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# PRAMS SURVEILLANCE REPORT ALABAMA 2000

## Table of Contents

	Page
<b>Table of Contents</b> .....	ii
<b>Introduction and Acknowledgements</b> .....	1
<b>2000 PRAMS Surveillance Report Highlights</b> .....	3
<b>Mother's General Comments</b> .....	4
<b>Chapter One INTENDEDNESS OF BIRTHS</b>	
When Mother Intended to Become Pregnant, Alabama PRAMS 2000 .....	6
Unintended Births in Alabama, Alabama PRAMS 1993-2000.....	7
Unintended Births by Mother's Race, Alabama PRAMS 1993-2000.....	8
Unintended Births for Teens vs. Adults, Alabama PRAMS 1993-2000.....	9
Unintended Births by Mother's Education, Alabama PRAMS 1993-2000 .....	10
Unintended Births by Marital Status, Alabama PRAMS 1993-2000.....	11
Unintended Births by Method of Payment for Delivery, Alabama PRAMS 1993-2000 .....	12
Unintended Births by Live Birth Order, Alabama PRAMS 1993-2000 .....	13
Percent Low Birth Weight by Intendedness of Births, Alabama PRAMS 1993-2000 .....	14
Mother's Intendedness Comments.....	15
<b>Chapter Two PRENATAL CARE</b>	
Prenatal Care Received as Early as Mother Wanted, Alabama PRAMS 2000 .....	17
Topics Discussed During Prenatal Care Visits, Alabama PRAMS 2000.....	18
Percent of Mothers Who Took a Multivitamin Before Pregnancy, Alabama PRAMS 2000.....	19
Recommended Weight Gain of Mother During Pregnancy, Alabama PRAMS 2000 .....	20
Mother's Prenatal Care Comments .....	21
<b>Chapter Three NEGATIVE HEALTH BEHAVIORS: SMOKING AND DRINKING</b>	
Smoked 100 Cigarettes or More in Past 2 Years, Alabama PRAMS 2000.....	23
Percent of Mothers who Smoked, Alabama PRAMS 1993-2000 .....	24
Percent of Mothers who Smoked by Mother's Race, Alabama PRAMS 2000.....	25
Percent of Mothers who Smoked by Mother's Age, Alabama PRAMS 2000 .....	26
Percent of Mothers who Smoked by Mother's Education, Alabama PRAMS 2000.....	27
Percent of Mothers who Smoked by Marital Status, Alabama PRAMS 2000.....	28
Percent of Mothers who Smoked by Method of Payment, Alabama PRAMS 2000.....	29
Percent Low Birth Weight by Smoking Status of Mother and Period of Smoking, Alabama PRAMS 2000. 30	
Percent Low Birth Weight by Race and Smoking Status of Mother During Pregnancy, Alabama PRAMS 2000.....	31
Percent of Mothers who Drank Before and During Pregnancy, Alabama PRAMS 1993-2000 .....	32
Percent of Mothers who Drank by Mother's Race, Alabama PRAMS 2000 .....	33
Percent of Mothers who Drank by Mother's Age, Alabama PRAMS 2000 .....	34
Percent of Mothers who Drank by Mother's Education, Alabama PRAMS 2000.....	35
Percent of Mothers who Drank by Marital Status, Alabama PRAMS 2000 .....	36
Percent of Mothers who Drank by Method of Payment, Alabama PRAMS 2000.....	37
Percent Low Birth Weight by Drinking Status, Alabama PRAMS 2000 .....	38
Mother's Negative Health Behaviors Comments .....	39

