

PRAMS Surveillance Report Alabama 2010

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DIVISION OF STATISTICAL ANALYSIS
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Principal Authors

Qun Zheng, M.S., Louie Albert Woolbright, Ph.D. and Izza Afgan, M.P.H.

**Donald E. Williamson, M.D., State Health Officer
Catherine Molchan Donald, M.B.A., Director, Center for Health Statistics
Louie Albert Woolbright, Ph.D., Director, Division of Statistical Analysis**

**Alabama Department of Public Health
Center for Health Statistics
Division of Statistical Analysis
Post Office Box 5625
Montgomery, Alabama 36103-5625
(334) 206-5429**

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PRAMS SURVEILLANCE REPORT

ALABAMA 2010

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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 56,858 live births which occurred in Alabama in 2010 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 2010, 723 questionnaires were completed from 1,178 sampled. The overall **unweighted** response rate was 61.4 percent, and the **weighted** response rate was 62 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 2010.

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.

2010 Alabama PRAMS Surveillance Report Highlights

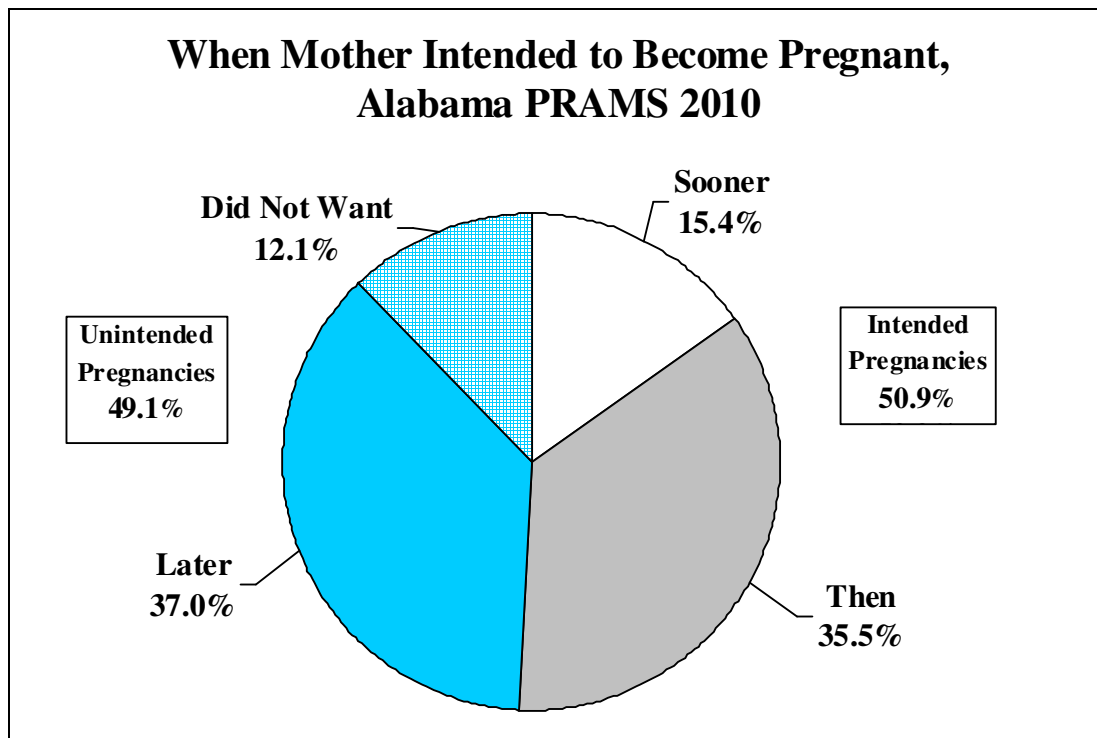
- 49.1 percent of Alabama births were unintended.
- 61.6 percent of Alabama mothers did not take any multivitamins before becoming pregnant.
- 15.9 percent of Alabama mothers indicated they continued smoking during pregnancy.
- 9.8 percent of Alabama mothers reported drinking alcoholic beverages on a weekly basis during the last three months of pregnancy.
- 71.0 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.
- 59.8 percent of Alabama mothers participated in the Supplemental Food Program for Women, Infants, and Children (WIC) during pregnancy.
- 70.6 percent of Alabama mothers initiated breastfeeding their infants.
- 59.5 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), 87.1 percent of mothers were using some form of birth control.
- 34.6 percent of Alabama mothers reported they moved to a new address during their pregnancy.
- 15.9 percent of Alabama mothers reported they *always or almost always* felt down, depressed, or sad since the birth of their baby. 54.2 percent reported feeling this way *sometimes or on rare occasions*.
- 8.3 percent of Alabama mothers reported being *diagnosed* by their doctor or health care worker with depression since the birth of their infant.
- 32.7 percent of Alabama mothers reported having a dental cleaning during their pregnancy.
- 66.0 percent of Alabama mothers most often lay their babies on their backs for sleeping.

Mothers' General Comments

- “Being a mommy is the best thing to happen to me. We are blessed with two boys and we love them so much. I hope my survey can help.”
- “I would like to take time out and say I enjoyed answering all the questions to the best of my ability. My pregnancy wasn’t perfect, but I had a healthy baby.”
- “I hope these questions help to find out why some women lose their babies.”
- “I am thankful that you are doing this survey. I hope we find some answers.”
- “I hope my answers help.”
- “I enjoyed doing this survey. I hope it helps with babies and pregnancies in the future.”
- “I am very happy to provide this information.”
- “It was a pleasure answering these questions. You are quite welcome.”

INTENDEDNESS OF BIRTHS

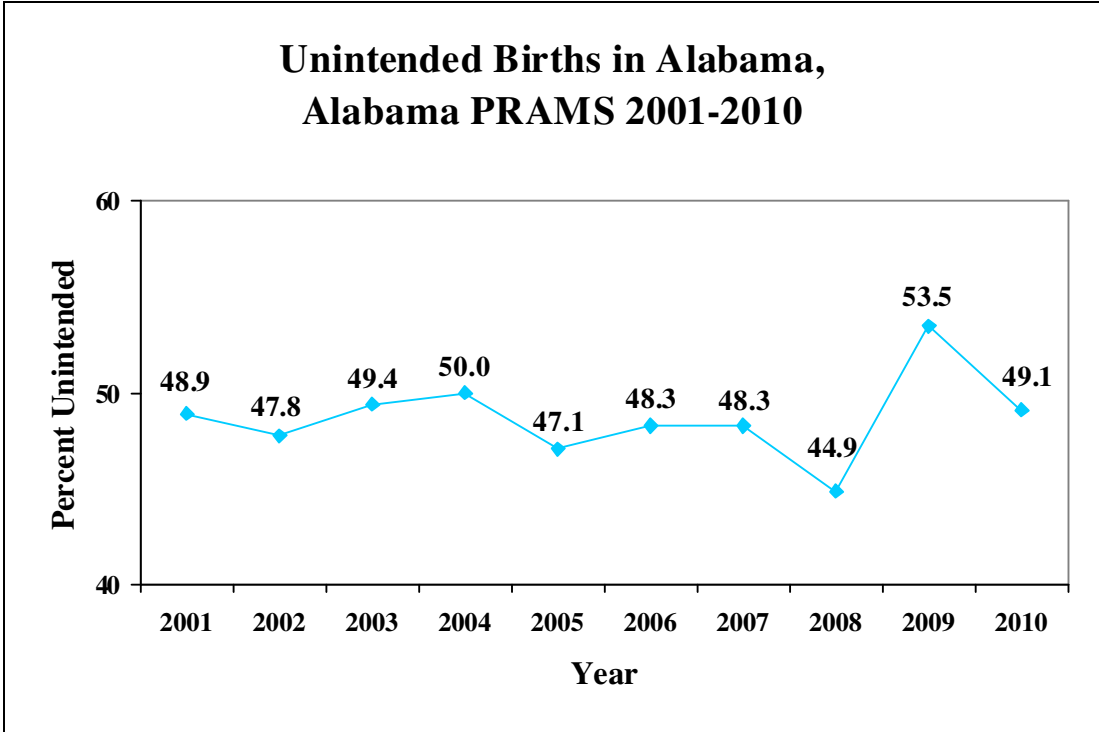
When Mother Intended to Become Pregnant, Alabama PRAMS 2010



(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 2010, 49.1 percent of Alabama mothers reported their pregnancies as *unintended*. 37.0 percent of Alabama women said they wanted to be pregnant *later*, and 12.1 percent said they did not want to be pregnant then or at any time in the future. On the other hand, 50.9 percent of Alabama mothers reported either wanting to be pregnant *then* (35.5 percent) or even *sooner* (15.4 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.

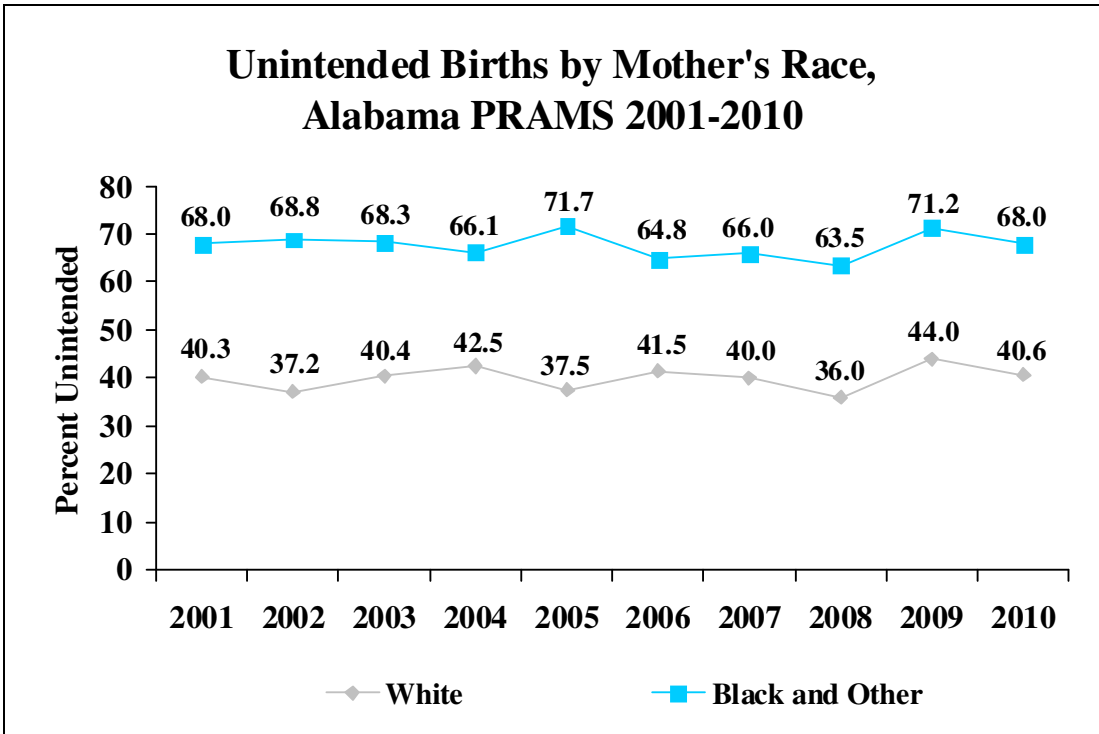
95 % Confidence Intervals						
Intention	Sooner	Then	Later	Did Not Want	Intended	Unintended
Percent	13.0-18.2	33.5-40.6	32.1-39.1	9.8-14.8	47.3-54.5	45.5-52.7



(Question #10 of the PRAMS Survey)

From 2009 to 2010, there was an 8.2% decrease in unintended births in Alabama. However, the difference from 2009 to 2010 is not statistically significant.

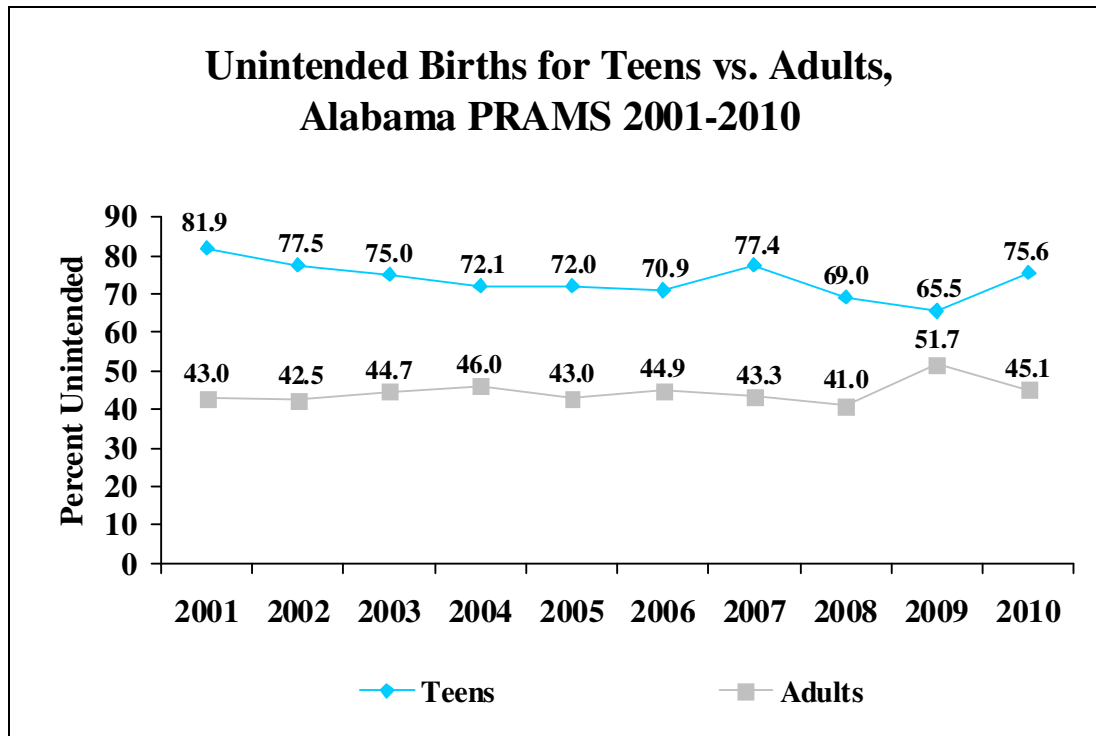
95 % Confidence Intervals										
Year	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
% Unintended	46.0-51.7	44.8-50.8	46.3-52.5	46.5-53.5	43.7-50.6	44.9-51.8	44.8-51.8	41.4-48.5	49.8-57.1	45.5-52.7



(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 2009-2010, the percentage of unintended births to black and other women decreased by 4.5 percent, and the percentage of unintended births decreased by 7.7 percent from 2009-2010 among white women. The percent change in both populations is not statistically significant.

95 % Confidence Intervals										
Year	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
White	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	36.5-44.9
Black & Other	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	61.2-74.1

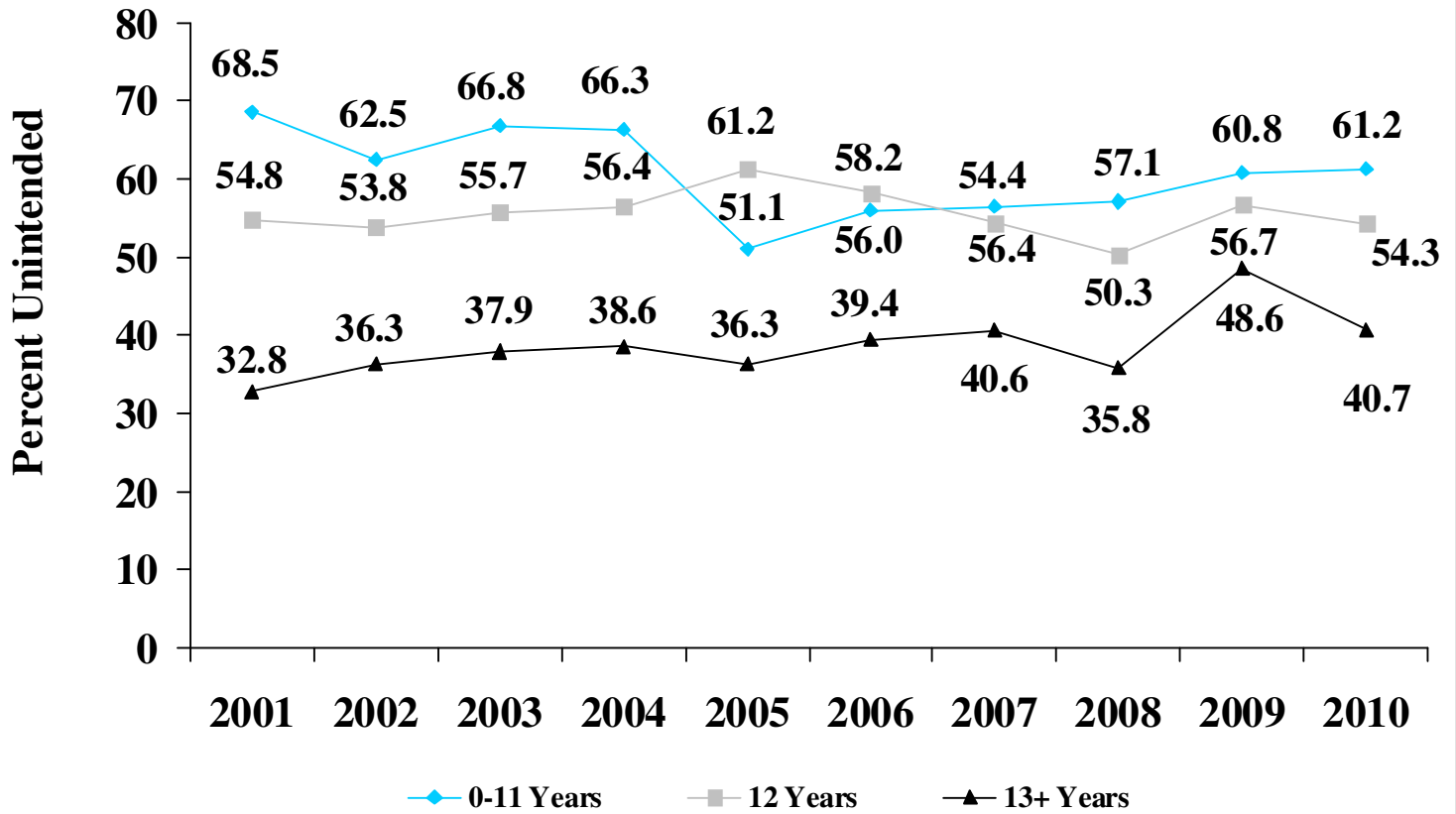


(Question #10 of the PRAMS Survey)

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 2009 through 2010, an increase of 15.4 percent in the percentage of unintended pregnancies among Alabama’s teenagers was seen. From 2009 to 2010 there was a 12.8 percentage decrease in the adult group.

95 % Confidence Intervals										
Year	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Teens	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	65.7-83.3
Adults	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	41.2-49.0

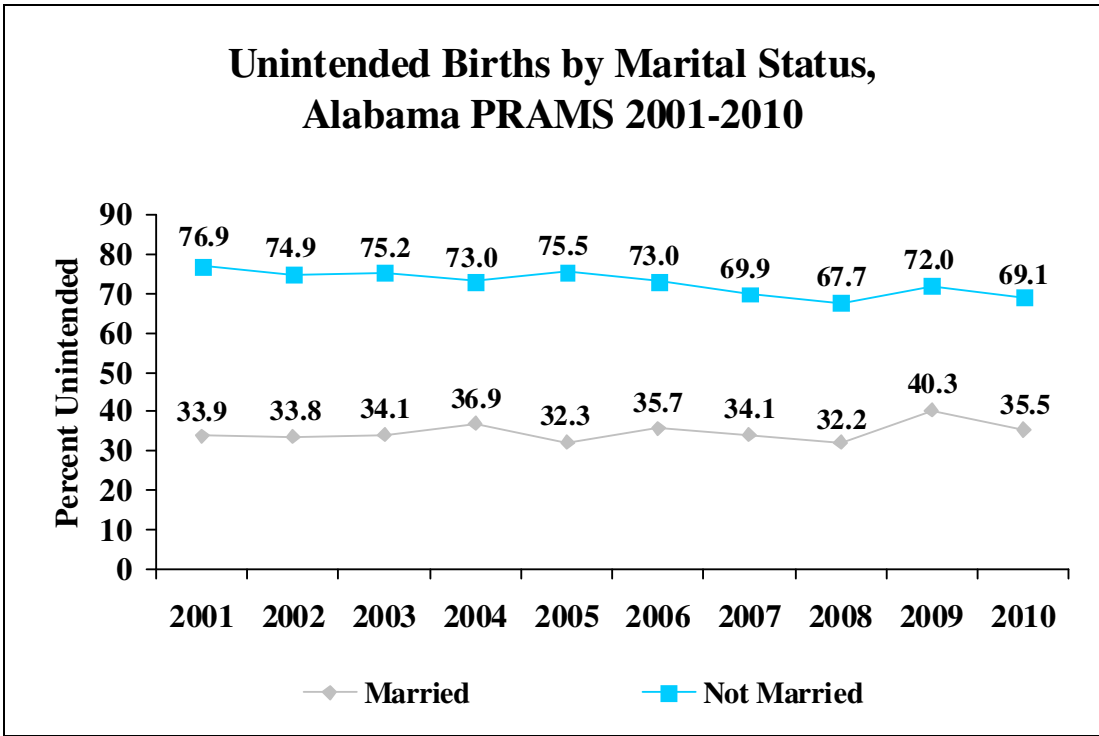
Unintended Births by Mother's Education, Alabama PRAMS 2001-2010



(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. From 2005-2010, there was a 19.8% increase of unintended births among women with the lowest level of education and a slight increase was seen among women with 12 years of education. There was a 16.3% decrease in unintended births among women with the highest levels of education from 2009 to 2010. These changes were not statistically significant.

