Alabama Department of Public Health • Bureau of Family Health Services

2015 SURVEILLANCE REPORT - ALABAMA

PRANS

PRAMS Surveillance Report Alabama 2015

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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 at the Alabama Department of Public Health, Center for Health Statistics.

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 whose deliveries are paid by Medicaid are over sampled. Roughly, equal numbers of mothers are selected from each of two sample strata: Medicaid and non-Medicaid.

The figures provided in this publication are weighted to represent the 55,098 live births which occurred in Alabama in 2015 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 2015, 866 questionnaires were completed from 1,456 sampled.

The overall **un-weighted** response rate was 59.5percent, and the **weighted** response rate was 59.6 percent. The CDC requires an overall weighted response rate of 55 percent to insure data is of the highest quality.

This year, 95 percent 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.

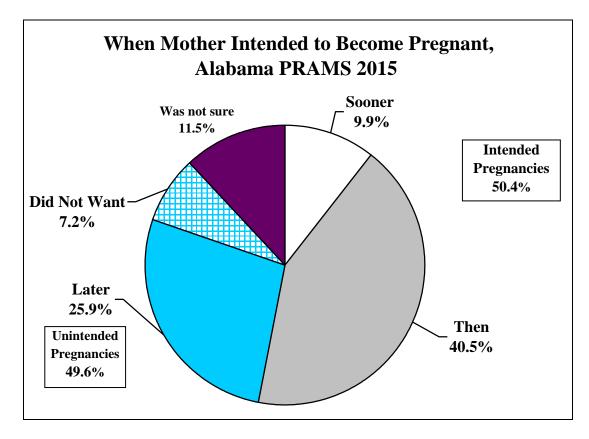
2015 Alabama PRAMS Surveillance Report Highlights

- 49.6 percent of Alabama births were unintended.
- 57.7 percent of Alabama mothers did not take any multivitamins before becoming pregnant.
- 11.0 percent of Alabama mothers indicated they continued smoking during pregnancy.
- 5.0 percent of Alabama mothers reported drinking alcoholic beverages on a weekly basis during the last three months of pregnancy.
- 61.9 percent of Alabama mothers reported having a medical problem, such as severe nausea or vomiting, preterm labor, high blood pressure, kidney or bladder infections, vaginal bleeding, or diabetes during pregnancy.
- 54.6 percent of Alabama mothers participated in the Supplemental Food Program for Women, Infants, and Children (WIC) during pregnancy.
- 77.7 percent of Alabama mothers initiated breastfeeding of their infants.
- 55.5 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), 82.3 percent of mothers were using some form of birth control.
- 31.7 percent of Alabama mothers reported they moved to a new address during their pregnancy.
- 8.9 percent of Alabama mothers reported they *always or almost always* felt down, depressed, or sad since the birth of their baby. 48.5 percent reported feeling this way *sometimes or on rare occasions*.
- 40.6 percent of Alabama mothers reported having a dental cleaning during their pregnancy.
- 74.4 percent of Alabama mothers most often lay their babies on their backs for sleeping.

Mother's General Comments

- "Believe babies are a blessing from God."
- "I love him very much and I am so happy to have my sweet little boy."
- "Motherhood is such a joy!"
- "Thanks for allowing me to participate in your survey."
- "No love is greater than a mother's love."
- "This is a great study. Thank you for your time and effort on this topic."
- "I feel so lucky to have a happy, healthy baby."
- "Hope this survey helps."
- "Eat as much healthy food as you can while you are pregnant."

INTENDEDNESS OF BIRTHS

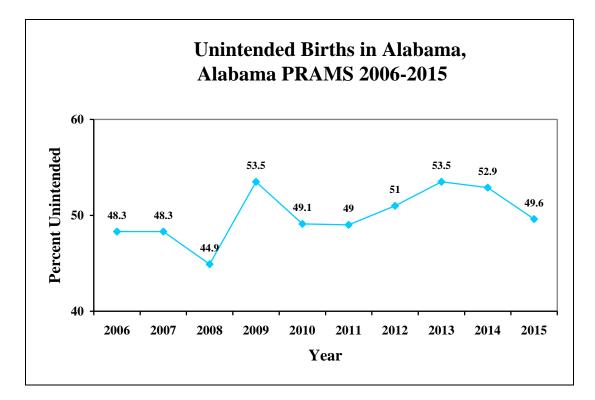




Pregnancies that are unwanted or mistimed are an important health care issue. The health of the infant is directly affected by the mother's attitude, behaviors, and experiences during the pregnancy.

In 2015, 49.6 percent of Alabama mothers reported their pregnancies as "*unintended*"; 25.9 percent of Alabama women said they wanted to be pregnant "*later*"; and 7.2 percent said they did not want to be pregnant then or at any time in the future. The percent of women who were not sure was 11.5 percent. On the other hand, 50.4 percent of Alabama mothers reported either wanting to be pregnant "*then*" (40.5 percent) or even "*sooner*" (9.9 percent). The Healthy People 2020 Objective is to increase the proportion of pregnancies that are intended to 56.0 percent.

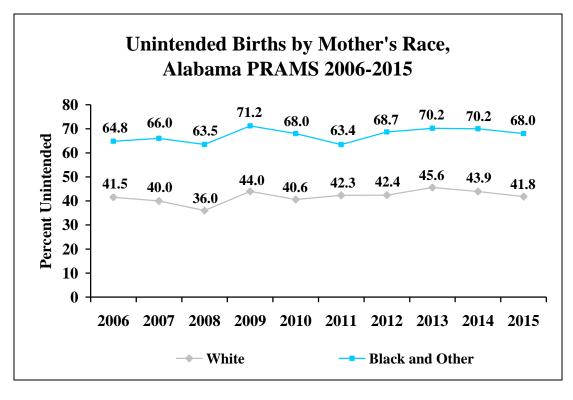
95 % Confidence Intervals										
Intention	Intended	Unintended								
Percent	8.1-12.0	37.3-43.7	23.1-29	55.6-9.2	14.1-19.8	47.2-53.6	46.4-52.8			



(Question 12 of the PRAMS Survey)

From 2014 to 2015, there was a 3.3 percent decrease in unintended births in Alabama. This decrease is not statistically significant.

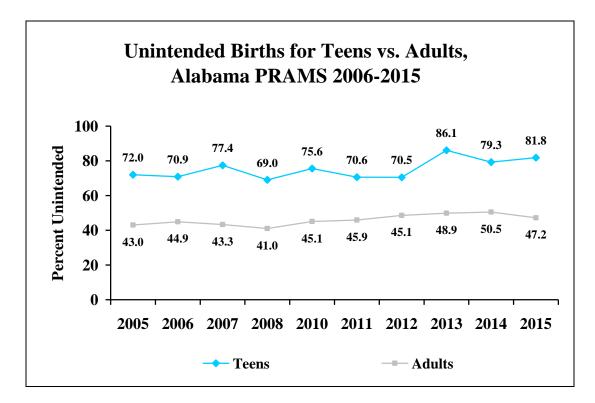
	95 % Confidence Intervals												
Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
% Unintended	44.9-51.8	44.8-51.8	41.4-48.5	49.8-57.1	45.5-52.7	45.7-52.3	46.7-55.3	50.0-57.0	49.7-56	46.4-52.8			



(Question 12 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 2014-2015, the percentage of unintended births to black and other race women decreased by 2.2 percent, and the percentage of unintended births decreased by 2.1 percent from 2014-2015 among white women. The percent change in both populations is not statistically significant.

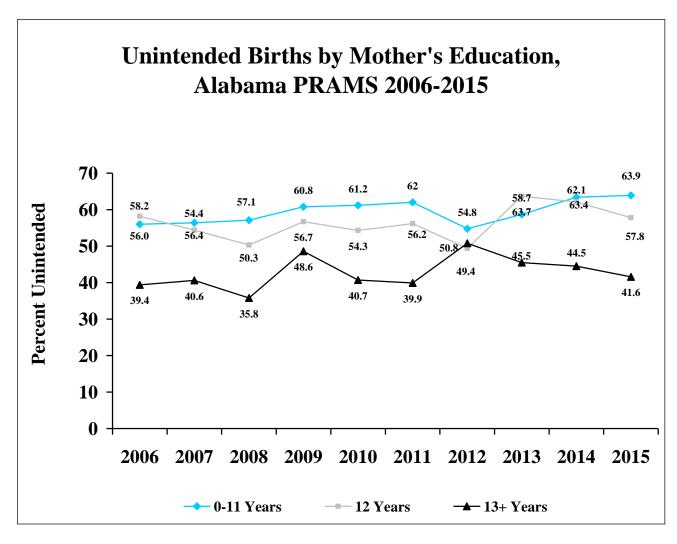
	95 % Confidence Intervals												
Year Race	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
White	37.5-45.7	35.9-44.2	32.1-40.2	39.7-48.4	36.5-44.9	38.5-46.2	37.6-47.3	41.5-49.8	40.0-47.9	37.9-45.8			
Black & Other	58.3-70.8	59.8-71.7	56.7-69.9	64.7-77.0	61.2-74.1	57.1-69.4	60.0-76.3	63.5-76.2	64.5-75.0	61.7-73.7			



(Question 12 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 2014 to 2015, there was a 2.5 percent increase in the percent of unintended pregnancies among Alabama's teens.

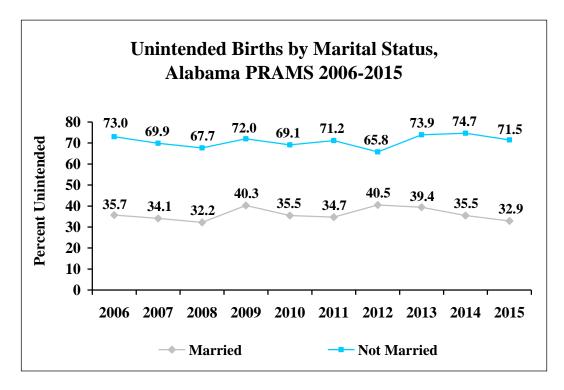
	95 % Confidence Intervals												
Year Age	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
Teens	61.2-79.1	67.7-84.8	59.0-77.4	54.6-75.0	65.7-83.3	60.5-78.9	56.1-81.7	75.9-92.4	47.2-54.0	69.4-89.9			
Adults	41.2-48.6	39.7-47.1	37.3-44.9	47.7-55.6	41.2-49.0	42.4-49.4	44.1-53.2	46.2-53.7	68.8-87.0	43.9-50.6			



(Question 12 of the PRAMS Survey)

As the amount of formal education increases, the percent of unintended births decreases. From 2014-2015, there was a 1.8 percent increase of unintended births among women with the lowest level of education and a 5.6 percent decrease was seen among women with 12 years of education. There was a 2.9 percent decrease in unintended births among women with the highest levels of education from 2014 to 2015. These changes were not statistically significant.

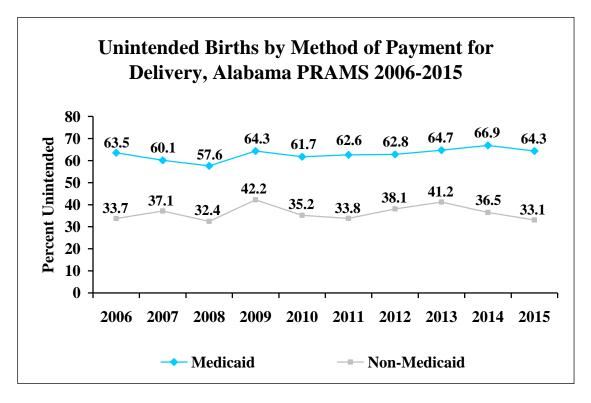
	95 % Confidence Intervals													
Year Education	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015				
0-11 yrs.	48.0-63.8	47.6-64.9	48.4-65.3	52.0-69.0	52.5-69.2	53.5-69.7	43.0-66.1	48.8-67.9	54.4-71.5	54.1-72.7				
12 yrs.	51.4-64.8	47.9-60.8	43.6-56.9	49.8-63.3	47.6-60.8	49.7-62.5	41.3-57.5	57.2-69.7	56.1-67.7	51.5-63.9				
13+ yrs.	34.8-44.2	36.1-45.3	31.2-40.7	43.5-53.7	35.7-45.8	35.7-44.3	45.1-56.5	40.8-50.3	40.1-48.9	37.8-45.8				



(Question 12 of the PRAMS Survey)

The average percent of unintended births to unmarried women was 118.5 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 2014-2015, there was a 4.3 percent decrease of unintended births among unmarried women and a 7.3 percent decrease of unintended births among married women.

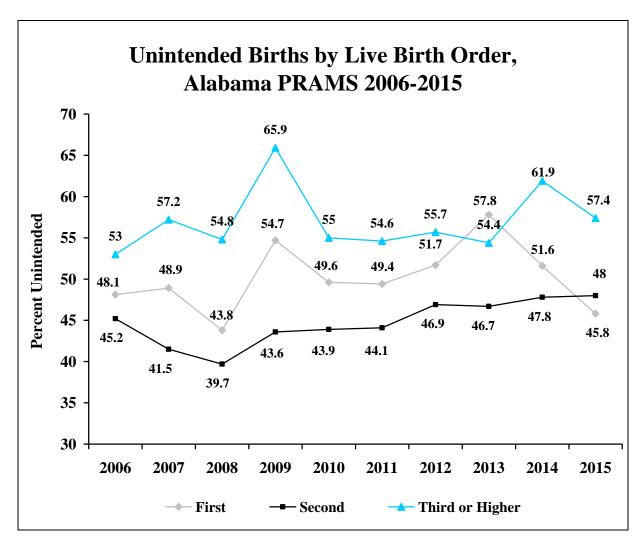
	95 % Confidence Intervals												
Year/ Marital Status	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
Married	31.7-39.9	30.2-38.3	28.2-36.5	35.8-44.9	31.1-40.1	30.8-38.8	35.4-45.8	35.1-43.8	31.5-39.8	29-37.1			
Not Married	67.1-78.2	64.0-75.3	61.5-73.4	66.1-77.2	63.3-74.4	65.8-76.1	58.3-72.5	68.2-78.9	69.9-79.0	66.4-76			



(Question 12 of the PRAMS Survey)

In 2015, 64.3 percent of births to women on Medicaid were unintended compared to 33.1 percent among non-Medicaid women in Alabama. This disparity indicates that poorer women are more likely to have unplanned births.

