

PRAMS Surveillance Report Alabama 2013

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> Principal Authors Qun Zheng, M.S., Jimmy Messick, M.S., Xuejun Shen, Ph.D.

Thomas M. Miller, M.D., State Health Officer Catherine Molchan Donald, M.B.A., Director, Center for Health Statistics Xuejun Shen, Ph.D., Director, Division of Statistical Analysis

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

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Alabama PRAMS staffs that are responsible for the collection and analysis of data in this report include:

Catherine Molchan Donald, PRAMS Project Director, Xuejun Shen, Director of the Statistical Analysis

Division, Qun Zheng, PRAMS Project Coordinator, Jimmy Messick, PRAMS Research Analyst and

Yvonne Fountain Paul, PRAMS Data Manager.

PRAMS SURVEILLANCE REPORT ALABAMA 2013

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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 collect 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 given in this publication are weighted to represent the 54,912 live births which occurred in Alabama in 2013 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 2013, 755 questionnaires were completed from 1,426 sampled.

The overall **un-weighted** response rate was 52.9 percent, and the **weighted** response rate was 53.0 percent. Because the CDC requires an overall weighted response rate of 65 percent to insure data is of the highest quality, caution should be used in interpreting data reported from 2013.

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 trends charts may be useful to programs that are interested in PRAMS data.

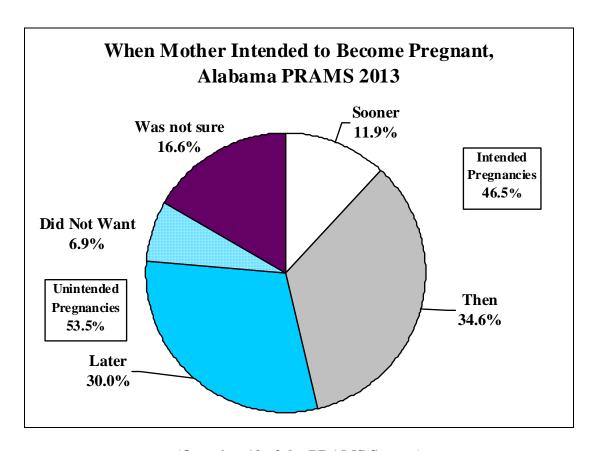
2013 Alabama PRAMS Surveillance Report Highlights

- 53.5 percent of Alabama births were unintended.
- 61.9 percent of Alabama mothers did not take any multivitamins before becoming pregnant.
- 14.9 percent of Alabama mothers indicated they continued smoking during pregnancy.
- 6.5 percent of Alabama mothers reported drinking alcoholic beverages on a weekly basis during the last three months of pregnancy.
- 65.0 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.
- 60.5 percent of Alabama mothers participated in the Supplemental Food Program for Women, Infants, and Children (WIC) during pregnancy.
- 73.4 percent of Alabama mothers initiated breastfeeding their infants.
- 59.7 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), 80.7 percent of mothers were using some form of birth control.
- 38.9 percent of Alabama mothers reported they moved to a new address during their pregnancy.
- 10.6 percent of Alabama mothers reported they *always or almost always* felt down, depressed, or sad since the birth of their baby. 51.9 percent reported feeling this way *sometimes or on rare occasions*.
- 42.2 percent of Alabama mothers reported having a dental cleaning during their pregnancy.
- 70.5 percent of Alabama mothers most often lay their babies on their backs for sleeping.

Mother's General Comments

- "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 mothers 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."

INTENDEDNESS OF BIRTHS

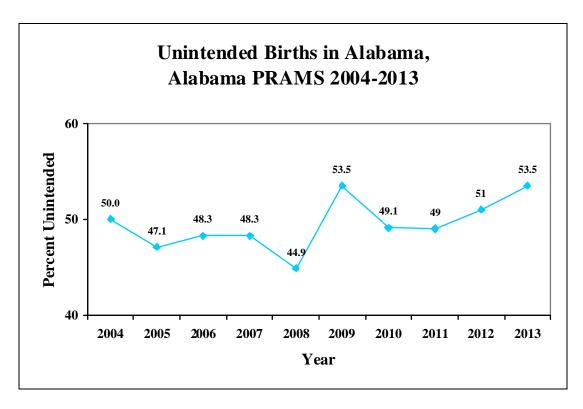


(Question 12 of the PRAMS Survey)

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

In 2013, 53.5 percent of Alabama mothers reported their pregnancies as *unintended*. 30.0 percent of Alabama women said they wanted to be pregnant *later*, and 6.9 percent said they did not want to be pregnant then or at any time in the future. There are 16.6 percent of Alabama women was not sure. On the other hand, 46.5 percent of Alabama mothers reported either wanting to be pregnant *then* (34.6 percent) or even *sooner* (11.9 percent). The Healthy People 2020 Objective is to increase the proportion of pregnancies that are intended to 56.0 percent.

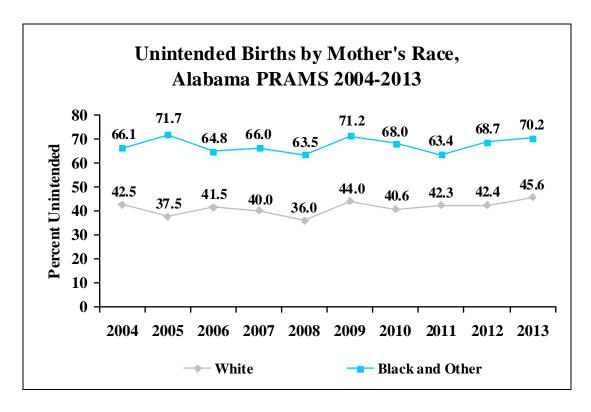
	95 % Confidence Intervals										
Intention Sooner Then Later Did not want Was not sure Intended Unintended											
Percent	9.8-14.3	31.3-38.1	26.7-33.4	5.3-9.0	14.1-19.6	43.0-50.0	50.0-57.0				



(Question 12 of the PRAMS Survey)

From 2012 to 2013, there was a 4.1 percent increase in unintended births in Alabama. It's not a significant increase.

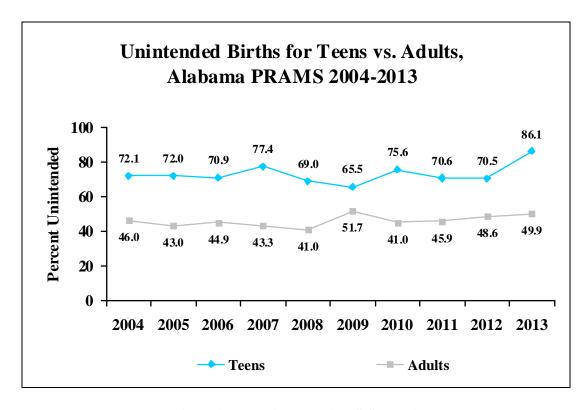
	95 % Confidence Intervals										
Year	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
% Unintended	46.5-53.5	43.7-50.6	44.9-51.8	44.8-51.8	41.4-48.5	49.8-57.1	45.5-52.7	45.7-52.3	46.7-55.3	50.0-57.0	



(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 2012-2013, the percentage of unintended births to black and other women increased by 2.2 percent, and the percentage of unintended births increased by 7.5 percent from 2012-2013 among white women. The percent change in both populations is not statistically significant.

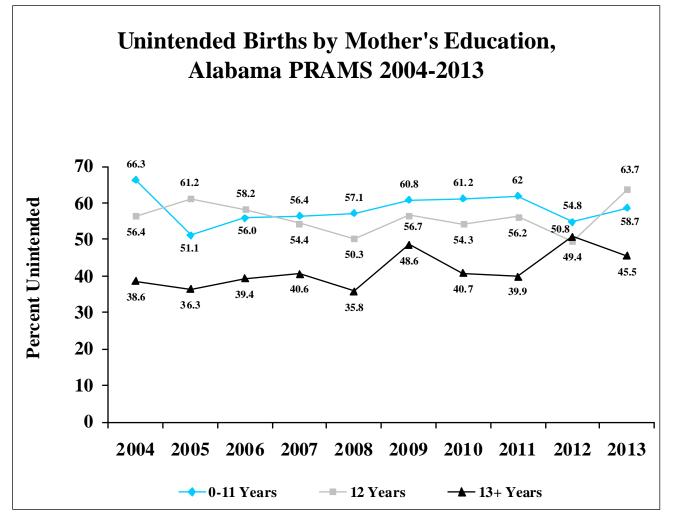
	95 % Confidence Intervals										
Year	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
White	38.3-46.8	33.6-41.6	37.5-45.7	35.9-44.2	32.1-40.2	39.7-48.4	36.5-44.9	38.5-46.2	37.6-47.3	41.5-49.8	
Black & Other	59.7-71.9	65.3-77.3	58.3-70.8	59.8-71.7	56.7-69.9	64.7-77.0	61.2-74.1	57.1-69.4	60.0-76.3	63.5-76.2	



(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 2012 to 2013, there was a 22.1 percent increase in the percent of unintended pregnancies among Alabama's teens.

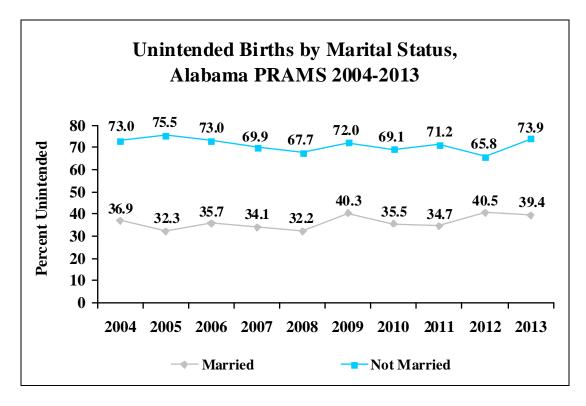
	95 % Confidence Intervals											
Year	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
Teens	63.5-79.3	62.9-79.5	61.2-79.1	67.7-84.8	59.0-77.4	54.6-75.0	65.7-83.3	60.5-78.9	56.1-81.7	75.9-92.4		
Adults	42.3-49.9	39.3-46.8	41.2-48.6	39.7-47.1	37.3-44.9	47.7-55.6	41.2-49.0	42.4-49.4	44.1-53.2	46.2-53.7		



(Question 12 of the PRAMS Survey)

As the amount of formal education increases, the percent of unintended births decreases. From 2012-2013, there was a 7.1 percent increase of unintended births among women with the lowest level of education and a 28.9 percent decrease was seen among women with 12 years of education. There was a 10.4 percent decrease in unintended births among women with the highest levels of education from 2012 to 2013. These changes were not statistically significant.

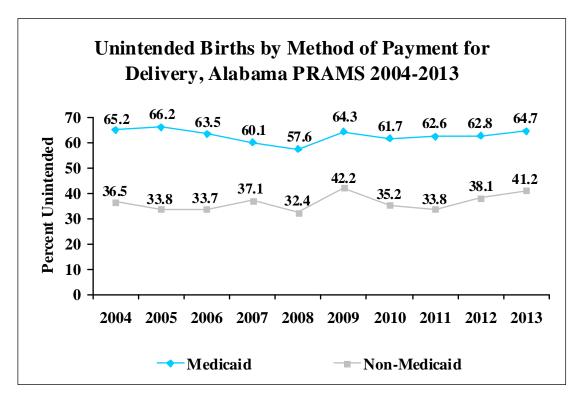
	95 % Confidence Intervals											
Year/ Education	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
0-11 yrs.	58.2-73.6	43.2-58.8	48.0-63.8	47.6-64.9	48.4-65.3	52.0-69.0	52.5-69.2	53.5-69.7	43.0-66.1	48.8-67.9		
12 yrs.	49.9-62.6	54.8-67.3	51.4-64.8	47.9-60.8	43.6-56.9	49.8-63.3	47.6-60.8	49.7-62.5	41.3-57.5	57.2-69.7		
13+ yrs.	33.8-43.7	31.5-41.3	34.8-44.2	36.1-45.3	31.2-40.7	43.5-53.7	35.7-45.8	35.7-44.3	45.1-56.5	40.8-50.3		



(Question 12 of the PRAMS Survey)

The average percent of unintended births to unmarried women was 87.6 percent higher than that of married women. Abstinence, postponement of childbearing and improved contraceptive use would be instrumental in the reduction and elimination of unintended births, especially among unmarried women for whom the consequences tend to be greatest. From 2012-2013, there was a 12.3 percent increase of unintended births among unmarried women and 2.7 percent decrease of unintended births among married women.