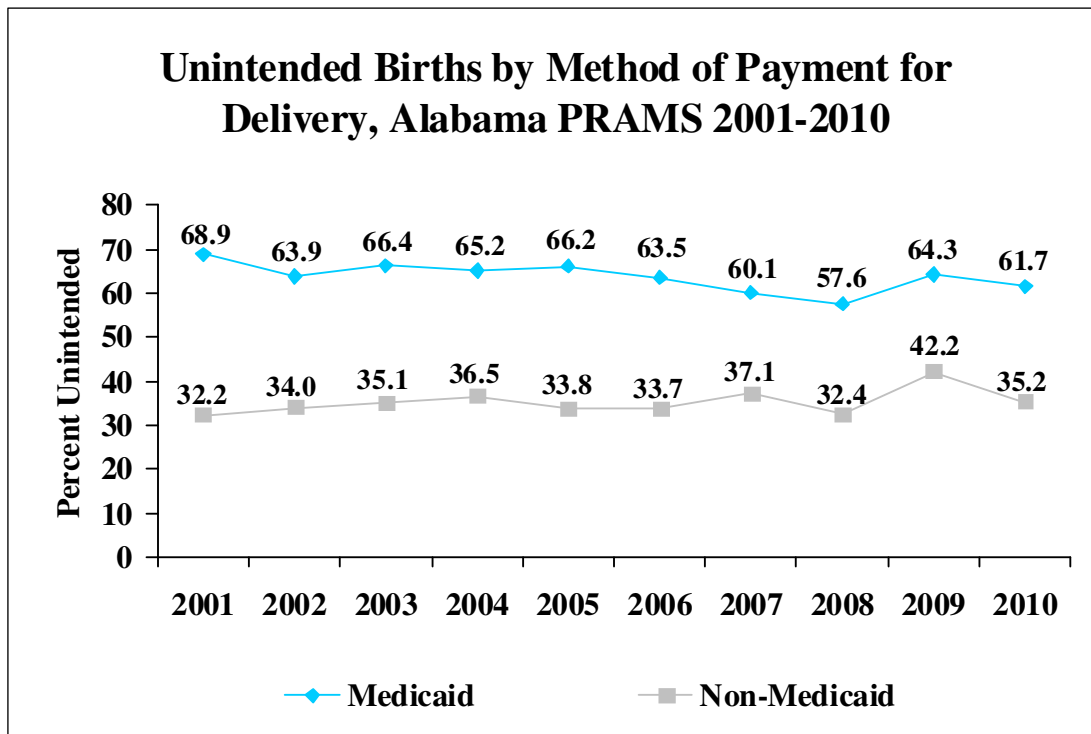
95 % Confidence Intervals										
Year/ Education	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
0-11 yrs.	63.0-74.0	56.4-68.7	59.9-73.0	58.2-73.6	43.2-58.8	48.0-63.8	47.6-64.9	48.4-65.3	52.0-69.0	52.5-69.2
12 yrs.	49.3-60.2	48.2-59.3	49.9-61.4	49.9-62.6	54.8-67.3	51.4-64.8	47.9-60.8	43.6-56.9	49.8-63.3	47.6-60.8
13 plus yrs.	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	35.7-45.8



(Question #10 of the PRAMS Survey)

The average percent of unintended births to unmarried women was 94.6 percent higher than that of 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. From 2009-2010, there was a 4.0 percent decrease of unintended births among unmarried women and 11.9 percent decrease of unintended births among married women.

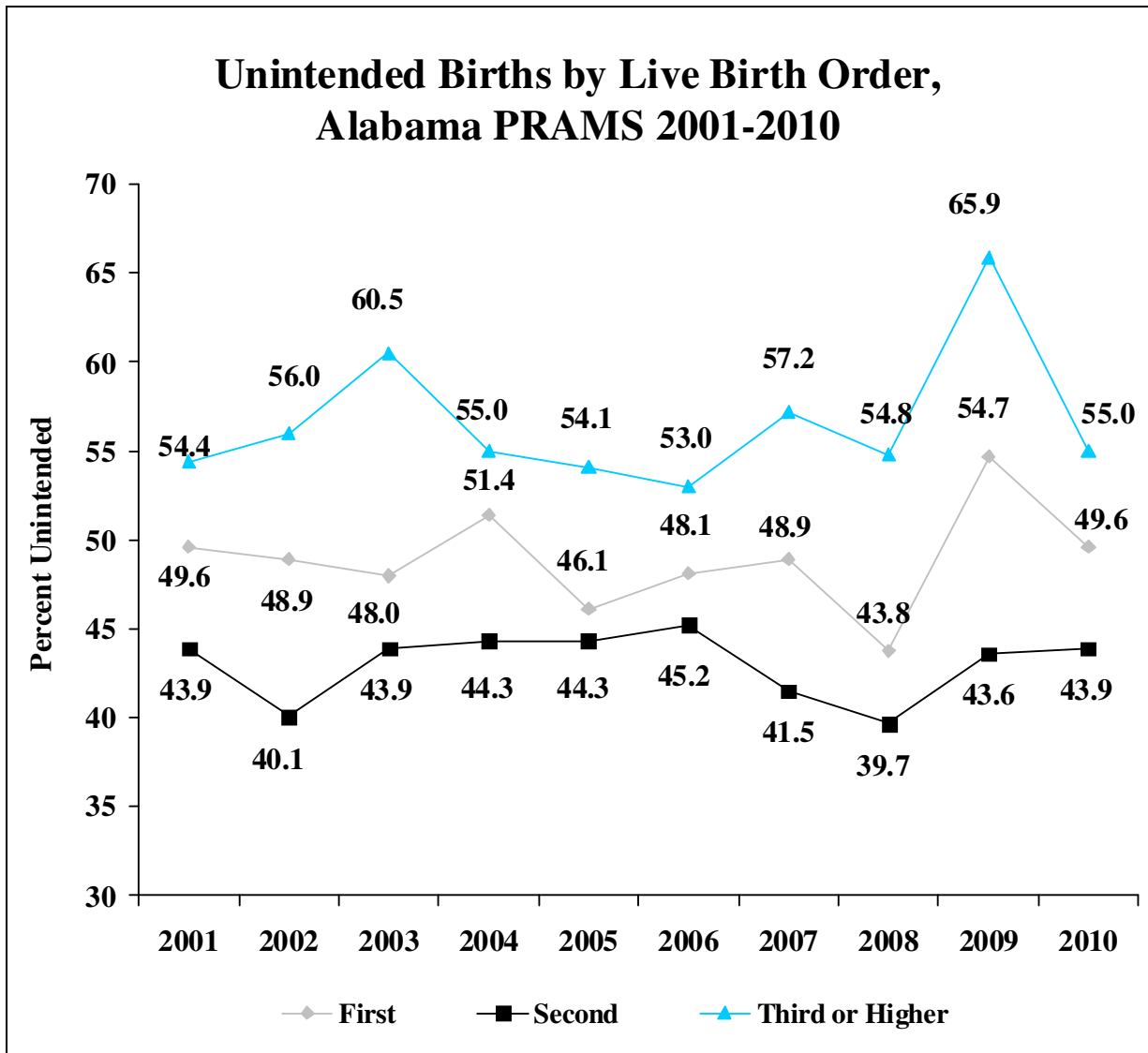
95 % Confidence Intervals										
Year/ Marital Status	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Married	30.3-37.6	30.1-37.5	30.4-38.0	32.8-41.3	28.4-36.5	31.7-39.9	30.2-38.3	28.2-36.5	35.8-44.9	31.1-40.1
Not Married	72.7-81.1	70.5-79.4	70.1-79.6	67.3-78.0	69.8-80.3	67.1-78.2	64.0-75.3	61.5-73.4	66.1-77.2	63.3-74.4



(Question #10 of the PRAMS Survey)

In 2010 in Alabama, 61.7 percent of births to women on Medicaid were unintended compared to 35.2 percent among non-Medicaid women. This indicates that poorer women are more likely to have unplanned births.

95 % Confidence Intervals										
Year/ Payment	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Medicaid	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	56.6-66.6
Non-Medicaid	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	30.2-40.5

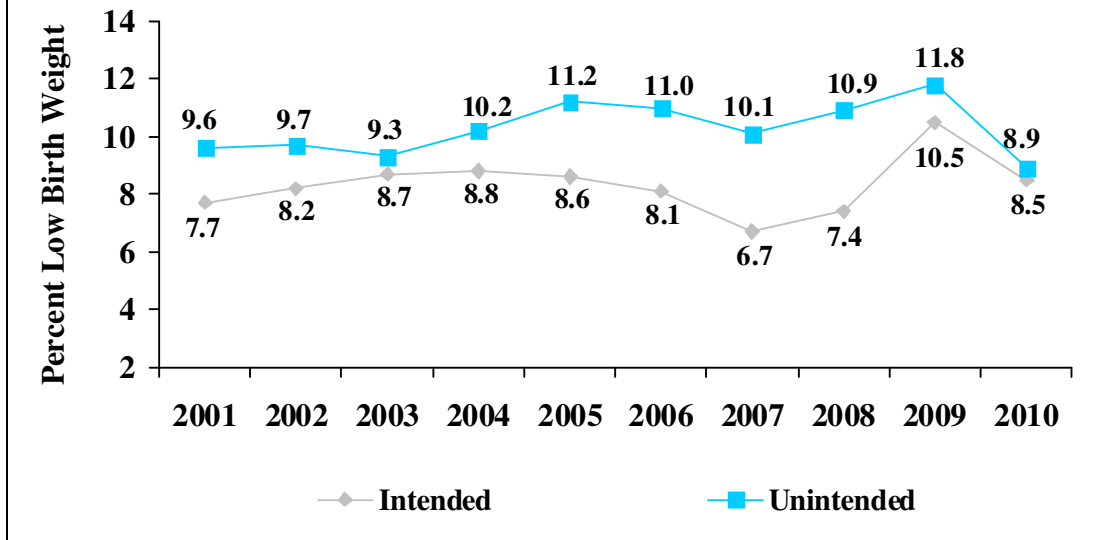


(Question #10 of the PRAMS Survey)

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 2009 to 2010, there was a 13.2 percent decrease in unintended births for mothers having their first child. In 2010, for mothers having their third (or higher) child, 55% of the births were unintended. And there was a 16.5 percent decrease from 2009 to 2010. All of the changes from 2009 to 2010 were not statistically significant.

95 % Confidence Intervals										
Year/ Birth Order	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
First	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	44.1-55.1
Second	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	37.6-50.4
Third +	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	47.5-62.3

Percent Low Birth Weight by Intendedness of Births, Alabama PRAMS 2001-2010



(Question #10 of the PRAMS Survey)

Low birth weight is defined as birth weight of less than 2,500 grams or 5 lbs. 8oz. Infants delivered at this weight are at increased risk of death during their first year of life or of lifelong disabilities. Of births reported as unintended in 2010, 8.9 percent were low weight births. This was a 24.6 percent decrease from 2009. Of intended births, the percentage of low weight births decreased in 2010, too. Both decreases are not statistically significant.

95 % Confidence Intervals										
Year/ Intention	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Intended	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	6.1-11.8
Unintended	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	6.3-12.5

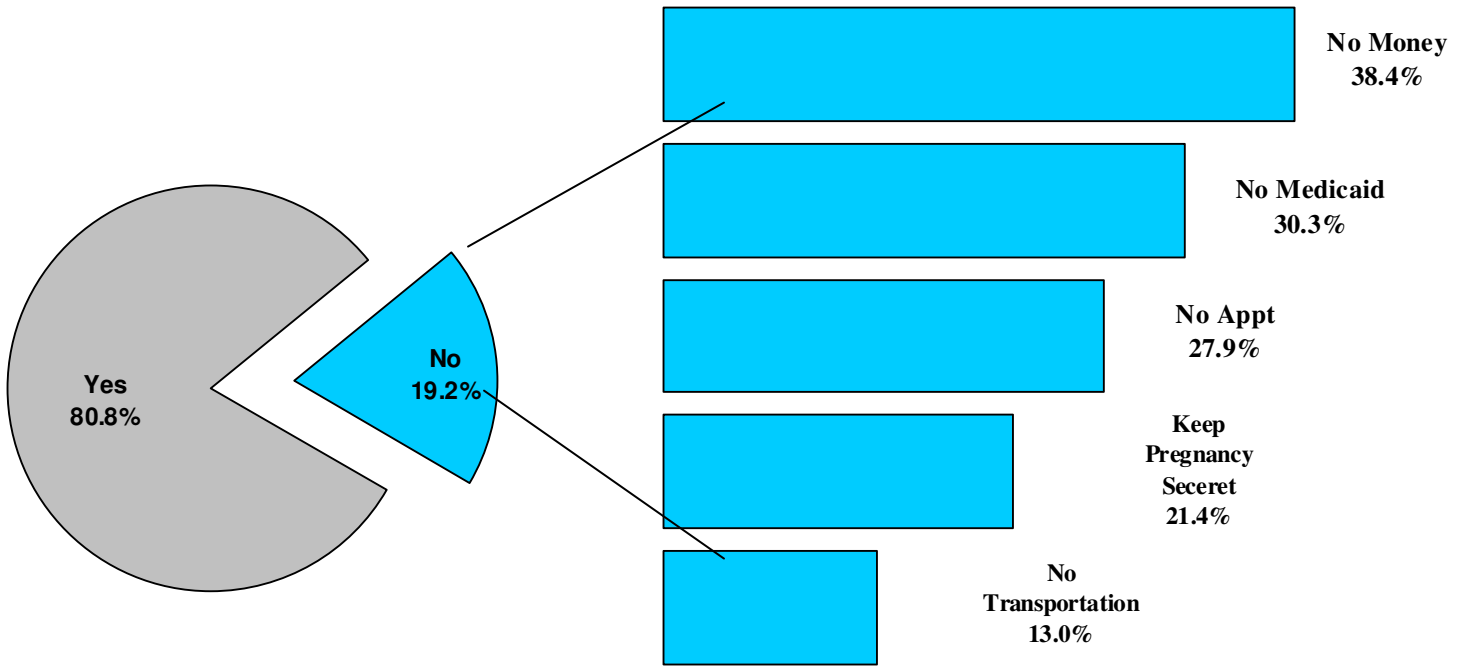
Mothers' Intendedness Comments

- "I was unaware that I was pregnant until the morning I had the baby."
- "I wasn't supposed to be able to have kids now or in the future."
- "We wanted another child, but we just didn't expect it to happen so soon. It was a great surprise after the shock wore off!"
- "It's always best to plan ahead."
- "We had not used any form of birth control for 2 years prior and no pregnancy."
- "Getting pregnant has been difficult. We had given up."
- "I think it is very important for mothers to plan ahead and begin taking care of themselves months before they plan on trying to become pregnant."
- "I have a history of infertility. We wanted to have more children if possible. We were not using protection of any kind hoping, but not expecting to get pregnant."
- "I had a tube taken out so I didn't think I could get pregnant. I had a 50% chance."

PRENATAL CARE

Prenatal Care Received as Early as Mother Wanted, Alabama PRAMS 2010

Reason Care Not Received Early*



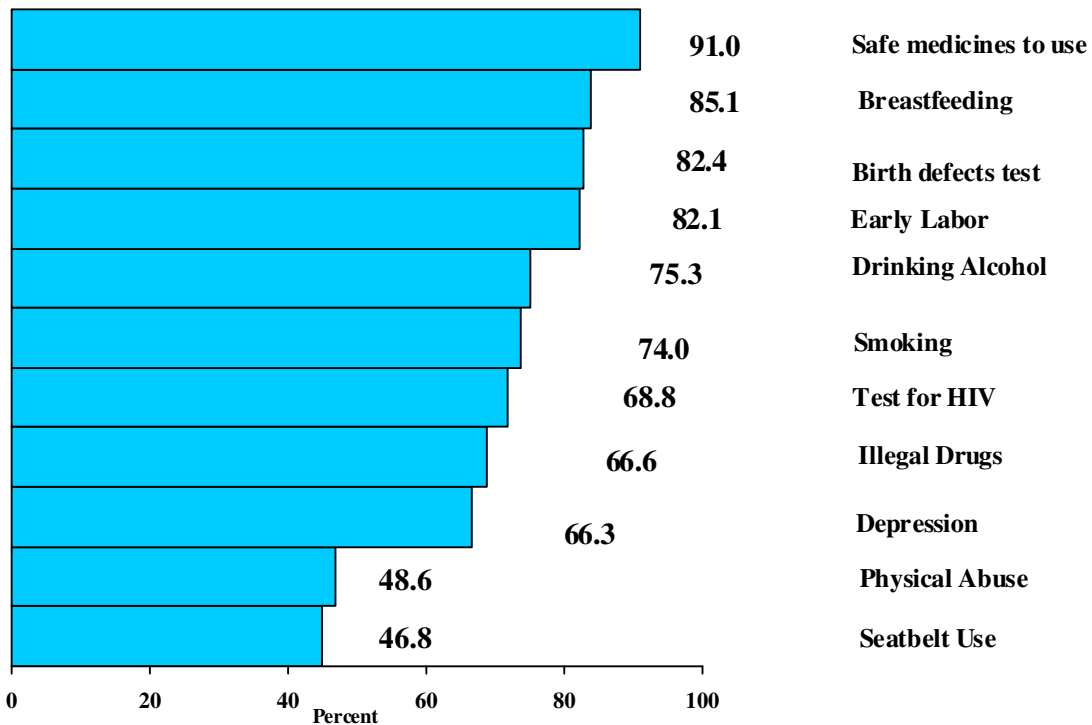
*Items not mutually exclusive; therefore, percentages will not equal 100.

(Questions 17 & 18 of the PRAMS Survey)

Early and adequate prenatal care are critical in detecting problems that arise during pregnancy and in treating them before they become serious or life-threatening. In 2010, 19.2% 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	No Appt.	No Money	No Medicaid Card	Secret	No Trans.
Percent	77.7-83.6	16.4-22.3	20.8-36.3	30.3-47.0	23.1-38.7	15.0-29.5	3.0-8.1

Topics Discussed During Prenatal Care Visits, Alabama PRAMS 2010



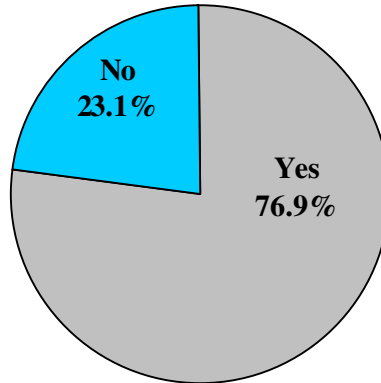
(Question 20 of the PRAMS Survey)

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 2010, nine out of ten Alabama mothers reported being informed about safe medications to take during their pregnancies. Approximately 8 out of 10 mothers reported discussions about screening tests for birth defects or diseases which run in their families, breastfeeding, and what to do if premature labor occurs. Only 46.8 percent reported any discussion on seat belt usage during pregnancy, and 48.6 percent of Alabama’s mothers reported having a discussion about physical abuse by a husband or partner.

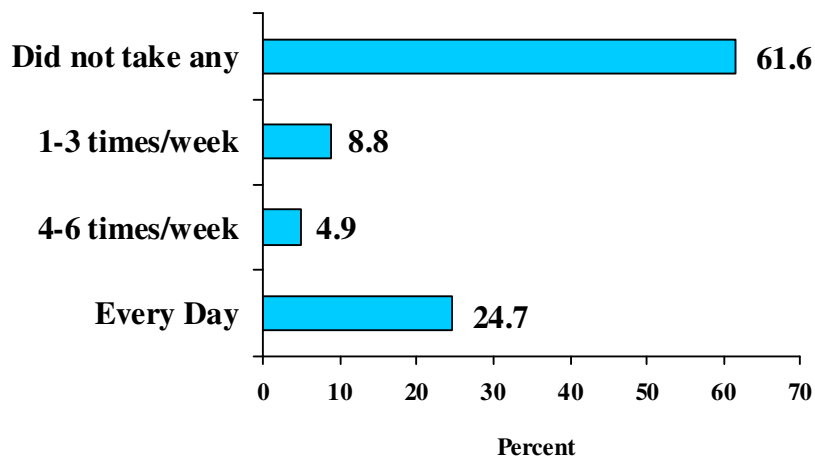
95% Confidence Intervals					
Topics	Safe Medicines	Birth defects	Depression	Early labor	Breastfeeding
Percent	88.6-92.9	79.4-85.1	62.6-69.7	79.0-84.8	82.3-87.5

95% Confidence Intervals					
Smoking	HIV testing	Drinking	Illegal drug usage	Seat belt usage	Physical abuse
70.8-77.0	65.3-72.1	72.1-78.3	63.2-69.9	43.1-50.5	45.0-52.3

Knowledge of Folic Acid, Alabama PRAMS 2010
Question 22: Have you ever heard or read that taking the vitamin folic acid can help prevent some birth defects?



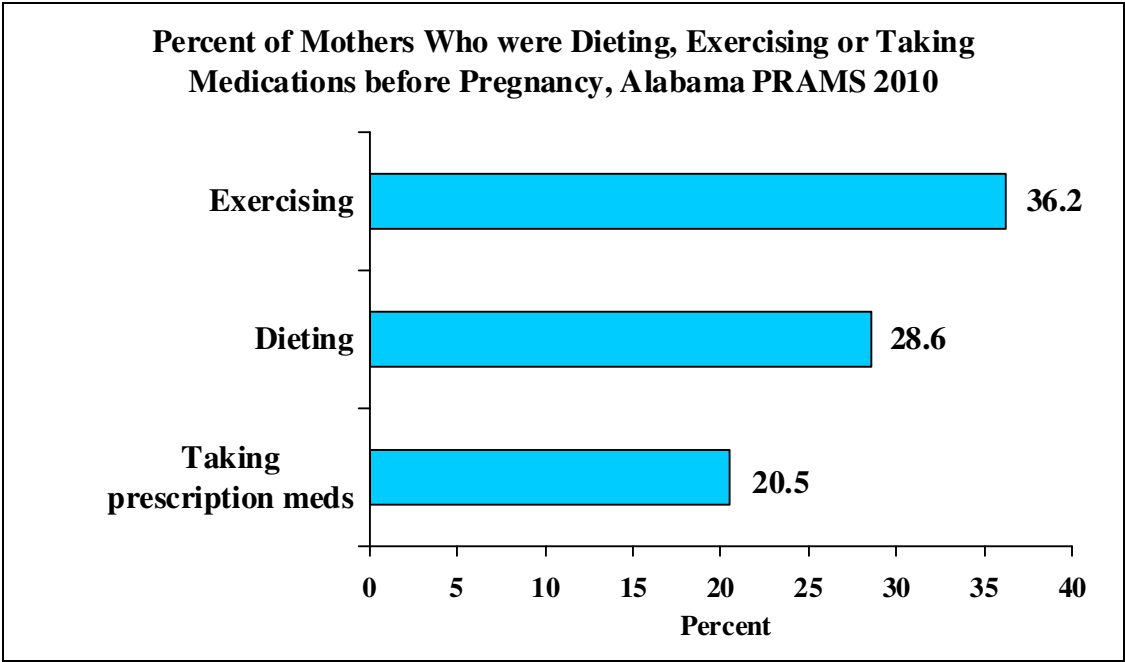
Percent of Mothers Who Took a Multivitamin Before Pregnancy, Alabama PRAMS 2010



(Question 3 of the PRAMS Survey)

Studies have shown that women who consume 400 micrograms of folic acid daily *before* becoming pregnant can greatly reduce the incidence of neural tube defects such as spina bifida and anencephaly in their infants. In 2010, 76.9% of 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 61.6 percent of mothers took no multivitamins (which contain the required amount of folic acid) the month before their pregnancy occurred. Only 24.7 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	73.6-79.9	20.1-26.4	58.0-64.9	7.0-11.1	3.6-6.7	21.8-27.9



(Question 1 of PRAMS Survey)

In 2010, 36.2 percent of mothers said they were exercising three or more days of the week, and 28.6 percent were dieting (changing eating habits). 20.5 percent of mothers were taking prescription medicines other than birth control.