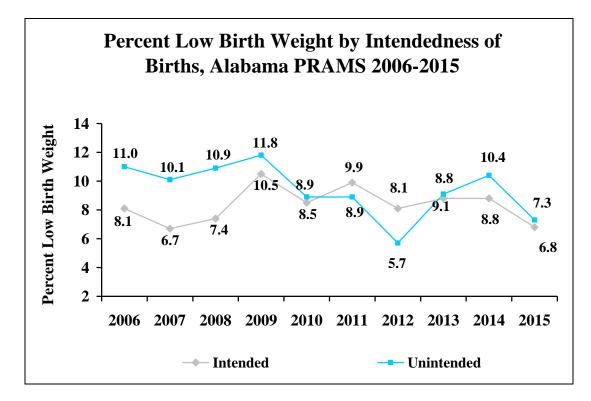
	95 % Confidence Intervals												
Year Payment	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
Medicaid	58.5-68.1	54.9-65.0	52.2-62.8	59.1-69.2	56.6-66.6	57.7-67.2	56.3-68.8	59.5-69.5	62.3-71.2	59.5-68.8			
Non- Medicaid	29.1-38.7	32.4-42.1	27.9-37.3	37.0-47.6	30.2-40.5	29.5-38.4	32.5-43.9	36.4-46.1	32.1-41.2	28.7-37.8			



(Question 12 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 more likely to be planned. From 2014 to 2015, there was a 11.2 percent decrease in unintended births for mothers having their first child. In 2015, for mothers having their third (or higher) child, 57.4 percent of the births were unintended, and there was no difference for mothers who had given birth to their second child from 2014 to 2015. All of the changes from 2014 to 2015 were not statistically significant.

	95 % Confidence Intervals												
Year Birth Order	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
First	42.8-53.4	43.7-54.2	38.6-49.1	49.0-60.2	44.1-55.1	44.5-54.4	45.2-58.1	52.4-62.9	46.7-56.4	40.1-51			
Second	39.1-51.4	35.6-47.7	33.6-46.1	37.3-50.0	37.6-50.4	38.1-50.2	39.6-54.4	40.3-53.1	41.9-53.7	42.2-53.8			
Third +	45.8-60.1	49.5-64.5	47.0-62.5	58.3-72.8	47.5-62.3	47.5-61.5	46.0-65	47.0-61.6	55.1-68.3	50.8-63.8			



(Question 12 of the PRAMS Survey)

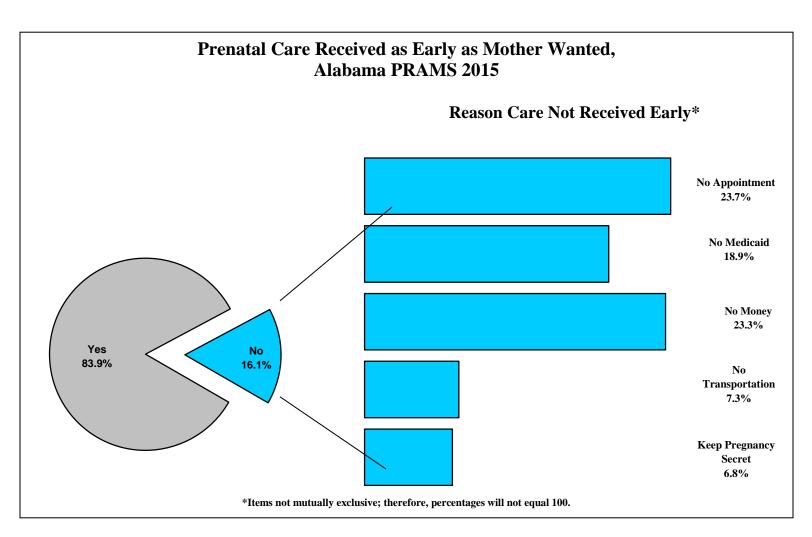
Low birth weight is defined as a birth weight of less than 2,500 grams or 5 lbs. 8oz. Infants delivered at this weight are at an increased risk of death during their first year of life or of lifelong disabilities. Of the births reported as unintended in 2015, 7.3 percent were low weight births. For both unintended and intended births, the percentage of low weight births decreased in 2015.

	95 % Confidence Intervals									
Year Intention	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Intended	7.3-9.0	4.7-9.6	5.2-10.4	7.5-14.4	6.1-11.8	7.4-13.1	5.3-12.2	6.2-12.4	6.4-11.9	4.7-9.8
Unintended	9.9-12.1	7.3-13.7	7.8-15.1	8.7-15.7	6.3-12.5	6.4-12.2	3.2-9.9	6.6-12.6	7.8-13.8	5.1-10.2

Mother's Comments on Intendedness

- "I am older and have had fertility issues. We would be ok if we get pregnant again."
- "We didn't know we were going to get pregnant so soon after I had my baby..."
- "I love my son much until it scares me, but at the same time, I wish I could be a teen again. Teens in Alabama, don't grow up too fast."
- "If you don't want to have a baby, please just don't get pregnant."
- "We discussed me getting off of birth control to see if we would get pregnant, but we weren't trying."
- "My husband is sterile, we used artificial insemination."
- "My husband and I tried for seven years to become pregnant. We did in vitro three times and finally got pregnant with twins."

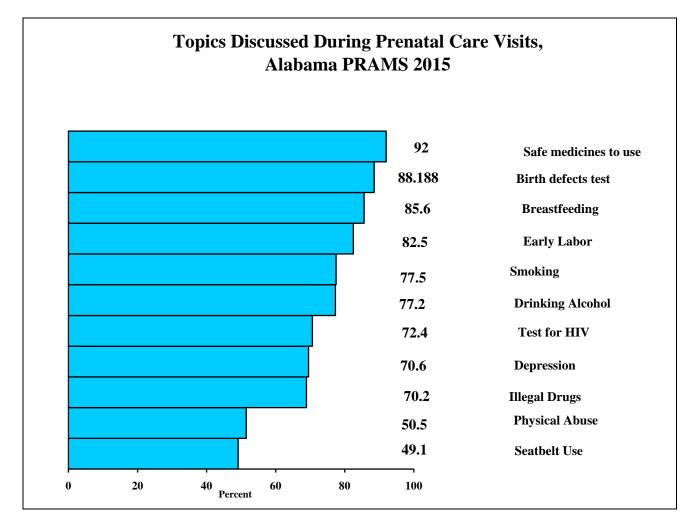
PRENATAL CARE



(Questions 19 & 20 of the PRAMS Survey)

Early and adequate prenatal care is critical in detecting problems that arise during pregnancy and in treating them before they become serious or life-threatening. In 2015, 16.1 percent 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 Prenatal Care	Yes	No	No Appt.	No Money	No Medicaid Card	Secret	No Trans.			
Percent	81.2-86.2	13.8-18.8	18.6-29.6	18.3-29.3	14.3-24.7	4.2-10.9	4.7-11.4			

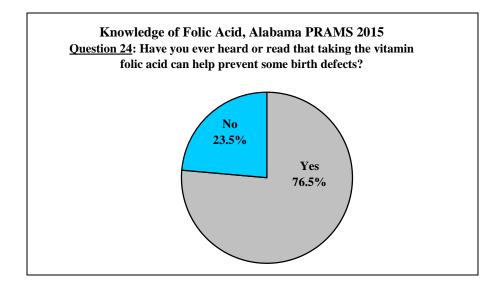


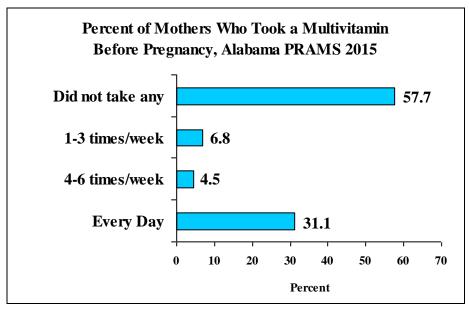
(Question 22 of the PRAMS Survey)

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 2015, about 92 percent of Alabama mothers reported being informed about safe medications to take during their pregnancies. About 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 50.5 percent of Alabama's mothers reported having a discussion about physical abuse by a husband or partner and only 49.1 percent reported any discussion on seat belt usage during pregnancy.

95% Confidence Intervals							
Topics	Safe medicines	Birth defects	Depression	Early labor	Breastfeeding		
Percent	90-93.7	86.1-90.5	67.4-73.6	79.8-85	8387.8		

95% Confidence Intervals						
Smoking	Smoking HIV testing Drinking Illegal drug usage Seat belt usage Physical abuse					
74.7-80.1	64.9-71.2	74.3-79.8	67.1-73.1	45.7-52.5	48.2-54.9	



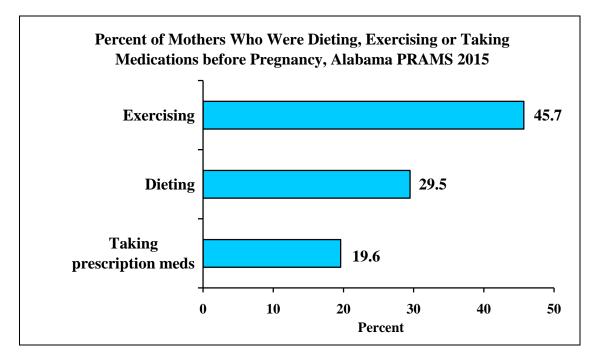


(Question 9 & 24 of the PRAMS Survey)

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 2015, 76.5 percent 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 57.7 percent of mothers took no multivitamins (which contain the required amount of folic acid) in the month before their pregnancy occurred. Only 31.1 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	73.6-79.3	20.7-26.5	54.5-60.8	5.3-8.7	3.3-6.0	28.2-34.1		



(Question 7 of PRAMS Survey)

In 2015, 45.7 percent of mothers said they were exercising three or more days of the week, and 29.5 percent were dieting (changing eating habits). Regarding medicine, 19.6 percent of mothers were taking prescription medicines other than birth control.

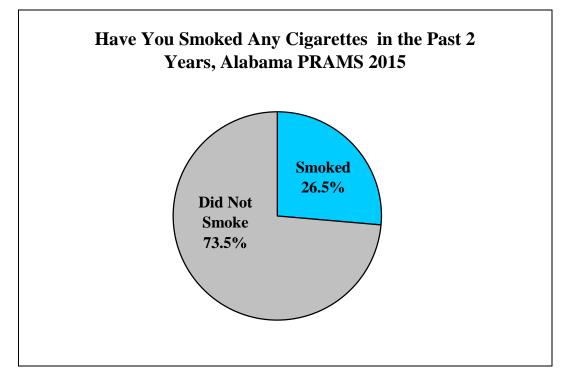
95% Confidence Intervals						
TopicsDietingExerciseTaking prescription if						
Percent	26.6-32.6	42.4-48.9	17.1-22.4			

Mother's Comments on Prenatal Care

- "I believe prenatal education is so important and helpful."
- "Vitamins and prenatal care are very important."
- "I feel my doctor had me reading many books helped me carry them as long as I did."
- "During my pregnancy, I got a lot of rest and planned healthy meals and snacks daily. Kept all my appointments."
- "While I was pregnant, I did not drink, smoke or take any medication period. I went to every doctor's appointment and if anything didn't feel right, I went to the emergency room."
- "Pregnant women need to make sure they eat healthy, exercise and try to be as healthy as possible during their pregnancy."
- "I was treated as if my pregnancy was a disease instead of a natural process."
- "I had a great pregnancy and I loved the services and care I received from my doctors. I was pleased with my prenatal care."
- "Get early prenatal care and don't miss visits."
- "No one spoke to me about domestic violence, seat belts use, etc."

NEGATIVE HEALTH BEHAVIORS:

SMOKING AND DRINKING



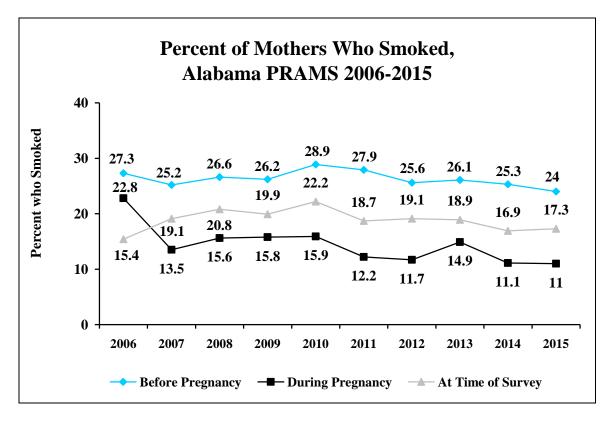
(Question 28 of the PRAMS Survey)

The Centers for Disease Control and Prevention (CDC) have reported that "Smoking during pregnancy is the single most preventable cause of illness and death among mothers and infants." ¹ They report that infants born to mothers who smoked while pregnant are more likely to be low birth weight infants (weighing less than 2,500 grams) and may experience lifelong health problems. In addition to those issues, babies born to women who smoked during pregnancy have about 30 percent higher odds of being born prematurely and are also 1.4 to 3.0 times more likely to die of Sudden Infant Death Syndrome (SIDS)². In 2015, when Alabama mothers were asked if they had smoked any cigarettes in the past two years, 26.5 percent answered, "Yes".

95% Confidence Intervals						
Smoking Status	Smoked	Did Not Smoke				
Percent	23.6-29.6	70.4-76.4				

¹ The Centers for Disease Control and Prevention (CDC). Preventing Smoking and Exposure to Secondhand Smoke Before, During, and After Pregnancy. <u>http://www.cdc.gov/nccdphp/publications/factsheets/prevention/pdf/smoking.pdf</u>.

