apply	Less than 24 hours (less than 1 day) 24 to 48 hours (1 to 2 days)
	 ☐ Health insurance from your job or the job of your husband, partner, or parents ☐ Health insurance that you or someone else paid for (not from a job) ☐ Medicaid ☐ TRICARE or other military health care ☐ All Kids 	3 to 5 days 6 to 14 days More than 14 days My baby was not born in a hospital My baby is still in the hospital—Go to Page 10, Question 50 48. Is your baby alive now?
	☐ Other source(s) → Please tell us:	☐ No → Go to Page 12, Question 61 Yes
	☐ I did not have health insurance to help pay for my delivery	49. Is your baby living with you now? Go to Page 12, Question 61 Yes Go to Page 10, Question 50

50.	Did you ever breastfeed or pump breast milk to feed your new baby after delivery, even for a short period of time?		ow many weeks or n eastfeed or pump m	nonths did you ilk to feed your baby?
Ų —	-☐ No ☐ Yes — Go to Question 52	_	Weeks OR Less than 1 week	Months
51.	What were your reasons for not breastfeeding your new baby? Check all that apply		hat were your reaso eastfeeding?	
52.	My baby was sick and was not able to breastfeed I was sick or on medicine I had other children to take care of I had too many household duties I didn't like breastfeeding I tried but it was too hard I didn't want to I was embarrassed to breastfeed I went back to work or school I wanted my body back to myself Other	ت ا	I thought my baby enough weight My nipples were so bleeding It was too hard, paid consuming I thought I was not milk I had too many oth I felt it was the right breastfeeding I got sick and was at I went back to work My baby was jaund skin or whites of the	lid not satisfy my baby was not gaining ore, cracked, or inful, or too time producing enough er household duties at time to stop not able to breastfeed k or school diced (yellowing of the

Q	uestion 56a.
55.	This question asks about things that may have happened at the hospital where your new baby was born. For each item, circle Y (Yes) if it happened or circle N (No) if it did not happen.
	No. Vos

If your baby was not born in a hospital, go to

	N	0	Yes
a.	Hospital staff gave me		
	information about breastfeedingN	[Y
b.	My baby stayed in the		
	same room with me at the hospital N	[Y
c.	I breastfed my baby in the hospital N	[Y
d.	I breastfed in the first hour after		
	my baby was born	[Y
e.	Hospital staff helped me learn		
	how to breastfeed N	[Y
f.	My baby was fed only		
	breast milk at the hospital N		Y
g.	Hospital staff told me to		
	breastfeed whenever my		
	baby wanted N		Y
h.	The hospital gave me a		
	breast pump to use N		Y
i.	The hospital gave me a gift pack		
	with formula N	[Y
j.	The hospital gave me a		
	telephone number to call for		
	help with breastfeeding N	[Y
k.	My baby used a pacifier		
	in the hospital N		Y

56a. How old was your new baby the first time he or she drank liquids other than breast milk (such as formula, water, juice, tea, or cow's milk)?

	Weeks OR Months		
My baby was less than 1 week oldMy baby has not had any liquids other than breast milk			

56b	56b. How old was your new baby the first time he or she ate food (such as baby cereal, baby food, or any other food)?					
		7	Veeks	OR		Months
		-	•			n 1 week old n any foods
			y is st iestio		he ho	spital, go to
57.					n do y sleep r	you <u>most often</u> lay now?
					C	heck <u>one</u> answer
		On h	is or l	ner sid ner bad ner sto	ck	
58.	or o	ther	healtl	ı care	work	by a doctor, nurse, er for a <i>one week</i> vas born?
		No Yes				
59.	che hea	ckup ' lth vis	? (A visit for	well-b	aby ch aby u	well-baby neckup is a regular sually at 1, 2, 4,
V		Yes	l			e 12, Question 61
Go to Page 12, Question 60						

60.	How many times has your new baby been to a doctor or nurse for a well-baby checkup? (It may help to use the calendar.)	63.	hus		ntrol are you or your sing <i>now</i> to keep from
	Times				Check <u>all</u> that apply d (female sterilization)
	Are you or your husband or partner doing anything now to keep from getting pregnant? (Some things people do to keep from getting pregnant include not having sex at certain times [natural family planning or rhythm] or withdrawal, and using birth control methods such as the pill, condoms, vaginal ring, IUD, having their tubes tied, or their partner having a vasectomy.) No Yes Go to Question 63 What are your reasons or your husband's or partner's reasons for not doing anything to keep from getting pregnant now? Check all that apply			Vaginal ring (Nuva IUD (including Mir Rhythm method or planning Withdrawal (pullin Not having sex (ab Emergency contrac (The "morning-afte	y 3 months ant (Implanon [®]) h (OrthoEvra [®]) hl cap, or sponge Ring [®]) rena [®]) natural family g out) stinence)
If	☐ I want to get pregnant ☐ I don't want to use birth control ☐ My husband or partner doesn't want to use anything ☐ I don't think I can get pregnant (sterile) ☐ I can't pay for birth control ☐ I am pregnant now ☐ Other				
ar	by thing to keep from getting pregnant now, to to Question 64.				

64. Below is a list of feelings and experiences that women sometimes have after childbirth. Read each item to determine	If your baby is not alive or is not living with you, go to Question 67. 66. About how many hours a day, on average, is your new baby in the same room or vehicle with someone who is smoking?			
how well it describes your feelings and experiences. Then, write on the line the number of the choice that best describes how often you have felt or experienced things this way since your new baby was				
born. Use the scale when answering:	Hours			
1 2 3 4 5 Never Rarely Sometimes Often Always a. I felt down, depressed, or sad	Less than 1 hour a dayMy baby is never in the same room or vehicle with someone who is smoking			
b. I felt hopeless	67. Have you ever had your teeth cleaned by a dentist or dental hygienist?			
c. I felt slowed down	☐ No — Go to Page 14, Question 69 ☐ Yes			
65. At any time during your most recent pregnancy, did a doctor, nurse, or other health care worker tell you that you had depression?	listed below? For each time period, circle Y (Yes) if you had your teeth cleaned then or circle N (No) if you did not have your teeth cleaned then. No Yes			
pregnancy, did a doctor, nurse, or other health care worker <i>tell you that you had</i>	circle N (No) if you did not have your teeth cleaned then.			

14

The last questions are about the time during the <u>12 months before</u> your new baby was born.

			your income, your husband's or partner's
69.	During the 12 months was born, what were thousehold's income?		income, and any other income you may have received. (All information will be kept private and will not affect any services you are now getting.)
	 □ Money from famili □ Money from a busion or rental income □ Paycheck or mone □ Food stamps or Wisupplemental Nutrown □ Women, Infants, and Aid such as Tempor Needy Families (Tassistance, general Supplemental Section Unemployment be □ Unemployment be □ Child support or all □ Social security, wo 	y from a job IC (the Special rition Program for nd Children) orary Assistance for 'ANF), welfare, public assistance, or urity Income (SSI) nefits	

70. During the 12 months before your new baby was born, what was your yearly total

household income before taxes? Include