95% Confidence Intervals			
Topics	Dieting	Exercise	Taking prescription meds
Percent	25.4-32.0	32.8-39.8	17.7-23.5

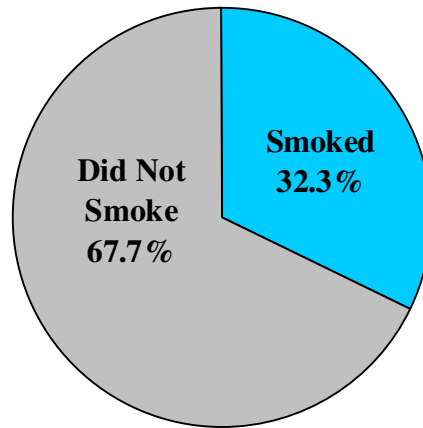
Mothers' Prenatal Care Comments

- "I think mothers should be talked to about drugs and the harm they could cause during pregnancy, and know that folic acid can help prevent birth defects because I didn't know that."
- "Even after receiving excellent prenatal care, my baby was born with a congenital heart defect. "
- "I am upset about my pregnancy experience because my baby was not able to survive and during prenatal visits, I feel the doctors didn't tell me about complications I might have had."
- "When going to prenatal visits, always ask any questions you may have. Please don't think that your questions might be embarrassing."
- "I'm very grateful for the care I've been given when I was pregnant."
- "My baby was born very healthy and I credit it to my prenatal care and healthy eating."
- "Taking prenatal vitamins help ensure you have a healthy baby."
- "I think it is very important...to receive regular prenatal care."
- "Everyday, I took my prenatal vitamins. When I was pregnant, I never did any heavy lifting or anything that I thought would hurt the baby. I ate healthy, exercised and did normal day to day routines."
- "My pediatrician says that my two month old is advanced in her cognitive and motor skills. I think prenatal vitamins and a healthy diet during pregnancy had something to do with that."
- "It would be nice if there were more information about safe medicines that can be taken during pregnancy. I suffered so much due to not taking medications out of fear of them having an adverse effect on the baby."

NEGATIVE HEALTH BEHAVIORS:

SMOKING AND DRINKING

Have you smoked any Cigarettes in the Past 2 Years, Alabama PRAMS 2010



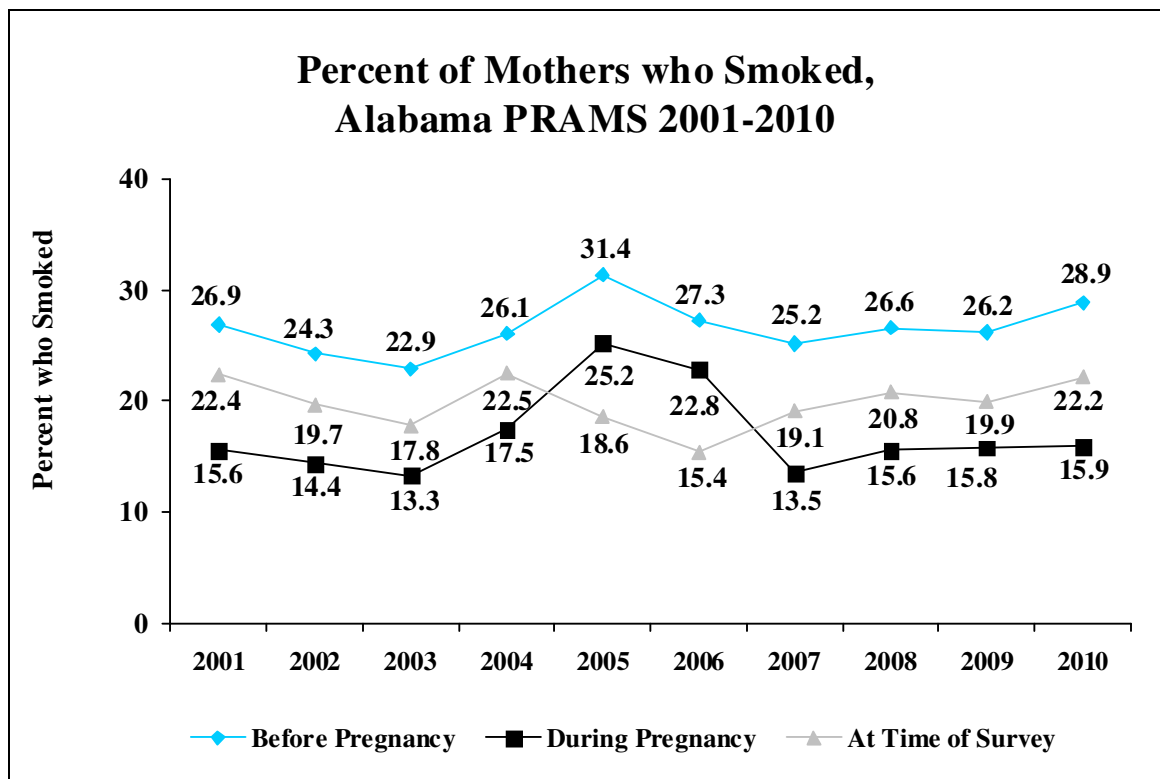
(Question 28 of the PRAMS Survey)

The Centers for Disease Control and Prevention (CDC) has reported that “Smoking during pregnancy is the single most preventable cause of illness and death among mothers and infants.”¹ 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, that is, less than 2,500 grams, and may experience lifelong health problems.

In 2010, when Alabama mothers were asked if they had smoked any cigarettes in the past two years, 32.3 percent answered ‘Yes’.

95% Confidence Intervals		
Smoking Status	Smoked	Did Not Smoke
Percent	29.0-35.8	64.2-71.0

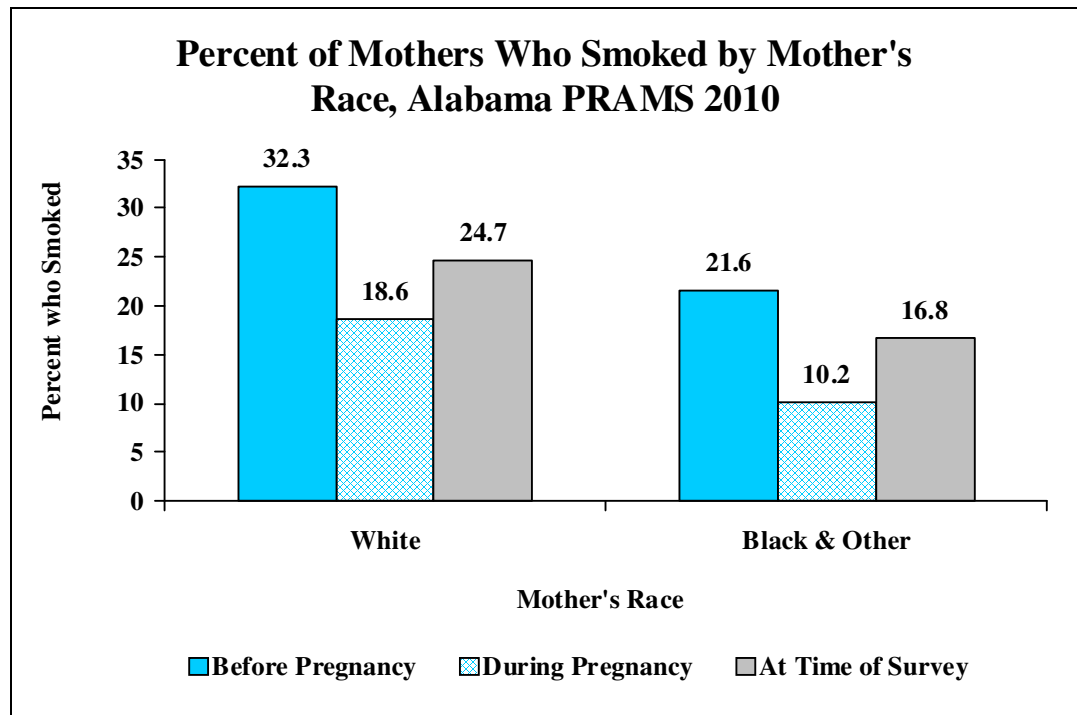
¹ The Centers for Disease Control and Prevention (CDC). Chronic Disease- Preventing Smoking During Pregnancy. <http://www.cdc.gov/nccdphp/publications/factsheets/Prevention/smoking.htm>. Found May 3, 2006.



(Questions 29, 30, & 31 of the PRAMS Survey)

The Healthy People 2010 Objective is to increase abstinence 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 2010, although 15.9 percent of Alabama mothers continued to smoke while pregnant. In 2010, the increases in smoking seen during the three time periods were not statistically significant.

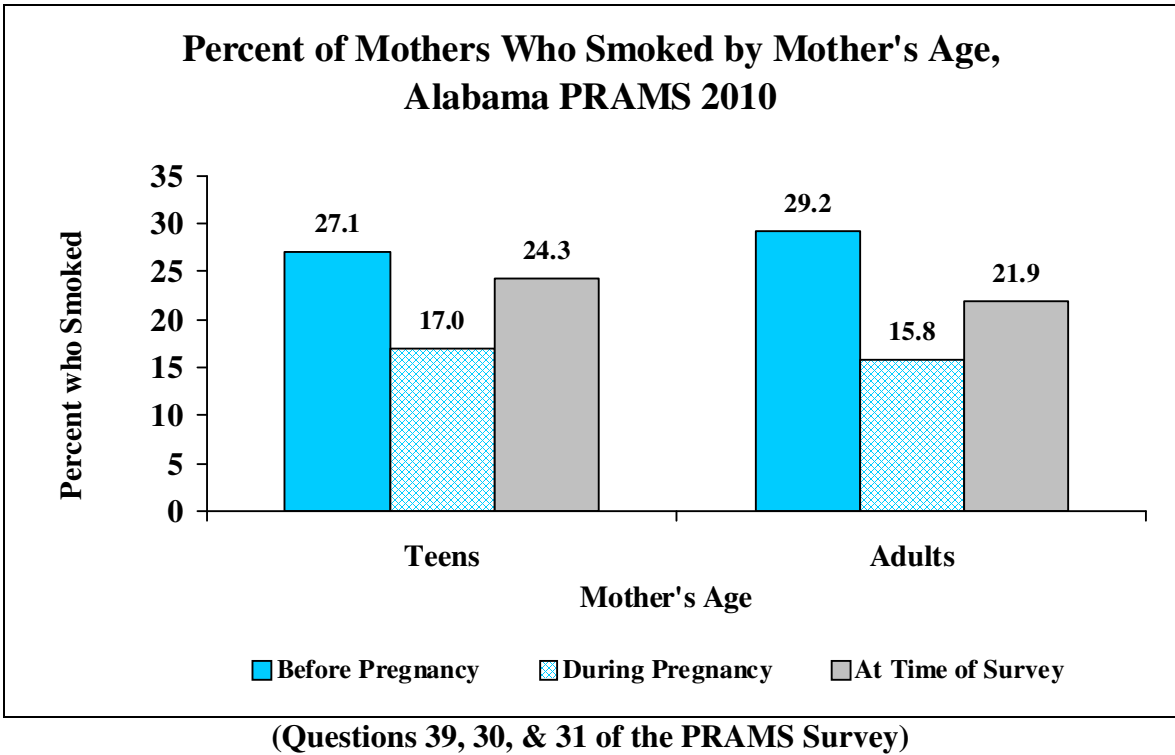
95% Confidence Intervals										
Year/ Smoked	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Before Pregnancy	24.2-29.6	21.7-27.0	20.3-25.7	23.1-29.3	28.2-34.8	24.3-30.5	22.2-28.4	23.5-29.9	23.1-29.5	25.7-32.4
During Pregnancy	13.4-17.8	12.3-16.5	11.3-15.6	15.0-20.3	16.0-21.5	13.1-18.1	11.3-16.1	13.2-18.4	13.3-18.7	13.4-18.8
At Time of Survey	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	19.3-25.4



(Questions 29, 30, & 31 of the PRAMS Survey)

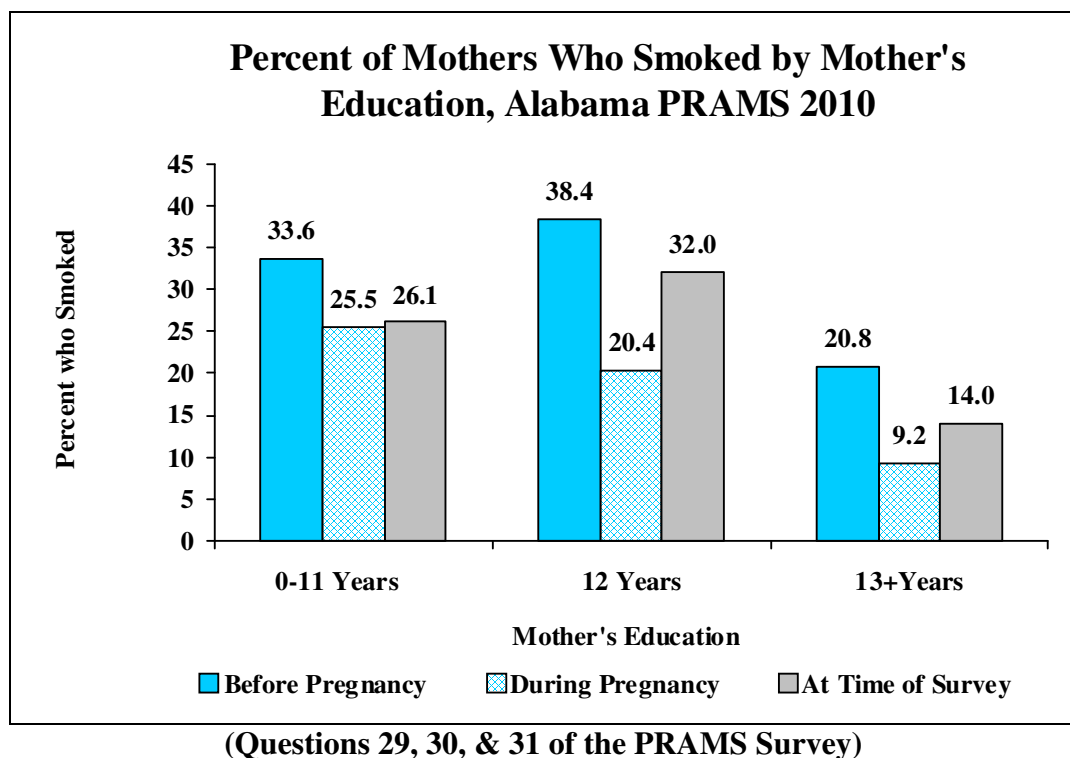
Both white and black and other smokers showed the same trend - smoking decreased during pregnancy but increased again by the time of the survey. For both white and black and other smokers, there was a statistically significant decrease in smoking from before pregnancy to during pregnancy. White mothers were statistically more likely to smoke before, during and after pregnancy.

95 % Confidence Intervals			
Smoked/Race:	Before Pregnancy	During Pregnancy	At Time of Survey
White	28.4-36.4	15.4-22.2	21.2-28.6
Black and Other	16.5-27.9	6.7-15.2	12.2-22.6



In 2010, 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 not statistically significant.

95 % Confidence Intervals			
Smoked/Age:	Before Pregnancy	During Pregnancy	At Time of Survey
Teens	18.9-37.2	10.6-26.0	16.6-34.1
Adults	25.8-32.9	13.1-18.9	18.8-25.3

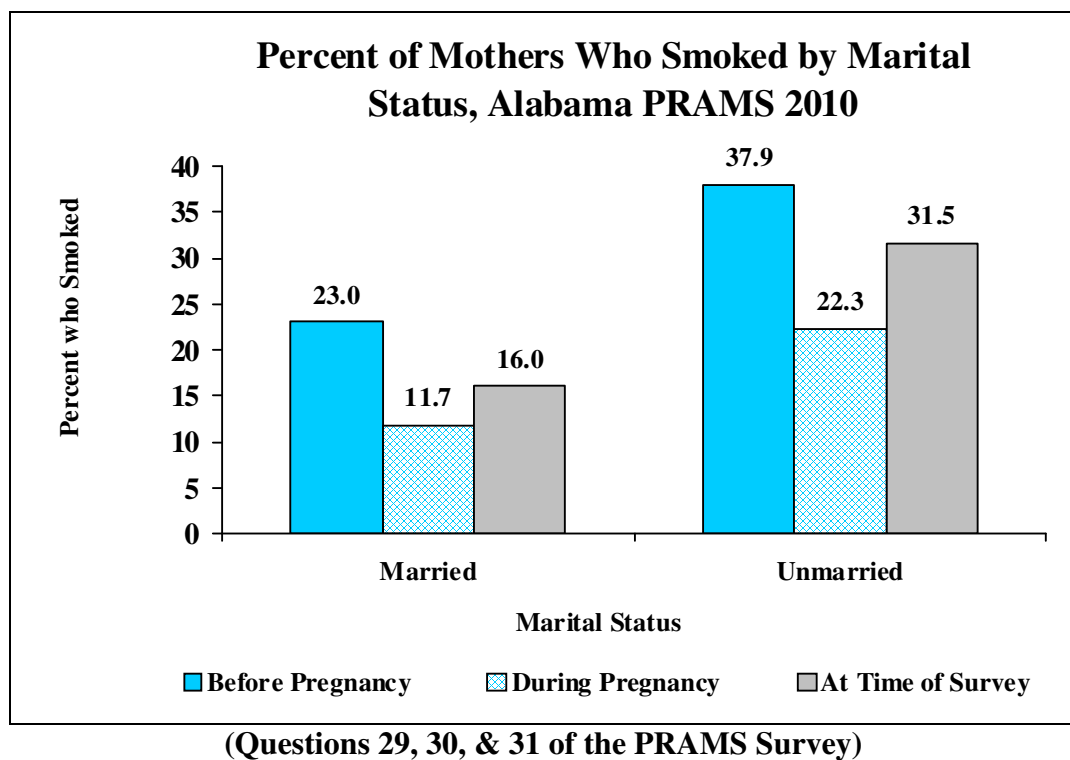


Generally in Alabama, there is an inverse correlation between a woman's educational attainment and smoking: as a woman's level of education *increases*, smoking *decreases*. In 2010, in the percentages of women with 0-11 years of education who smoked, the decreases in smoking seen from before pregnancy 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 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.

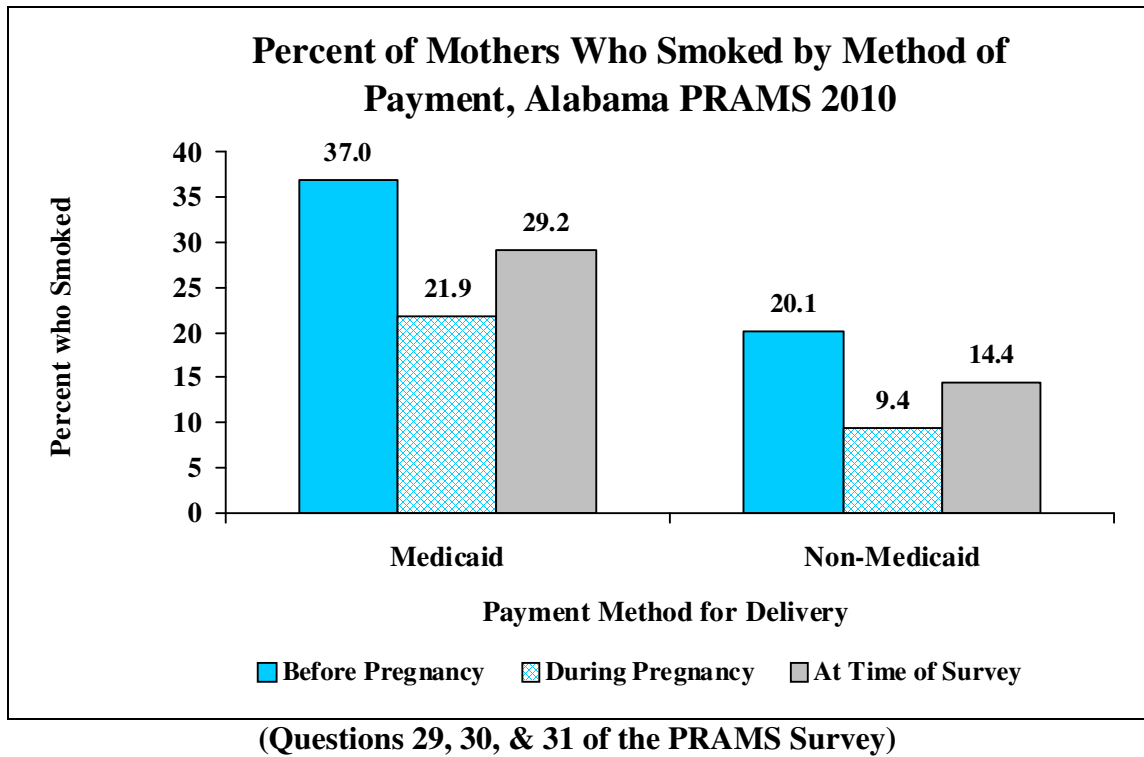
The lower percentages of smoking (before pregnancy, during pregnancy, and after delivery) among women with 13+ years of education were statistically significant from the other two educational groups. The drop in smoking from before pregnancy and during pregnancy was statistically significant.