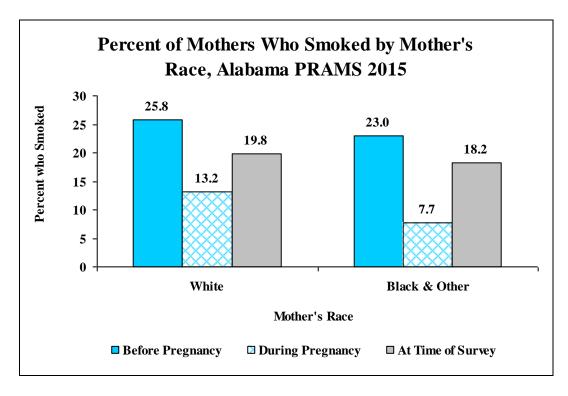
² Emily, McKinney., Sharon, Murray.2013 Maternal-Child Nursing,4th Edition 559-560



(Questions 40, 41, & 42 of the PRAMS Survey)

The Healthy People 2020 Objective is to increase abstention from cigarette smoking by pregnant women to 98.6 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 2015, although 11 percent of Alabama mothers continued to smoke while pregnant. From 2014 to 2015, the increases in smoking seen during the two time periods (before and during) were not statistically significant.

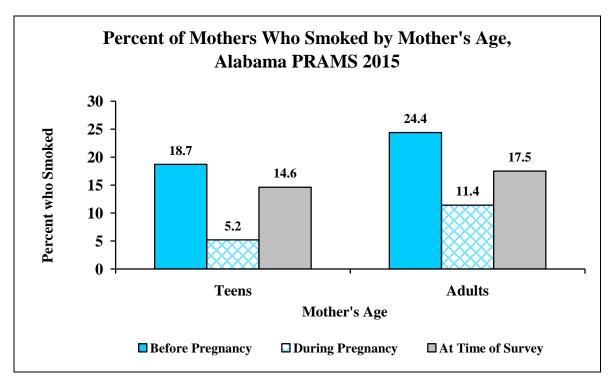
	95% Confidence Intervals									
Year Smoked	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Before Pregnancy	24.3-30.5	22.2-28.4	23.5-29.9	23.1-29.5	25.7-32.4	25.0-31.0	22.0-29.7	23.1-29.4	22.5-28.3	21.2-27
During Pregnancy	13.1-18.1	11.3-16.1	13.2-18.4	13.3-18.7	13.4-18.8	10.1-14.7	9.1-15.0	12.5-17.7	9.2-13.5	9-13.4
At Time of Survey	20.0-25.9	16.5-22.1	18.0-23.9	17.2-23.0	19.3-25.4	16.2-21.4	15.8-22.8	16.2-22.0	14.6-19.6	14.9-20.1



(Questions 40, 41, & 42 of the PRAMS Survey)

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

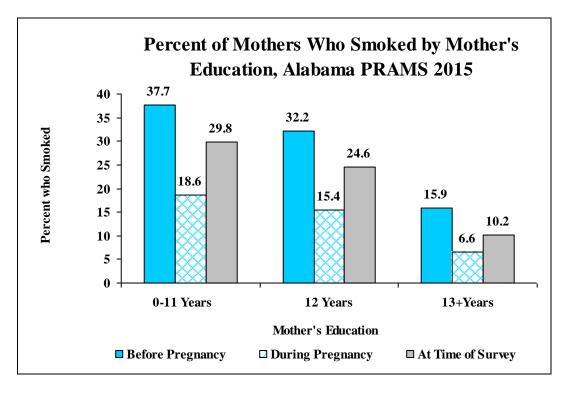
95 % Confidence Intervals							
Smoked/Race:	Before Pregnancy	During Pregnancy	At Time of Survey				
White	22.4-29.6	10.6-16.4	15.2-21.7				
Black and Other	17.6-29.3	4.7-12.2	13.5-24.1				



(Questions 40, 41, & 42 of the PRAMS Survey)

In 2015, teen and adult mothers followed the same pattern - decreased smoking during pregnancy and increased smoking after delivery. The decrease in smoking during pregnancy among both adult and teen mothers was statistically significant.

95 % Confidence Intervals								
Smoked Age Before Pregnancy During Pregnancy At Time of Survey								
Teens	10.4-31.4	1.7-15	7.5-26.6					
Adults	21.5-27.5	9.3-13.9	15-20.4					



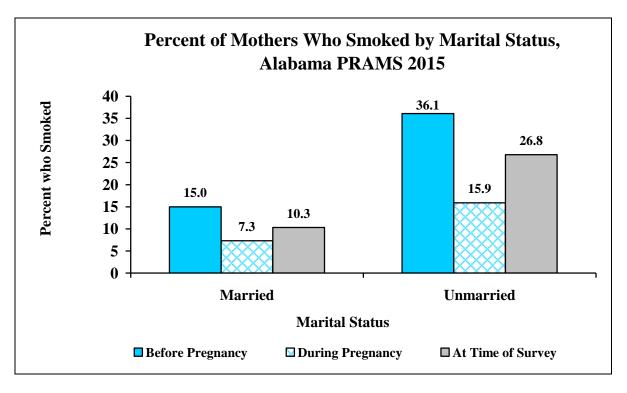
(Questions 40, 41, & 42 of the PRAMS Survey)

Generally in Alabama, there is an inverse correlation between a woman's educational attainment and smoking. As a woman's level of education *increases*, the smoking rate *decreases*.

In 2015, 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. About one in three 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. The lower percentages of smoking (before pregnancy, during pregnancy, and after delivery) among women with 13 plus 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.

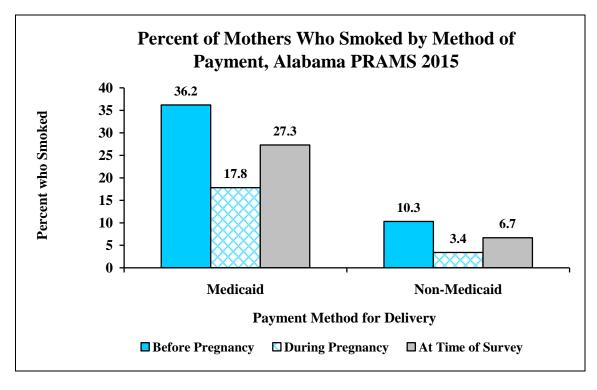
95 % Confidence Intervals								
Smoked Education	Before Pregnancy	During Pregnancy	At Time of Survey					
0-11 Years	28.5-48	11.8-28	21.4-40.1					
12 Years	26.6-38.4	11.4-20.6	19.5-30.5					
13+ Years	13-19.5	4.7-9.2	7.8-13.2					



(Questions 40, 41, & 42 of the PRAMS Survey)

In 2015, 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 51.3 percent, which was a statistically significant decrease. Unmarried women decreased smoking while pregnant by 56 percent, which was also statistically significant.

95 % Confidence Intervals							
Smoked Marital Status	Before Pregnancy	During Pregnancy	At Time of Survey				
Married	12-18.4	5.4-10	7.9-13.4				
Unmarried	31-41.6	12.1-20.4	22.1-32				

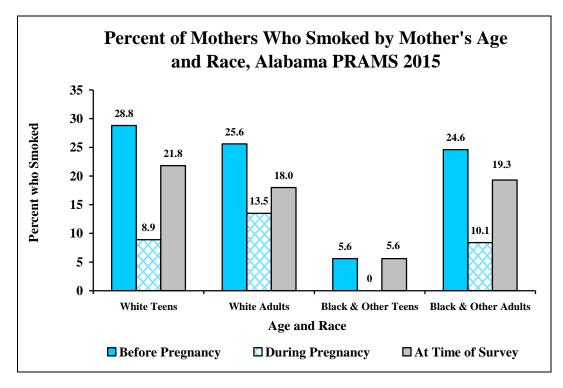


(Questions 40, 41, & 42 of the PRAMS Survey)

In 2015, cigarette smoking was significantly higher among mothers on Medicaid before, during, and after their pregnancies than among non-Medicaid mothers. The decreases in smoking from before pregnancy to 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	31.5-41.2	14.3-22	23-32				
Non-Medicaid	7.6-13.7	2-5.8	4.6-9.7				

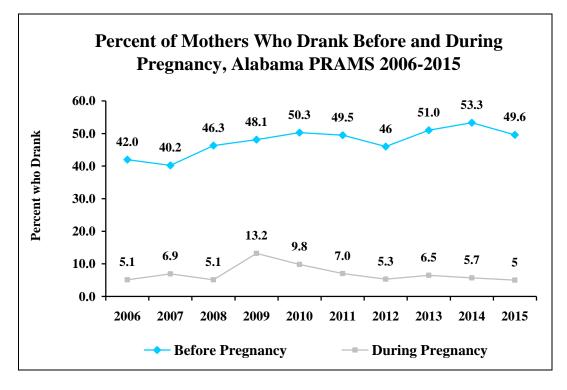
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(Questions 39, 40, & 41 of the PRAMS Survey)

In 2015, a higher percentage of white mothers smoked than did black and other mothers. White teen mothers had the highest rates of smoking, and black and other adult mothers had the lowest rates. The decrease in smoking for white, black and other teen mothers and white, black and other adults during pregnancy was statistically significant.

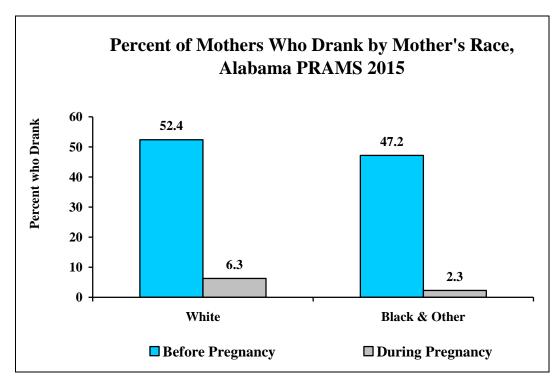
95 % Confidence Intervals							
Smoked Race and Age	Before Pregnancy	During Pregnancy	At Time of Survey				
White Teens	15.7-46.8	2.9-24.4	10.8-39.3				
White Adults	22.1-29.5	10.8-16.8	14.9-21.6				
Black & Other Teens	0.8-30.5	0-0	0.8-30.5				
Black & Other Adults	18.9-31.3	5.2-13.3	14.3-25.6				



(Questions 45 and 46 of the PRAMS Survey)

From 2014 to 2015, there was a decrease of 6.9 percent in drinking *before* becoming pregnant and a decrease of 12.3 percent in drinking *during* the last three months of pregnancy reported by Alabama mothers. From 2006-2015, Alabama women did decrease drinking during their pregnancies from their levels of drinking before pregnancy significantly.

	95% Confidence Intervals									
Year Drank	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Before Pregnancy	38.6-45.6	36.7-43.7	42.6-49.9	44.4-51.8	46.6-54.0	46.2-52.9	41.7-50.4	47.5-54.6	50.0-56.6	46.3-53
During Pregnancy	3.8-6.9	5.3-9.0	3.8-7.0	10.9-15.9	7.8-12.3	5.5-9.0	3.6-7.7	5.0-8.5	4.4-7.5	3.8-6.6

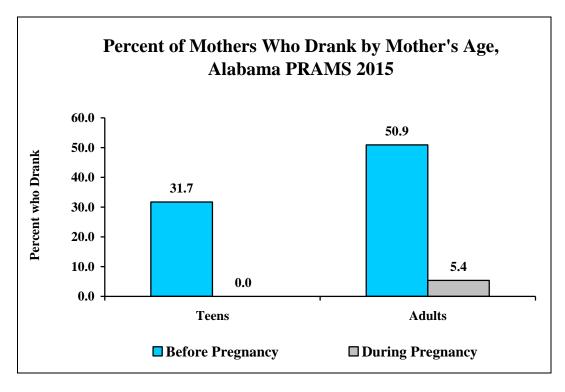


(Questions 45 and 46 of the PRAMS Survey)

In 2015, more than 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 in born population.

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

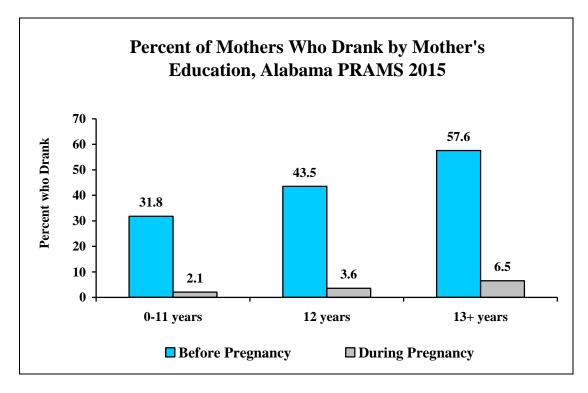
95% Confidence Intervals								
Race Drank	Before Pregnancy	During Pregnancy						
White	48.3-56.4	4.6-8.5						
Black and Other	40.7-53.8	1-5.5						



(Questions 45 and 46 of the PRAMS Survey)

As expected, a higher percentage of adult mothers reported consuming alcohol than teenage mothers. In 2015, despite being underage 31.7 percent of teenage mothers reported using alcohol before becoming pregnant, and zero percent reported drinking during their pregnancies. In both populations, drinking significantly declined during the last three months of their pregnancies.