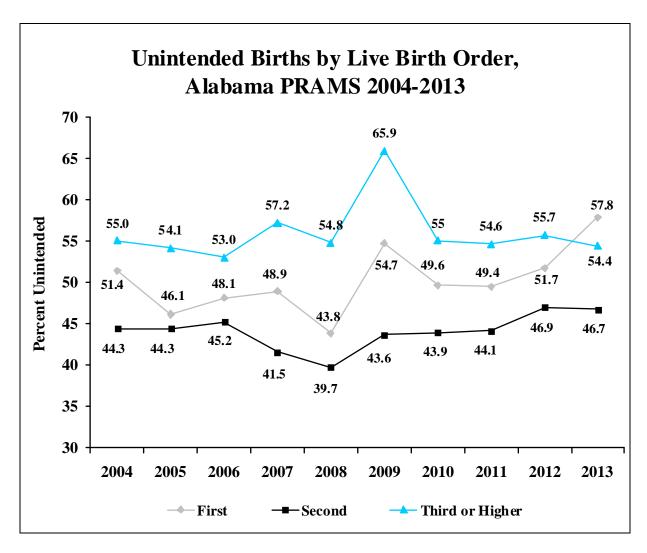
	95 % Confidence Intervals											
Year/ Marital Status	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
Married	32.8-41.3	28.4-36.5	31.7-39.9	30.2-38.3	28.2-36.5	35.8-44.9	31.1-40.1	30.8-38.8	35.4-45.8	35.1-43.8		
Not Married	67.3-78.0	69.8-80.3	67.1-78.2	64.0-75.3	61.5-73.4	66.1-77.2	63.3-74.4	65.8-76.1	58.3-72.5	68.2-78.9		



(Question 12 of the PRAMS Survey)

In 2013 in Alabama, 64.7 percent of births to women on Medicaid were unintended compared to 41.2 percent among non-Medicaid women. This indicates that poorer women are more likely to have unplanned births.

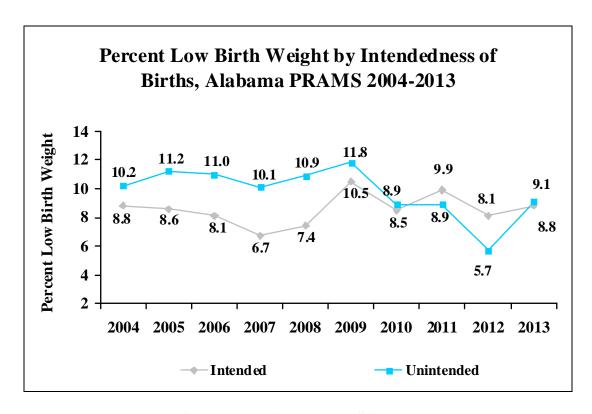
	95 % Confidence Intervals											
Year/ Payment	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
Medicaid	60.3-69.7	61.2-70.9	58.5-68.1	54.9-65.0	52.2-62.8	59.1-69.2	56.6-66.6	57.7-67.2	56.3-68.8	59.5-69.5		
Non- Medicaid	31.5-41.7	29.1-38.9	29.1-38.7	32.4-42.1	27.9-37.3	37.0-47.6	30.2-40.5	29.5-38.4	32.5-43.9	36.4-46.1		



(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 most likely to be planned. From 2012 to 2013, there was an 11.8 percent increase in unintended births for mothers having their first child. In 2013, for mothers having their third (or higher) child, 54.4 percent of the births were unintended, and there was no different who had given birth to their second child from 2012 to 2013. All of the changes from 2012 to 2013 were not statistically significant.

	95 % Confidence Intervals												
Year/ Birth Order	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013			
First	46.1-56.7	40.9-51.4	42.8-53.4	43.7-54.2	38.6-49.1	49.0-60.2	44.1-55.1	44.5-54.4	45.2-58.1	52.4-62.9			
Second	38.3-50.6	38.5-50.2	39.1-51.4	35.6-47.7	33.6-46.1	37.3-50.0	37.6-50.4	38.1-50.2	39.6-54.4	40.3-53.1			
Third +	47.4-62.3	46.2-61.8	45.8-60.1	49.5-64.5	47.0-62.5	58.3-72.8	47.5-62.3	47.5-61.5	46.0-65.0	47.0-61.6			



(Question 12 of the PRAMS Survey)

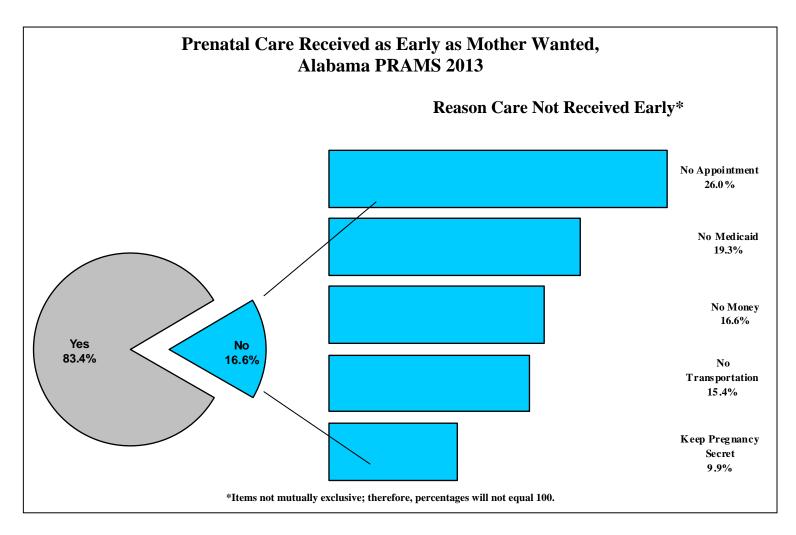
Low birth weight is defined as birth weight of less than 2,500 grams or 5 lbs. 8oz. Infants delivered at this weight are at increased risk of death during their first year of life or of lifelong disabilities. Of births reported as unintended in 2013, 9.1 percent were low weight births. Both unintended and intended births, the percentage of low weight births increased in 2013.

	95 % Confidence Intervals											
Year/ Intention	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
Intended	8.0-9.7	7.8-9.5	7.3-9.0	4.7-9.6	5.2-10.4	7.5-14.4	6.1-11.8	7.4-13.1	5.3-12.2	6.2-12.4		
Unintended	9.2-11.2	10.1-12.4	9.9-12.1	7.3-13.7	7.8-15.1	8.7-15.7	6.3-12.5	6.4-12.2	3.2-9.9	6.6-12.6		

Mother's Comments on Intendedness

- "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."

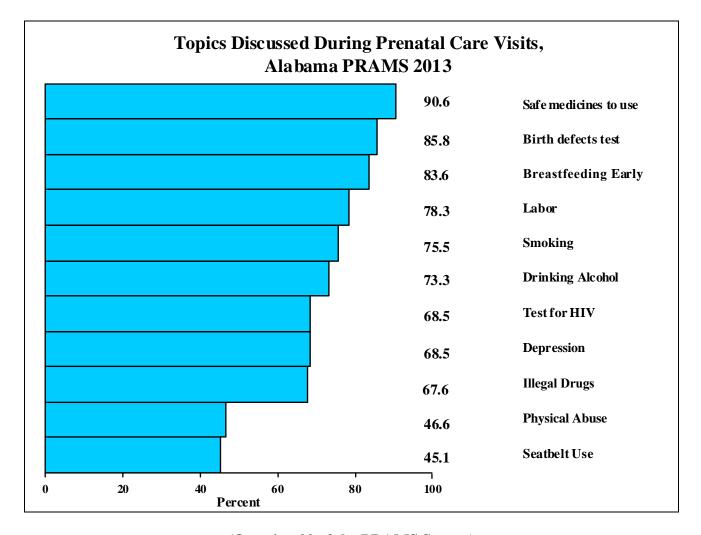
PRENATAL CARE



(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 2013, 16.6 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	80.4-85.9	14.1-19.6	20.4-32.4	12.1-22.2	14.4-25.4	6.3-15.0	10.8-21.4



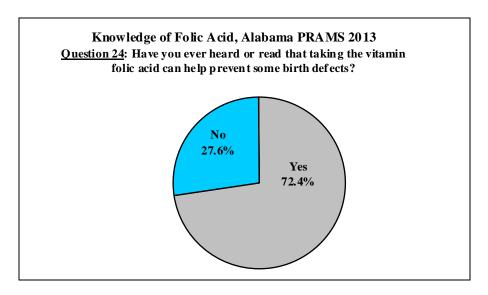
(Question 22 of the PRAMS Survey)

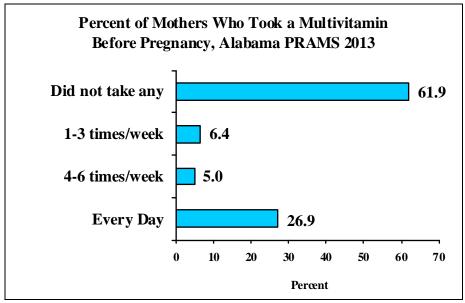
Mothers were asked if a doctor, nurse, or health care worker talked with them about the above topics during any of their prenatal care visits. In 2013, about nine out of ten Alabama mothers reported being informed about safe medications to take during their pregnancies. About 8 out of 10 mothers reported discussions about screening tests for birth defects or diseases which run in their families, breastfeeding, and what to do if premature labor occurs. Only 46.6 percent of Alabama's mothers reported having a discussion about physical abuse by a husband or partner, and only 45.1 percent reported any discussion on seat belt usage during pregnancy.

95% Confidence Intervals						
Topics	Safe Medicines	Birth defects	Depression	Early labor	Breastfeeding	
Percent	88.2-92.5	83.0-88.2	65.0-71.8	75.1-81.2	80.9-86.0	

95% Confidence Intervals					
Smoking	HIV testing	Drinking	Illegal drug usage	Seat belt usage	Physical abuse
72.4-78.3	65.0-71.7	70.1-76.3	64.3-70.7	41.5-48.8	43.0-50.2

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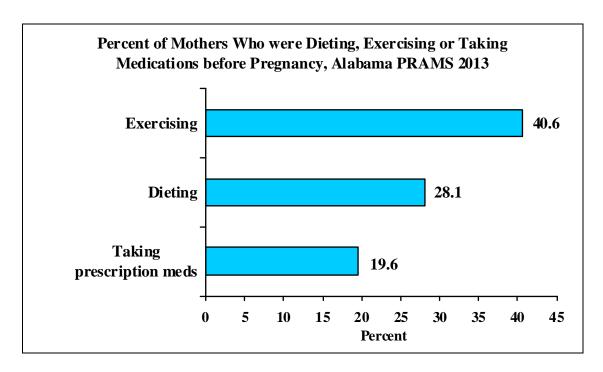


(Question 9 & 24 of the PRAMS Survey)

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 2013, 72.4 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 61.9 percent of mothers took no multivitamins (which contain the required amount of folic acid) the month before their pregnancy occurred. Only 26.9 percent of Alabama mothers consumed a daily multivitamin during the month prior to becoming pregnant.