95 % Confidence Intervals			
Smoked/ Education:	Before Pregnancy	During Pregnancy	At Time of Survey
0-11 Years	26.0-42.2	18.8-33.7	19.3-34.3
12 Years	32.1-45.1	15.5-26.3	26.2-38.5
13+ Years	16.9-25.3	6.6-12.7	10.7-18.0



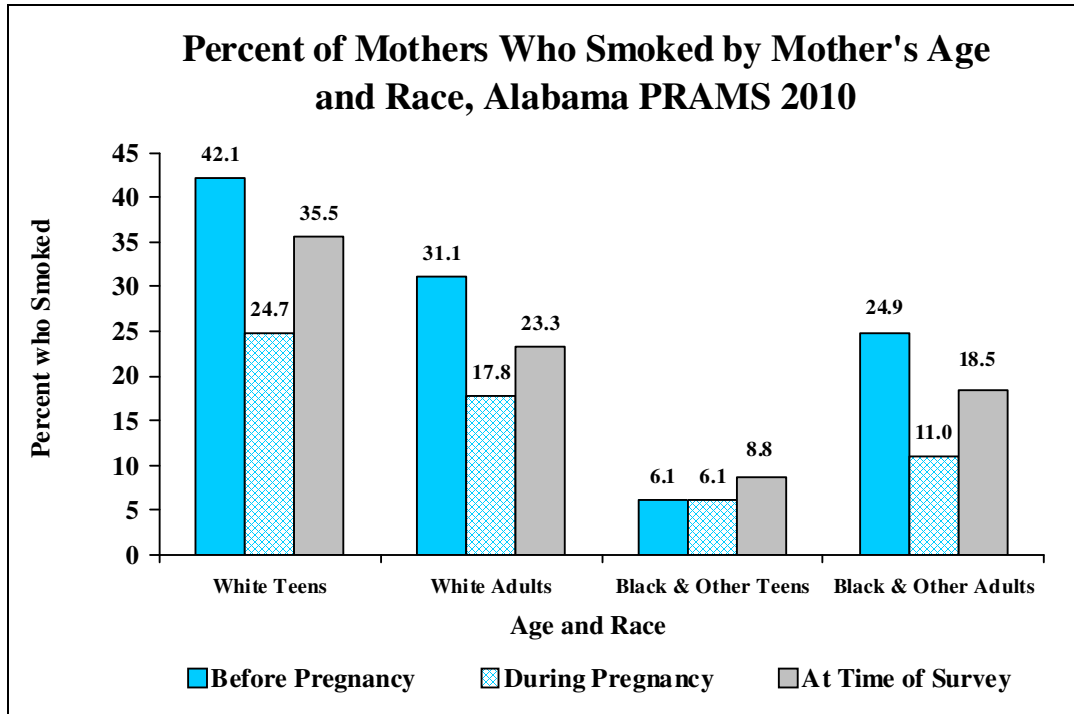
In 2010, married and unmarried mothers followed the same pattern - they decreased their smoking during pregnancy only to increase it again after delivery. During pregnancy, married women decreased their smoking by nearly 49.1 percent, which was a statistically significant decrease. Unmarried women decreased smoking while pregnant by 41.2 percent, which was also statistically significant.

95 % Confidence Intervals			
Smoked/ Marital Status:	Before Pregnancy	During Pregnancy	At Time of Survey
Married	19.3-27.1	9.0-15.1	12.8-19.7
Unmarried	32.3-43.9	17.7-27.6	26.2-37.2



In 2010, 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.

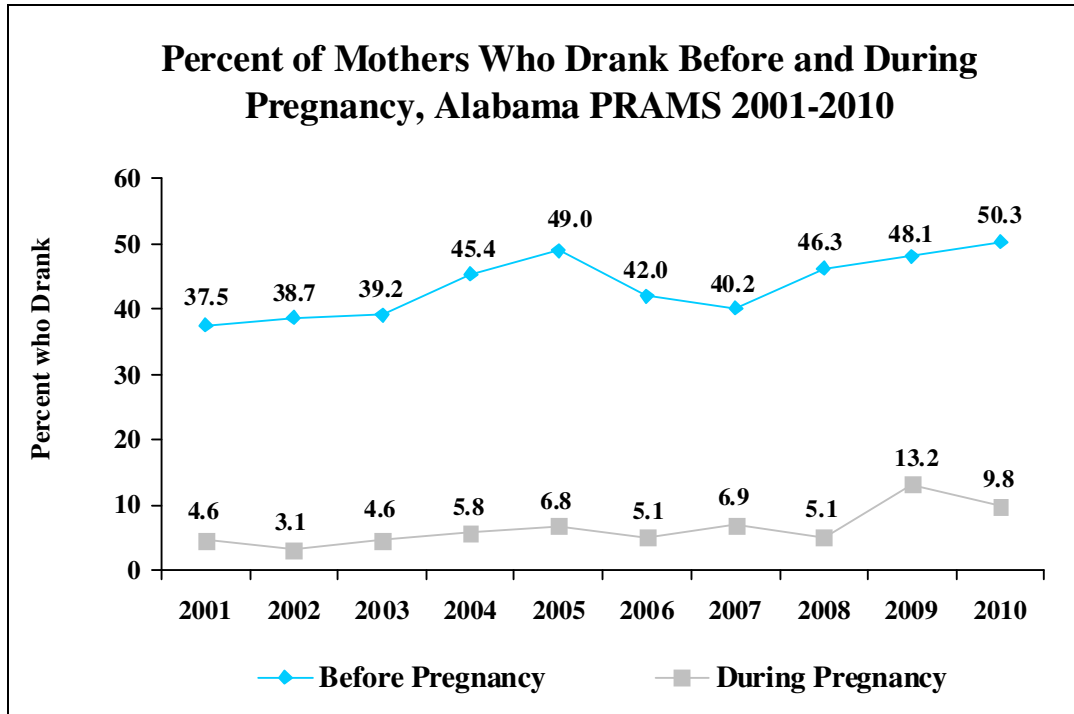
95 % Confidence Intervals			
Smoked/ Payment Method:	Before Pregnancy	During Pregnancy	At Time of Survey
Medicaid	32.2-42.2	17.9-26.4	24.8-34.1
Non-Medicaid	16.1-24.8	6.6-13.2	10.9-18.7



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

In 2010, a higher percentage of white mothers smoked than did black and other mothers. The decrease in smoking for both white and black and other adults during pregnancy was statistically significant.

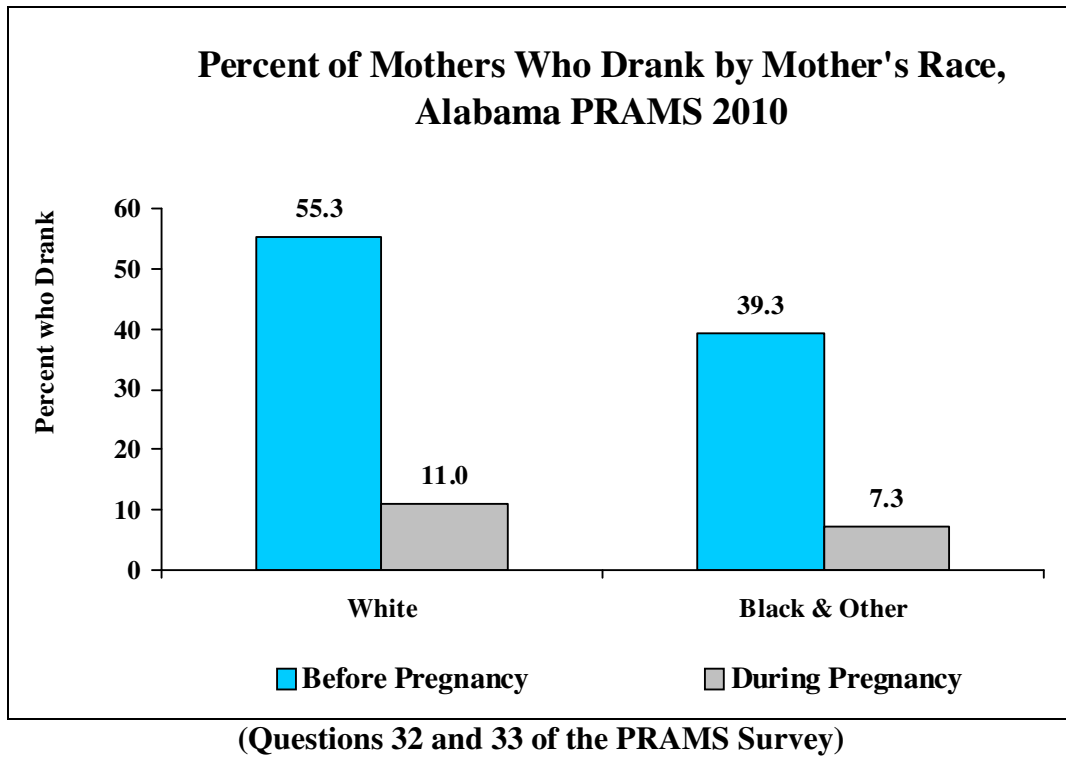
95 % Confidence Intervals			
Smoked/ Race and Age:	Before Pregnancy	During Pregnancy	At Time of Survey
White Teens	29.7-55.4	15.2-37.7	24.1-48.8
White Adults	27.0-35.4	14.5-21.6	19.7-27.4
Black & Other Teens	1.5-21.1	1.5-21.1	2.9-23.9
Black & Other Adults	18.9-32.0	7.1-16.8	13.2-25.1



(Questions 34 and 35 of the PRAMS Survey)

From 2009 to 2010, there was an increase of 4.6 percent in drinking *before* becoming pregnant and a decrease of 25.8 percent in drinking *during* the last three months of pregnancy reported by Alabama mothers. From 2001-2010, Alabama women did significantly decrease drinking during their pregnancies from their levels of drinking before pregnancy.

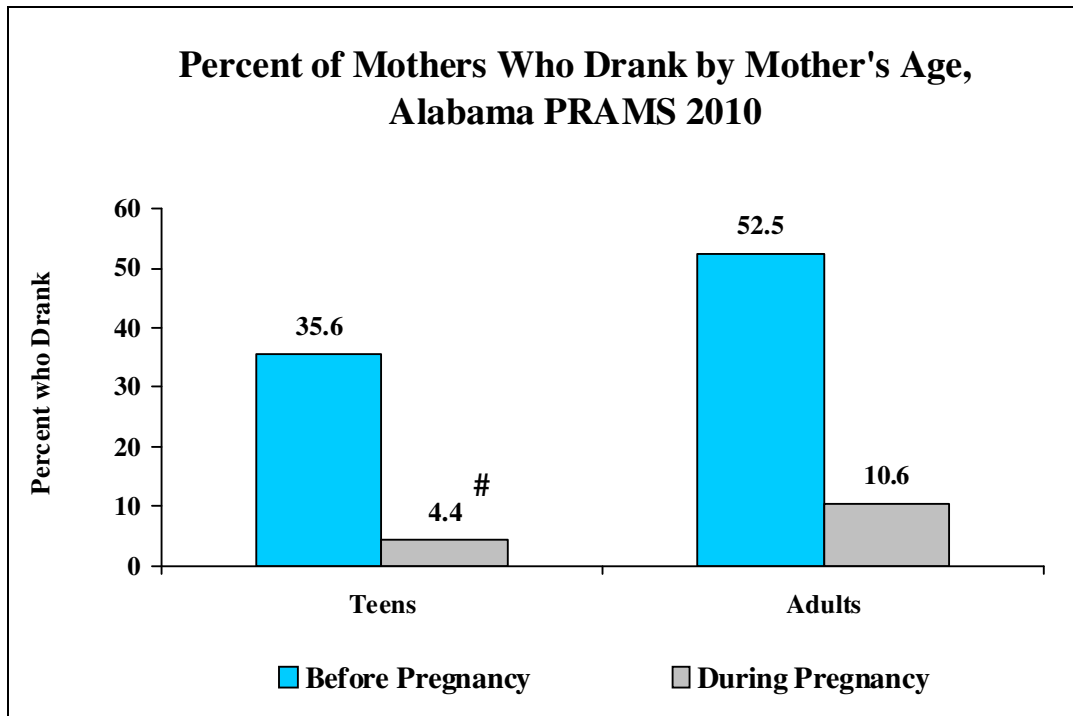
95% Confidence Intervals										
Year/Drank	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Before Pregnancy	34.5-40.5	35.7-41.8	36.1-42.5	41.8-49.0	45.4-52.6	38.6-45.6	36.7-43.7	42.6-49.9	44.4-51.8	46.6-54.0
During Pregnancy	3.3-5.9	2.0-4.2	3.5-6.1	4.3-7.7	5.2-8.8	3.8-6.9	5.3-9.0	3.8-7.0	10.9-15.9	7.8-12.3



In 2010, 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	50.9-59.6	8.5-14.1
Black and Other	32.7-46.2	4.5-11.8

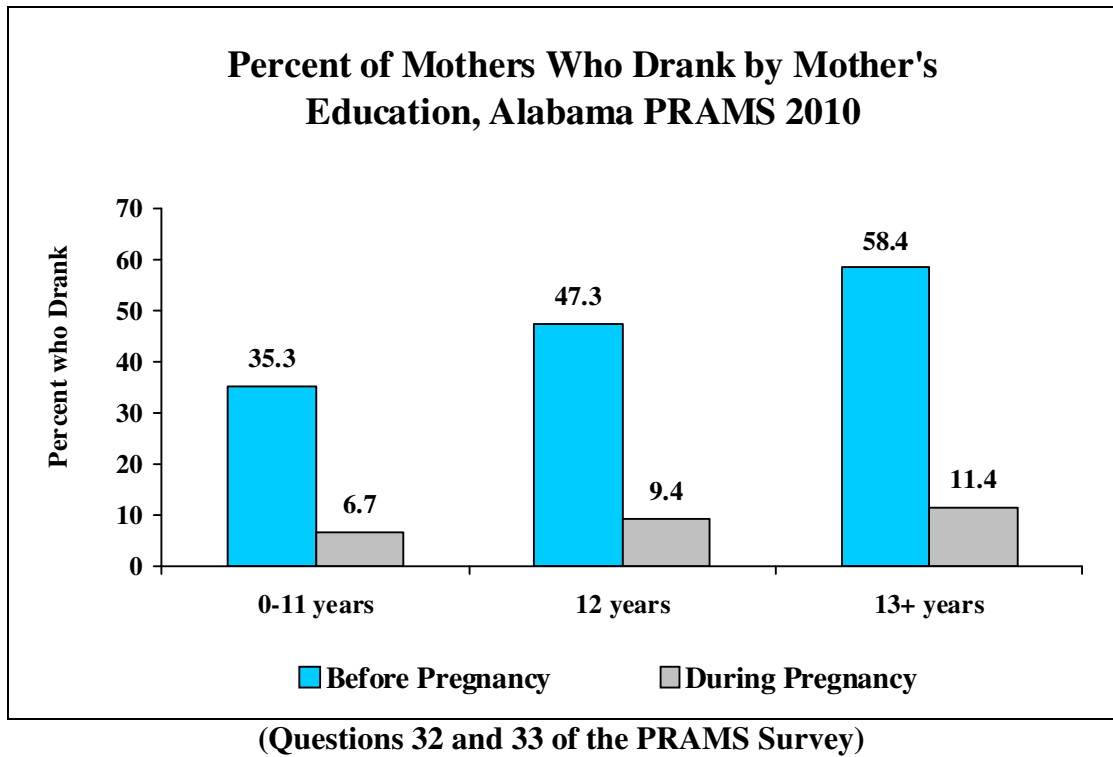


(Questions 34 and 35 of the PRAMS Survey)

number of respondents is less than 20

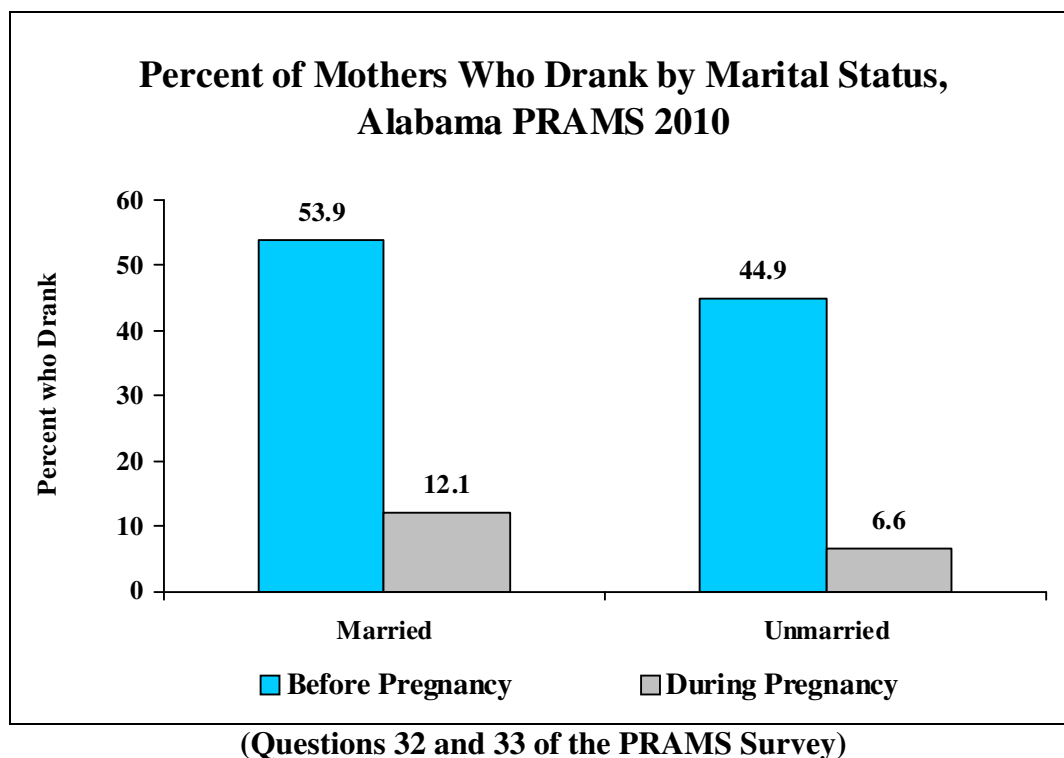
As expected, a higher percentage of adult mothers reported consuming alcohol than teenage mothers. Yet in 2010, 35.6 percent of teenage mothers reported using alcohol before becoming pregnant, and 4.4 percent reported drinking during their pregnancies, despite being underage. In both populations, drinking significantly declined during the last three months of their pregnancies.

95% Confidence Intervals		
Drank / Mother's Age	Before Pregnancy	During Pregnancy
Teens	26.3-46.1	1.7-11.3
Adults	48.5-56.4	8.4-13.3



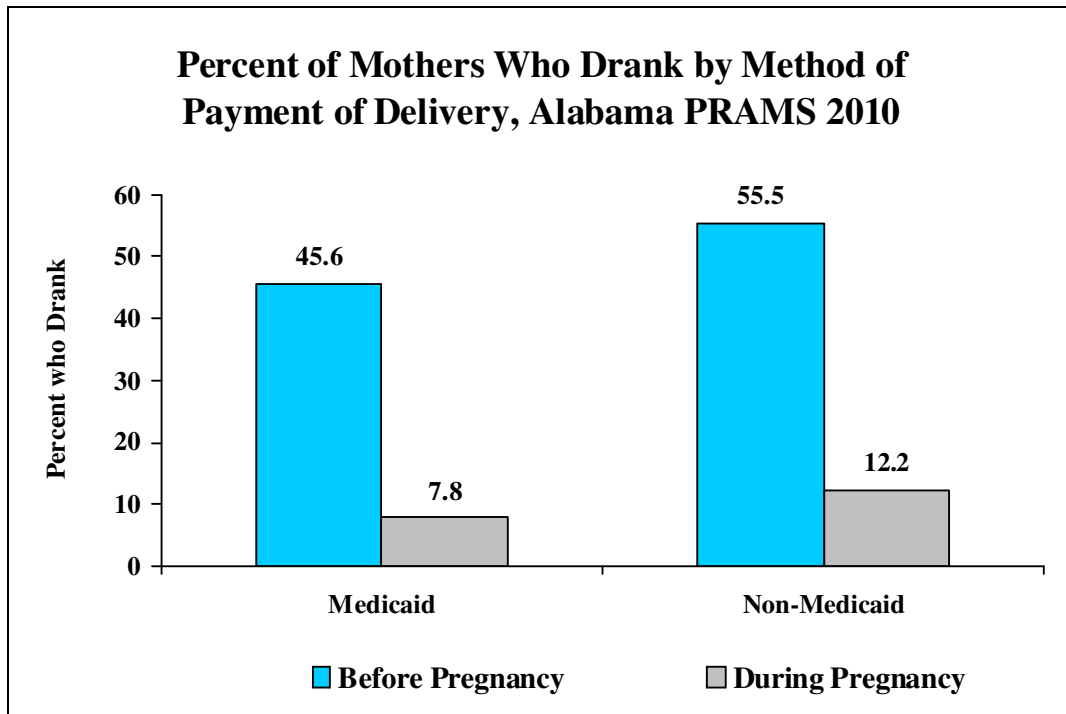
In 2010, women with higher levels of education were more likely to drink than those women with lower educational attainment. This could be attributable to age; women with lower educational levels are probably younger and underage. In each educational level, drinking during pregnancy decreased significantly.

95% Confidence Intervals		
Drank/Education	Before Pregnancy	During Pregnancy
0-11 years	27.5-44.0	3.4-12.8
12 years	40.7-54.0	6.1-14.1
13+ years	53.2-63.4	8.5-15.1



In 2010, unmarried mothers were about 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.

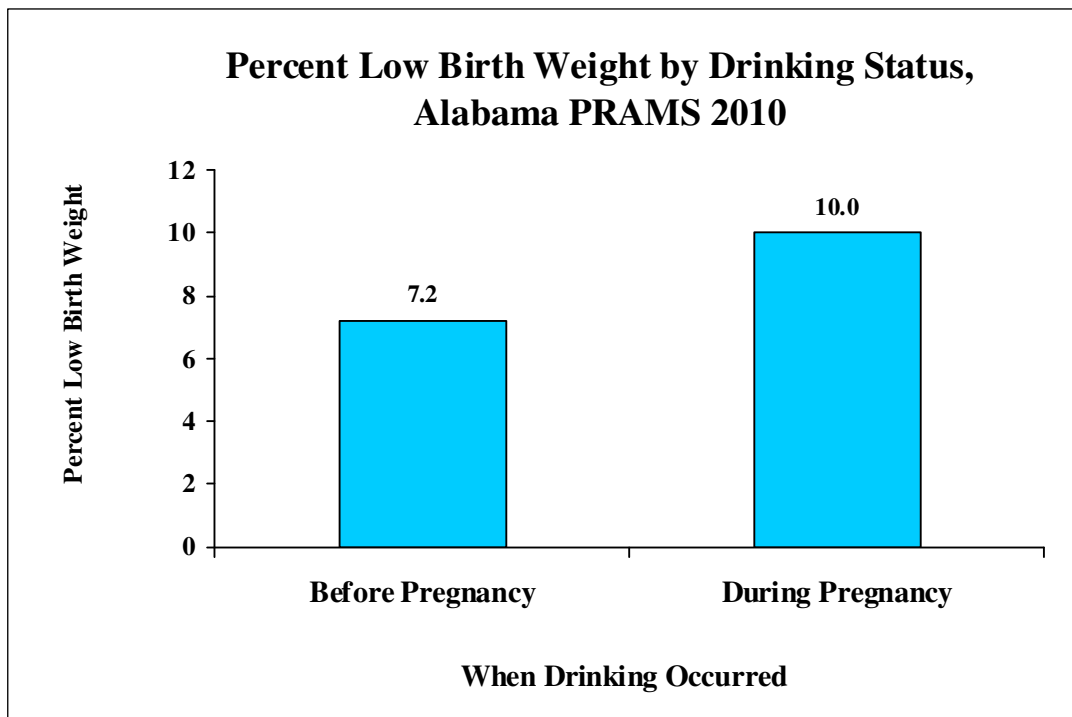
95 % Confidence Intervals		
Drank/Marital Status	Before Pregnancy	During Pregnancy
Married	49.2-58.5	9.3-15.6
Unmarried	39.0-50.9	4.2-10.2



(Questions 32 and 33 of the PRAMS Survey)

In Alabama in 2010, 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. Medicaid mothers drank significantly less before pregnancy than 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	40.5-50.7	5.4-11.0
Non-Medicaid	50.1-60.7	9.1-16.2



(Questions 34 and 35 of the PRAMS Survey)

In 2010, 7.2 percent of women who drank before pregnancy had a low weight infant. Among women who drank while pregnant, 10.0 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.