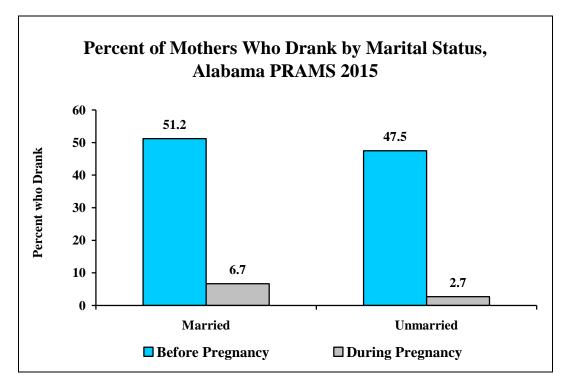
95% Confidence Intervals								
Drank Mother's Age	Before Pregnancy	During Pregnancy						
Teens	20.7-45.2	0-0						
Adults	47.5-54.4	4-7.1						



(Questions 44 and 45 of the PRAMS Survey)

In 2015, women with higher levels of education were more likely to drink than women with lower educational attainment. This could be attributable to age. Women with lower educational levels are probably younger. In each educational level, drinking during pregnancy decreased significantly.

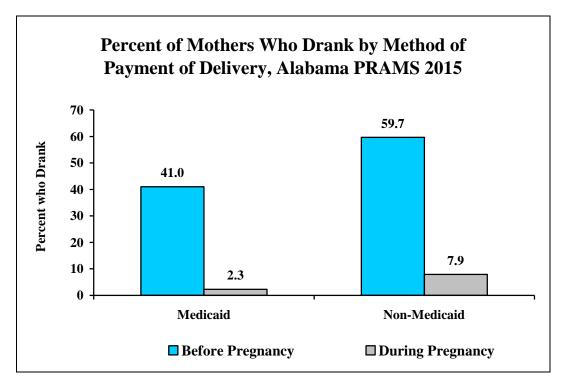
95% Confidence Intervals									
Drank Education	Before Pregnancy	During Pregnancy							
0-11 years	23.1-41.9	0.5-8.7							
12 years	37.3-49.9	1.9-6.9							
13+ years	53.2-61.8	4.7-8.9							



(Questions 44 and 45 of the PRAMS Survey)

In 2015, 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.

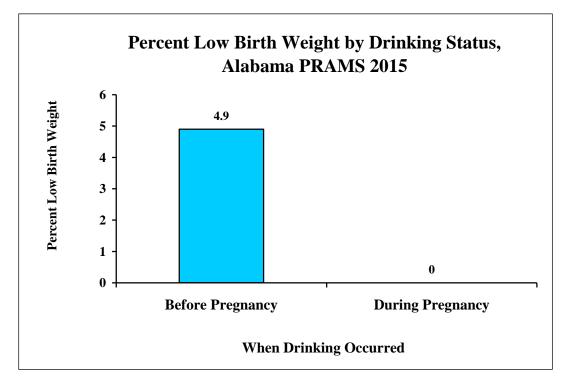
95 % Confidence Intervals									
Drank Marital Status	Before Pregnancy	During Pregnancy							
Married	46.9-55.5	4.9-9.1							
Unmarried	42.2-53	1.4-5.3							



(Questions 44 and 45 of the PRAMS Survey)

In 2015, Alabama 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 counter parts. 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	36.2-45.9	1.2-4.4						
Non-Medicaid	54.9-64.4	5.7-10.9						



(Questions 45 and 46 of the PRAMS Survey)

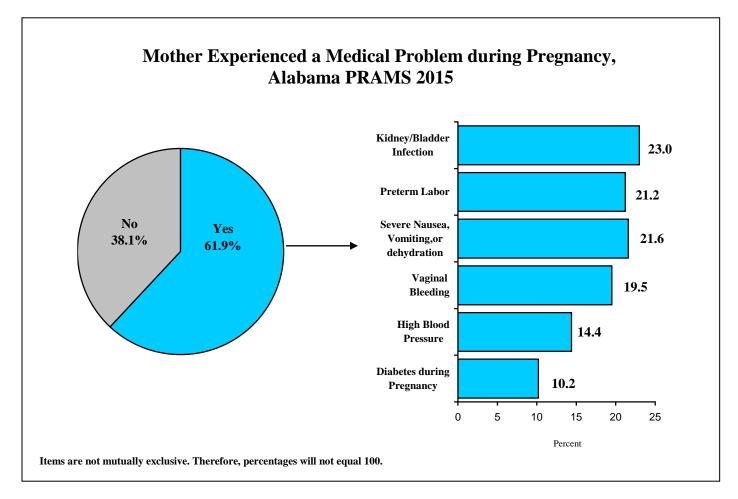
In 2015, 4.9 percent of women who drank before pregnancy had a low weight infant. Among women who drank while pregnant, zero percent delivered a low weight infant. There is no statistically significant difference in the percentage of low weight births to mothers who drank before pregnancy or during pregnancy.

95% Confidence Intervals						
Drank	Before Pregnancy	During Pregnancy				
Percent LBW	3.2-7.4	0-0				

Mothers' Comments on Negative Health Behaviors

- "Please do not smoke or drink while you are pregnant."
- "I stopped smoking 2 months before I got pregnant, just because I realized how awful it is."
- "I have 4 kids. With all my kids I had alcohol, cigarettes, and sometimes I was involved in fights. But when my kids came out they looked normal. As they grew I can see how it affected them. Some have learning delays, all of them has [sic] asthma. I have one son who takes medication for ADHD, hyperactive and seizures"
- "I believe in no smoking/drinking during pregnancy and doing everything you can to make your baby healthy."

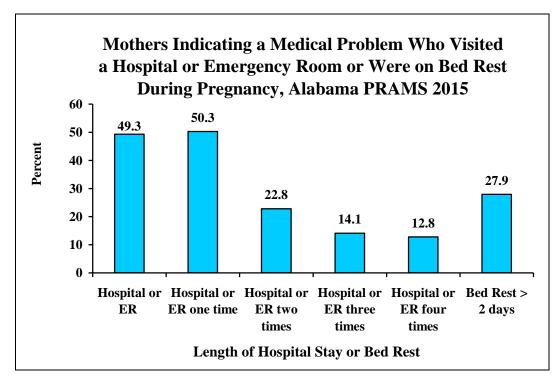
HEALTH CARE SYSTEM ISSUES



(Question 34 & 35 of the PRAMS Survey)

In 2015, 61.9 percent of Alabama mothers reported having a medical problem during their pregnancy. Of those, 21.6 percent reported having severe nausea, vomiting, and/or dehydration. About one in four mothers reported experiencing preterm labor or a kidney/bladder infection. Also 19.5 percent of mothers reported vaginal bleeding, while 14.4 percent of mothers reported having high blood pressure. In addition,10.2 percent of mothers developed gestational diabetes.

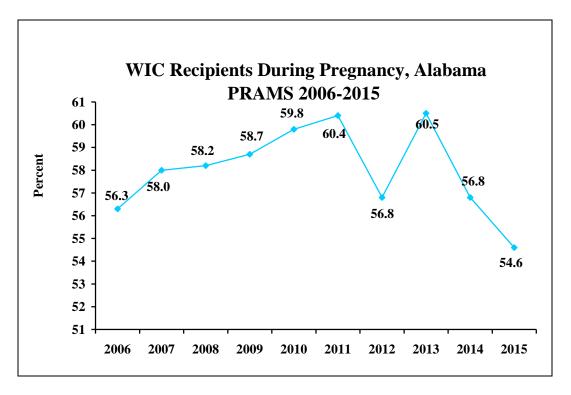
	95% Confidence Intervals											
Problems	Yes	No	Nausea,vomiting, or dehydration	Preterm labor	Kidney/ Bladder infection	Vaginal Bleeding	HBP	Diabetes During Preg.				
Percent	58.6-65	35-41.4	18.9-24.5	18.5-24.1	20.3-26	17-22.4	12.1-17	8.4-12.4				



(Question 36 & 37 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, 49.3 percent of the mothers visited a hospital at least once; 50.3 percent of these visited one time; 22.8 percent went to the hospital two times; and 27.9 percent stayed in bed for more than two days due to 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	44.9-53.8	44.5-56.3	18.2-28.1	10.3-19	9.2-17.4	24.1-32.1					



(Questions 32 of the PRAMS Survey)

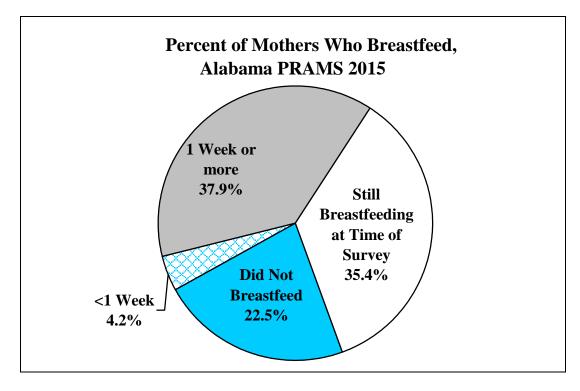
WIC, the Special Supplemental Nutrition Program for Women, Infants, and Children, is one of the nation's most successful nutrition programs, providing proper nutrition to pregnant women, breastfeeding women, women who had a baby within the last six months, infants, and children under the age of five, and who meet eligibility guidelines. In 2015, 54.6 percent of Alabama mothers received WIC benefits.

95% Confidence Intervals											
Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	
Percent	53.6-58.9	55.2-60.8	55.3-61.0	55.8-61.5	57.0-62.5	58.1-62.7	53.3-60.2	57.8-63.2	54.3-59.3	52.1-57.1	

Mother's Comments on Health Care System Issues

- "Hospitals should advise parents who deliver pre-term babies about social security disability benefits and WIC."
- "I was really saddened by the fact that free health classes were not offered by my hospital."
- "We think babies should be tested before they leave the hospital for Group B Strep if mom tested positive because it can be fatal."
- "The nurses and doctors made me feel like I was at home. I love you Alabama. Keep up the good work."
- "My employer doesn't offer insurance and I could not afford it...My pregnancy was high risk and I ended up having an emergency C-section due to high blood pressure. It was scary and stressful. All the support I received provided by Medicaid was outstanding."
- "I think my pregnancy was a specific case of preterm labor with no specific cause. I like to thank you for your efforts to help all mothers receive appropriate preterm and postpartum care."
- "There should be more financial assistance in assisting women getting their tubes tied."
- "Make sure parents know about SIDS."
- "My doctor gave me a booklet filled with a lot of this information, but it was not discussed."
- "Thanks to all my doctors I had throughout my pregnancy. Everything went as smoothly as I could have ever hoped for."
- "I had to have my preterm labor stopped medically. I had an extremely difficult pregnancy."
- "I had kidney stones while I was pregnant. I never was nauseated. I couldn't get an appetite up. I got dehydrated from not eating or drinking much."
- "My baby came early due to problems with my placenta and preeclampsia symptoms."
- "I stayed extremely sick during my pregnancy."
- "I love how the healthcare field is now addressing breastfeeding more than ever. It is so important and much more healthy for babies."
- "I think people being informed about breastfeeding helps a lot. The hospital I had my first three children at pretty much left me to figure it out alone...I love breastfeeding and wish I had received information and care with previous births."
- "Nurses should not bottle-feed when you are breastfeeding."
- "...My delivering hospital failed at helping me breastfeed. I went home confused and frustrated. I know for the next time I will have to encourage myself. The RNs didn't care to take the time to help while in the hospital or after on phone calls."
- "My doctor and his nurses took great care of me due to the fact that I had had 6 miscarriages all occurring in the third trimester. They were very informative supportive and caring. If I had been anywhere else I probably would not have been able to have a child now."

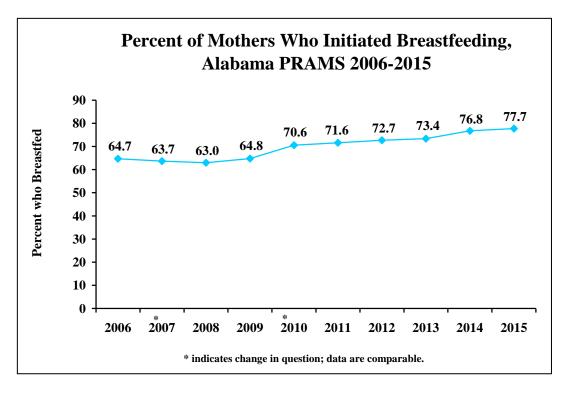
BREASTFEEDING



(Questions 62, 64 and 65 of the PRAMS Survey)

Numerous benefits are associated with breastfeeding, not only for the infant but for the mother as well. In 2015, 22.5 percent of mothers did not attempt to breastfeed their babies. Only 35.4 percent of Alabama mothers were still breastfeeding their infants at the time of the survey or two to four months after delivery.

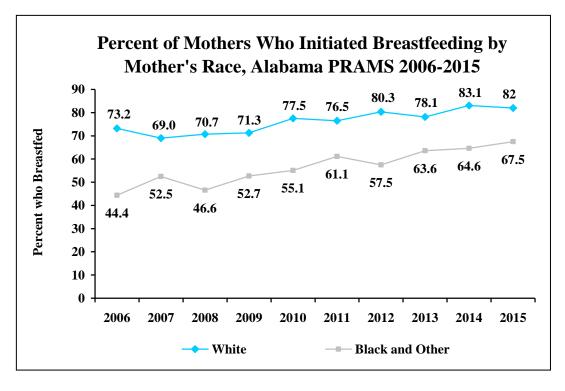
95% Confidence Intervals									
Time Breastfed	Did Not Breastfeed	<1 week	1 week or more	Still Breastfeeding					
Percent	32.4-38.5	3-5.8	34.6-41.3	32.4-38.5					



(Question 62 of the PRAMS Survey)

From 2006-2015, the percentage of Alabama mothers who initiated breastfeeding increased six out of the ten years. The Healthy People 2020 objective is to increase the percentage of mothers who initiate breastfeeding to 81.9 percent. In 2015, 77.7 percent of mothers reported they initiated breastfeeding. Comparing 2006 and 2015 data, there has been a statistically significant increase of 20.1 percent in mothers who initiated breastfeeding.