95% Confidence Intervals						
Questions	Questions Knowledge? Yes Knowledge? No None Taken 1-3 times/wk. 4-6 times/wk. Taken Dai					Taken Daily
Percent	68.9-75.6	24.4-31.1	58.5-65.2	4.9-8.3	3.7-6.8	23.8-30.0



(Question 7 of PRAMS Survey)

In 2013, 40.6 percent of mothers said they were exercising three or more days of the week, and 28.1 percent were dieting (changing eating habits). 19.6 percent of mothers were taking prescription medicines other than birth control.

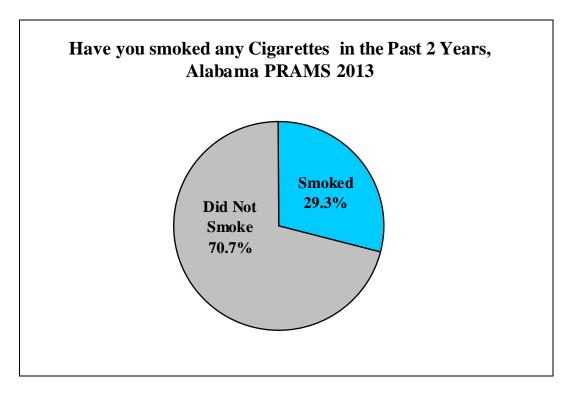
95% Confidence Intervals					
Topics Dieting Exercise Taking prescription m					
Percent	25.0-31.3	37.1-44.2	16.9-22.5		

Mother's Comments on Prenatal Care

- "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."
- "I recommend that pregnant women take their prenatal vitamins."
- "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)

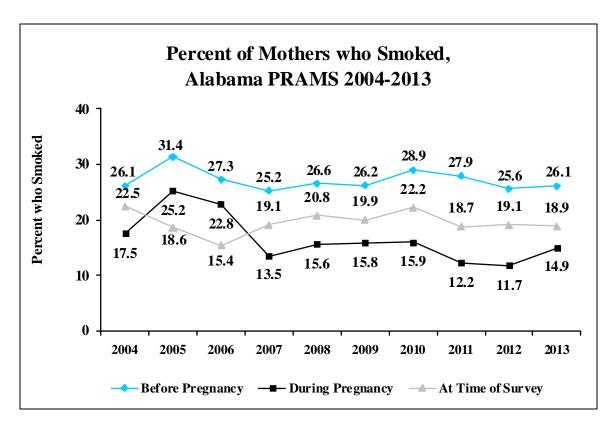
The Centers for Disease Control and Prevention (CDC) has reported that "Smoking during pregnancy is the single most preventable cause of illness and death among mothers and infants." ¹ They report that infants born to mothers who smoked while pregnant are more likely to be low birth weight infants (weighing less than 2,500 grams), and may experience lifelong health problems. In addition to this, babies born to women who smoked during pregnancy have about 30% 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). In 2013, when Alabama mothers were asked if they had smoked any cigarettes in the past two years, 29.3 percent answered "Yes".

95% Confidence Intervals				
Smoking Status	Smoked	Did Not Smoke		
Percent	26.1-32.7	67.3-73.9		

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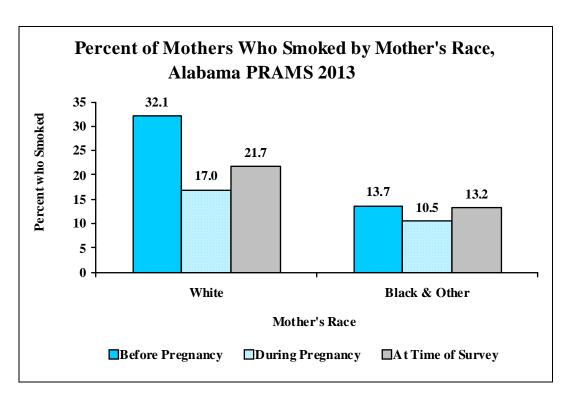
¹ The Centers for Disease Control and Prevention (CDC). Preventing Smoking and Exposure to Secondhand Smoke Before, During, and After Pregnancy. http://www.cdc.gov/nccdphp/publications/factsheets/prevention/pdf/smoking.pdf.



(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 2013, although 14.9 percent of Alabama mothers continued to smoke while pregnant. From 2012 to 2013, the increases in smoking seen during the two time periods (before and during) were not statistically significant.

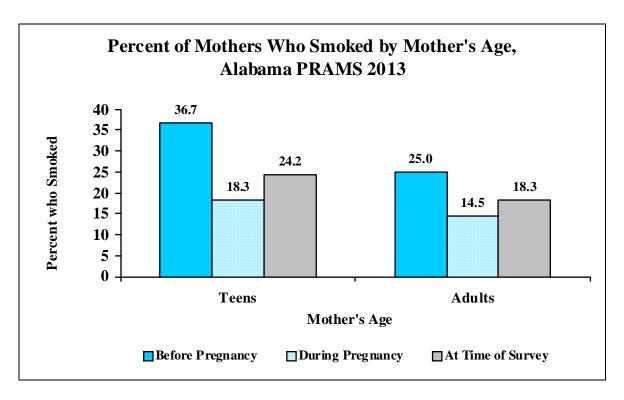
	95% Confidence Intervals									
Year/ Smoked	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Before Pregnancy	23.1-29.3	28.2-34.8	24.3-30.5	22.2-28.4	23.5-29.9	23.1-29.5	25.7-32.4	25.0-31.0	22.0-29.7	23.1-29.4
During Pregnancy	15.0-20.3	16.0-21.5	13.1-18.1	11.3-16.1	13.2-18.4	13.3-18.7	13.4-18.8	10.1-14.7	9.1-15.0	12.5-17.7
At Time of Survey	19.7-25.6	22.2-28.4	20.0-25.9	16.5-22.1	18.0-23.9	17.2-23.0	19.3-25.4	16.2-21.4	15.8-22.8	16.2-22.0



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

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

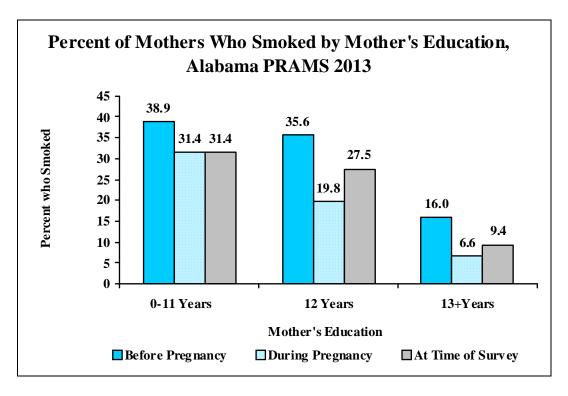
95 % Confidence Intervals					
Smoked/Race:	Before Pregnancy	During Pregnancy	At Time of Survey		
White	28.3-36.1	14.1-20.4	18.4-25.4		
Black and Other	9.3-19.6	6.7-16.0	8.9-19.1		



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

In 2013, teen and adult mothers followed the same pattern - decreasing smoking during pregnancy and increasing 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	25.9-48.9	10.7-29.7	15.3-36.1		
Adults	21.8-28.4	12.0-17.4	15.5-21.5		



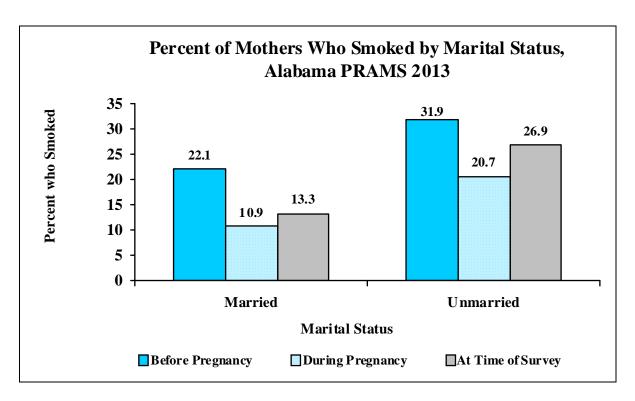
(Questions 40, 41, & 42 of the PRAMS Survey)

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

In 2013, 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+ 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.

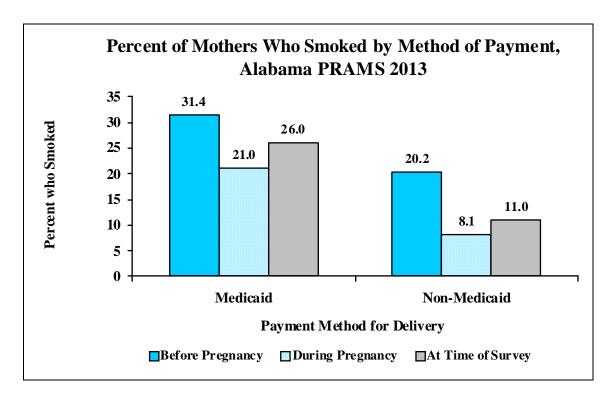
95 % Confidence Intervals					
Smoked/ Education:	Before Pregnancy	During Pregnancy	At Time of Survey		
0-11 Years	29.9-48.7	23.1-41.1	23.1-41.1		
12 Years	29.6-42.2	15.1-25.6	22.0-33.8		
13+ Years	12.8-19.8	4.6- 9.5	6.9-12.7		



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

In 2013, 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 50.7 percent, which was a statistically significant decrease. Unmarried women decreased smoking while pregnant by 35.1 percent, which was also statistically significant.

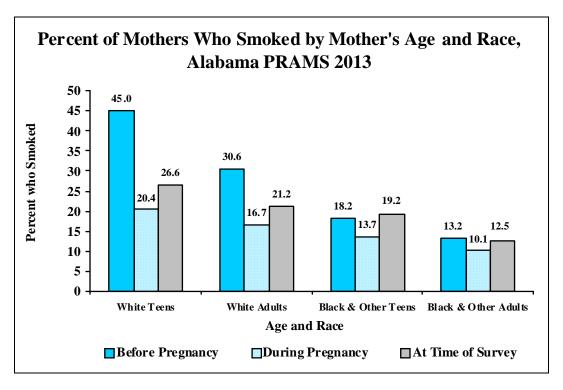
95 % Confidence Intervals					
Smoked/ Marital Status: Before Pregnancy During Pregnancy At Time of Sur					
Married	18.6-26.1	8.4-14.0	10.6-16.7		
Unmarried	26.5-37.8	16.2-26.1	21.9-32.7		



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

In 2013, cigarette smoking was significantly higher among mothers on Medicaid before, during and after their pregnancies than non-Medicaid mothers. The decreases in smoking from before pregnancy and during pregnancy among Medicaid and non-Medicaid mothers were statistically significant.

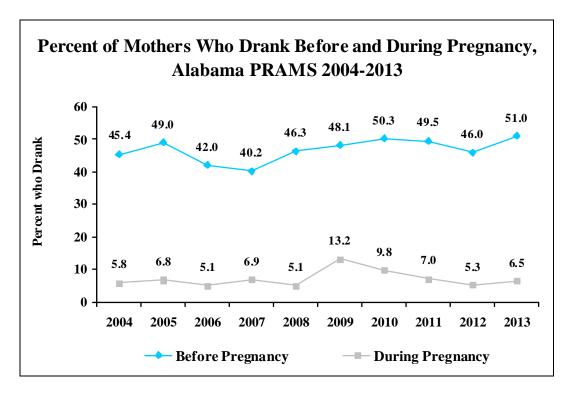
95 % Confidence Intervals					
Smoked/ Payment Method:	Before Pregnancy	During Pregnancy	At Time of Survey		
Medicaid	26.7-36.5	17.1-25.7	21.6-30.9		
Non-Medicaid	16.5-24.5	5.7-11.3	8.2-14.6		



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

In 2013, 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 teen mothers and white adults during pregnancy was statistically significant.