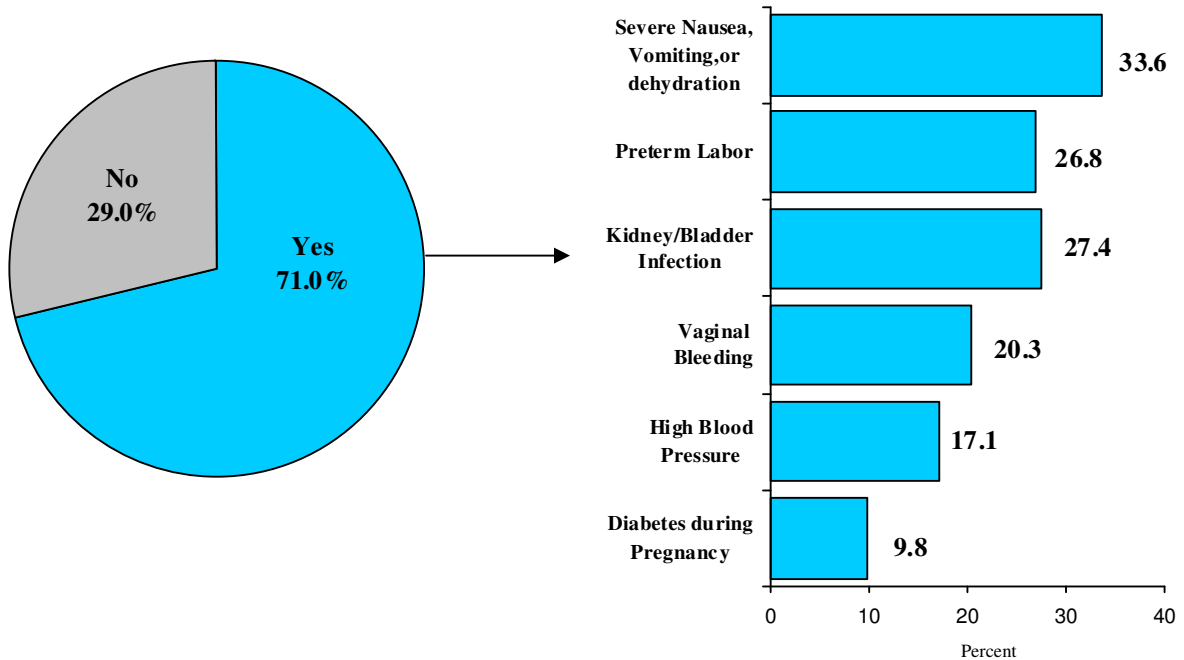
95% Confidence Intervals		
Drank	Before Pregnancy	During Pregnancy
Percent LBW	4.9-10.3	4.8-19.6

Mothers' Negative Health Behaviors Comments

- “To mothers, if you are smoking, please try to stop. Try to stay stress free. Eat healthy and take your vitamins. Just relax.”
- “I think all mothers that smoke or are around smoking should stay away from all sources of smoking to have a healthy baby.”
- “I recommend that all women never smoke or drink when you find out that you are pregnant.”
- “I don't smoke or drink and wasn't around it when I was pregnant.”

HEALTH CARE SYSTEM ISSUES

Mother Experienced a Medical Problem During Pregnancy, Alabama PRAMS 2010

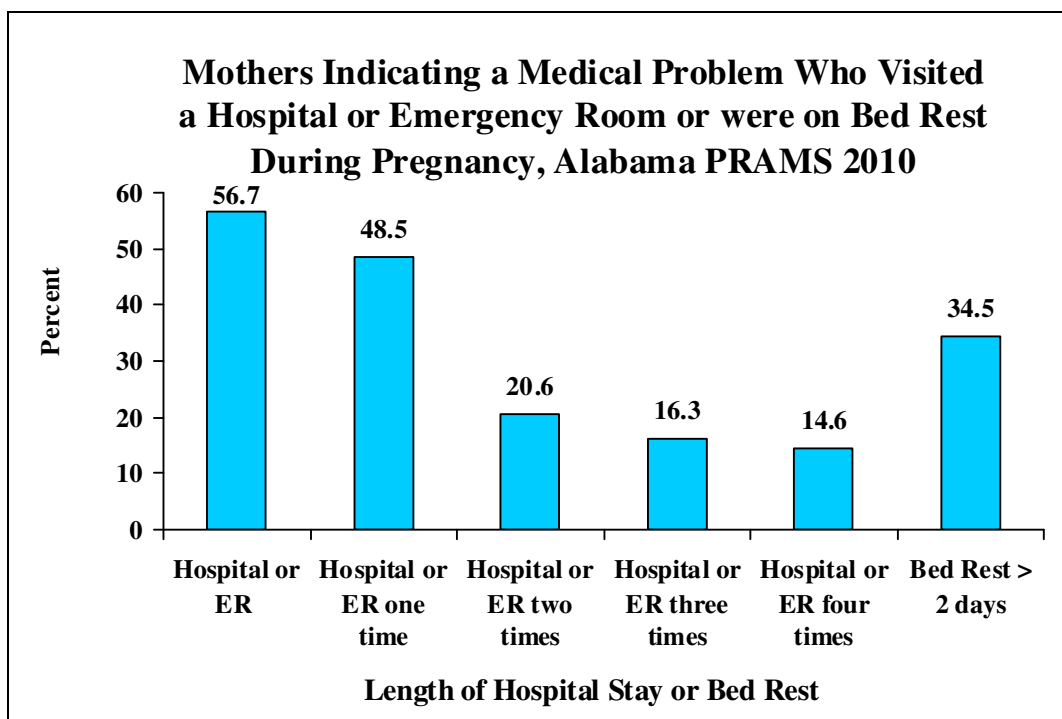


Items are not mutually exclusive. Therefore, percentages will not equal 100.

(Question 25 & 26 of the PRAMS Survey)

In 2010, 71.0 percent of Alabama Mothers reported having a medical problem during their pregnancy. Of those, the highest percentage (33.6) reported having nausea, vomiting, and/or dehydration. A little over one in four mothers reported experiencing preterm labor or a kidney/bladder infection. 20.3 percent of mothers reported vaginal bleeding, while 17.1 percent of mothers reported having high blood pressure. In addition, 9.8 percent of mothers developed gestational diabetes.

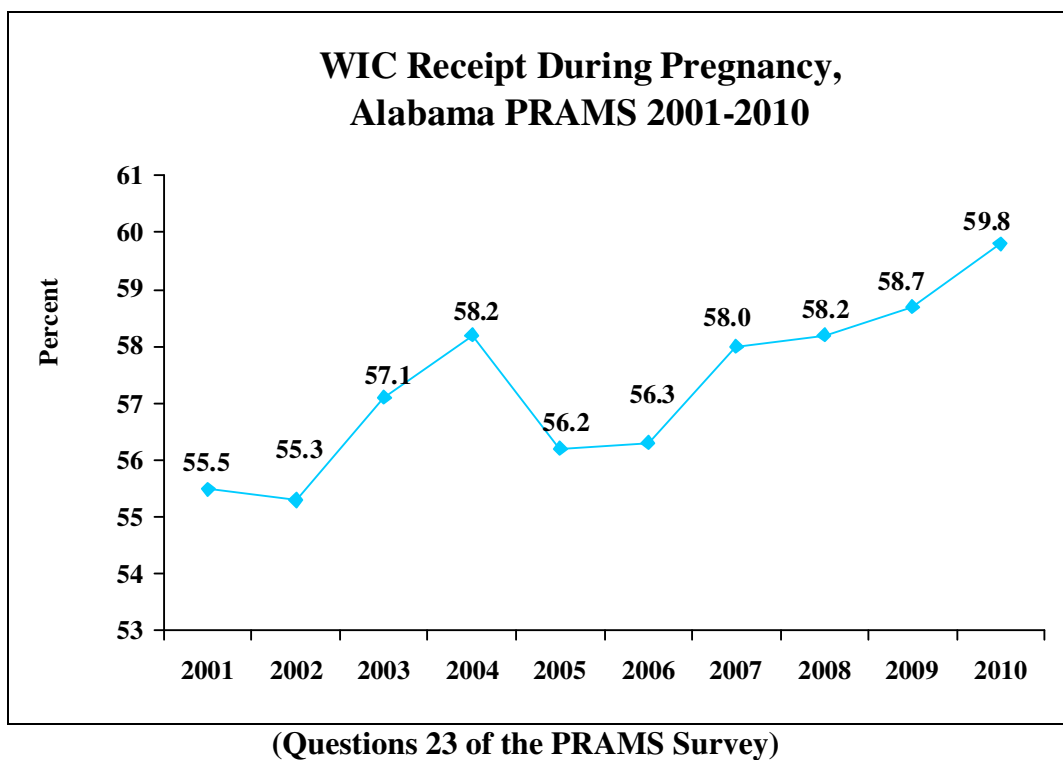
95% Confidence Intervals								
Problems	Yes	No	Nausea, vomiting, or dehydration	Preterm labor	Kidney/Bladder infection	Vaginal Bleeding	HBP	Diabetes During Preg.
Percent	67.6-74.2	25.8-32.4	30.2-37.2	23.7-30.2	24.2-30.8	17.5-23.4	14.4-20.0	7.7-12.2



(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, 56.7 percent of mothers visited a hospital at least once; 48.5 percent of these visited one time; 20.6 percent went to hospital two times; and 34.5 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 Bed Rest	Hospital/ER	Hospital/ER 1 time	Hospital/ER 2 times	Hospital/ER 3 times	Hospital/ER 4 times	Bed Rest > 2 days
Percent	52.1-61.3	42.4-54.6	16.1-26.0	12.3-21.4	10.8-19.5	30.2-39.1



WIC, 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, and children under the age of five, and who meet eligibility guidelines. In 2010, 59.8 percent of Alabama mothers received WIC benefits.

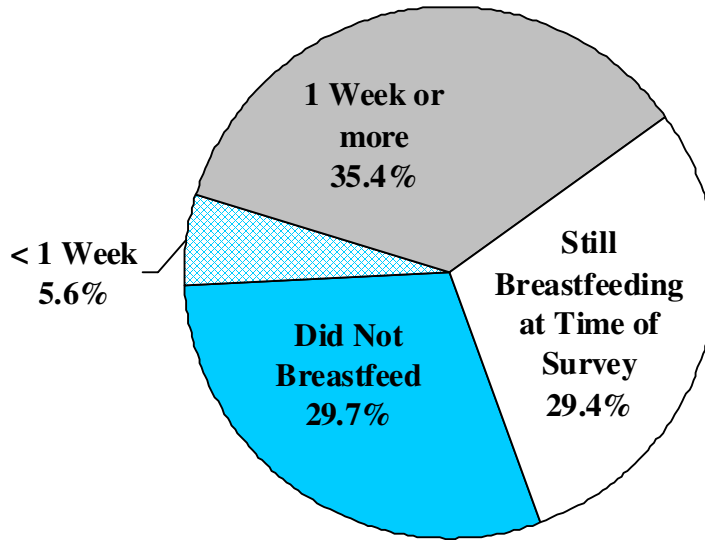
95% Confidence Intervals										
Year	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Percent	53.1-57.8	53.0-57.7	54.5-59.6	55.5-60.9	53.5-58.8	53.6-58.9	55.2-60.8	55.3-61.0	55.8-61.5	57.0-62.5

Mothers' Health Care System Issues Comments

- “I personally was extremely pleased with my experience. The doctors and nurses did a wonderful job. My baby was born early with slight complications and they were all very kind and helpful.”
- “There is an interesting article about TEXT4BABY, geared toward low income mothers that sends text messages reminding them about important things like checkups, car seats, vitamins and all kinds of things that can increase a mother’s and baby’s health during and after pregnancy.”
- “The Saturday before I had my baby, my water had broke and I went to the hospital and they said it hadn’t but when I went to the hospital (two days later) they still said it hadn’t but when they went to break my water, the doctor said it had already broke. So when my son was born he had fluid in his lungs cause he swallowed my water when it broke.”
- “I had a good experience here in Alabama having my baby. I loved my OB, but wish I could have used a midwife. I delivered my first baby out of state with a midwife and couldn’t believe the same option wasn’t available to me here in Alabama.”
- “I wish there was more support for women that had a miscarriage. Doctors should refer their patients to a mental health worker. I could have benefitted from that.”
- “I think more women should be aware of Amniotic Band Syndrome.”
- “Doctors don’t take a miscarriage as thoughtful as they should. I had a miscarriage and the doctors acted like it didn’t matter to them. I was hurt.”
- “I think that what helped us get through a difficult pregnancy was that we had a wonderful doctor and staff who went above and beyond to meet our needs.”
- “I was never told why my son had breathing problems.”
- “Perhaps they shouldn’t try to give so many drugs in the hospital!”
- “I’m very grateful for the care my baby gets now. If it weren’t for Medicaid, I don’t know how we would have done it.”
- “My baby was born early due to my placenta having aged past its gestational age and it was no longer working properly. I wished there were more research on this issue so that it could have been caught earlier and maybe I would have gone on bed rest earlier to try to extend my pregnancy.”
- “Benefits were very low for single working women. You almost have to have nothing in order to get some help.”
- Hospitals should have a counselor to help you cope with what you are going through while your baby is in the NICU, or they should have a support group.”

BREASTFEEDING

**Percent of Mothers Who Breastfed,
Alabama PRAMS 2010**

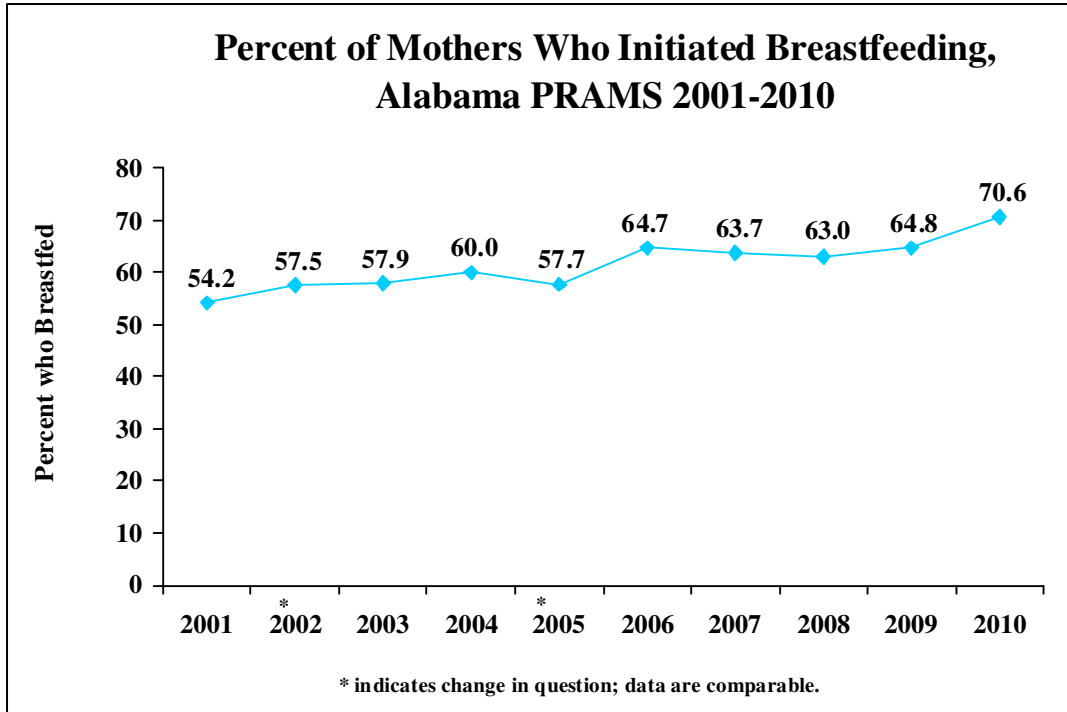


(Questions 50, 52, and 53 of the PRAMS Survey)

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 2010, 29.7 percent of mothers did not attempt to breastfeed their babies. Only 29.4 percent Alabama mothers were still breastfeeding their infants at the time of the survey, two to six months after delivery.

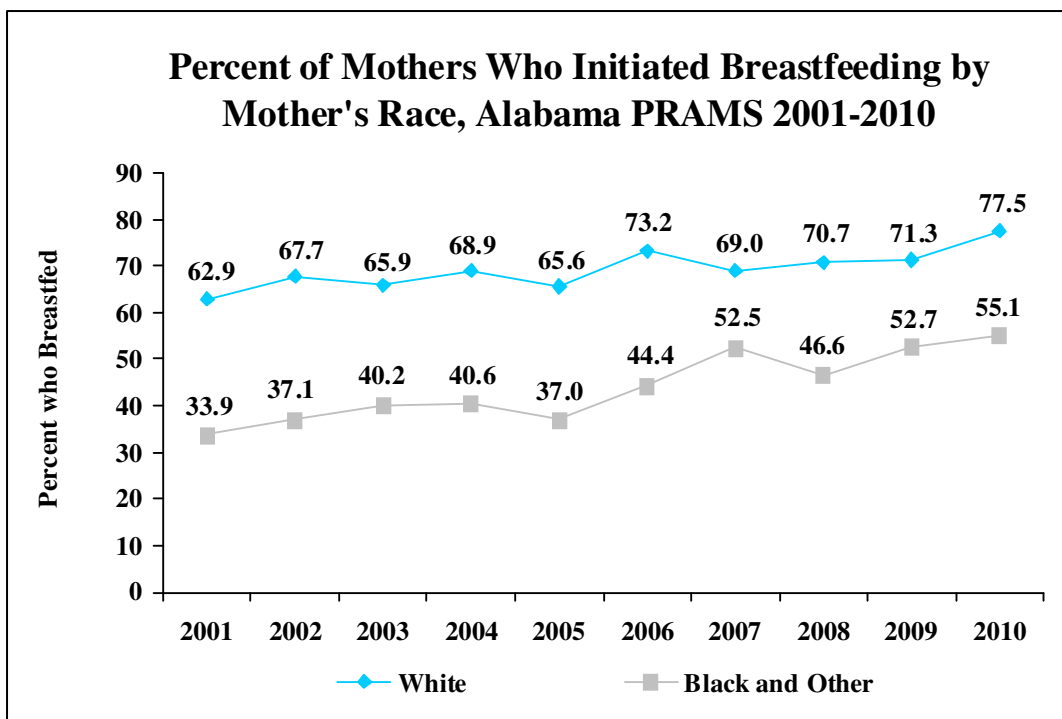
95% Confidence Intervals				
Time Breastfed	Did Not Breastfeed	<1 week	1 week or more	Still Breastfeeding
Percent	26.4-33.2	4.1-7.5	31.9-39.0	26.3-32.7



(Question 50 of the PRAMS Survey)

From 2001-2010, the percentage of Alabama mothers who initiated breastfeeding increased six out of the ten years. In 2010, 70.6 percent of mothers reported they initiated breastfeeding; however, from 2006-2010, the changes have not been statistically significant. Comparing 2001 and 2010 data, there has been a statistically significant increase of 30.3 percent in mothers who initiated breastfeeding.

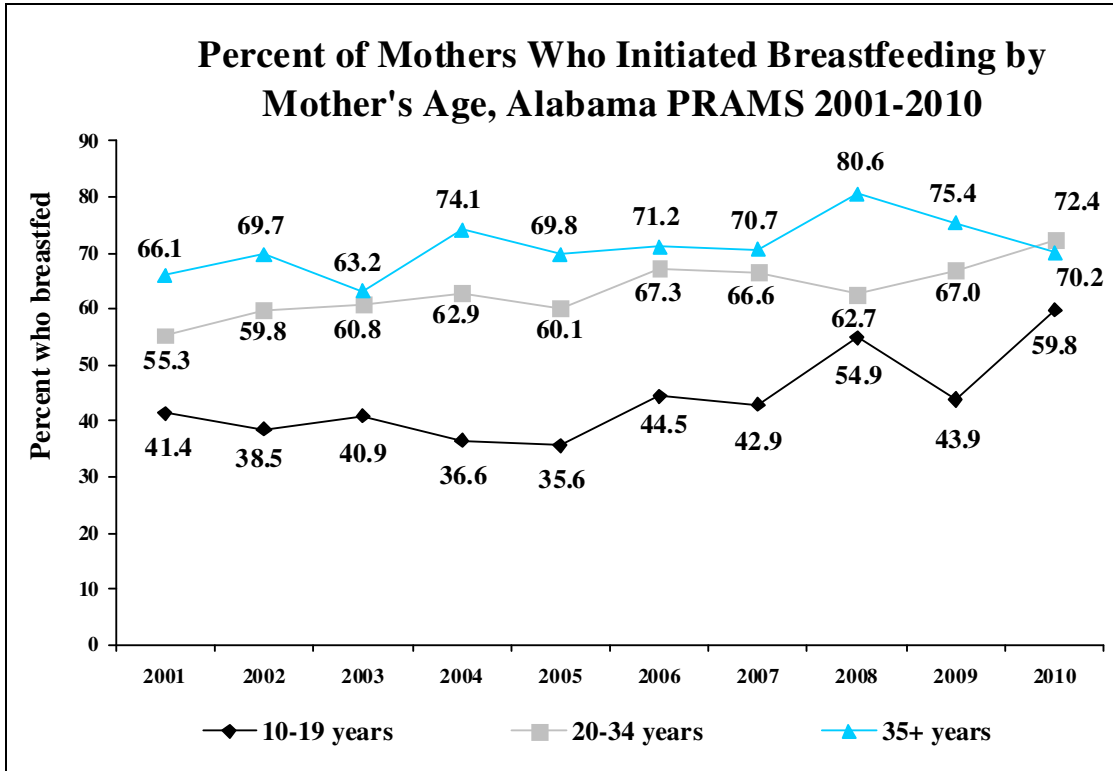
95% Confidence Intervals										
Year	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
% Breastfeeding	51.2-57.3	54.5-60.5	54.7-61.1	56.5-63.4	54.2-61.1	61.3-67.9	60.3-67.0	59.4-66.4	61.2-68.3	67.1-73.9



(Question 50 of the PRAMS Survey)

From 2001 to 2010, there has been a statistically significant increase in breastfeeding in both racial groups. The prevalence of breastfeeding has been consistently higher among white women than among black and other race women. The percentage of black and other race moms who breastfeed increased 4.6 percent from 2009 to 2010. The percentage of white moms who breastfeed increased 8.7 percent from 2009 to 2010.