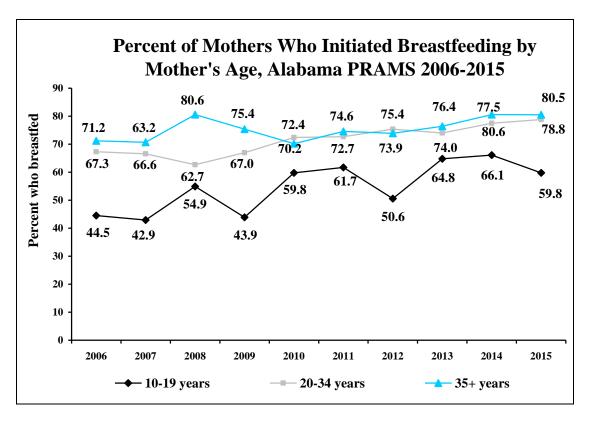
95% Confidence Intervals											
Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	
Breastfeeding	61.3-67.9	60.3-67.0	59.4-66.4	61.2-68.3	67.1-73.9	68.4-74.5	68.5-76.6	70.0-76.5	73.9-79.5	74.7-80.4	



(Question 62 of the PRAMS Survey)

From 2006 to 2015, 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 women. The percentage of black and other moms who breastfeed has increased 4.5 percent from 2014 to 2015 while the percentage of white moms who breastfeed decreased 1.3 percent from 2014 to 2015.

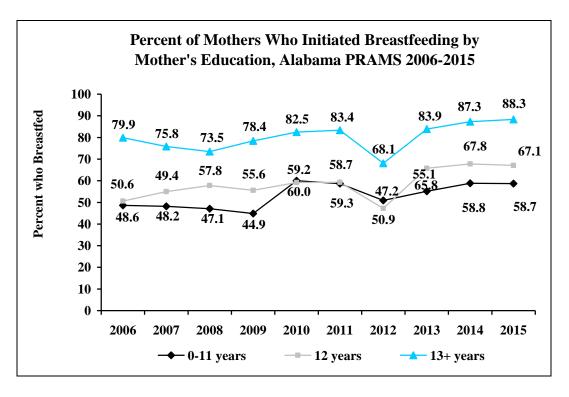
	95% Confidence Intervals												
Year Race	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
White	69.3-76.8	64.9-72.8	66.6-74.4	67.2-75.1	73.6-80.9	72.9-79.7	76.0-83.9	74.4-81.4	79.8-85.9	78.5-85			
Black and Other	38.1-51.0	46.1-58.9	39.7-53.6	45.9-59.4	48.0-61.9	54.6-67.2	48.5-65.9	56.5-70.2	58.7-70.1	61-73.5			



(Question 62 of the PRAMS Survey)

During the period from 2006 through 2015, the percentage of women initiating breastfeeding increased in all three age groups. When examining each group, the oldest mothers, age 35 plus years, had the highest percentage of breastfeeding while teenage mothers had the lowest percentage. From 2014 to 2015, the percentage of teenage mothers who initiated breastfeeding decreased 6.3 percent.

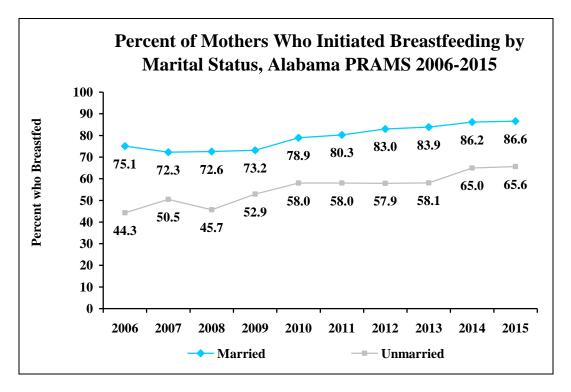
	95% Confidence Intervals											
Year Age	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
10-19	35.0-54.4	32.8-53.7	44.4-64.9	33.4-55.0	49.2-69.6	51.3-71.2	36.1-64.9	52.2-75.5	54.8-75.7	46.2-72		
20-34	63.4-70.9	62.7-70.2	58.7-66.6	62.9-70.8	68.5-76.0	69.0-76.0	70.8-79.5	70.1-77.5	74.2-80.4	76-81.7		
35+	60.5-80.0	59.9-79.6	67.5-89.3	63.9-84.1	58.0-80.0	65.2-82.2	59.2-84.6	66.9-83.8	70.4-87.9	71.7-87.1		



(Question 62 of the PRAMS Survey)

In Alabama, breastfeeding prevalence is highest among women with 13 or more years of education. Comparing percentages from 2014 to percentages in 2015, there is not a statistically significant deference in the three groups.

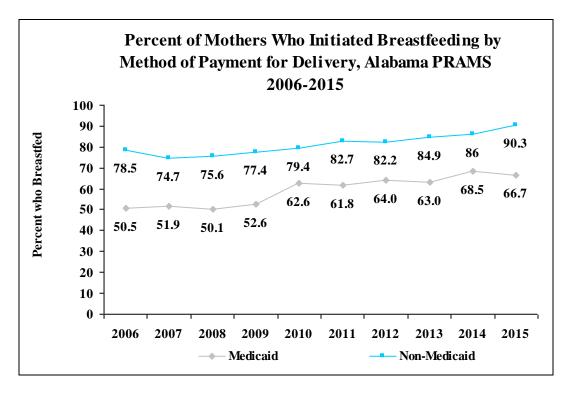
	95% Confidence Intervals											
Year Edu.	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
0-11 yrs.	40.7-56.5	39.4-57.2	38.5-55.8	36.3-53.9	51.2-68.1	50.2-66.7	27.0-74.3	45.2-64.6	49.7-67.2	48.7-68.1		
12 yrs.	43.7-57.4	48.3-61.5	50.9-64.4	48.7-62.2	52.5-65.6	52.8-65.5	34.1-60.7	59.1-72.0	61.8-73.3	60.9-72.8		
13+ yrs.	75.7-83.6	71.5-79.6	68.8-77.7	73.8-82.4	78.1-86.2	79.7-86.6	59.8-75.4	80.0-87.2	84.6-90.5	85.1-90.9		



(Question 62 of the PRAMS Survey)

Comparing 2006 levels to 2015 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 married mothers may be older and have a higher educational attainment than their unmarried counterparts.

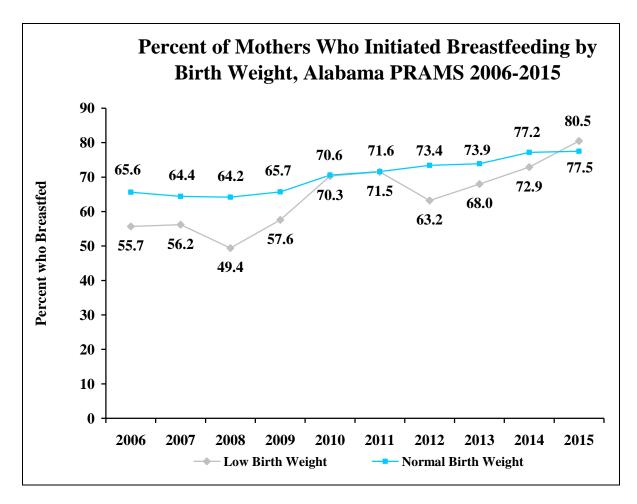
	95% Confidence Intervals											
Year Married Status	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
Married	71.1-78.6	68.4-75.9	68.4-76.5	68.9-77.2	74.8-82.5	76.7-83.5	78.6-86.7	80.3-87.0	82.9-88.9	83.3-89.3		
Unmarried	38.2-50.6	44.3-56.6	39.4-52.2	46.7-59.1	51.9-63.9	52.2-63.6	50.2-65.3	51.9-64.1	59.8-69.9	60.2-70.7		



(Question 62 of the PRAMS Survey)

From 2006 through 2015, 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 2006 to 2015, both the Medicaid and non-Medicaid groups have significantly increased in the percentage of women who initiated breastfeeding their infants.

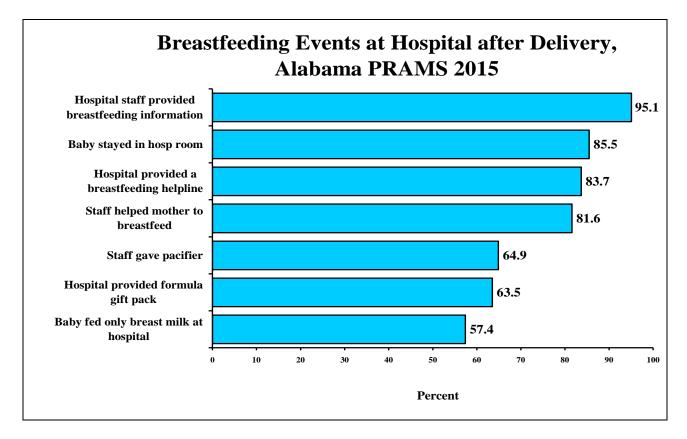
	95% Confidence Intervals											
Year Payment	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
Medicaid	45.5-55.5	46.7-57.1	44.6-55.5	47.2-57.9	57.4-67.5	56.9-66.5	57.3-70.2	57.7-68.1	63.8-72.8	61.8-71.2		
Non- Medicaid	73.9-82.5	70.3-78.7	70.9-79.7	72.6-81.6	74.6-83.5	78.8-86.0	77.2-86.3	80.9-88.2	82.2-89.1	86.9-92.9		



(Question 62 of the PRAMS Survey)

In 2015, 77.5 percent of the babies born of a normal birth weight were breastfed. Of the low birth weight babies (weighing less than 2,500 grams), 80.5 percent were breastfed. When comparing 2006 percentages with 2015 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	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
LBW	51.6-59.7	43.6-68.1	36.6-62.2	45.6-68.8	57.4-80.6	59.9-80.8	43.6-79.2	54.5-79.0	61.1-82.2	68-88.9		
NBW	61.9-69.1	60.8-67.8	60.5-67.8	61.9-69.3	67.0-74.0	68.3-74.7	69.1-77.3	70.3-77.1	74.1-80.0	74.4-80.3		



(Question 67 of the PRAMS Survey)

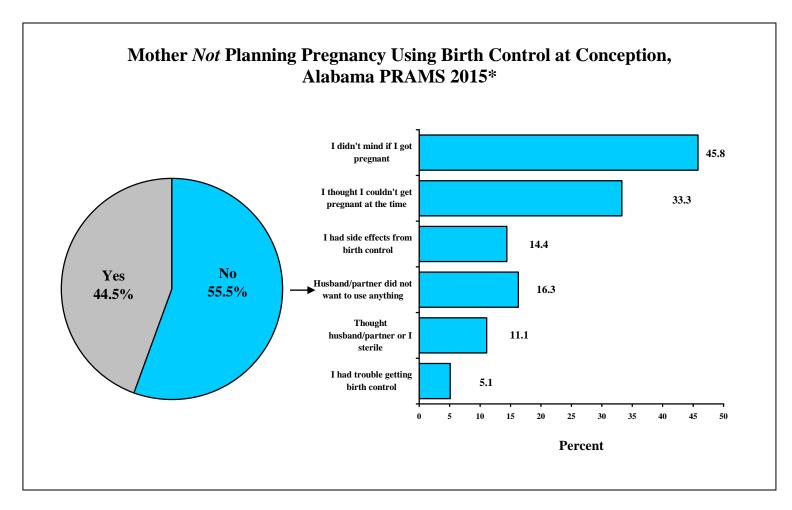
In 2015, 83.7 percent of mothers reported they received direct help from hospital staff in learning how to breastfeed their babies and 95.1 percent reported that the hospital provided them information on breastfeeding. Only 57.4 percent reported that their infants received breast milk exclusively while in the hospital. And 63.5 percent were given a formula gift pack to take home upon discharge.

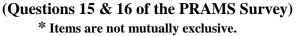
	95% Confidence Intervals									
Events	EventsGiven Gift PackBreastfeeding informationBaby in Hosp RoomBaby used PacifierBreastfeeding HelplineStaff HelpedFed only breast milk in hospital									
Percent	Percent 59.8-67.1 93.1-96.5 82.5-88 61.2-68.4 80.7-86.4 78.5-84.4 53.7-61.2									

Mother's Comments on Breastfeeding

- "Society should allow women to make up their own mind without pressure to breastfeed."
- "Make sure you breastfeed your baby because it is the best gift you will ever give to your baby."
- "I had to have surgery and was in the hospital for two days and could not use the breast milk for a few days afterward due to the medicines I was prescribed. My supply got low and I could not produce enough for my son anymore."
- "I was not shown how to breastfeed. I was made to feel guilty because I would not breastfeed."
- "I didn't want my baby to get confused between the two. I know that I would be going back to work so I didn't want him to like breast milk and not take on to formula."
- "I think women give up too quickly on breastfeeding and their babies would be healthier if they had a good reason to stick with it. Since breastfeeding is free and very healthy it should be an easy choice."
- "Doctor thought she was not gaining enough and put me on a every third feeding with a bottle of formula. She developed flow preference and stopped wanting to latch on. Pump did not work well enough for me and I dried up. I wish it wouldn't have happened."
- "I chose to stop [breastfeeding] so I could start medication for postpartum depression."
- "We were told baby would gain weight better on formula due to her being in NICU."
- "I think PRAMS is a wonderful idea. We also need more people to promote breastfeeding."
- "Baby wasn't getting any milk. I pumped for two hours and got nothing."
- "I had not breastfed my other two children so I decided not to breastfeed my new baby."
- "I have lupus...that was the reason I did not breastfeed but I was pleased with the care I received from my personal doctor."
- "Formula is only given to my baby for feeding three times a week when I am at my part-time job. Other than that, she breastfeeds on demand."
- "I am an advocate for breastfeeding, but due to my child having a protein intolerance, doctors advised me against breastfeeding."
- "Breastfeeding is the best. I have been at it since day one. My little one is now 22 weeks and we are still going strong."
- "Every mother should be encouraged to attempt to breastfeed her baby, if possible."