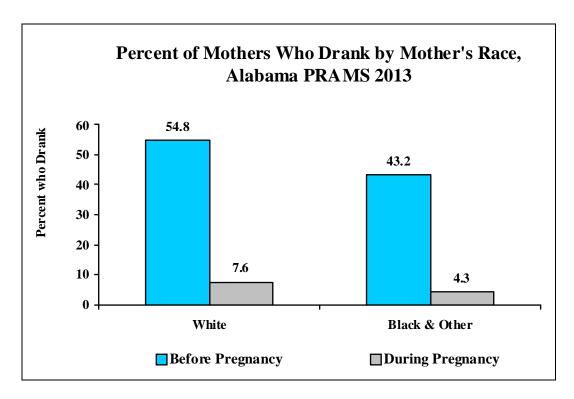
95 % Confidence Intervals			
Smoked/ Race and Age:	Before Pregnancy	During Pregnancy	At Time of Survey
White Teens	31.8-58.9	11.4-33.9	16.1-40.5
White Adults	26.8-34.8	13.6-20.2	17.8-25.0
Black & Other Teens	5.9-44.1	3.5- 41.0	6.4-45.2
Black & Other Adults	8.8-19.4	6.3-15.9	8.2-18.6



(Questions 45 and 46 of the PRAMS Survey)

From 2012 to 2013, there was an increase of 10.9 percent in drinking *before* becoming pregnant and an increase of 22.6 percent in drinking *during* the last three months of pregnancy reported by Alabama mothers. From 2004-2013, Alabama women did significantly decrease drinking during their pregnancies from their levels of drinking before pregnancy.

	95% Confidence Intervals											
Year/ Drank	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
Before Pregnancy	41.8-49.0	45.4-52.6	38.6-45.6	36.7-43.7	42.6-49.9	44.4-51.8	46.6-54.0	46.2-52.9	41.7-50.4	47.5-54.6		
During Pregnancy	4.3-7.7	5.2-8.8	3.8-6.9	5.3-9.0	3.8-7.0	10.9-15.9	7.8-12.3	5.5-9.0	3.6-7.7	5.0-8.5		

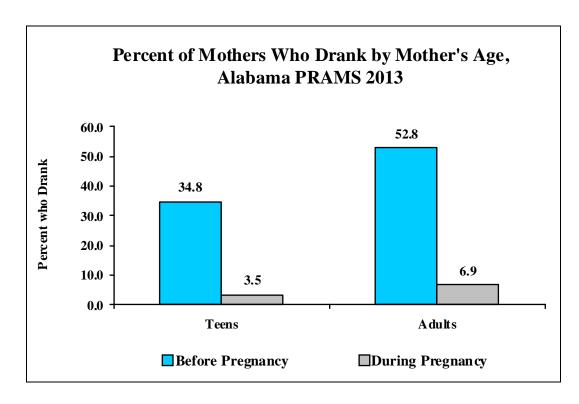


(Questions 45 and 46 of the PRAMS Survey)

In 2013, 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.

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

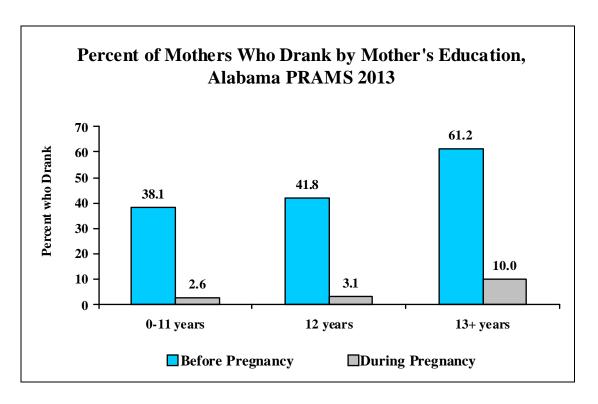
95% Confidence Intervals								
Drank /Race	Before Pregnancy	During Pregnancy						
White	50.6-58.9	5.7-10.1						
Black and Other	36.3-50.3	2.2-8.2						



(Questions 45 and 46 of the PRAMS Survey)

As expected, a higher percentage of adult mothers reported consuming alcohol than teenage mothers. In 2013, 34.8 percent of teenage mothers reported using alcohol before becoming pregnant, and 3.5 percent reported drinking during their pregnancies, despite being underage. In both populations, drinking significantly declined during the last three months of their pregnancies.

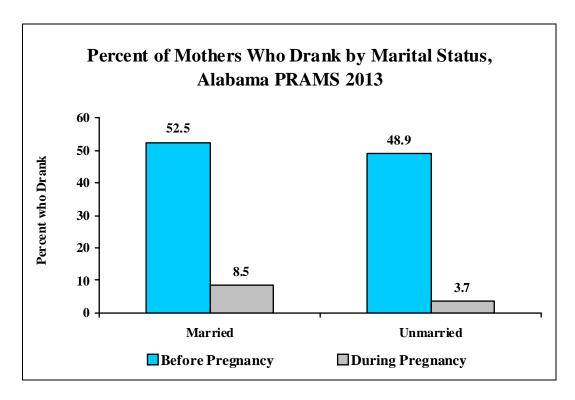
	95% Confidence Intervals							
Drank / Mother's Age	Before Pregnancy	During Pregnancy						
Teens	24.2-47.1	0.9-13.2						
Adults	49.1-56.6	5.3-8.9						



(Questions 44 and 45 of the PRAMS Survey)

In 2013, 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.

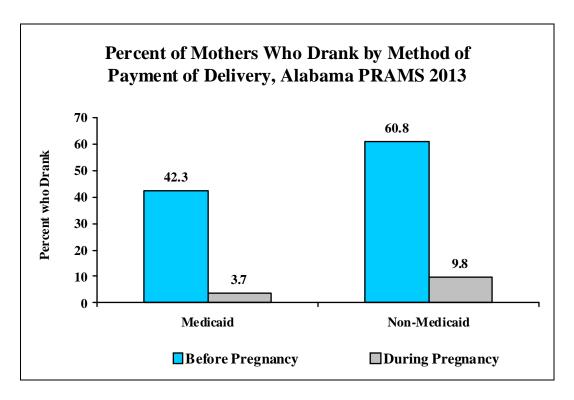
95% Confidence Intervals								
Drank/Education	Before Pregnancy	During Pregnancy						
0-11 years	29.1-48.0	0.9-7.8						
12 years	35.5-48.4	1.5-6.4						
13+ years	56.4-65.8	7.5-13.3						



(Questions 44 and 45 of the PRAMS Survey)

In 2013, 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.

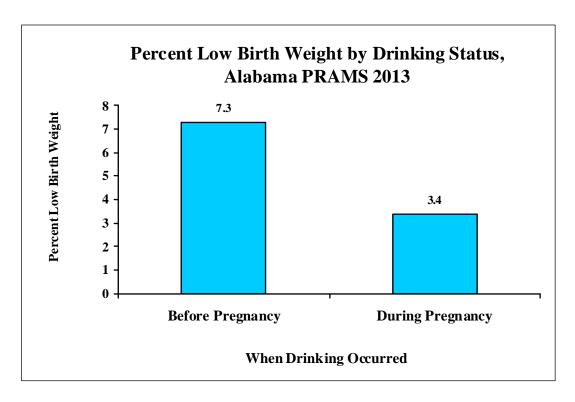
95 % Confidence Intervals								
Drank/Marital Status Before Pregnancy During Pregnancy								
Married	48.1-56.9	6.4-11.3						
Unmarried	42.8-55.0	2.0-6.9						



(Questions 44 and 45 of the PRAMS Survey)

In Alabama in 2013, 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	37.2-47.6	2.1-6.3					
Non-Medicaid	55.9-65.6	7.2-13.0					



(Questions 45 and 46 of the PRAMS Survey)

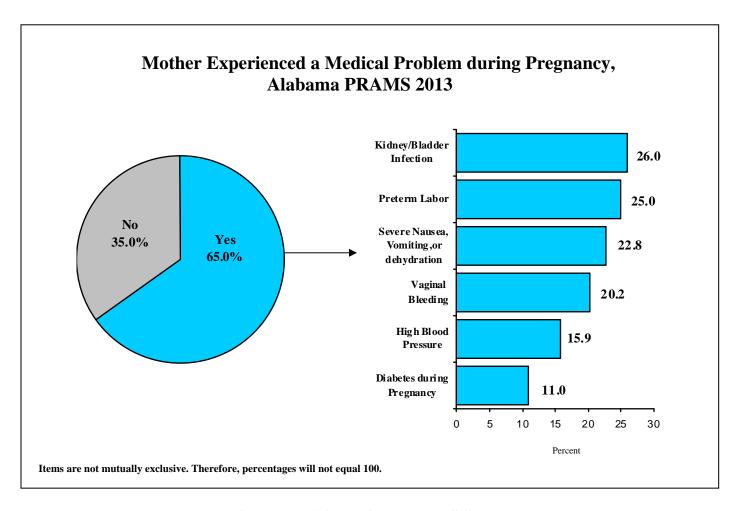
In 2013, 7.3 percent of women who drank before pregnancy had a low weight infant. Among women who drank while pregnant, 3.4 percent delivered a low weight infant. There is no statistically significant difference in the percentage of low weight births to mothers who drank before pregnancy or during pregnancy.

95% Confidence Intervals							
Drank	Before Pregnancy	During Pregnancy					
Percent LBW	5.1-10.4	0.9-12.6					

Mothers' Comments on Negative Health Behaviors

- "Please do not smoke or drink while you are pregnant."
- "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."

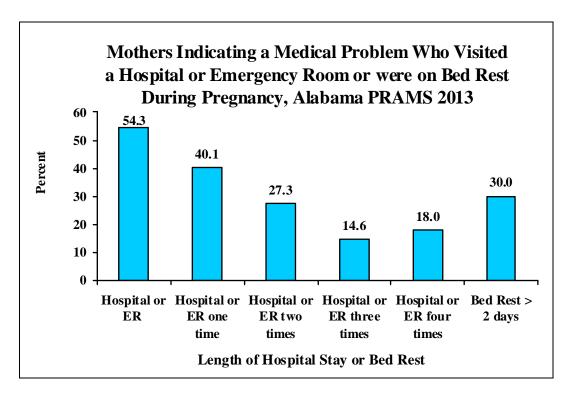
HEALTH CARE SYSTEM ISSUES



(Question 34 & 35 of the PRAMS Survey)

In 2013, 65.0 percent of Alabama mothers reported having a medical problem during their pregnancy. Of those, 22.8 percent reported having severe nausea, vomiting, and/or dehydration. About one in four mothers reported experiencing preterm labor or a kidney/bladder infection. 20.2 percent of mothers reported vaginal bleeding, while 15.9 percent of mothers reported having high blood pressure. In addition,11.0 percent of mothers developed gestational diabetes.

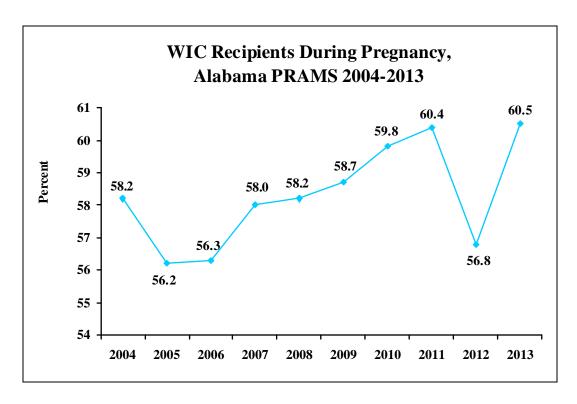
	95% Confidence Intervals										
Problems	Yes No		Yes No Nausea, vomiting, Preterm Bl.		Kidney/ Bladder infection	Vaginal Bleeding	НВР	Diabetes During Preg.			
Percent	61.5-68.3	31.7-38.5	19.9-26.1	21.9-28.2	22.9-29.3	17.4-23.3	13.3-18.7	8.9-13.6			



(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, 54.3 percent of mothers visited a hospital at least once; 40.1 percent of these visited one time; 27.3 percent went to hospital two times; and 30.0 percent stayed in bed for more than two days at a doctor's or nurse's advice.