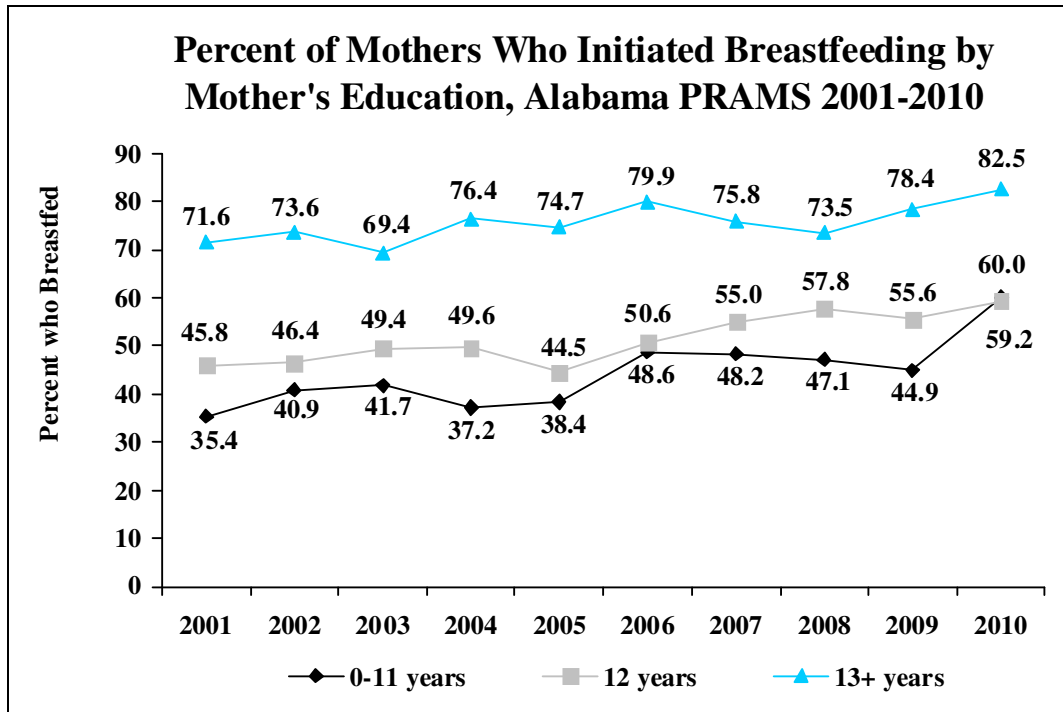
95% Confidence Intervals										
Year/ Race	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
White	59.2-66.6	64.1-71.2	62.0-69.6	64.8-72.8	61.5-69.4	69.3-76.8	64.9-72.8	66.6-74.4	67.2-75.1	73.6-80.9
Black and Other	28.7-39.1	31.7-42.4	34.5-46.1	34.3-47.2	30.7-43.9	38.1-51.0	46.1-58.9	39.7-53.6	45.9-59.4	48.0-61.9



(Question 50 of the PRAMS Survey)

During the period from 2001 through 2010, 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 while teenage mothers have the lowest percentage. However, the percentage of teenage mothers who initiated breastfeeding increased 36.2 percent from 2009 to 2010.

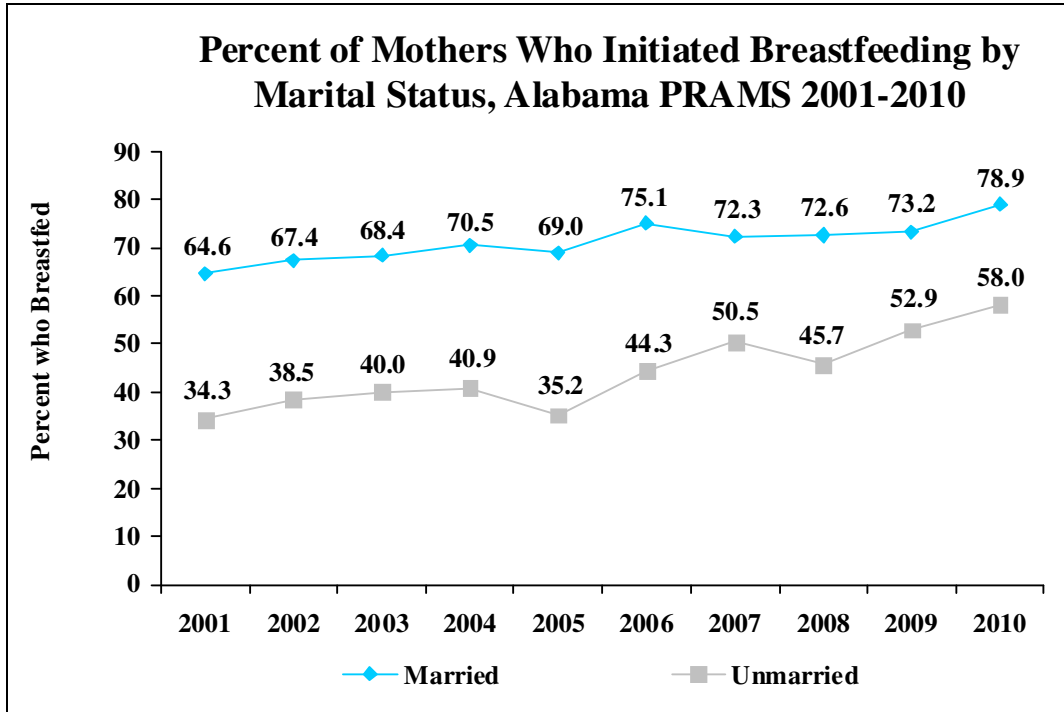
95% Confidence Intervals										
Year/ Age	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
10-19	33.7-49.2	30.9-46.1	32.6-49.7	28.1-45.9	27.0-45.2	35.0-54.4	32.8-53.7	44.4-64.9	33.4-55.0	49.2-69.6
20-34	51.7-58.8	56.2-63.3	57.0-64.4	58.8-66.8	56.1-64.0	63.4-70.9	62.7-70.2	58.7-66.6	62.9-70.8	68.5-76.0
35+	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	58.0-80.0



(Question 50 of the PRAMS Survey)

In Alabama, breastfeeding prevalence is highest among women with 13 or more years of education. Comparing percentages from 2001 to percentages in 2010, there is a statistically significant increase in all three educational groups.

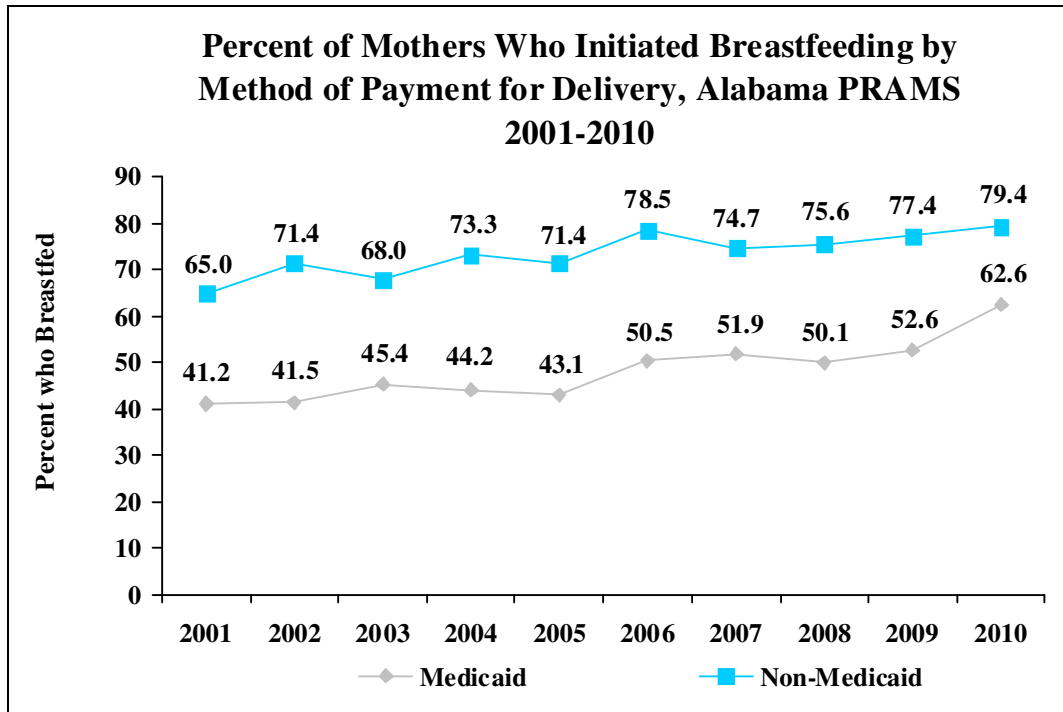
95% Confidence Intervals										
Year/ Edu.	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
0-11 yrs.	29.6-41.2	34.4-47.5	34.4-49.4	29.6-45.6	30.8-46.6	40.7-56.5	39.4-57.2	38.5-55.8	36.3-53.9	51.2-68.1
12 yrs.	40.2-51.5	40.7-52.0	43.4-55.5	43.0-56.2	38.2-50.9	43.7-57.4	48.3-61.5	50.9-64.4	48.7-62.2	52.5-65.6
13+ yrs.	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	78.1-86.2



(Question 50 of the PRAMS Survey)

Comparing 2001 levels to 2010 levels, there have been statistically significant increases in breastfeeding initiation in both married and 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.

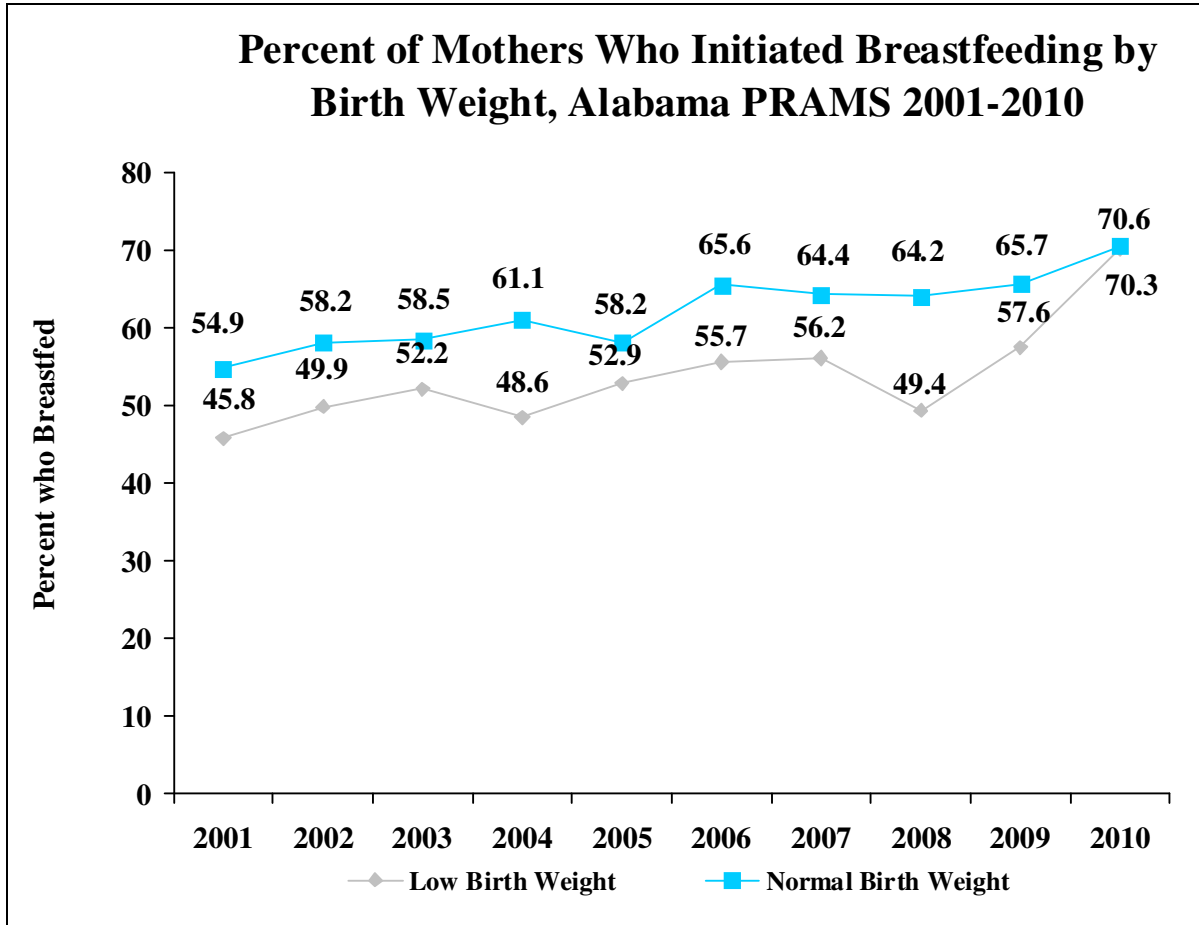
95% Confidence Intervals										
Year/ Married Status	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Married	60.8-68.3	63.7-71.2	64.5-72.0	66.2-74.4	64.8-73.0	71.1-78.6	68.4-75.9	68.4-76.5	68.9-77.2	74.8-82.5
Unmarried	29.4-39.2	33.4-43.6	34.5-45.7	34.9-47.2	29.5-41.4	38.2-50.6	44.3-56.6	39.4-52.2	46.7-59.1	51.9-63.9



(Question 50 of the PRAMS Survey)

From 2001 through 2010 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 2001 to those in 2010, both the Medicaid and Non-Medicaid groups have significantly increased in the percentage of women who initiated breastfeeding their infants.

95% Confidence Intervals										
Year/ Payment	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Medicaid	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	57.4-67.5
Non-Medicaid	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	74.6-83.5

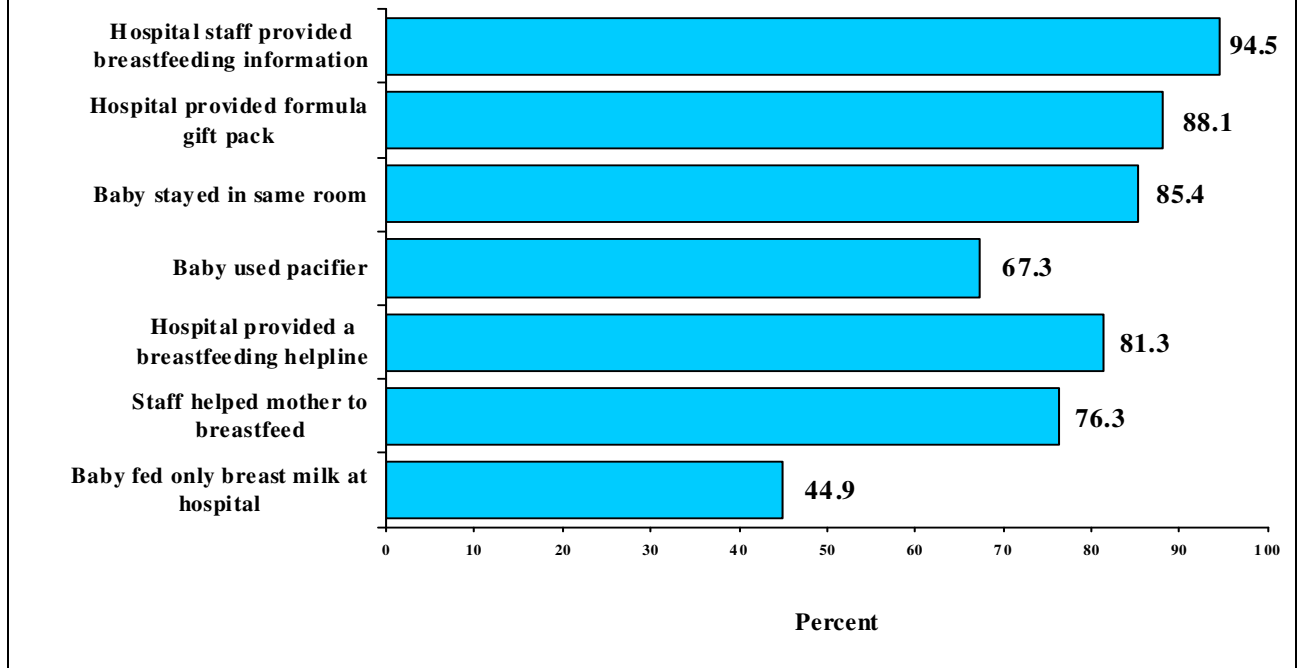


(Question 50 of the PRAMS Survey)

Of babies born in 2010 at a normal birth weight, 70.6 percent were breastfed. Of low birth weight babies, (weighing less than 2,500 grams), 70.3 percent were breastfed. Comparing 2001 percentages with 2010 percentages, there have been statistically significant increases in breastfeeding for both the normal birth weight and low birth weight groups.

95% Confidence Intervals										
Year/ BW	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
LBW	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	45.6-68.8	57.4-80.6
NBW	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	67.0-74.0

Breastfeeding Events at Hospital after Delivery, Alabama PRAMS 2010



(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 2010, 76.3 percent of mothers reported they received direct help from hospital staff in learning how to breastfeed their babies and 94.5 percent reported that the hospital provided them information on breastfeeding. Only 44.9 percent reported that their infants received breast milk exclusively while in the hospital, and 88.1 percent were given a formula gift pack to take home upon discharge.

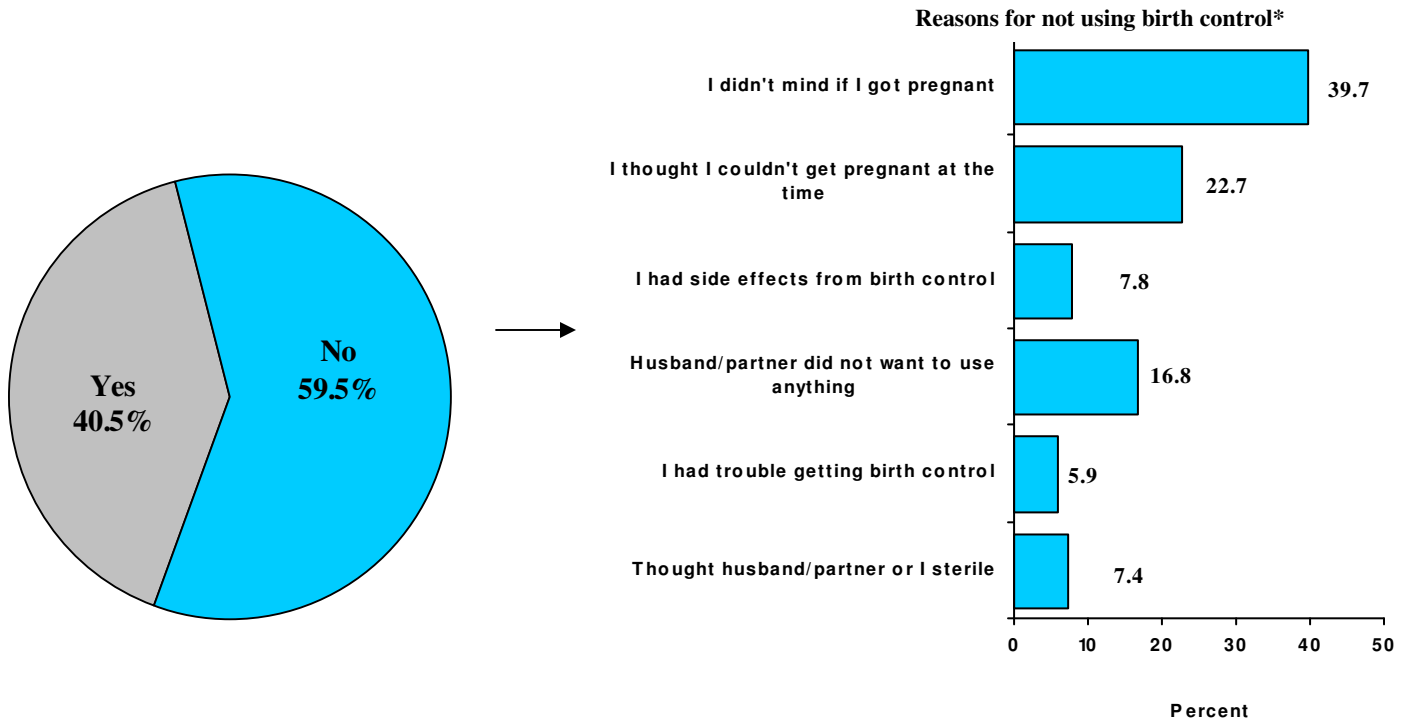
95% Confidence Intervals							
Events	Given gift pack	Breastfeeding information	Baby in room	Baby used pacifier	Breastfeeding helpline	Staff helped	Fed only breast milk in hospital
Percent	84.9-90.7	92.0-96.2	82.0-88.3	63.0-71.3	77.6-84.4	72.2-79.9	40.6-49.3

Mothers' Breastfeeding Comments

- “I would like to see more mothers try breastfeeding.”
- “The five medications I’m on keep me from being able to breastfeed.”
- “I had to do both breast milk and formula due to low supply. I pumped for 10 weeks but then dried up.”
- “I had tried (breastfeeding) with my first child, and he wouldn’t take it so I never tried again.”
- “I would like to advise young mothers to breastfeed more. The first couple of weeks are painful but it’s well worth it in the end. My baby turned out so much smarter than average.”
- “More education on breastfeeding would be helpful.”
- “Baby was not satisfied with breast milk.”
- “I fell into a deep depression and could not (breastfeed).”
- “I believe in breastfeeding.”
- “My baby had some formula after birth because she had trouble latching and lost weight but now she is exclusively breastfed.”