CONTRACEPTION

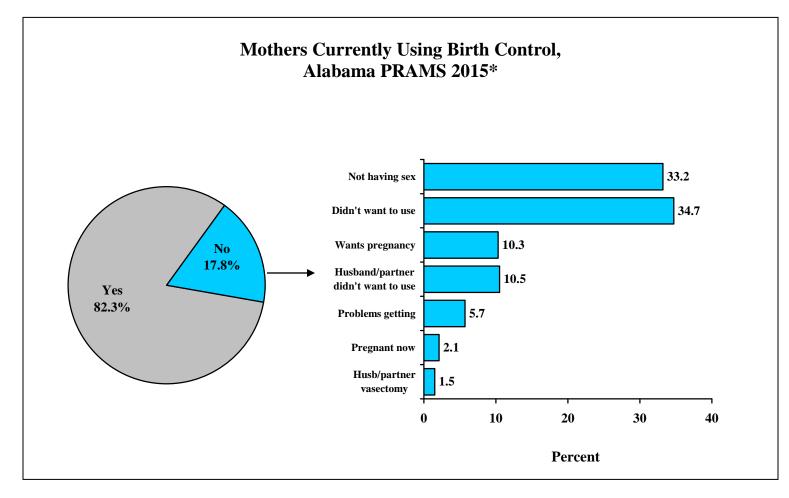


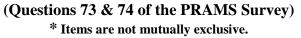


In 2015, 55.5 percent of Alabama mothers *who did not want a pregnancy* answered "no" to using any kind of birth control to prevent it. A Healthy People 2020 objective is to increase the proportion of females at risk of unintended pregnancy who use contraception to 91.6 percent.

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	40.1-48.9	51.1-59.9	39.9-51.7	27.8-39.4	12.2-21.4	9.7-18	2.9-8.3	7.7-15.8			

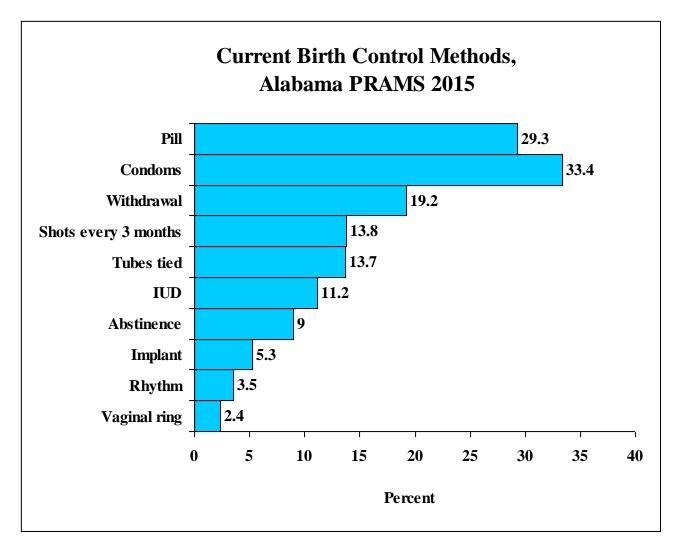




The correct usage of contraception is invaluable in preventing unintended pregnancies. In 2015, 82.3 percent of Alabama mothers reported they were using some sort of birth control at the time they participated in the survey. Of those who were not using birth control, 33.2 percent reported they were not having sex; 34.7 percent of the women said they did not want to use anything; 10.3 percent want to get pregnant; and 5.7 percent reported their spouse or partner did not want to use any contraception. And 2.1 percent reported that they were already pregnant again.

95% Confidence Intervals									
Birth ControlYesNoDidn't want to use anythingNot having sexWants a pregnancy									
Percent	79.5-84.7	15.3-20.5	27.7-42.5	26.4-40.8	6.5-15.9				

95% Confidence Intervals								
Birth ControlHusband/partner didn't want to usePregnant nowProblems gettingHusb/partner vasectom								
Percent	6.6-16.3	0.7-6.2	2.7-11.5	0.4-5.7				



(Question 75 of the PRAMS Survey)

In 2015, 33.4 percent of women reported condom usage as the preferred method of contraception. The percent of women were taking the pill was 29.3 percent and 19.2 percent of women reported withdrawal as their birth control method.

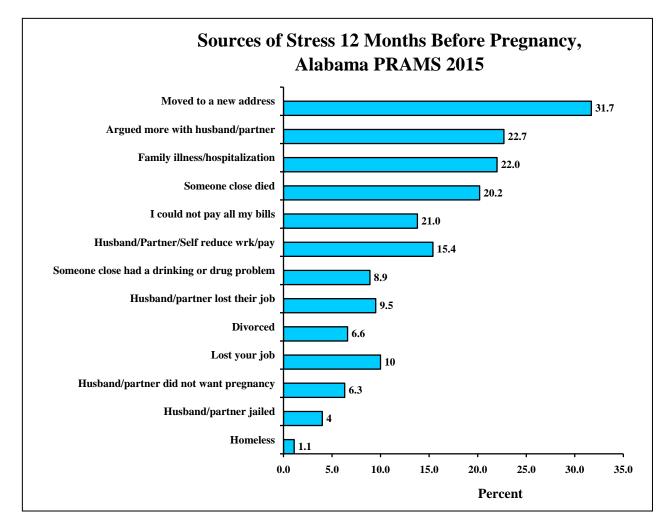
95% Confidence Intervals								
Method of Birth Control Condoms Pill Tubes tied								
Percent 29.9-37 26.1-32.7 11.4-16.5								

95% Confidence Intervals									
Method of Birth Control	Method of Birth Control Withdrawal Shots every 3 mos. Abstinence								
Percent 16.5-22.4 11.4-16.6 7.1-11.4									

Mother's Comments on Birth Control

- "If you don't want to have a baby, then please just don't get pregnant."
- "Birth control, pills and patches make me feel bad."
- "I had a full time job and was not taking the pill regularly."
- "...I want everyone who is sexually active to know that if they are not ready for children really be careful and use protection all the time..."
- "I have been trying to get on birth control since I had the baby, but I am having insurance issues."
- "I can't get any birth control because I can't afford it or use it because I had cervical cancer."

MISCELLANEOUS

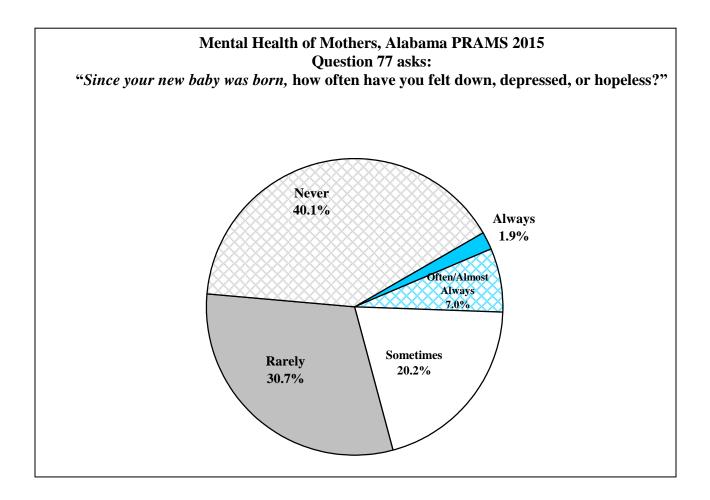


(Question 47 of the PRAMS Survey)

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, 31.7 percent of Alabama mothers reported they had moved to a new address; 22.7 percent reported they argued more with their husband/partner; 22 percent had a family illness or hospitalization; and 21 percent reported they were unable to pay all of their bills. More than one in five mothers suffered the loss of someone close to them.

	95% Confidence Intervals									
Source of Stress										
Percent	28.6-34.9	19.9-25.6	19.3-25	11.7-16.4	17.6-23.1	7.2-11.0				

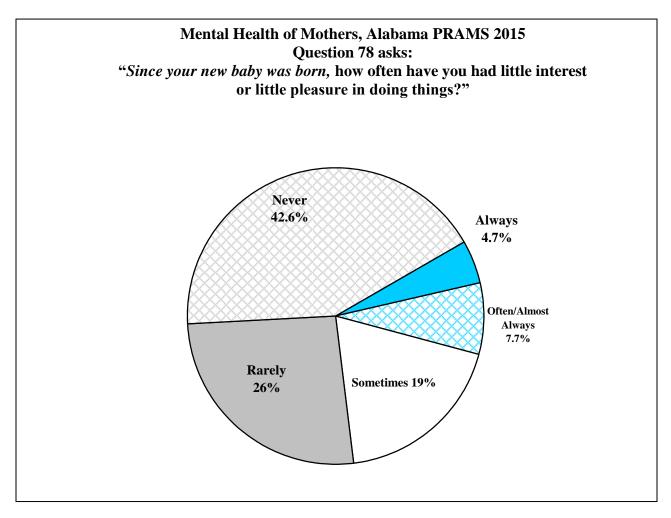
95% Confidence Intervals							
Source of Stress	Divorced	Lost job	Husband/partner lost their job	Husb/partner did not want preg.	Husb/Part/Self reduce wrk/pay	Husb/partner jailed	Homeless
Percent	5.1-8.5	8.1-12.2	7.6-11.7	4.8-8.2	11.9-16.7	2.8-5.6	0.6-2.0



(Question 77 of the PRAMS Survey)

In 2015, 8.9 percent of Alabama mothers reported they always or almost always felt "down", "depressed", or hopeless since the birth of their baby. About 50.9 percent reported feeling this way sometimes and on rare occasions.

95% Confidence Intervals						
Depression Never Always Often/Almost Always		Sometimes	Rarely			
Percent	36.8-43.5	1.2-3.2	5.4-9.1	17.6-23.1	27.7-34.0	

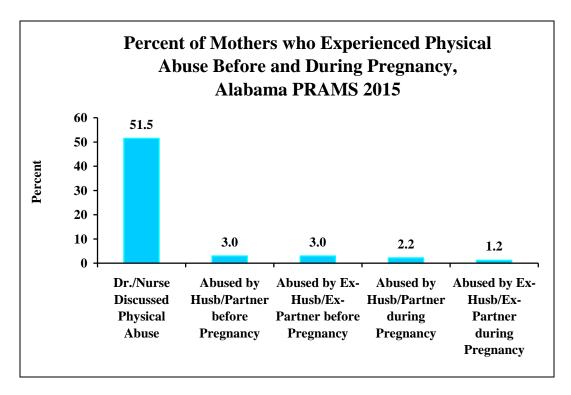


(Question 78 of the PRAMS Survey)

In 2015, when Alabama mothers were asked "how often have you had little interest or little pleasure in doing things", 12.4 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 (called Baby Blues). within hours to a few weeks after giving birth. 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 symptoms.

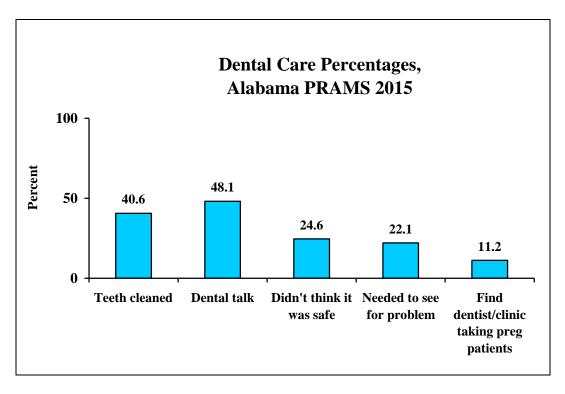
95% Confidence Intervals					
Depression Never Always Often/Almost Always Sometime		Sometimes	Rarely		
Percent	39.3-46.0	3.4-6.4	6.1-9.8	16.5-21.8	23.2-29.1



(Questions 22, 48, 49, 50 & 51 of the PRAMS Survey)

In 2015, 3 percent of Alabama mothers reported physical abuse by their *current* husband/partner and 3 percent of mothers reported abuse by a *former* husband/partner twelve months before becoming pregnant. The abuse decreased during pregnancy by 26.7 percent by *current* spouse/partner and decreased 60 percent by *former* husband/partner.

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	78.2-54.9	2.1-4.4	2.0-4.5	1.4-3.5	0.7-2.3	

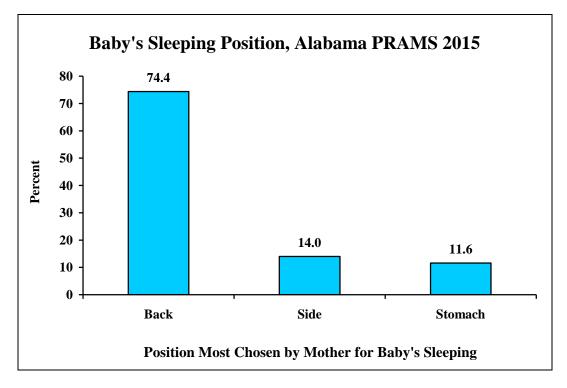


(Question 29 & 82 of the PRAMS Survey)

Periodontal disease is a serious dental infection caused by bacteria. This disease can destroy bone and other structures that support the teeth. Pregnant women who have periodontal disease 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 2015, 40.6 percent of Alabama mothers got their teeth cleaned during pregnancy, and 24.6 percent reported they didn't think teeth cleaning was safe. If following the recommended guidelines for good dental health, all mothers should visit the dentist at least once during their pregnancy for a checkup and cleaning.