95% Confidence Intervals									
Times of went to Hospital/ER or Bed Rest Hospital/ER Hospital/ER 1 time Hospital/ER 2 times Hospital/ER Hospital/ER 4 times Bed Res 2 days									
Percent	49.7-58.8	34.3-46.2	22.2-33.1	10.8-19.5	13.7-23.3	26.0-34.5			



(Questions 32 of the PRAMS Survey)

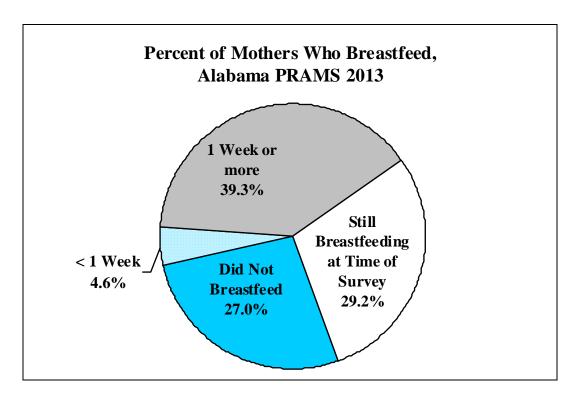
WIC, the Special Supplemental Nutrition Program for Women, Infants, and Children, is one of the nation's most successful nutrition programs, providing proper nutrition to pregnant women, breastfeeding women, women who had a baby within the last six months, infants, and children under the age of five, and who meet eligibility guidelines. In 2013, 60.5 percent of Alabama mothers received WIC benefits.

	95% Confidence Intervals										
Year	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
Percent	55.5-60.9	53.5-58.8	53.6-58.9	55.2-60.8	55.3-61.0	55.8-61.5	57.0-62.5	58.1-62.7	53.3-60.2	57.8-63.2	

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."

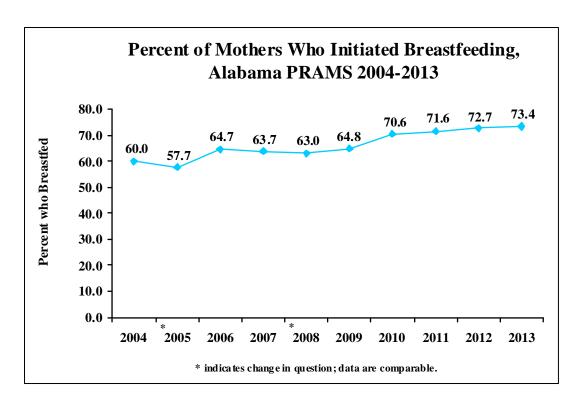
BREASTFEEDING



(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 Alabama in 2013, 27.0 percent of mothers did not attempt to breastfeed their babies. Only 29.2 percent Alabama mothers were still breastfeeding their infants at the time of the survey, two to four months after delivery.

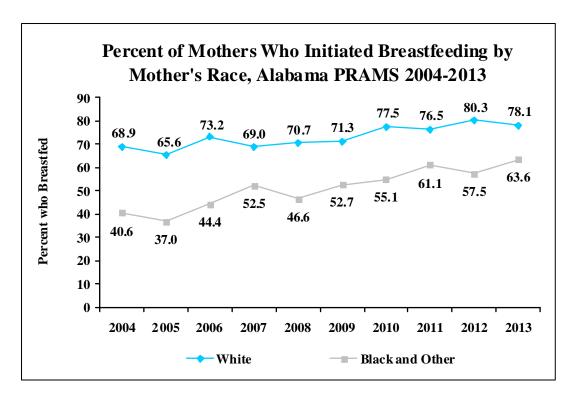
95% Confidence Intervals									
Time Breastfed	Did Not Breastfeed	<1 week	1 week or more	Still Breastfeeding					
Percent	23.8-30.4	3.2-6.5	35.7-42.9	26.2-32.4					



(Question 62 of the PRAMS Survey)

From 2004-2013, 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 mother who initiates breastfeeding to 81.9 percent. In 2013, 73.4 percent of mothers reported they initiated breastfeeding. Comparing 2004 and 2013 data, there has been a statistically significant increase of 22.3 percent in mothers who initiated breastfeeding.

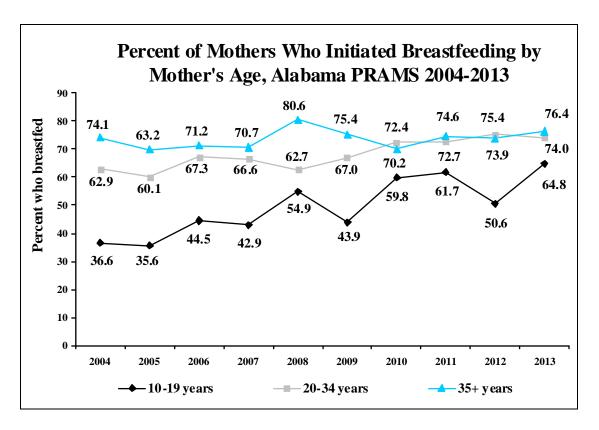
	95% Confidence Intervals										
Year	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
% Breastfeeding	56.5-63.4	54.2-61.1	61.3-67.9	60.3-67.0	59.4-66.4	61.2-68.3	67.1-73.9	68.4-74.5	68.5-76.6	70.0-76.5	



(Question 62 of the PRAMS Survey)

From 2004 to 2013, there has been a statistically significant increase in breastfeeding in both racial groups. The prevalence of breastfeeding has been consistently higher among white women than among black and other race women. The percentage of black and other race moms who breastfeed is increased 10.6 percent from 2012 to 2013 while the percentage of white moms who breastfeed decreased 2.7 percent from 2012 to 2013.

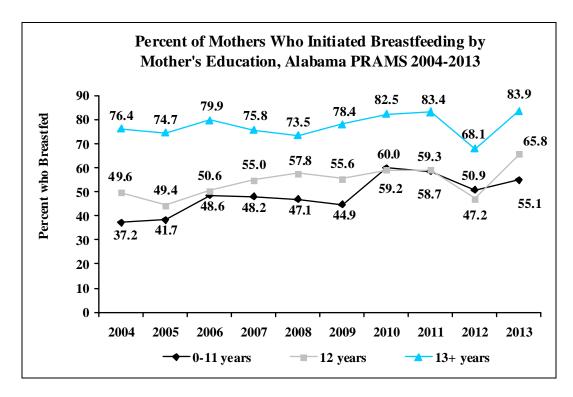
	95% Confidence Intervals									
Year/ Race	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
White	64.8-72.8	61.5-69.4	69.3-76.8	64.9-72.8	66.6-74.4	67.2-75.1	73.6-80.9	72.9-79.7	76.0-83.9	74.4-81.4
Black and Other	34.3-47.2	30.7-43.9	38.1-51.0	46.1-58.9	39.7-53.6	45.9-59.4	48.0-61.9	54.6-67.2	48.5-65.9	56.5-70.2



(Question 62 of the PRAMS Survey)

During the period from 2004 through 2013, the percentage of women initiating breastfeeding increased in all three age groups. When examining each group, the oldest mothers, 35 plus years, had the highest percentage of breastfeeding while teenage mothers have the lowest percentage. From 2012 to 2013, the percentage of teenage mothers who initiated breastfeeding increased 28.1 percent.

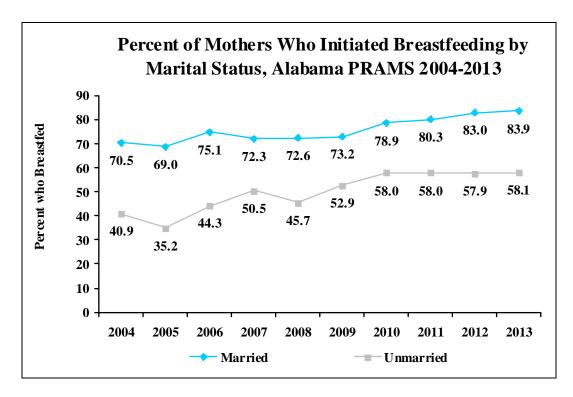
	95% Confidence Intervals										
Year/ Age	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
10-19	28.1-45.9	27.0-45.2	35.0-54.4	32.8-53.7	44.4-64.9	33.4-55.0	49.2-69.6	51.3-71.2	36.1-64.9	52.2-75.5	
20-34	58.8-66.8	56.1-64.0	63.4-70.9	62.7-70.2	58.7-66.6	62.9-70.8	68.5-76.0	69.0-76.0	70.8-79.5	70.1-77.5	
35+	62.1-83.3	58.0-79.4	60.5-80.0	59.9-79.6	67.5-89.3	63.9-84.1	58.0-80.0	65.2-82.2	59.2-84.6	66.9-83.8	



(Question 62 of the PRAMS Survey)

In Alabama, breastfeeding prevalence is highest among women with 13 or more years of education. Comparing percentages from 2012 to percentages in 2013, there is a statistically significant increase in 13+ year education group.

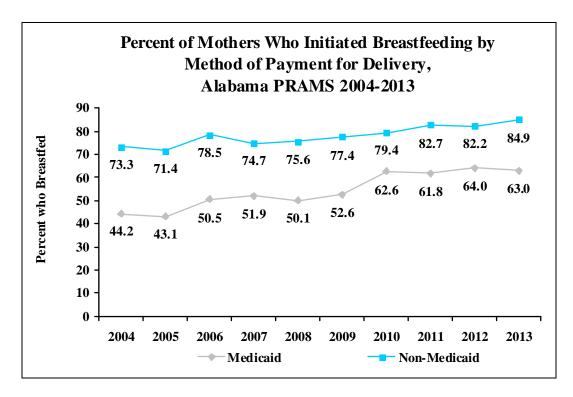
	95% Confidence Intervals										
Year/ Edu.	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
0-11 yrs.	29.6-45.6	30.8-46.6	40.7-56.5	39.4-57.2	38.5-55.8	36.3-53.9	51.2-68.1	50.2-66.7	27.0-74.3	45.2-64.6	
12 yrs.	43.0-56.2	38.2-50.9	43.7-57.4	48.3-61.5	50.9-64.4	48.7-62.2	52.5-65.6	52.8-65.5	34.1-60.7	59.1-72.0	
13+ yrs.	71.7-80.5	69.9-79.0	75.7-83.6	71.5-79.6	68.8-77.7	73.8-82.4	78.1-86.2	79.7-86.6	59.8-75.4	80.0-87.2	



(Question 62 of the PRAMS Survey)

Comparing 2004 levels to 2013 levels, there have been statistically significant increases in breastfeeding initiation in both married and unmarried women. Over the past 10 years, the percentage of mothers who initiated breastfeeding has been significantly higher among married mothers compared to unmarried mothers. Factors affecting this trend include that married mothers may be older and have a higher educational attainment than their unmarried counterparts.