CONTRACEPTION

Mother *Not* Planning Pregnancy Using Birth Control at Conception, Alabama PRAMS 2010



(Questions 13 & 14 of the PRAMS Survey)

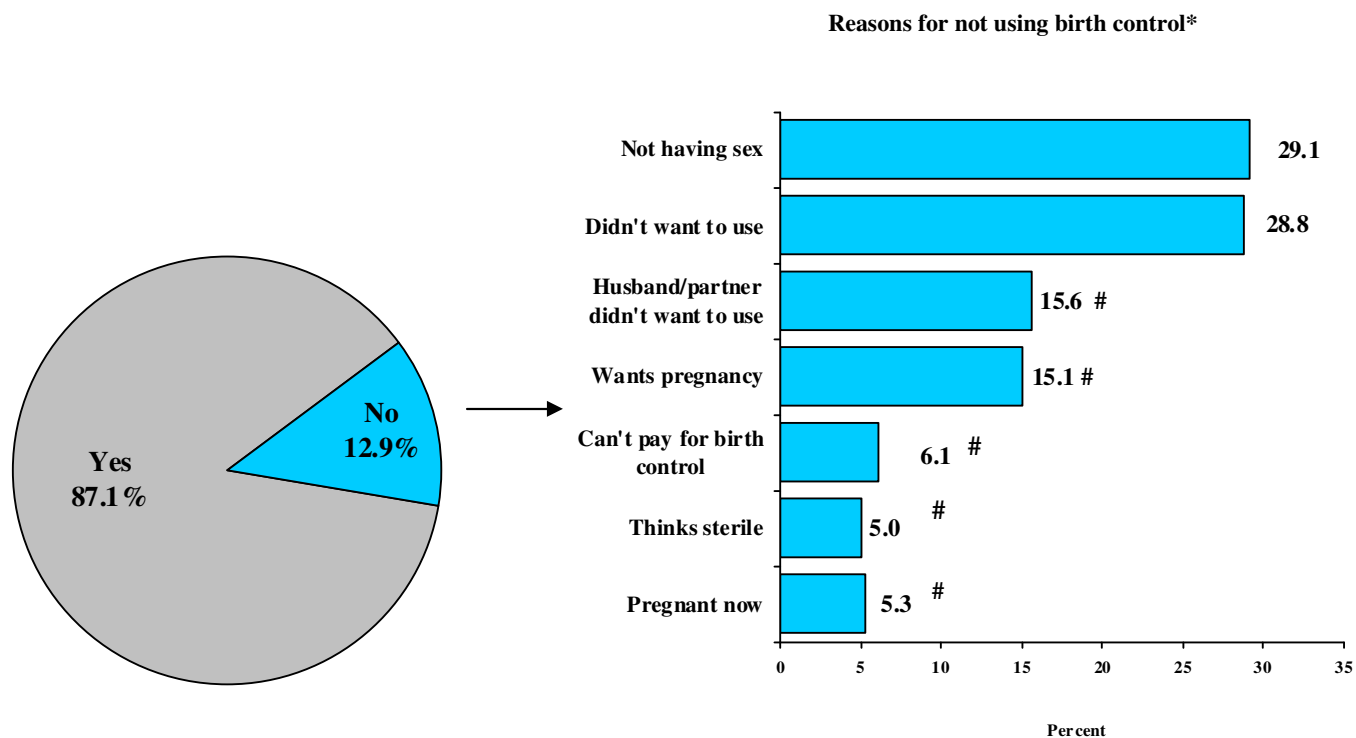
* Items are not mutually exclusive.

In 2010, 59.5 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. Over one in five 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	35.7-45.5	54.5-64.3	33.8-46.0	17.9-28.5	12.6-22.1	5.0-12.0	3.5-9.8	4.8-11.4

Mothers Currently Using Birth Control, Alabama PRAMS 2010

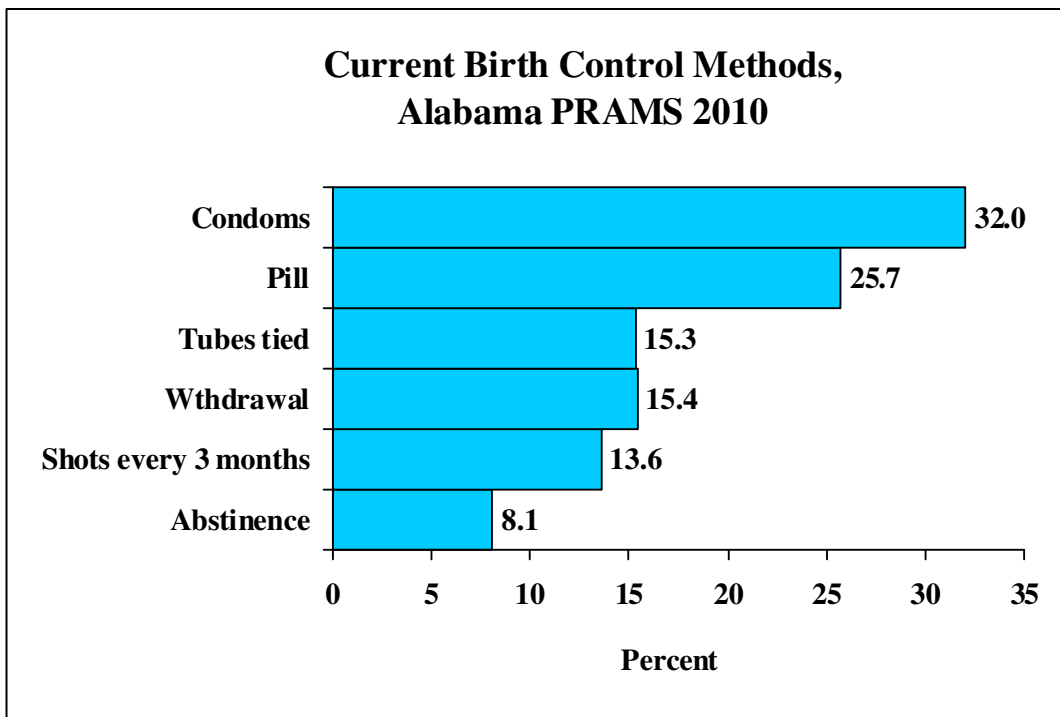


(Questions 61 & 62 of the PRAMS Survey) *Items are not mutually exclusive.
Number of respondents is less than 20.

The correct usage of contraception is invaluable in preventing unintended pregnancies. Almost 90 percent of Alabama mothers in 2010 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, 28.8 percent of the women said they did not want to use anything, 29.1 percent reported they were not having sex, 15.1 percent were wanting to be pregnant, and 15.6 percent reported their spouse or partner did not want to use any contraception. 5.3 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	84.4-89.4	10.6-15.6	20.7-38.7	20.9-39.0	9.2-23.6

95% Confidence Intervals				
Birth Control	Husb/partner didn't want to use	Pregnant now	Can't pay for birth control	Thinks sterile
Percent	9.7-24.1	2.2-12.3	2.7-12.9	2.1-11.4



(Question 63 of the PRAMS Survey)

In 2010, 32.0 percent of women reported condom usage as the preferred method of contraception. 25.7 percent reported they were taking the pill. Sterilization was the choice of 15.3 percent of women.

95% Confidence Intervals			
Method of Birth Control	Condoms	Pill	Tubes tied
Percent	28.4-35.7	22.5-29.2	12.6-18.4

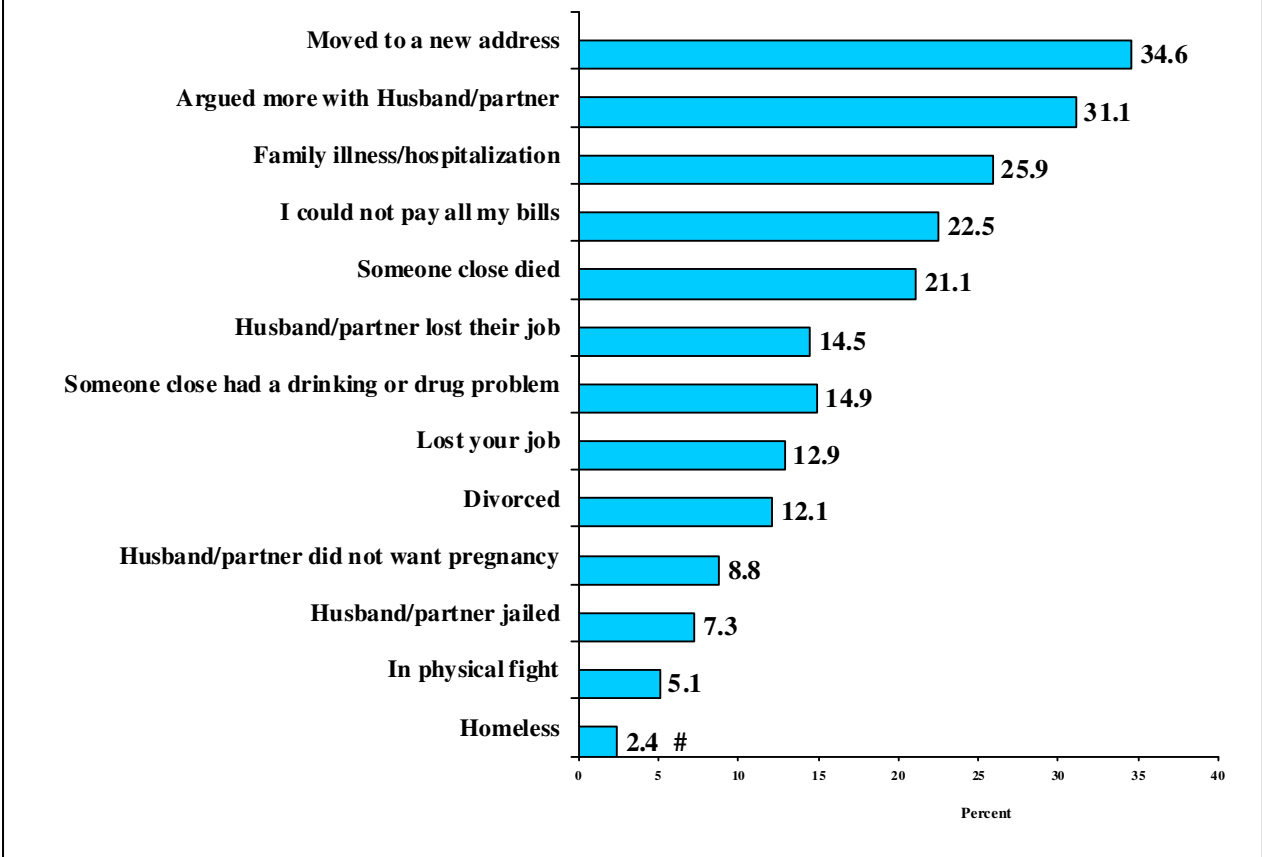
95% Confidence Intervals			
Method of Birth Control	Withdrawal	Shots every 3 mos.	Abstinence
Percent	12.8-18.4	11.1-16.6	6.2-10.5

Mothers' Birth Control Comments

- “I didn’t make it to my appointment to get my next three months worth of birth control.”
- “I was in between birth control because the NuvaRing didn’t work for me. It gave me hot flashes. I had been without birth control for six weeks when I got pregnant.”
- “I was breastfeeding another baby and didn’t want to use birth control.”
- “We both just allow the Lord to lead us and show us when he wants us to have children.”

MISCELLANEOUS

Sources of Stress 12 Months Before Pregnancy, Alabama PRAMS 2010



(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, 34.6 percent of Alabama mothers reported they had moved to a new address, 31.1 percent reported they argued more with their husband/partner, about 25.9 percent had a family illness or hospitalization, and 22.5 percent reported they were unable to pay all of their bills. About one in five mothers suffered the loss of someone close to them.

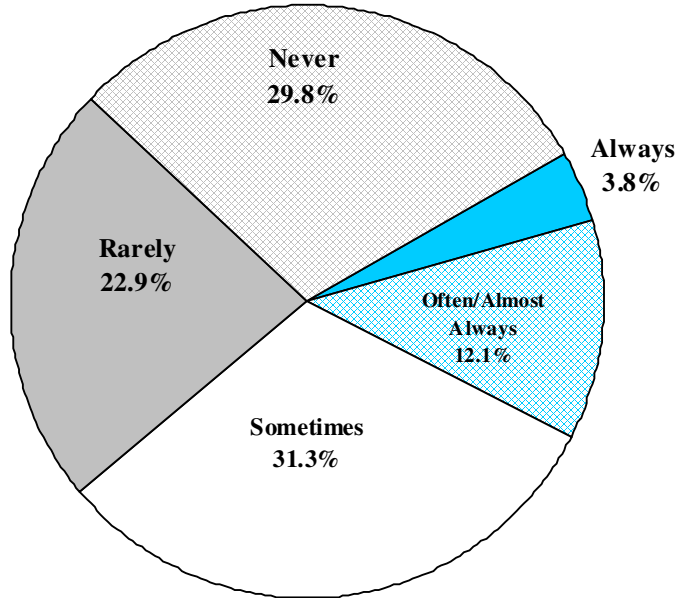
95% Confidence Intervals						
Source of Stress	Moved	Argued more with Husb/partner	Family illness	Financial difficulties	Someone close died	Someone close with a drug/alcohol problem
Percent	31.2-38.1	27.8-34.6	22.8-29.3	19.6-25.8	18.2-24.3	12.5-17.7

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	9.9-14.7	10.6-15.6	12.1-17.2	6.9-11.2	3.7-7.0	5.6-9.5	1.5-3.8

Mental Health of Mothers, Alabama PRAMS 2010

Question 64a asks:

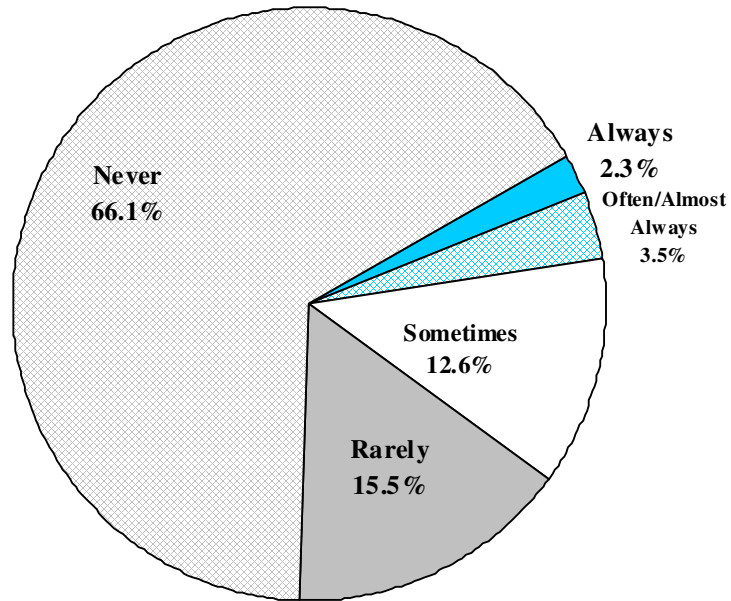
“Since your new baby was born, how often have you felt down, depressed, or sad?”



In 2010, 15.9 percent of Alabama mothers reported they always or almost always felt down, depressed, or hopeless since the birth of their baby. About 54.2 percent reported feeling this way sometimes and on rare occasions.

95% Confidence Intervals					
Depression	Never	Always	Often/Almost Always	Sometimes	Rarely
Percent	26.5-33.4	2.6-5.6	9.9-14.8	28.0-34.9	20.0-26.1

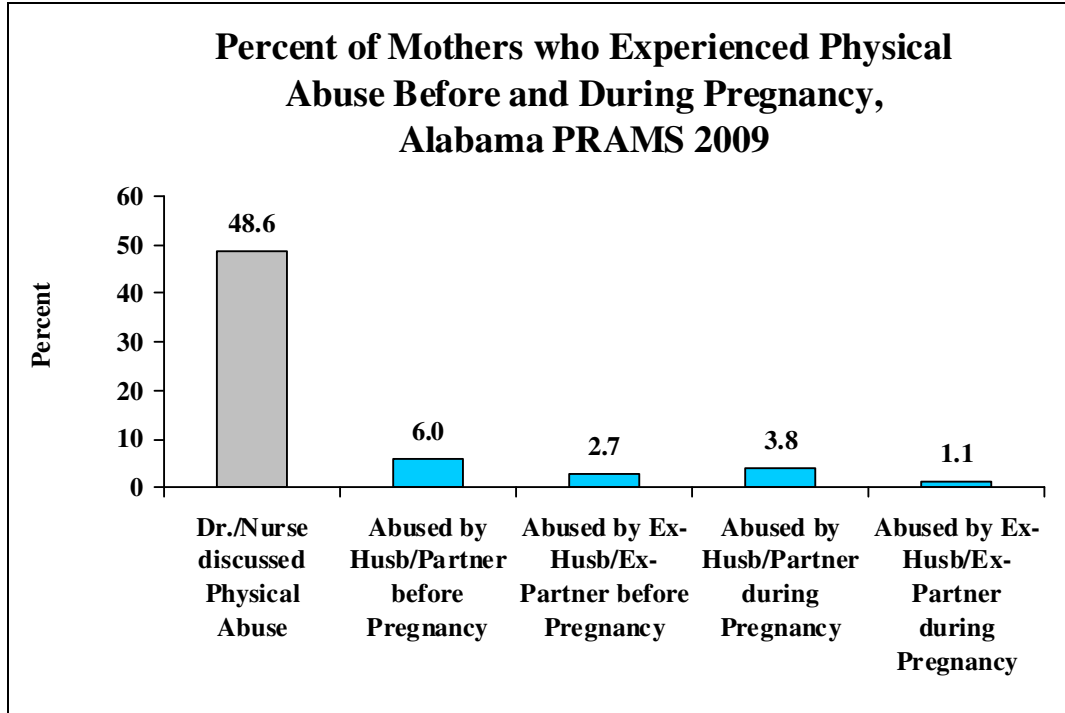
Mental Health of Mothers, Alabama PRAMS 2010
Question 64b asks:
“Since your new baby was born, how often have you felt hopeless?”



In 2010, When Alabama mothers were asked how often they felt hopeless, 5.8 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 2010 in Alabama, 8.3 percent of mothers reported their doctor or other health care worker had diagnosed them with depression since the birth of their baby.

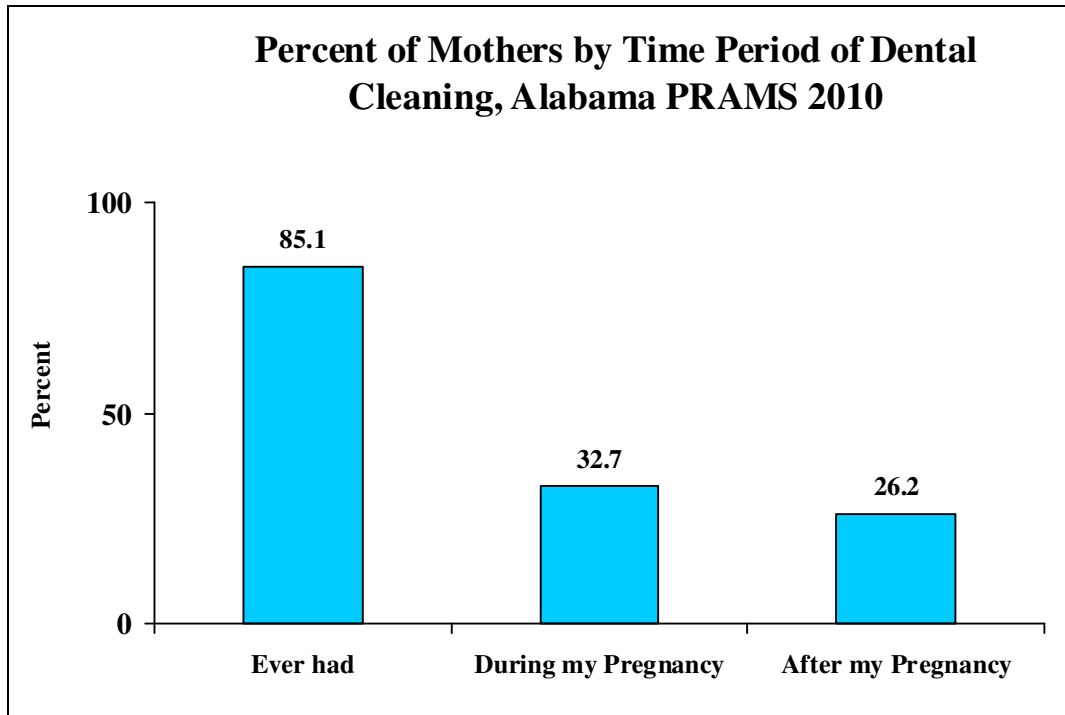
95% Confidence Intervals					
Depression	Never	Always	Often/Almost Always	Sometimes	Rarely
Percent	62.5-69.6	1.4-3.8	2.3-5.1	10.4-15.4	13.0-18.3



(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 2010, 6.0 percent of Alabama mothers reported physical abuse by their *current* husband/partner and 2.7 percent mothers reported abuse by a *former* husband/partner twelve months before becoming pregnant. The abuse decreased **during pregnancy** by 36.7 percent by *current* spouse/partner and 59.3 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	45.0-52.3	4.5-8.0	1.7-4.2	2.6-5.5	0.5-2.3

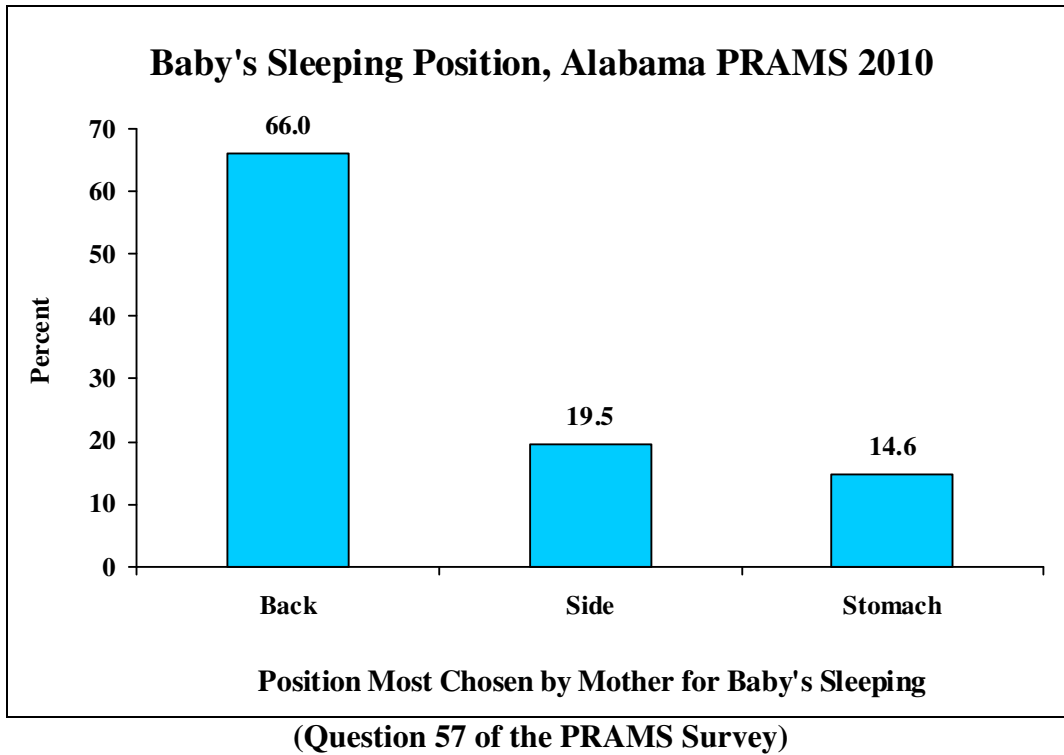


(Question 67 & 68 of the PRAMS Survey)

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 2010 when Alabama mothers were asked, “When did you have your teeth cleaned by a dentist or dental hygienist?” 85.1 percent reported having had their teeth cleaned, 32.7 percent had their teeth cleaned *during* their pregnancy, and 26.2 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 up and cleaning.