95 % Confidence Intervals						
About Teeth cleaning	Teeth cleaned	Dental talk	Didn't think it was safe	Needed to see for problem	Find dentist/clinic taking pregnant patients	
Percent	37.5-43.7	44.7-51.4	19.3-30.8	19.4-25.1	7.6-16.2	



(Question 70 of the PRAMS Survey)

Health providers suggest placing an infant on his/her back (face up) for resting, sleeping, or when left alone can reduce the risk of Sudden Infant Death Syndrome or SIDS. A Healthy People 2020 objective is to increase the percentage of healthy full-term infants who are placed on their backs for sleeping to 75.9 percent. Alabama, was below this objective at 74.4 percent. In 2015, 25.6 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	11.7-16.6	71.2-77.4	9.5-14.1		

Mother's Comments on Miscellaneous Topics

- "I just hope that women put their children first and care of themselves during their pregnancy."
- "I think stress is a huge part of why so many mothers don't do well during pregnancy and [this] causes health problems in the baby...My problem was stress brought on by my ex-partner who decided it was a good idea to abuse me physically, emotionally and financially. Once I got out of that relationship, all of my health problems disappeared and I was able to quit taking meds for depression that I was on before I got pregnant."
- "Emotional strain during my two months after baby was born was due to serious family illness."
- "I had postpartum depression with my first child...and wanted to start back taking antidepressants to prevent postpartum depression."
- "Mothers and pregnant women should be told about the 'baby blues' the sense of an over whelming sense of responsibility. They should be told how they may feel, how long it may last and that it is totally normal as well as giving them information that may help them get over this temporary depression."
- "I believe that my stress level at my past employer had a lot to do with the 'rough' pregnancy that I had."
- "I felt no depression after baby was born, also had more energy."
- "I am a licensed dental hygienist...The health of the mother's teeth and gums directly correlate with the health of their baby. I think more emphasis needs to be put on dental health while women are pregnant and thereafter."
- "I wish there were support groups or programs to help with the 'baby blues'. I feel that one-on-one discussions with a therapist would be most beneficial because of the guilt associated with this feeling. I feel I would have adjusted better to having a new baby if I had help with dealing with all the emotions. Even though my husband and I wanted this baby more than anything and had tried for 2 years to get pregnant. I felt sad after her birth."

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. In 2012, the Phase 7 survey book was implemented.

Weighting

Statistics in this report are based on weighted data. The weights were developed by the 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 the 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 2015, 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 the 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.

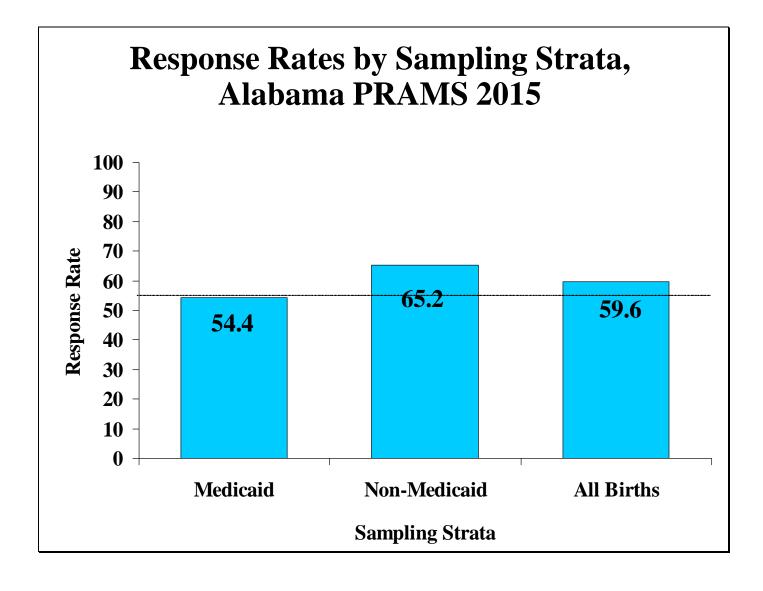
The Sample

Each month approximately 110 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 2014 were approximately as follows:

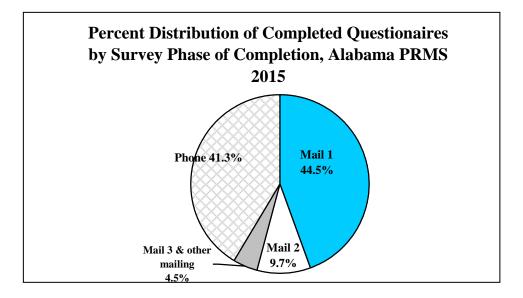
Medicaid	1:38
Non-Medicaid	1:39

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.

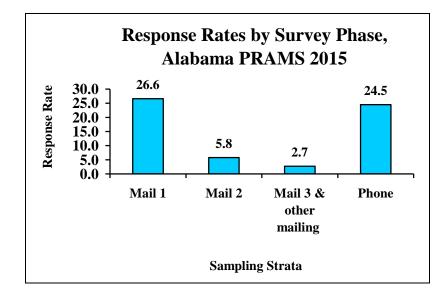
Strata were chosen to allow for oversampling of mothers whose births were paid for by Medicaid. Medicaid births are of special interest to the state of Alabama. The large enough numbers of births that are paid for by Medicaid allow for perform analyses.



As a rule of thumb, the CDC requires at least 400 completed questionnaires and a response rate of 55 percent in each stratum. In 2015, the response rates for the Medicaid strata was below 55 percent, the higher rate of 65.2 percent among non-Medicaid births, and the lower rate of 54.4 percent for Medicaid births. The overall response rate for the two strata was 59.6 percent. The CDC requires an overall weighted response rate of 55 percent to insure data is of the highest quality.



The majority of completed surveys, 44.5 percent, were received as a result of the initial mailing or mail 1. The mail 2 accounted for 9.7 percent of completed questionnaires, and mail 3 and other mailing accounted for 4.5 percent. Of the total number of completed surveys, 41.3 percent resulted from the phone phase.



The response rate is the percent of surveys sent which are completed. Of all women who received the first mailing, 26.6 percent responded. The second mailing had a 5.8 percent response rate. The response rate for the third and other mailing was 2.7 percent in 2015, and the response rate for the phone phase was 24.5 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

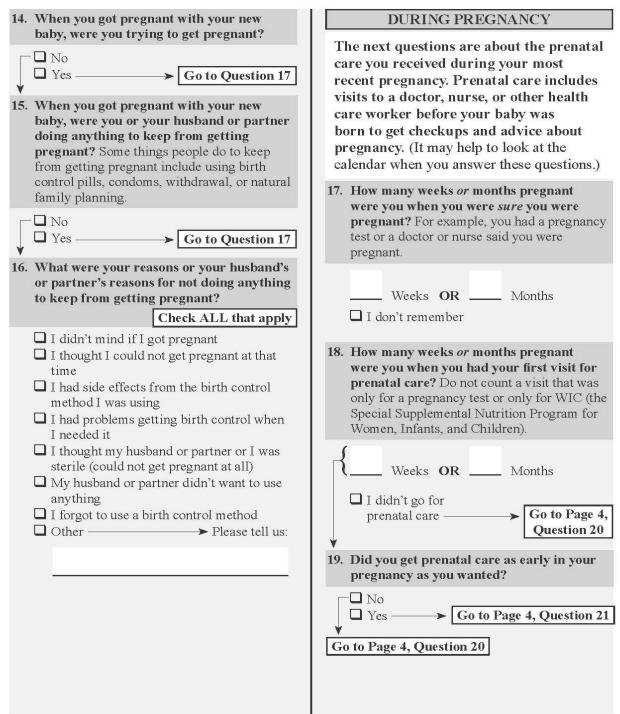
SURVEY

QUESTIONS

(PHASE VII)

Please check the box next to your answer or follow the directions included with the question. You may be asked to skip some questions that do not apply to you. BEFORE PREGNANCY	 6. Was the baby <i>just before</i> your new one born <i>earlier</i> than 3 weeks before his or her due date? No Yes
The first questions are about <i>you</i> . 1. How tall are <i>you</i> without shoes?	The next questions are about the time <i>before</i> you got pregnant with your <i>new</i> baby.
Feet Inches OR Centimeters	7. 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, check No if you did not do it or Yes if you did it.
 Just before you got pregnant with your new baby, how much did you weigh? Pounds OR Kilos 	No Yes a. I was dieting (changing my eating habits) to lose weight b. I was exercising 3 or more days of the week
 3. What is <u>your</u> date of birth? 	 c. I was regularly taking prescription medicines other than birth control □ d. I visited a health care worker and was checked for diabetes e. I visited a health care worker and was checked for high blood pressure□ f. I visited a health care worker and was checked for depression or anxiety□
 baby, did you ever have any other babies who were born alive? □ No → Go to Question 7 □ Yes 5. Did the baby born <i>just before</i> your new one weigh 5 pounds, 8 ounces (2.5 kilos) or <i>less</i> 	 g. I talked to a health care worker about my family medical history □ h. I had my teeth cleaned by a dentist or dental hygienist □
at birth?	

2		
8.	During the month before you got pregnant with your new baby, what kind of health insurance did you have? Check ALL that apply Private health insurance from my job or the	11. Before you got pregnant with your new baby, did a doctor, nurse, or other health care worker tell you that you had any of the following health conditions? For each one, check No if you did not have the condition or Yes if you did.
	 job of my husband, partner, or parents Private health insurance purchased directly from an insurance company Medicaid Some other kind of health insurance> Please tell us: I did not have any health insurance 	No Yes a. Type 1 or Type 2 diabetes (NOT the same as gestational diabetes or diabetes that starts during pregnancy) b. High blood pressure or hypertension c. Depression
9.	during the <i>month before</i> I got pregnant During the <i>month before</i> you got pregnant with your new baby, how many times	The next questions are about the time when you got pregnant with your new baby.
	 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 in the month before I got pregnant 1 to 3 times a week 4 to 6 times a week Every day of the week 	 12. 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 later I wanted to be pregnant sooner I wanted to be pregnant then I didn't want to be pregnant
10.	<i>Before</i> you got pregnant with your new baby, did a doctor, nurse, or other health care worker talk to you about how to improve your health before pregnancy?	then or at any time in the future I wasn't sure what I wanted
	NoYes	13. How much longer did you want to wait to become pregnant?
		 Less than 1 year 1 year to less than 2 years 2 years to less than 3 years 3 years to 5 years More than 5 years



	Did any of these things keep you from getting prenatal care when you wanted it? For each item, check No if it did not keep you				
	from getting prenatal care or Yes if it did				
	No	Yes			
a.	I couldn't get an appointment when I wanted one				
b.	I didn't have enough money or insurance to pay for my visits				
C.	I didn't have any transportation to get to the clinic or doctor's office				
d.	The doctor or my health plan would not start care as early as I wanted				
e.	I had too many other things going on \Box	ā			
f.	I couldn't take time off from work or school				
g. h.	I didn't have my Medicaid card				
i.	my children				
j.	I didn't want anyone else to know I				
	was pregnant				
k.	I didn't want prenatal care	ā			
If					
If Q	I didn't want prenatal care	0			
If Q	I didn't want prenatal care	o pply or the			
If Q	I didn't want prenatal care	o pply or the			
If Q	I didn't want prenatal care	o pply or the			
If Q	I didn't want prenatal care	o pply or the rectly			

22. 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, check No if no one talked with you about it or Yes if someone did. No Yes a. How much weight I should gain during my pregnancy 🔲 🗖 b. How smoking during pregnancy could affect my baby..... c. Breastfeeding my baby d. How drinking alcohol during pregnancy could affect my baby...... 🔲 🔲 e. Using a seat belt during my pregnancy..... f. Medicines that are safe to take during my pregnancy..... g. How using illegal drugs could affect my baby 🔲 🔲 h. Doing tests to screen for birth defects or diseases that run in my family...... \Box i. The signs and symptoms of preterm labor (labor more than 3 weeks before the baby is due)...... \Box j. Getting tested for HIV (the virus that causes AIDS) \Box k. What to do if I feel depressed during my pregnancy or after my baby is born 🔲 🔲 1. Physical abuse to women by their husbands or partners 23. At any time during your most recent pregnancy or delivery, did you have a test for HIV (the virus that causes AIDS)? No

VYes

I don't know

 24. Have you ever heard or read that taking a vitamin with folic acid can help prevent some birth defects? □ No 	28. This question is about the care of your teeth <u>during</u> your most recent pregnancy. For each item, check No if it is not true or does not apply to you or Yes if it is true.		
 25. During the 12 months before the delivery of your new baby, did a doctor, nurse, or other health care worker offer you a flu shot or tell you to get one? No Yes 26. During the 12 months before the delivery of your new baby, did you get a flu shot? Check ONE answer No Go to Question 28 Yes, before my pregnancy Yes, during my pregnancy 27. During what month and year did you get the flu shot? 	No Yes a. I knew it was important to care for my teeth and gums during my pregnancy		
Month Year I don't remember	29. Did any of the following things make it hard for you to go to a dentist or dental clinic about the problem you had during your most recent pregnancy? For each item, check No if it was not something that made it hard for you to go to a dentist during pregnancy or Yes if it was.		
	 No Yes a. I could not find a dentist or dental clinic that would take pregnant patients. b. I could not find a dentist or dental clinic that would take Medicaid patients. c. I did not think it was safe to go to the dentist during pregnancy. d. I could not afford to go to the dentist or dental clinic		

- 6
- 30. During your most recent pregnancy, did you take a class or classes to prepare for childbirth and learn what to expect during labor and delivery?

No
Yes

31. During your most recent pregnancy, did a home visitor come to your home to help you prepare for your new baby? A home visitor is a nurse, a health care worker, a social worker, or other person who works for a program that helps pregnant women.

No
Yes

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

🗖 No ———	>	Go to Question 34
🗆 Ves		

- 33. When you went for WIC visits during your most recent pregnancy, did you receive information on breastfeeding?
 - **No U** Yes
- 34. 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)?