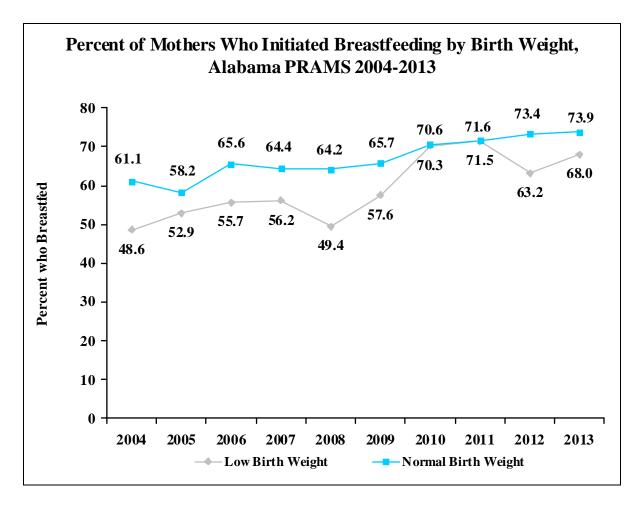
	95% Confidence Intervals										
Year/ Married Status	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
Married	66.2-74.4	64.8-73.0	71.1-78.6	68.4-75.9	68.4-76.5	68.9-77.2	74.8-82.5	76.7-83.5	78.6-86.7	80.3-87.0	
Unmarried	34.9-47.2	29.5-41.4	38.2-50.6	44.3-56.6	39.4-52.2	46.7-59.1	51.9-63.9	52.2-63.6	50.2-65.3	51.9-64.1	



(Question 62 of the PRAMS Survey)

From 2004 through 2013 in Alabama, women whose delivery was not paid for by Medicaid were significantly more likely to breastfeed their infants than women whose delivery was covered by Medicaid. When comparing percentages in 2004 to 2013, both the Medicaid and Non-Medicaid groups have significantly increased in the percentage of women who initiated breastfeeding their infants.

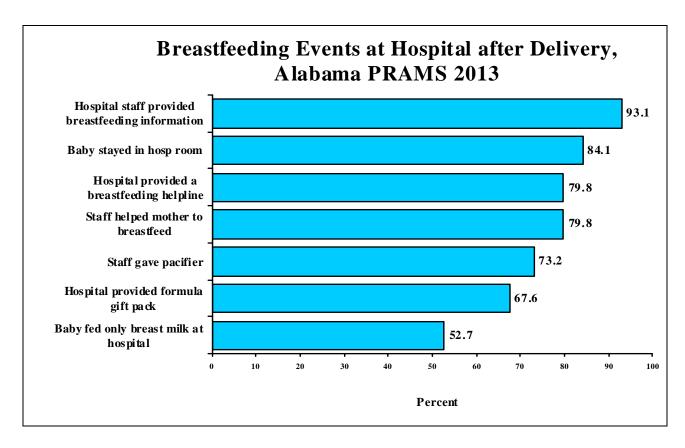
	95% Confidence Intervals										
Year/ Payment	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
Medicaid	39.2-49.3	38.1-48.2	45.5-55.5	46.7-57.1	44.6-55.5	47.2-57.9	57.4-67.5	56.9-66.5	57.3-70.2	57.7-68.1	
Non- Medicaid	68.4-77.7	66.5-75.9	73.9-82.5	70.3-78.7	70.9-79.7	72.6-81.6	74.6-83.5	78.8-86.0	77.2-86.3	80.9-88.2	



(Question 62 of the PRAMS Survey)

Of babies born in 2013 at a normal birth weight, 73.9 percent were breastfed. Of low birth weight babies (weighing less than 2,500 grams), 68.0 percent were breastfed. Comparing 2004 percentages with 2013 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	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
LBW	44.8-52.5	48.8-57.0	51.6-59.7	43.6-68.1	36.6-62.2	45.6-68.8	57.4-80.6	59.9-80.8	43.6-79.2	54.5-79.0	
NBW	57.3-64.8	54.3-61.9	61.9-69.1	60.8-67.8	60.5-67.8	61.9-69.3	67.0-74.0	68.3-74.7	69.1-77.3	70.3-77.1	



(Question 67 of the PRAMS Survey)

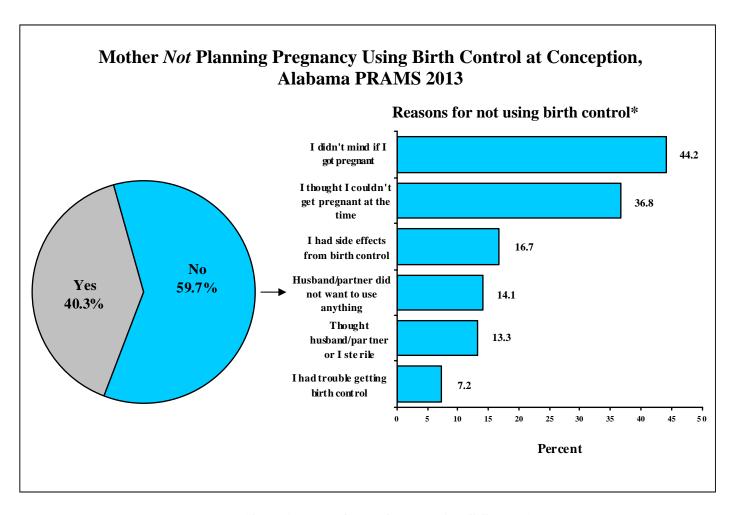
In 2013, 79.8 percent of mothers reported they received direct help from hospital staff in learning how to breastfeed their babies and 93.1 percent reported that the hospital provided them information on breastfeeding. Only 52.7 percent reported that their infants received breast milk exclusively while in the hospital, and 67.6 percent were given a formula gift pack to take home upon discharge.

95% Confidence Intervals									
Events	Events Given Gift Pack Breastfeeding information Room Baby used Pacifier Breastfeeding Helpline Fed only breast Helpline Helped Fed only breast milk in hospital								
Percent 63.6-71.4 90.7-95.0 80.7-86.9 69.4-76.7 75.9-82.7 76.2-83.0 48.6-56.8									

Mother's Comments on Breastfeeding

- "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



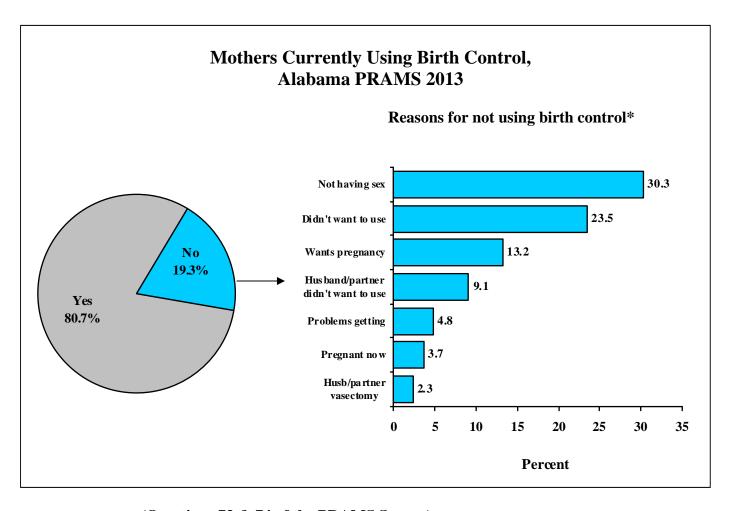
(Questions 15 & 16 of the PRAMS Survey)

* Items are not mutually exclusive.

In 2013, 44.2 percent of Alabama mothers *who did not want a pregnancy* answered "no" to using any kind of birth control to prevent it. A Healthy People 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	35.8-44.9	55.1-64.2	38.4-50.2	30.9-43.1	10.2-19.2	12.4-22.0	4.5-11.4	9.5-18.5			

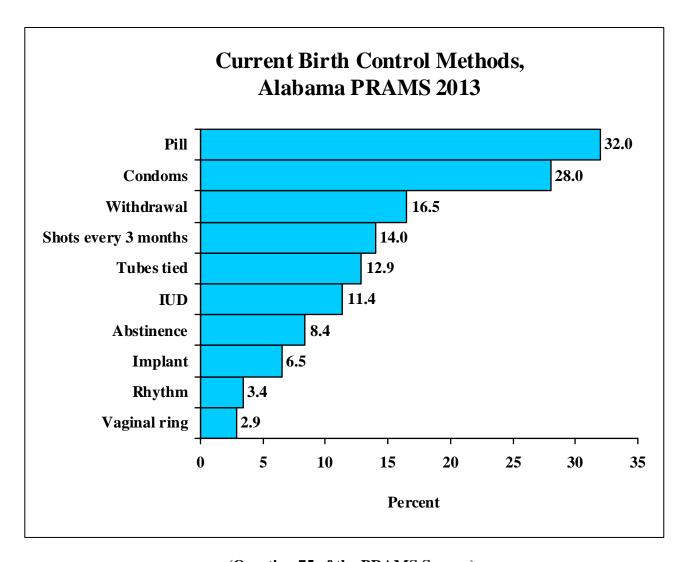


(Questions 73 & 74 of the PRAMS Survey) *Items are not mutually exclusive.

There is 80.7 percent of Alabama mothers in 2013 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, 30.3 percent reported they were not having sex, 23.5 percent of the women said they did not want to use anything, 13.2 percent want to get pregnant, and 9.1 percent reported their spouse or partner did not want to use any contraception. 3.7 percent reported that they were already pregnant again.

95% Confidence Intervals									
Birth Control Yes No Didn't want to use anything Not having sex Wants a pregnancy									
Percent	77.6-83.4	16.6-22.4	17.5-30.8	23.4-38.1	8.5-19.8				

95% Confidence Intervals								
Birth Control	Husband/partner didn't want to use	Pregnant now	Problems getting	Husb/partner vasectomy				
Percent	5.6-14.6	1.5-8.7	2.3-9.9	0.9-6.0				



(Question 75 of the PRAMS Survey)

In 2013, 28.0 percent of women reported condom usage as the preferred method of contraception. 32.0 percent reported they were taking the pill. 16.5 percent of women reported withdrawal as their birth control method.

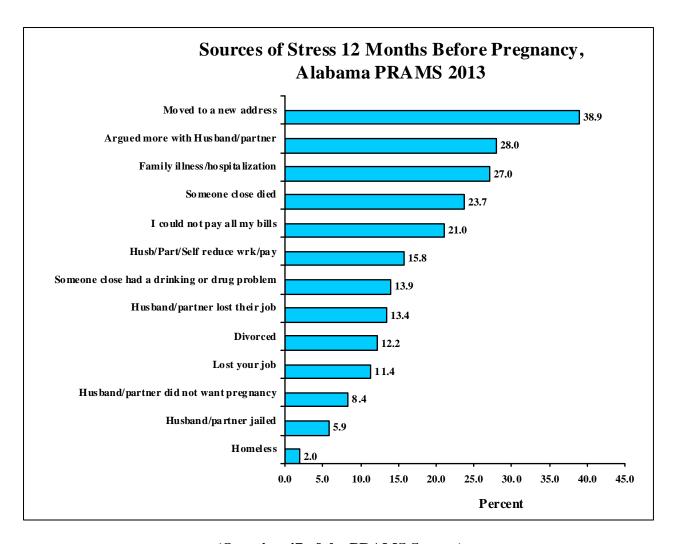
95% Confidence Intervals								
Method of Birth Control Condoms Pill Tubes tied								
Percent 24.5-31.7 28.4-35.8 10.4-15.8								

95% Confidence Intervals								
Method of Birth Control Withdrawal Shots every 3 mos. Abstinence								
Percent	13.7-19.7	11.3-17.2	6.4-11.0					

Mother's Comments on Birth Control

- "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

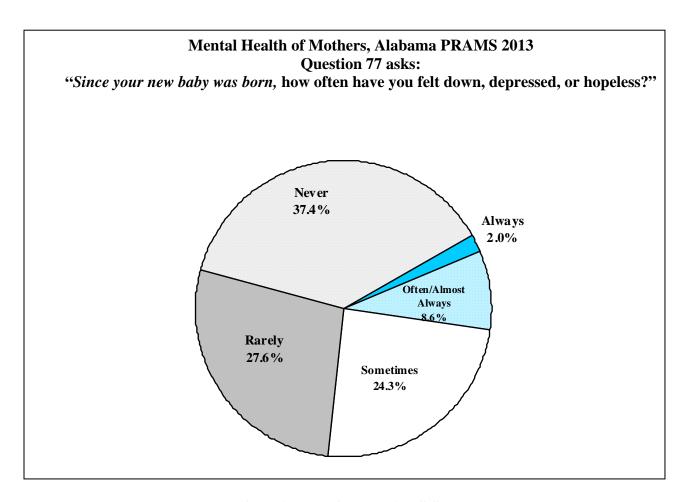


(Question 47 of the PRAMS Survey)