<b>Chapter Four</b>	<b>HEALTH CARE SYSTEM ISSUES</b>	
	Mother Experienced Medical Problems During Pregnancy, Alabama PRAMS 2000 .....	41
	Mother Stayed in Hospital or was on Bedrest During Pregnancy, Alabama PRAMS 2000 .....	42
	Mother’s Nights in Hospital for Delivery, Alabama PRAMS 2000 .....	43
	Percent of Mothers Receiving Selected Services During Pregnancy, Alabama PRAMS 2000 .....	44
	WIC Receipt During Pregnancy, Alabama PRAMS 1993-2000 .....	45
	Mother’s Health Care System Comments.....	46
<b>Chapter Five</b>	<b>BREASTFEEDING</b>	
	Percent of Mothers who Breastfed, Alabama PRAMS 2000 .....	48
	Percent of Mothers who Initiated Breastfeeding, Alabama PRAMS 1993-2000.....	49
	Percent of Mothers who Initiated Breastfeeding by Mother’s Race, Alabama PRAMS 1993-2000 .....	50
	Percent of Mothers who Initiated Breastfeeding by Mother’s Age, Alabama PRAMS 1993-2000.....	51
	Percent of Mothers who Initiated Breastfeeding by Mother’s Education, Alabama PRAMS 1993-2000 ....	52
	Percent of Mothers who Initiated Breastfeeding by Marital Status, Alabama PRAMS 1993-2000 .....	53
	Percent of Mothers who Initiated Breastfeeding by Method of Payment for Delivery, Alabama PRAMS 1993-2000 .....	54
	Percent of Mothers who Initiated Breastfeeding by Birth Weight, Alabama PRAMS 1993-2000.....	55
	Breastfeeding Events at Hospital After Delivery, Alabama PRAMS 2000 .....	56
	Receipt of Breastfeeding Information at WIC Visits, Alabama PRAMS 1996-2000 .....	57
	Mother’s Breastfeeding Comments .....	58
<b>Chapter Six</b>	<b>CONTRACEPTION</b>	
	Mother Not Planning Pregnancy Using Birth Control at Conception, Alabama PRAMS 2000 .....	60
	Mother Currently Using Birth Control, Alabama PRAMS 2000.....	61
	Current Birth Control Methods, Alabama PRAMS 2000 .....	62
	Mother’s Contraceptive Comments .....	63
<b>Chapter Seven</b>	<b>MISCELLANEOUS</b>	
	Mother’s Age at First Conception, Alabama PRAMS 2000 .....	65
	Use of Reproductive Assistance for Conception, Alabama PRAMS 2000.....	66
	Sources of Stress 12 Months Before Delivery, Alabama PRAMS 2000 .....	67
	Number of Stress Factors Before Delivery, Alabama PRAMS 2000 .....	68
	Percent of Mothers who Experienced Physical Abuse, Alabama PRAMS 2000.....	69
	Percent of Mothers who Worked During Pregnancy, Alabama PRAMS 2000 .....	70
	Month Mother Stopped Working Due to Pregnancy, Alabama PRAMS 2000.....	71
	Dental Care During Pregnancy, Alabama PRAMS 2000 .....	72
	Months Since Last Dental Cleaning, Alabama PRAMS 2000.....	73
	Baby’s Sleeping Position, Alabama PRAMS 2000 .....	74
	Frequency of Baby Co-Sleeping, Alabama PRAMS 2000 .....	75
	Selected Safety Characteristics, Alabama PRAMS 2000 .....	76
	Mother’s Miscellaneous Comments .....	77
<b>Technical Notes</b> .....		79
<b>PRAMS Survey Questions</b> .....		85

## INTRODUCTION AND ACKNOWLEDGEMENTS

The Pregnancy Risk Assessment Monitoring System (PRAMS) is a surveillance system of new mothers and is supported by the Centers for Disease Control and Prevention (CDC) under cooperative agreement number U50/CCU407103. 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 mother's 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.

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. Alabama does not yet have Spanish speaking interviewers for the phone phase. For infants born during 2000, 1571 questionnaires were completed from the 2245 sampled. The response rate was 70.0 percent.

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

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.

The figures given in this publication are weighted to represent the 61,618 live births which occurred in Alabama in 2000 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.

This year 95% confidence intervals have been included in the analyses. Line graphs of the major topics have been included to identify trends and determine progress in objectives of interest. These trend charts may be useful to programs that are interested in PRAMS data. For the year 1993, November and December births in the year 1992 are included, since those two months were the first collected for Alabama PRAMS. New questions on multivitamin use, fertility treatments, assisted reproduction, and dental care were added to the 2000 PRAMS survey and are included in this report.

PRAMS staff responsible for the collection and analysis of data in this report include Dorothy Harshbarger, PRAMS project director; Rhonda Stephens, PRAMS project coordinator; Shelia Davison, PRAMS data manager; Albert Woolbright, PRAMS research analyst; and Kenneth J. Lentini, PRAMS research analyst.

The PRAMS staff at CDC also contributed greatly to the success of the Alabama PRAMS project. We would especially like to acknowledge the assistance of our project manager, Kristen Helms. The contents of this report are solely the responsibility of the authors and do not necessarily represent the official views of CDC.