Ì	Yes

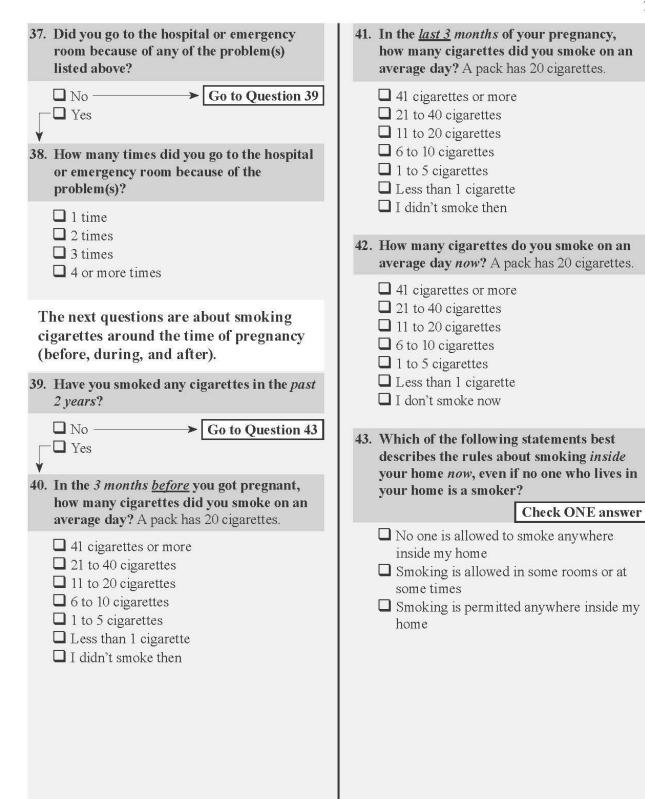
35	. Did you have any of the following problems
	during your most recent pregnancy? For each item, check No if you did not have the
	problem or Yes if you did.
	No Yes
a.	5 5
b.	Kidney or bladder (urinary tract) infection (UTI)
0	
C.	Severe nausea, vomiting, or dehydration that sent me to the
	doctor or hospital
d.	· · · · · · · · · · · · · · · · · · ·
u.	for incompetent cervix)
e.	0 1 , 11
	(including pregnancy-induced
	hypertension [PIH]), preeclampsia,
	or toxemia
f.	((
	abruptio placentae or placenta
	previa)
g.	
	before my baby was due (preterm or early labor)
h.	
	before my baby was due (premature
	rupture of membranes [PROM])
i.	I had to have a blood transfusion
j.	I was hurt in a car accident
12.00	

If you did not have any of the problems listed above, go to Question 39.

36. 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?

No
Yes

양근 관금 영광



Pregnancy can be a difficult time for The next questions are about drinking some women. The next questions are alcohol around the time of pregnancy about things that may have happened (before and during). before and during your most recent 44. Have you had any alcoholic drinks in the pregnancy. past 2 years? A drink is 1 glass of wine, wine cooler, can or bottle of beer, shot of 47. This question is about things that may liquor, or mixed drink. have happened during the 12 months before your new baby was born. For each 🗖 No · Go to Question 47 item, check No if it did not happen to you **Yes** or Yes if it did. (It may help to look at the calendar when you answer these questions.) 45. During the 3 months before you got No Yes pregnant, how many alcoholic drinks did a. A close family member was very you have in an average week? sick and had to go into the hospital \dots □ 14 drinks or more a week b. I got separated or divorced from my **7** to 13 drinks a week husband or partner \Box 4 to 6 drinks a week c. I moved to a new address..... □ 1 to 3 drinks a week d. I was homeless or had to sleep outside, in a car, or in a shelter Less than 1 drink a week □ I didn't drink then e. My husband or partner lost his job \dots f. I lost my job even though I wanted to go on working...... 46. During the last 3 months of your g. My husband, partner, or I had a cut pregnancy, how many alcoholic drinks did in work hours or pay...... 🔲 🗖 you have in an average week? h. I was apart from my husband or □ 14 drinks or more a week partner due to military deployment **7** to 13 drinks a week or extended work-related travel 4 to 6 drinks a week i. I argued with my husband or partner □ 1 to 3 drinks a week more than usual...... Less than 1 drink a week j. My husband or partner said he □ I didn't drink then didn't want me to be pregnant k. I had problems paying the rent, mortgage, or other bills...... 1. My husband, partner, or I went to jail 🛛 🗖 m. Someone very close to me had a problem with drinking or drugs \Box n. Someone very close to me died \Box

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- 48. 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
- 49. 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?

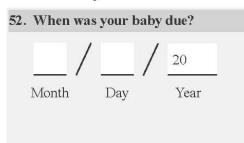
NoYes

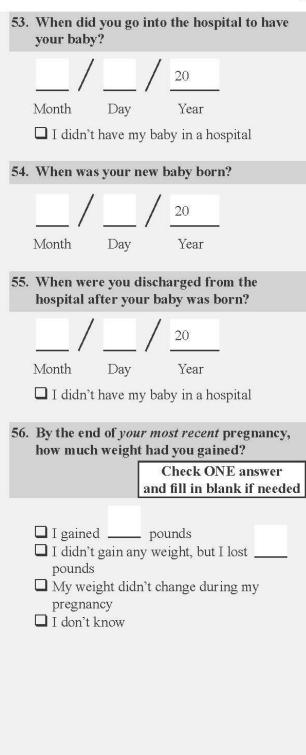
50. During *your most recent* pregnancy, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?

□ No □ Yes

- 51. 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?
 - NoYes

The next questions are about your labor and delivery.





10 57. What kind of health insurance did you 60. Is your baby alive now? have to pay for your *delivery*? 🗖 No -> We are very sorry for your loss. Check ALL that apply **Yes** Go to Page 12, Question 73 □ Private health insurance from my job or the job of my husband, partner, or parents 61. Is your baby living with you now? □ Private health insurance purchased directly D No -► Go to Page 12, Question 72 from an insurance company Medicaid Yes □ Some other kind of ➤ Please tell us: health insurance -62. Did you ever breastfeed or pump breast milk to feed your new baby, even for a short period of time? □ I did not have any health insurance to pay D No for my *delivery* Go to Question 64 🔲 Yes – 63. What were your reasons for not AFTER PREGNANCY breastfeeding your new baby? The next questions are about the time Check ALL that apply since your new baby was born. □ I was sick or on medicine □ I had other children to take care of 58. After your baby was delivered, was he or □ I had too many household duties she put in an intensive care unit (NICU)? □ I didn't like breastfeeding I tried but it was too hard **No** □ I didn't want to **Yes** □ I went back to work or school I don't know Other — → Please tell us: 59. After your baby was delivered, how long did he or she stay in the hospital? Less than 24 hours (less than 1 day) If you did not breastfeed your new baby, go \square 24 to 48 hours (1 to 2 days) to Page 12, Question 69. \Box 3 to 5 days \Box 6 to 14 days □ More than 14 days 64. Are you currently breastfeeding or feeding My baby was not born in a hospital pumped milk to your new baby? □ My baby is still in **No** Go to Question 62 the hospital -➤ Go to Question 67 **Ves** -Go to Question 60 Go to Question 65

				ıl, g	o to
Weeks OR Less than 1 week	Months	67.	have happened at the hospital wher new baby was born. For each item, c	e yo hecl	our k No
]	No	Yes
What were your rea breastfeeding?	sons for stopping Check ALL that apply		about breastfeeding My baby stayed in the same room		
Breast milk alone	did not satisfy my baby	c.	with me at the hospital Hospital staff helped me learn how to breastfeed		
weight	ore, cracked, or bleeding	e.	baby was born I breastfed my baby in the hospital		
			at the hospital		
I had too many oth	her household duties	h.	whenever my baby wanted		
breastfeeding	-		pump to use		
reasons			with formula		
🗖 My baby was jaun	diced (yellowing of the	J.	number to call for help with		
		k.			
		68.	 he or she drank liquids other than h milk (such as formula, water, juice, cow's milk)? Weeks OR Months My baby was less than 1 week old 	orea tea	, or
	 breastfeed or pump baby? Weeks OR Less than 1 week What were your real breastfeeding? My baby had diffi Breast milk alone I thought my baby weight My nipples were s It was too hard, paconsuming I thought I was no or my milk dried to or my milk dried to breastfeeding? I had too many ott I felt it was the rig breastfeeding I got sick or I had reasons I went back to wor My baby was jaun skin or whites of to 	 Weeks ORMonths Less than 1 week 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, or my milk dried up I had too many other household duties I felt it was the right time to stop breastfeeding I got sick or I had to stop for medical 	breastfeed or pump milk to feed your III baby? 67. Weeks OR Months 67. Less than 1 week a. What were your reasons for stopping b. breastfeeding? Check ALL that apply b. My baby had difficulty latching or nursing Breast milk alone did not satisfy my baby I thought my baby was not gaining enough weight d. My nipples were sore, cracked, or bleeding e. I thought I was not producing enough milk, or my milk dried up g. I had too many other household duties h. I felt it was the right time to stop breastfeeding i. I got sick or I had to stop for medical reasons j. My baby was jaundiced (yellowing of the skin or whites of the eyes) k.	 breastfeed or pump milk to feed your baby? Weeks OR Months Less than 1 week 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 I thought twas not producing enough milk, or my milk dried up I had too many other household duties I felt it was not producing enough milk, or my milk dried up I had too many other household duties I felt it was not school My baby was jaundiced (yellowing of the skin or whites of the eyes) Other Please tell us: 68. How old was your new baby the firsh eor she drank liquids other than 1 milk (such as formula, water, juice, cow's milk)? 	 breastfeed or pump milk to feed your baby? breastfeed or pump milk to feed your baby? Weeks OR Months Less than 1 week 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 I thought I was not producing enough milk, or my milk dried up I had too many other household duties I felt it was not producing enough milk, or my milk dried up I had too many other household duties I felt it was not producing enough milk, or my milk dried up I had too many other household duties I felt it was not producing enough milk, or my milk dried up I had too many other household duties I felt it was the right time to stop breastfeeding I got sick or I had to stop for medical reasons Went back to work or school My baby was jaundiced (yellowing of the skin or whites of the eyes) Other Please tell us: 68. How old was your new baby the first tim he or she drank liquids other than breamilk (such as formula, water, juice, tea cow's milk)?

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 69. 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 	 73. Are you or your husband or partner doing anything <i>now</i> to keep from getting pregnant? Some things people do to keep from getting pregnant include using birth control pills, condoms, withdrawal, or natural family planning. No Yes
	¥
If your baby is still in the hospital, go to Question 72.	74. What are your reasons or your husband's or partner's reasons for not doing anything
70. In which <i>one</i> position do you <u>most often</u> lay	to keep from getting pregnant <i>now</i> ?
your baby down to sleep now?	Check ALL that apply
Check ONE answer	 I am not having sex I want to get pregnant
 On his or her side On his or her back On his or her stomach 	 I don't want to use birth control I am worried about side effects from birth control My husband or partner doesn't want to use
71. 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.	anything I have problems getting birth control when I need it I had my tubes tied or blocked
NoYes	 My husband or partner had a vasectomy I am pregnant now Other> Please tell us:
72. Since your new baby was born, has a home visitor come to your home to help you learn how to take care of yourself or your	
new baby? A home visitor is a nurse, a health care worker, a social worker, or other person who works for a program that helps mothers of newborns.	If you or your husband or partner is <u>not doing</u> anything to keep from getting pregnant <i>now</i> , go to Question 76.
☐ No ☐ Yes	

75. What kind of birth control are you or your husband or partner using <i>now</i> to keep from getting pregnant?	78. <i>Since your new baby was born</i> , how often have you had little interest or little pleasure in doing things?
Check ALL that apply Tubes tied or blocked (female sterilization, Essure®, Adiana®) Vasectomy (male sterilization) Birth control pill Condoms Injection (Depo-Provera®) Contraceptive implant (Implanon®) Contraceptive patch (OrthoEvra®) or vaginal ring (NuvaRing®) IUD (including Mirena® or ParaGard®) Natural family planning (including rhythm method) Withdrawal (pulling out) Not having sex (abstinence) Other Please tell us:	 Always Often Sometimes Rarely Never 79. What kind of <i>health insurance</i> do you have now? Check ALL that apply Private health insurance from my job or the job of my husband, partner, or parents Private health insurance purchased directly from an insurance company Medicaid Some other kind of health insurance mow
postpartum checkup is the regular checkup a woman has about 4-6 weeks after she gives birth.	OTHER EXPERIENCES
□ No □ Yes	The next questions are on a variety of topics.
 77. Since your new baby was born, how often have you felt down, depressed, or hopeless? Always 	80. At any time during <i>your most recent</i> pregnancy, did a doctor, nurse, or other health care worker <i>tell you that you had</i> depression?
 Often Sometimes Rarely Never 	☐ No □ Yes
	If your baby is not alive, is not living with you, or is still in the hospital, go to Page 14, Question 82.

14 81. About how many hours a day, on average, 84. During the 12 months before your new is your new baby in the same room or baby was born, what was your yearly total household income before taxes? Include vehicle with someone who is smoking? your income, your husband's or partner's income, and any other income you may have Hours received. All information will be kept private □ 1 hour a day or less and will not affect any services you are now □ My baby is never in the same room or getting. vehicle with someone who is smoking **\$**0 to \$15,000 **\$15,001 to \$19,000** 82. Have you ever had your teeth cleaned by a □ \$19,001 to \$22,000 dentist or dental hygienist? **\$22,001 to \$26,000 No \$26,001 to \$29,000** □ Yes **\$29,001 to \$37,000 \$37,001 to \$44,000** □ \$44,001 to \$52,000 The last questions are about the time □ \$52,001 to \$56,000 during the 12 months before your new **\$56,001 to \$67,000 \$67,001 to \$79,000** baby was born. **\$79,001 or more** 83. During the 12 months before your new baby was born, what were the sources of 85. During the 12 months before your new your household's income? baby was born, how many people, Check ALL that apply including yourself, depended on this □ Money from family or friends income? □ Money from a business, fees, dividends, or rental income People □ Paycheck or money from a job □ Food stamps or WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children) 86. What is today's date? □ Aid such as Temporary Assistance for Needy Families (TANF), welfare, 20 public assistance, general assistance, or Supplemental Security Income (SSI) Month Day Year Unemployment benefits Child support or alimony □ Social security, workers' compensation, disability, veteran benefits, or pensions Other -➤ Please tell us:

Please use this space for any additional comments you would like to make about your experiences around the time of your pregnancy or the health of mothers and babies in Alabama.

Thanks for answering our questions!

Your answers will help us work to make Alabama mothers and babies healthier.