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, 38.9 percent of Alabama mothers reported they had moved to a new address, 28.0 percent reported they argued more with their husband/partner, 27.0 percent had a family illness or hospitalization, and 21.0 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	35.4-42.5	24.8-31.4	23.9-30.4	18.2-24.1	20.7-27.0	11.5-16.6

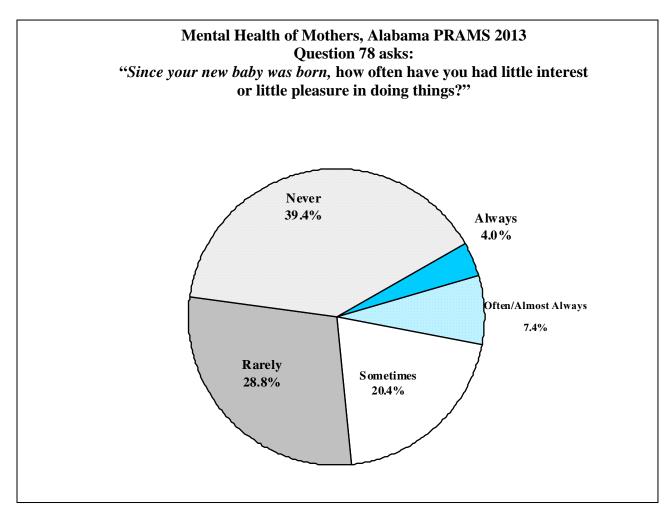
	95% Confidence Intervals								
Source of Stress	Divorced	Lost Job	Husband/partner lost their job	Husb/partner did not want preg.	Husb/Part/Self reduce wrk/pay	Husb/partner jailed	Homeless		
Percent	9.9-14.9	9.3-14.0	11.1-16.1	6.6-10.6	13.4-18.6	4.3-7.9	1.1-3.4		



(Question 77 of the PRAMS Survey)

In 2013, 10.6 percent of Alabama mothers reported they always or almost always felt down, depressed, or hopeless since the birth of their baby. About 51.9 percent reported feeling this way sometimes and on rare occasions.

	95% Confidence Intervals						
Depression	Never	Always	Often/Almost Always	Sometimes	Rarely		
Percent	34.0-41.0	1.2-3.4	6.7-10.9	21.3-27.6	24.7-30.8		

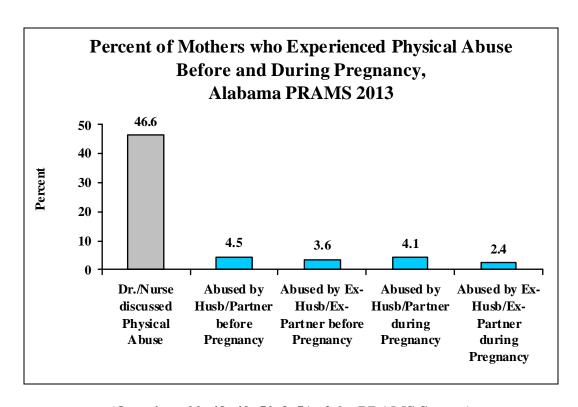


(Question 78 of the PRAMS Survey)

In 2013, When Alabama mothers were asked felt no interest or no pleasure in doing things, 11.4 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 within hours to a few weeks after giving birth (called Baby Blues). However in some women, these feelings and mood swings do not disappear in a few weeks, but instead intensify and may last up to a year after giving birth. This type of depression is called postpartum depression. This more serious form of depression requires medication and possibly counseling to deal with symptoms.

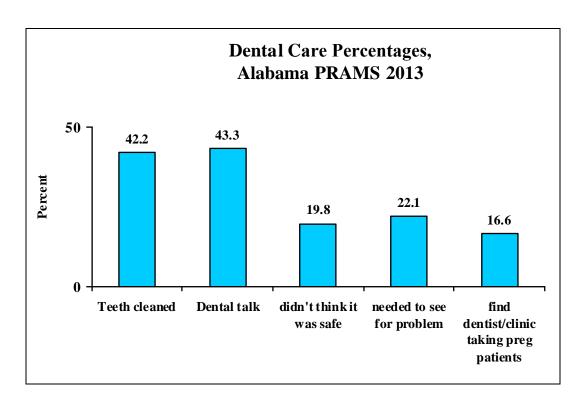
	95% Confidence Intervals						
Depression Never Always Often/Almost Always Sometimes Rarely					Rarely		
Percent	35.9-43.0	2.8-5.8	5.7-9.7	17.5-23.5	25.7-32.2		



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

In 2013, 4.5 percent of Alabama mothers reported physical abuse by their *current* husband/partner and 3.6 percent mothers reported abuse by a *former* husband/partner twelve months before becoming pregnant. The abuse decreased **during pregnancy** by 8.9 percent by *current* spouse/partner and 33.3 percent by *former* husband/partner. All of the decreases in abuse reported **during pregnancy** are not statistically significant.

	95% Confidence Intervals						
Physical Abuse	Abuse Discussed At Prenatal Visits	Abused by Current Husb/partner 12 mos. Before pregnancy	Abused by Former Husb/partner 12 mos. Before pregnancy		Abused by Former Husb/partner <u>During</u> pregnancy		
Percent	43.0-50.2	3.1-6.4	2.4-5.3	2.9-6.0	1.4-4.0		

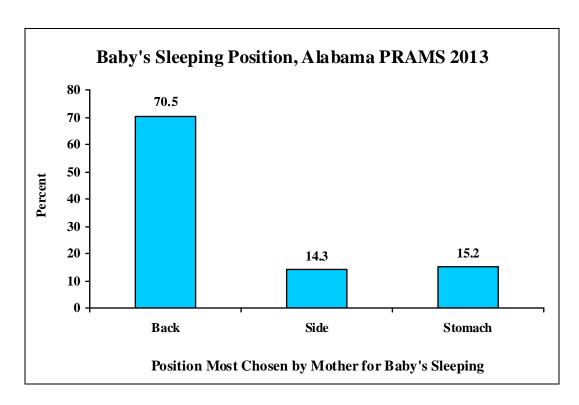


(Question 29 & 82 of the PRAMS Survey)

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 2013, 42.2 percent of Alabama mothers got teeth cleaning during pregnancy, 19.8 percent reported they didn't think teeth clean was safe. If following the recommended guidelines for good dental health, all mothers should have visited the dentist at least once during their pregnancy for a checkup and cleaning.

95 % Confidence Intervals						
About Teeth clean	Teeth cleaned	Dental talk	Didn't think it was safe	Needed to see for problem	Find dentist/clinic taking pregnant patients	
Percent	38.8-45.6	39.8-47.0	14.6-26.3	19.2-25.3	11.6-23.2	



(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, at 70.5 percent, was below this objective. In 2013 in Alabama, 29.5 percent of mothers reported placing their babies *most often* on their side or stomach for sleeping.

95% Confidence Intervals						
Sleep Position	Stomach					
Percent	67.0-73.9	11.8-17.1	12.6-18.2			

Mother's Comments on Miscellaneous Topics

- "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, <u>Mail and Telephone Surveys</u>: <u>The Total Design Method</u>. Great care was used in designing the questions and in making them as non-threatening as possible to the respondent. All questions were worded so that a person with a ninth grade reading level should be able to easily comprehend them.

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

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

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

The survey has gone through four revisions, or phases, since Alabama began using the PRAMS survey: 1993 to 1995 data were gathered in the Phase 2 survey; 1996 to 1999 data were gathered from the Phase 3 survey; and in 2000, the Phase 4 survey began. In 2002, a slight revision was made to Phase 4. In 2004, the Phase 5 survey was implemented. The phase 6 survey was implemented in 2009. From 2012, we began to use Phase 7 survey book.

Weighting

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

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

^{*}For 2013, there was no adjustment for noncoverage.

Calculation of Confidence Intervals

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

Limitations

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

The Sample

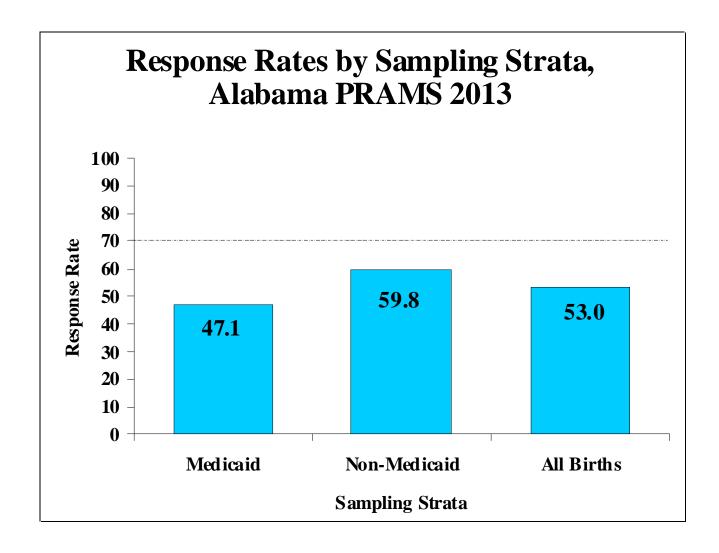
Each month approximately 110 women who have given birth two to four months before the sampling date are selected for the sample. The survey is divided into two strata: Medicaid and non-Medicaid normal birth weight. Women in each of these strata have a different probability of being chosen. Samples are selected so that roughly equal numbers of women are chosen from each strata. The odds of being selected in 2013 were approximately as follows:

Medicaid 1:38 Non-Medicaid 1:39

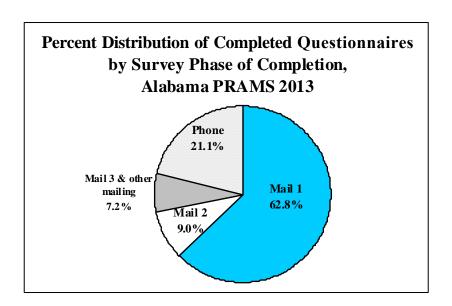
Selection probabilities are adjusted annually to take into account the changes in the distribution of births over time and the response rates of mothers in each strata. The goal is to obtain at least 400 completed questionnaires from each strata.

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

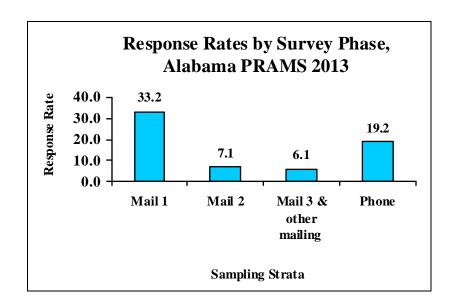
Response Rates



As a rule of thumb, CDC requires at least 400 completed questionnaires and a response rate of 65 percent in each stratum. In 2013, the response rates for the Medicaid strata was <u>below</u> 65 percent with the higher rate of 59.8 percent among non-Medicaid births and the lower rate of 47.1 percent for Medicaid births. The overall response rate for the two strata was 53.0 percent. Because the CDC requires an overall weighted response rate of 65 percent to insure data is of the highest quality, caution should be used in interpreting data reported from 2013.



The majority of completed surveys, 62.8 percent, were received as a result of the initial mailing or mail 1. The mail 2 accounted for 9.0 percent of completed questionnaires, and mail 3 and other mailing accounted for 7.2 percent. Of the total number of completed surveys, 21.1 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, 33.2 percent responded. The second mailing had a 7.1 percent response rate. The response rate for the third and other mailing was 6.1 percent in 2013, and the response rate for the phone phase was 19.2 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

The first questions are about <i>you</i> .	
1.	How tall are you without shoes?
	Feet Inches
	OR Centimeters
2.	Just before you got pregnant with your new baby, how much did you weigh?
	Pounds OR Kilos
3.	What is <u>your</u> date of birth?
	Month Day Year
4.	Before you got pregnant with your new baby, did you ever have any other babies who were born alive?
Ţ	□ 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> at birth?