95 % Confidence Intervals			
When cleaning was performed:	Before Pregnancy	During Pregnancy	After Pregnancy
Percent	82.3-87.6	29.2-36.3	22.9-29.8



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. Alabama, at 66.0 percent, was slightly below this objective.

In 2010 in Alabama, 34.1 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	62.3-69.5	16.6-22.7	12.0-17.5

Mothers' Miscellaneous Comments

- “My postpartum experience was awful and extremely depressing.”
- “It’s important that the mother has the baby’s dad there to help.”
- “I was going through depression when I got pregnant and way before. I never mentioned it at doctor’s appointments because I was uncomfortable talking about it and didn’t want anyone to think I was crazy. I think there are other people like me and I hope they can find a way to make it easier for people like me to talk about it.”
- “If a pregnant woman has no insurance, she should receive dental coverage with her Medicaid.”
- “My husband was laid off. Now we are trying to survive on unemployment, WIC and our daughter’s SSI check. The depression is a lot worse.”
- “I was only down and depressed because I could not help my baby while he was in the NICU.”
- “There should be more access to support groups for new mothers and mothers with multiple children, a network that they can go to for support and community information.”

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, Mail and Telephone Surveys: The Total Design Method. 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 respond 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 2010, 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

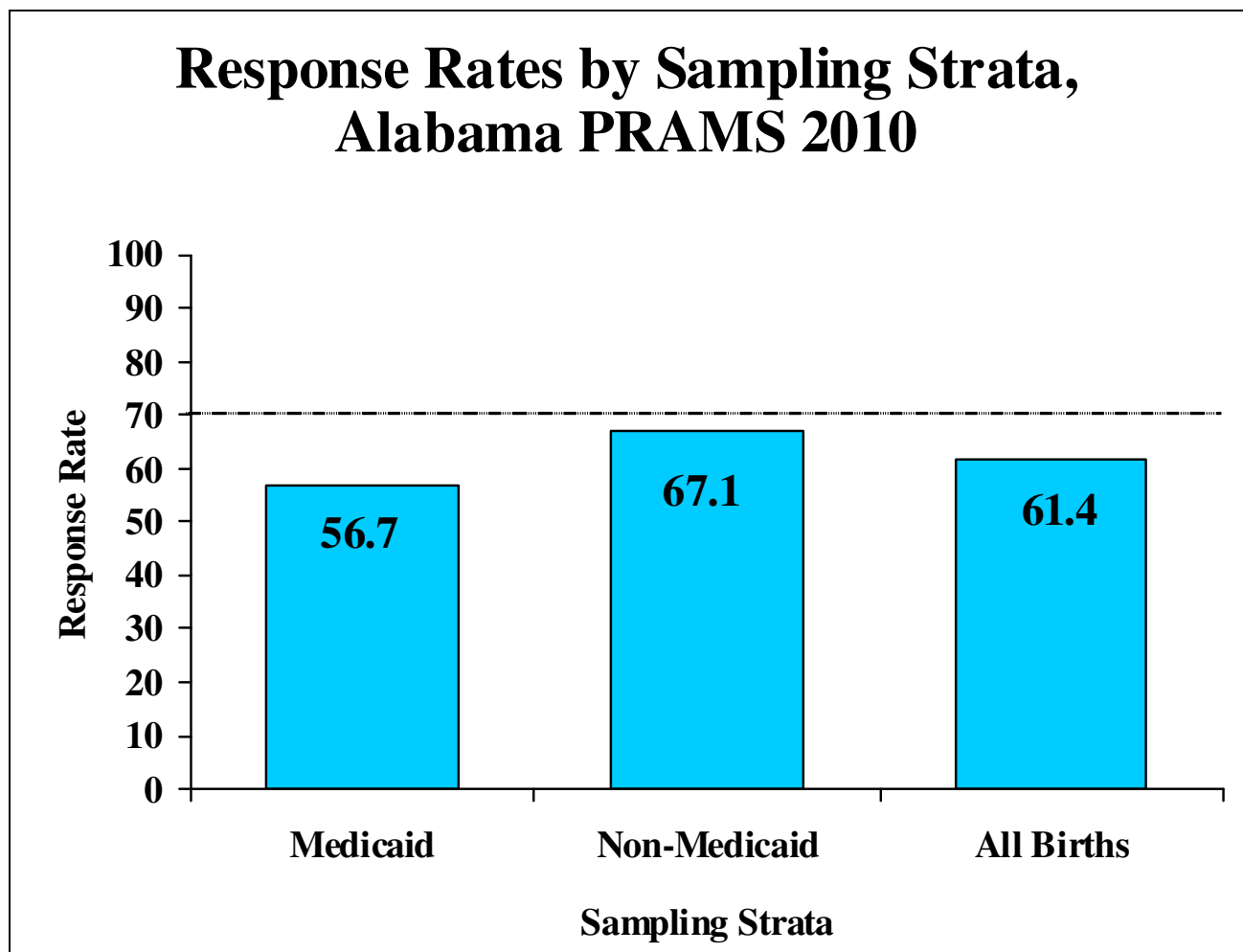
Each month approximately 100 women who have given birth two to four months before the sampling date are selected for the sample. The survey is divided into two strata: Medicaid and non-Medicaid normal birth weight. Women in each of these strata have a different probability of being chosen. Samples are selected so that roughly equal numbers of women are chosen from each strata. The odds of being selected in 2008 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.

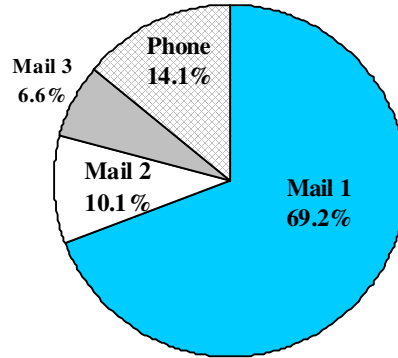
Strata were chosen to allow for oversampling of mothers who give birth to low birth weight babies and mothers whose birth was paid for by Medicaid. Both low birth weight births and Medicaid births are of special interest to the state of Alabama. Oversampling allows for large enough numbers of births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

Response Rates



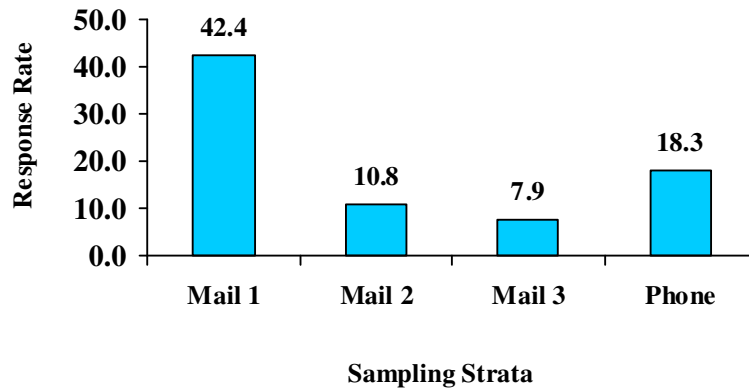
As a rule of thumb, CDC requires at least 400 completed questionnaires and a response rate of 65 percent in each stratum. In 2010, the response rates for the Medicaid strata was below 65 percent, with the higher rate of 67.1 percent among non-Medicaid births and the lower rate of 56.7 percent for Medicaid NBW births. The overall response rate for the two strata was 61.4 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 2010.

Percent Distribution of Completed Questionnaires by Survey Phase of Completion, Alabama PRAMS 2010



The majority of completed surveys, 69.2 percent, were received as a result of the initial mailing or mail 1. The mail 2 accounted for 10.1 percent of completed questionnaires, and mail 3 accounted for 6.6 percent. Of the total number of completed surveys, 14.1 percent resulted from the phone phase.

Response Rates by Survey Phase, Alabama PRAMS 2010



The response rate is the percent of surveys sent which are completed. Of all women who received the first mailing, 42.4 percent responded. The second mailing had a 10.8 percent response rate. The response rate for the third mailing was 7.9 percent in 2010, and the response rate for the phone phase was 18.3 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 *before* you got pregnant with your new baby.

1. 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	Yes
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

2. During the month before you got pregnant with your new baby, were you covered by any of these health insurance plans?

Check all that apply

- 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
- Other source(s) —————> Please tell us:

- I did not have any health insurance before I got pregnant

3. During the month before you got pregnant with your new baby, how many times a week did you take a multivitamin, a prenatal vitamin, or a folic acid vitamin?

- I didn't take a multivitamin, prenatal vitamin, or folic acid vitamin at all
- 1 to 3 times a week
- 4 to 6 times a week
- Every day of the week

4. Just before you got pregnant with your new baby, how much did you weigh?

_____ Pounds OR _____ Kilos

5. How tall are you without shoes?

Feet Inches

OR Meters

6. What is your date of birth?

/ / 19
Month Day Year

7. Before you got pregnant with your new 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 starts during pregnancy.

- No
 Yes

8. Before you got pregnant with your new baby, did you ever have any other babies who were born alive?

- No → **Go to Question 11**
 Yes

9. Did the baby born just before your new one weigh more than 5 pounds, 8 ounces (2.5 kilos) at birth?

- No
 Yes

10. Was the baby just before your new one born more than 3 weeks before his or her due date?

- No
 Yes

The next questions are about the time when you got pregnant with your *new* baby.

11. Thinking back to just before you got pregnant with your *new* baby, how did you feel about becoming pregnant?

Check one answer

- 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

12. When you got pregnant with your new baby, were you trying to get pregnant?

- No
 Yes → **Go to Question 15**

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 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 15**

Go to Question 14

14. What were your reasons or your husband's or partner's reasons for not doing anything to keep from getting pregnant?

Check all that apply

- I didn't mind if I got pregnant
- I thought I could not get pregnant at that time
- I had side effects from the birth control method I was using
- I had problems getting birth control when I needed it
- I thought my husband or partner or I was sterile (could not get pregnant at all)
- My husband or partner didn't want to use anything
- Other _____ → Please tell us:

DURING PREGNANCY

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

17. Did you get prenatal care as early in your pregnancy as you wanted?

No
 Yes → **Go to Question 19**

18. Did any of these things keep you from getting prenatal care at all or as early as you wanted? For each item, circle **T** (True) if it was a reason that you didn't get prenatal care when you wanted or circle **F** (False) if it was not a reason for you or if something does not apply to you.

	True	False
a. I couldn't get an appointment when I wanted one	T	F
b. I didn't have enough money or insurance to pay for my visits	T	F
c. I had no transportation to get to the clinic or doctor's office	T	F
d. The doctor or my health plan would not start care as early as I wanted	T	F
e. I had too many other things going on	T	F
f. I couldn't take time off from work or school	T	F
g. I didn't have my Medicaid card	T	F
h. I had no one to take care of my children	T	F
i. I didn't know that I was pregnant	T	F
j. I didn't want anyone else to know I was pregnant	T	F
k. I didn't want prenatal care	T	F

If you did not go for prenatal care, go to Question 21.

19. Did any of these health insurance plans help you pay for your prenatal care?

Check all that apply

- 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
- Other source(s) → Please tell us:

- I did not have health insurance to help pay for my prenatal care

20. During any of your prenatal care visits, did a doctor, nurse, or other health care worker talk with you about any of the things listed below? Please count only discussions, not 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 with you about it.

	No	Yes
a. How smoking during pregnancy could affect my baby.	N	Y
b. Breastfeeding my baby.	N	Y
c. How drinking alcohol during pregnancy could affect my baby.	N	Y
d. Using a seat belt during my pregnancy	N	Y
e. Medicines that are safe to take during my pregnancy	N	Y
f. How using illegal drugs could affect my baby.	N	Y
g. Doing tests to screen for birth defects or diseases that run in my family	N	Y
h. The signs and symptoms of preterm labor (labor more than 3 weeks before the baby is due).	N	Y
i. What to do if my labor starts early	N	Y
j. Getting tested for HIV (the virus that causes AIDS)	N	Y
k. What to do if I feel depressed during my pregnancy or after my baby is born	N	Y
l. Physical abuse to women by their husbands or partners	N	Y

21. At any time during your most recent pregnancy or delivery, did you have a test for HIV (the virus that causes AIDS)?

- No
- Yes
- I don't know

22. Have you ever heard or read that taking a vitamin with folic acid can help prevent some birth defects?

- No
- Yes

23. During your most recent pregnancy, were you on WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children)?

- No → Go to Question 25
- Yes

24. When you went for WIC visits during your most recent pregnancy, did you receive information on breastfeeding?

- No
- Yes

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

26. Did you have any of the following problems during your most recent pregnancy? For each item, circle **Y** (Yes) if you had the problem or circle **N** (No) if you did not.

	No	Yes
a. Vaginal bleeding	N	Y
b. Kidney or bladder (urinary tract) infection	N	Y
c. <i>Severe</i> nausea, vomiting, or dehydration	N	Y
d. Cervix had to be sewn shut (cerclage for incompetent cervix)	N	Y
e. High blood pressure, hypertension (including pregnancy-induced hypertension [PIH]), preeclampsia, or toxemia	N	Y
f. Problems with the placenta (such as abruptio placentae or placenta previa)	N	Y
g. Labor pains more than 3 weeks before my baby was due (preterm or early labor)	N	Y
h. Water broke more than 3 weeks before my baby was due (premature rupture of membranes [PROM])	N	Y
i. I had to have a blood transfusion	N	Y
j. I was hurt in a car accident	N	Y

If you did *not* have any of the problems listed above, go to Question 28.

27a. Did a doctor, nurse, or other health care worker tell you to stay home in bed for more than 2 days because of any of the problem(s) listed above?

- No
- Yes

27b. Did you go to the hospital or emergency room because of any of the problem(s) listed above?

- No → **Go to Question 28**
- Yes

Go to Question 27c

27c. How many times did you go to the hospital or emergency room because of the problem(s)?

- 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
- 1 to 5 cigarettes
- Less than 1 cigarette
- I didn't smoke then

30. In the last 3 months of your pregnancy, 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
- 1 to 5 cigarettes
- Less than 1 cigarette
- I didn't smoke then

31. How many cigarettes do you smoke on an average day now? (A pack has 20 cigarettes.)

- 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

32. Which of the following statements best describes the rules about smoking *inside* your home now?

Check one answer

- 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

The next questions are about drinking alcohol around the time of pregnancy (before, during, and after).

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.

- No → Go to Page 8, Question 36
- Yes

Go to Question 34a

34a. During the 3 months before you got pregnant, how many alcoholic drinks did you have in an average week?

- 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

34b. During the 3 months before you got pregnant, 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

35a. During the *last 3 months* of your pregnancy, how many alcoholic drinks did you have in an average week?

- 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 Page 8, Question 36

35b. During the *last 3 months* 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 *during* your most recent pregnancy.

36. This question is about things that may have happened during the 12 months before your new baby was born. For each item, circle **Y** (Yes) if it happened to you or circle **N** (No) if it did not. (It may help to look at the calendar when you answer these questions.)

- | | No | Yes |
|--|----|-----|
| a. A close family member was very sick and had to go into the hospital | N | Y |
| b. I got separated or divorced from my husband or partner | N | Y |
| c. I moved to a new address | N | Y |
| d. I was homeless | N | Y |
| e. My husband or partner lost his job . . . | N | Y |
| f. I lost my job even though I wanted to go on working. | N | Y |
| g. I argued with my husband or partner more than usual. | N | Y |
| h. My husband or partner said he didn't want me to be pregnant | N | Y |
| i. I had a lot of bills I couldn't pay. | N | Y |
| j. I was in a physical fight | N | Y |
| k. My husband or partner or I went to jail | N | Y |
| l. Someone very close to me had a problem with drinking or drugs | N | Y |
| m. Someone very close to me died | N | Y |

37. During the 12 months before you got pregnant with your new baby, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?

- No
- Yes

38. During the 12 months before you got pregnant with your new baby, did an ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?

- No
- Yes

39. During your most recent pregnancy, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?

- No
- Yes

40. During your most recent pregnancy, did an ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?

- No
- Yes

The next questions are about your labor and delivery. (It may help to look at the calendar when you answer these questions.)

41. When was your baby due?

	/		/	20
Month		Day		Year

42. When did you go into the hospital to have your baby?

	/		/	20
Month		Day		Year

- I didn't have my baby in a hospital

43. When was your baby born?

/ / 20
 Month Day Year

44. When were you discharged from the hospital after your baby was born?

/ / 20
 Month Day Year

I didn't have my baby in a hospital

45. Did any of these health insurance plans help you pay for the *delivery* of your new baby?

Check all that apply

- 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
- Other source(s) —————> Please tell us:

- I did not have health insurance to help pay for my delivery

AFTER PREGNANCY

The next questions are about the time since your new baby was born.

46. After your baby was born, was he or she put in an intensive care unit?

- No
- Yes
- I don't know

47. After your baby was born, how long did he or she stay in the hospital?

- Less than 24 hours (less than 1 day)
- 24 to 48 hours (1 to 2 days)
- 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?

- No —————> **Go to Page 12, Question 61**
- Yes

49. Is your baby living with you now?

- No —————> **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?

- No
- Yes → **Go to Question 52**

51. What were your reasons for not breastfeeding your new baby?

Check all that apply

- 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 → Please tell us:

If you did not breastfeed your new baby, go to Question 56b.

52. Are you currently breastfeeding or feeding pumped milk to your new baby?

- No
- Yes → **Go to Question 55**

Go to Question 53

53. How many weeks or months did you breastfeed or pump milk to feed your baby?

- Weeks **OR** Months
- Less than 1 week

54. What were your reasons for stopping breastfeeding?

Check all that apply

- My baby had difficulty latching or nursing
- Breast milk alone did not satisfy my baby
- I thought my baby was not gaining enough weight
- My nipples were sore, cracked, or bleeding
- It was too hard, painful, or too time consuming
- I thought I was not producing enough milk
- I had too many other household duties
- I felt it was the right time to stop breastfeeding
- I got sick and was not able to breastfeed
- I went back to work or school
- My baby was jaundiced (yellowing of the skin or whites of the eyes)
- Other → Please tell us:

If your baby was not born in a hospital, go to Question 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	Yes
a. Hospital staff gave me information about breastfeeding	N	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	N	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 old
 My baby has not had any liquids other than breast milk

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)?

Weeks **OR** Months
 My baby was less than 1 week old
 My baby has not eaten any foods

If your baby is still in the hospital, go to Page 12, Question 61.

57. In which *one* position do you *most often* lay your baby down to sleep now?

Check one answer

- On his or her side
- On his or her back
- On his or her stomach

58. Was your new baby seen by a doctor, nurse, or other health care worker for a *one week* check-up after he or she was born?

- No
- Yes

59. Has your new baby had a well-baby checkup? (A well-baby checkup is a regular health visit for your baby usually at 1, 2, 4, and 6 months of age.)

- No → **Go to Page 12, Question 61**
- Yes

↓ **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.)

Times

61. 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**

62. 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

- I am not having sex
 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 → Please tell us:

If you or your husband or partner is not doing anything to keep from getting pregnant *now*, go to Question 64.

63. What kind of birth control are you or your husband or partner using *now* to keep from getting pregnant?

Check all that apply

- Tubes tied or closed (female sterilization)
 Vasectomy (male sterilization)
 Pill
 Condoms
 Injection once every 3 months (Depo-Provera[®])
 Contraceptive implant (Implanon[®])
 Contraceptive patch (OrthoEvra[®])
 Diaphragm, cervical cap, or sponge
 Vaginal ring (NuvaRing[®])
 IUD (including Mirena[®])
 Rhythm method or natural family planning
 Withdrawal (pulling out)
 Not having sex (abstinence)
 Emergency contraception (The "morning-after" pill)
 Other → Please tell us:

64. Below is a list of feelings and experiences that women sometimes have after childbirth. Read each item to determine 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:

1 2 3 4 5
Never Rarely Sometimes Often Always

- a. I felt down, depressed, or sad.
- b. I felt hopeless
- c. I felt slowed down

OTHER EXPERIENCES

The next questions are on a variety of topics.

65. At any time during your most recent pregnancy, did a doctor, nurse, or other health care worker tell you that you had depression?

- No
- Yes

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?

Hours

- Less than 1 hour a day
- My baby is never in the same room or vehicle with someone who is smoking

67. Have you ever had your teeth cleaned by a dentist or dental hygienist?

- No → Go to Page 14, Question 69
- Yes

68. Did you have your teeth cleaned by a dentist or dental hygienist during the time periods 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 |
|--|----|-----|
| a. During my most recent pregnancy . . . | N | Y |
| b. After my most recent pregnancy. | N | Y |

The last questions are about the time during the *12 months before* your new baby was born.

69. During the 12 months before your new baby was born, what were the sources of your household's income?

Check all that apply

- Money from family or friends
- Money from a business, fees, dividends, or rental income
- Paycheck or money from a job
- Food stamps or WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children)
- Aid such as Temporary Assistance for Needy Families (TANF), welfare, public assistance, general assistance, or Supplemental Security Income (SSI)
- Unemployment benefits
- Child support or alimony
- Social security, workers' compensation, disability, veteran benefits, or pensions
- Other _____ → Please tell us:

70. During the 12 months before your new baby was born, what was your yearly total household income before taxes? Include your income, your husband's or partner's 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.)

- Less than \$10,000
- \$10,000 to \$14,999
- \$15,000 to \$19,999
- \$20,000 to \$24,999
- \$25,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 or more

71. During the 12 months before your new baby was born, how many people, including yourself, depended on this income?

_____ People

72. What is today's date?

____ / ____ / 20____
Month Day Year