□ No
□ Yes

6.	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	
b	he next questions are about the time efore you got pregnant with your new aby.	
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.	
a. b. c. d. e. f.	I was dieting (changing my eating habits) to lose weight	

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 job of my husband, partner, or parents	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.	
	 □ Private health insurance purchased directly from an insurance company □ Medicaid □ Some other kind of health insurance → Please tell us:	a. Type 1 or Type 2 diabetes (NOT the same as gestational diabetes or diabetes that starts during pregnancy)	
9.	☐ I did not have any health insurance during the <i>month before</i> I got pregnant During the <i>month before</i> you got pregnant	The next questions are about the time when you got pregnant with your new baby.	
	with your new baby, how many times a week did you take a multivitamin, a		
	prenatal vitamin, or a folic acid vitamin? I didn't take a multivitamin, prenatal vitamin, or folic acid vitamin in the month	12. Thinking back to <i>just before</i> you got pregnant with your new baby, how did you feel about becoming pregnant?	
	before I got pregnant ☐ 1 to 3 times a week ☐ 4 to 6 times a week ☐ Every day of the week	☐ 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 ☐ Go to	
10.	Before 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 Question 14	
	□ No □ Yes	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	

14. When you got pregnant with your new	DURING PREGNANCY
baby, were you trying to get pregnant? No Yes Go to Question 17 15. When you got pregnant with your new baby, were you or your husband or partner doing anything to keep from getting pregnant? Some things people do to keep from getting pregnant include using birth	The next questions are about the prenatal care you received during your most recent pregnancy. Prenatal care includes visits to a doctor, nurse, or other health care worker before your baby was born to get checkups and advice about pregnancy. (It may help to look at the calendar when you answer these questions.)
control pills, condoms, withdrawal, or natural family planning. No Yes Go to Question 17	17. How many weeks or months pregnant were you when you were sure you were pregnant? For example, you had a pregnancy test or a doctor or nurse said you were pregnant.
16. What were your reasons or your husband's or partner's reasons for not doing anything to keep from getting pregnant? Check ALL that apply	— Weeks OR — Months □ I don't remember
□ I didn't mind if I got pregnant □ I thought I could not get pregnant at that time □ I had side effects from the birth control method I was using □ I had problems getting birth control when I needed it □ I thought my husband or partner or I was sterile (could not get pregnant at all) □ My husband or partner didn't want to use anything □ I forgot to use a birth control method □ Other → Please tell us:	18. How many weeks or months pregnant were you when you had your first visit for prenatal care? Do not count a visit that was only for a pregnancy test or only for WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children). Weeks OR

20. 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	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
I wanted one	No Yes a. How much weight I should gain during my pregnancy
21. During your most recent pregnancy, what kind of health insurance did you have to pay for your prenatal care? 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	 k. What to do if I feel depressed during my pregnancy or after my baby is born
health insurance → Please tell us: ☐ I did not have any health insurance to pay for my prenatal care	☐ Yes☐ I don't know

24. Have you ever heard or read that taking a vitamin with folic acid can help prevent some birth defects?	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.
☐ No ☐ Yes	No Yes a. I knew it was important to care for
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?	my teeth and gums during my pregnancy
□ No □ Yes	c. I had my teeth cleaned by a dentist or dental hygienist
26. During the 12 months <i>before the delivery</i> of your new baby, did you <i>get</i> a flu shot?	during my pregnancy
Check ONE answer	a problem
No → Go to Question 28 Yes, before my pregnancy Yes during my pregnancy	f. I <u>went</u> to a dentist or dental clinic about a problem
Yes, during my pregnancy	If you did <u>not</u> have any problems with your teeth or gums during your pregnancy, go to
27. During what month and year did you get the flu shot?	Page 6, Question 30.
	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.
	a. I could not find a dentist or dental clinic that would take pregnant patients
	c. I did not think it was safe to go to the dentist during pregnancy

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?	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 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 Yes Go to Question 34 33. When you went for WIC visits during your most recent pregnancy, did you receive information on breastfeeding? No 	a. Vaginal bleeding
☐ Yes	If you did not have any of the problems listed
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)?	above, go to Question 39. 36. Did a doctor, nurse, or other health care worker tell you to stay home in bed for
□ No □ Yes	more than 2 days because of any of the problem(s) listed?
	□ No □ Yes

37. Did you go to the hospital or emergency room because of any of the problem(s) listed above?	41. In the <u>last 3</u> months of your pregnancy, how many cigarettes did you smoke on an average day? A pack has 20 cigarettes.	
□ No Go to Question 39 Yes 38. How many times did you go to the hospital or emergency room because of the problem(s)? □ 1 time	☐ 41 cigarettes or more ☐ 21 to 40 cigarettes ☐ 11 to 20 cigarettes ☐ 6 to 10 cigarettes ☐ 1 to 5 cigarettes ☐ Less than 1 cigarette ☐ I didn't smoke then	
☐ 2 times ☐ 3 times ☐ 4 or more times	42. How many cigarettes do you smoke on an average day now? A pack has 20 cigarettes.□ 41 cigarettes or more	
The next questions are about smoking cigarettes around the time of pregnancy (before, during, and after).	☐ 21 to 40 cigarettes ☐ 11 to 20 cigarettes ☐ 6 to 10 cigarettes ☐ 1 to 5 cigarettes	
39. Have you smoked any cigarettes in the <i>past</i> 2 years?	☐ Less than 1 cigarette☐ I don't smoke now	
 No Yes 40. In the 3 months before you got pregnant, how many cigarettes did you smoke on an average day? A pack has 20 cigarettes. □ 41 cigarettes or more □ 21 to 40 cigarettes □ 11 to 20 cigarettes □ 6 to 10 cigarettes □ 1 to 5 cigarettes □ Less than 1 cigarette □ I didn't smoke then 	43. Which of the following statements best describes the rules about smoking inside your home now, even if no one who lives i your home is a smoker? Check ONE answ No one is allowed to smoke anywhere inside my home Smoking is allowed in some rooms or at some times Smoking is permitted anywhere inside my home	

The next questions are about drinking alcohol around the time of pregnancy (before and during). 44. Have you had any alcoholic drinks in the	Pregnancy can be a difficult time for some women. The next questions are about things that may have happened before and during your most recent	
past 2 years? A drink is 1 glass of wine, wine cooler, can or bottle of beer, shot of liquor, or mixed drink. ☐ No ☐ Yes ☐ Go to Question 47 ☐ Yes ☐ Yes ☐ Go to Question 47 ☐ Yes ☐ Y	47. This question is about things that may have happened during the 12 months before your new baby was born. For each item, check No if it did not happen to you 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 pregnant, how many alcoholic drinks did you have in an average week? ☐ 14 drinks or more a week ☐ 7 to 13 drinks a week ☐ 4 to 6 drinks a week ☐ 1 to 3 drinks a week ☐ Less than 1 drink a week ☐ I didn't drink then	a. A close family member was very sick and had to go into the hospital	
46. During the last 3 months of your pregnancy, how many alcoholic drinks did you have in an average week? 14 drinks or more a week 7 to 13 drinks a week 1 to 3 drinks a week 1 to 3 drinks a week 1 Less than 1 drink a week 1 I didn't drink then	g. My husband, partner, or I had a cut in work hours or pay	

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?	53. When did you go into the hospital to have your baby?
	//_20
□ No	Month Day Year
☐ Yes	☐ I didn't have my baby in a hospital
49. During the 12 months before you got	54. When was your new baby born?
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?	Month Day Year
□ No	Month Day Year
☐ Yes	55. When were you discharged from the hospital after your baby was born?
50. During <i>your most recent</i> pregnancy, did your husband or partner push, hit, slap,	/ / 20
kick, choke, or physically hurt you in any	Month Day Year
other way?	☐ I didn't have my baby in a hospital
□ No □ Yes	
	56. By the end of <i>your most recent</i> pregnancy, how much weight had you gained?
During your most recent pregnancy, did an ex-husband or ex-partner push, hit, slap,	Check ONE answer
kick, choke, or physically hurt you in any other way?	and fill in blank if needed
□ No	☐ I gained pounds
☐ Yes	☐ I didn't gain any weight, but I lost pounds
Ti	☐ My weight didn't change during my
The next questions are about your labor and delivery.	pregnancy I don't know
52. When was your baby due?	
/ / _20	
Month Day Year	

57. What kind of <i>health insurance</i> did you have to pay for your <i>delivery</i> ?	60. Is your baby alive now?
Check ALL that apply	□ No → We are very sorry for your loss. □ Yes Go to Page 12, Question 73
 □ 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 → Please tell us:	61. Is your baby living with you now? One of the Page 12, Question 72 Yes 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 for my <i>delivery</i>	☐ No ☐ Yes
AFTER PREGNANCY	63. What were your reasons for not breastfeeding your new baby?
The next questions are about the time since your new baby was born.	Check ALL that apply
58. After your baby was delivered, was he or she put in an intensive care unit (NICU)? No Yes I don't know	☐ I was sick or on medicine ☐ I had other children to take care of ☐ I had too many household duties ☐ I didn't like breastfeeding ☐ I tried but it was too hard ☐ I didn't want to ☐ I went back to work or school ☐ Other
59. After your baby was delivered, how long did he or she stay in the hospital?	
Less than 24 hours (less than 1 day) 24 to 48 hours (1 to 2 days) 3 to 5 days 6 to 14 days More than 14 days My baby was not born in a hospital My baby is still in the hospital Go to Question 62 Go to Question 60	If you did not breastfeed your new baby, go to Page 12, Question 69. 64. Are you currently breastfeeding or feeding pumped milk to your new baby? No Yes Go to Question 67 Go to Question 65

65. How many weeks or months did you breastfeed or pump milk to feed your baby?	If your baby was not born in a hospital, go to Question 68.
Weeks OR Months □ Less than 1 week	67. This question asks about things that may have happened at the hospital where your new baby was born. For each item, check No if it did not happen or Yes if it did happen.
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 reasons ☐ I went back to work or school ☐ My baby was jaundiced (yellowing of the skin or whites of the eyes) ☐ Other → Please tell us:	a. Hospital staff gave me information about breastfeeding
	68. How old was your new baby the first time he or she drank liquids other than breast milk (such as formula, water, juice, tea, or cow's milk)?
	 Weeks OR Months My baby was less than 1 week old My baby has not had any liquids other than breast milk

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	73. Are you or your husband or partner doing anything now to keep from getting pregnant? Some things people do to keep from getting pregnant include using birth control pills, condoms, withdrawal, or natural family planning.
☐ My baby was less than 1 week old☐ My baby has not eaten any foods☐	☐ 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 to keep from getting pregnant now?
70. In which <i>one</i> position do you <u>most often</u> lay your baby down to sleep now? Check ONE answer	Check ALL that apply I am not having sex
☐ On his or her side ☐ On his or her back ☐ On his or her stomach	☐ I want to get pregnant ☐ 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
□ No □ Yes	☐ 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 not doing anything to keep from getting pregnant now, 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. Since your new baby was born, 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	☐ Always ☐ Often ☐ Sometimes ☐ Rarely ☐ Never
☐ Injection (Depo-Provera®) ☐ Contraceptive implant (Implanon®) ☐ Contraceptive patch (OrthoEvra®) or vaginal ring (NuvaRing®)	79. What kind of health insurance do you have now? Check ALL that apply
□ IUD (including Mirena® or ParaGard®) □ Natural family planning (including rhythm method) □ Withdrawal (pulling out) □ Not having sex (abstinence) □ Other	 □ 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 → Please tell us:
76. Since your new baby was born, have you had a postpartum checkup for yourself? A 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 your most recent pregnancy, did a doctor, nurse, or other health care worker tell you that you had 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.

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

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.