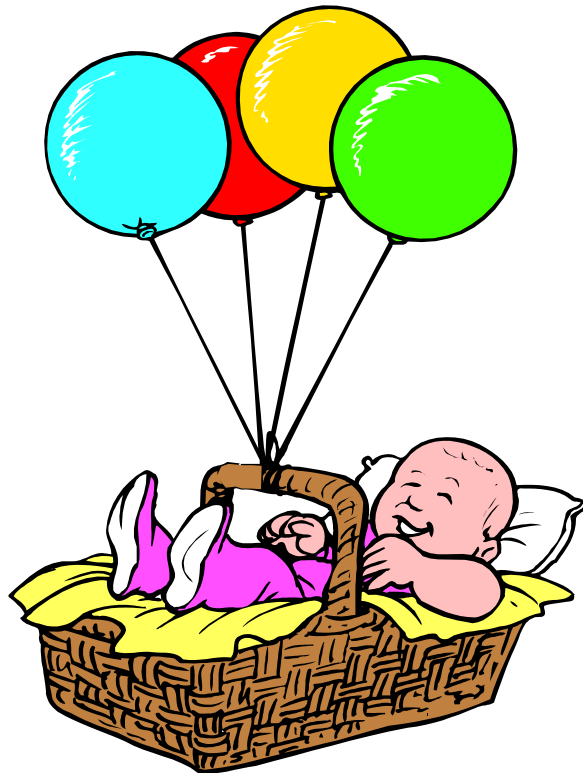
## 2000 PRAMS Surveillance Report Highlights

- **Almost half of Alabama births in 2000 were unintended (48.1 percent).**
- **26.8 percent of Alabama mothers reported that they had smoked 100 cigarettes or more in the past 2 years.**
- **14.0 percent of Alabama mothers reported smoking during the last three months of pregnancy.**
- **2.7 percent of Alabama mothers reported that they drank alcoholic beverages on a weekly basis during the last three months of pregnancy.**
- **Over two-thirds of Alabama mothers reported experiencing medical problems during pregnancy (68.8 percent).**
- **54.1 percent of Alabama mothers participated in the Supplemental Food Program for Women, Infants, and Children (WIC) during pregnancy.**
- **Only 55.3 percent of Alabama mothers attempted to breastfeed their infants in 2000.**
- **Only 46.7 percent of Alabama mothers who did not plan to become pregnant, reported using birth control at the time of conception.**
- **5.2 percent of Alabama mothers reported using fertility drugs to conceive, and 1.1 percent used assisted reproductive technology.**
- **4.9 percent of Alabama mothers reported physical abuse by their husband during pregnancy.**
- **48.2 percent of Alabama mothers who worked during pregnancy reported working until their ninth month of pregnancy.**
- **Almost a quarter of Alabama mothers needed to see a dentist during pregnancy (23.4 percent), and 51.6 percent of mothers reported waiting a year or longer to have their teeth cleaned.**
- **Just over one-half of Alabama mothers reported putting their baby down to sleep on his/her back in 2000 (51.4 percent).**
- **99.8 percent of Alabama mothers reported that they always or almost always place their infant in a car seat while traveling.**

## Mother's General Comments

- Mothers and babies need better childcare services and more options to work less hours per week. If women could get reasonable, quality part-time day care; mothers would be able to spend more time at home with children. This is very important to the well being of the mother and child.
- I think there should be more help for girls who have postpartum depression. I have it still and my baby is three months old and I don't know what to do about it!
- I believe health care workers should talk to mothers about depression that can occur after delivery. My depression was very overwhelming. The birth of my child was a traumatic experience for me. I need more emotional care than physical care. Nurses don't have the extra time to give this care.
- I would like to see every doctor or someone offer counseling services to the parents of a child who has been diagnosed with a medical or physical or any type of condition.
- All hospitals need grieving programs.
- Women should know... how it will effect your life w/ your husband/partner (being a new mom).
- I would like to see [it] required for retail stores and dr's offices [to] have changing tables.
- ...my little girl was born 10 weeks early. This was very scary for us. We were never educated on what could go wrong. It would have been much easier.
- I am fortunate to provide a wonderful loving and financially stable home for my children, but I think that after a baby leaves the hospital is when it is subject to harmful things. Clothing, bedding, a proper sleep place, and caretaking are very important as well as feeding supplies.
- I think reduced healthcare should be available to families who need it. Our insurance was canceled when I was 3 mos. pregnant. We now owe about \$15,000 in Dr. bills. We go w/o so my baby can go to the Dr.
- ...there should be a class in schools that shows and teaches young girls at the age of 10 yrs up to 18... to show girls how to dress, talk, eat healthy... how the body changes... and how to prevent peer pressure of boys and sex other than say no.
- I think that Medicaid should keep women on Medicaid after they have their babies instead of dropping them off after their six weeks check-up.
- Hospital staff should not interrupt so many times in mothers' rooms. Allow mothers to rest.
- Never let your baby [lay] down with his/her bottle alone. I almost lost mine when he fell asleep with the milk on his mouth... and the formula got into his nose.

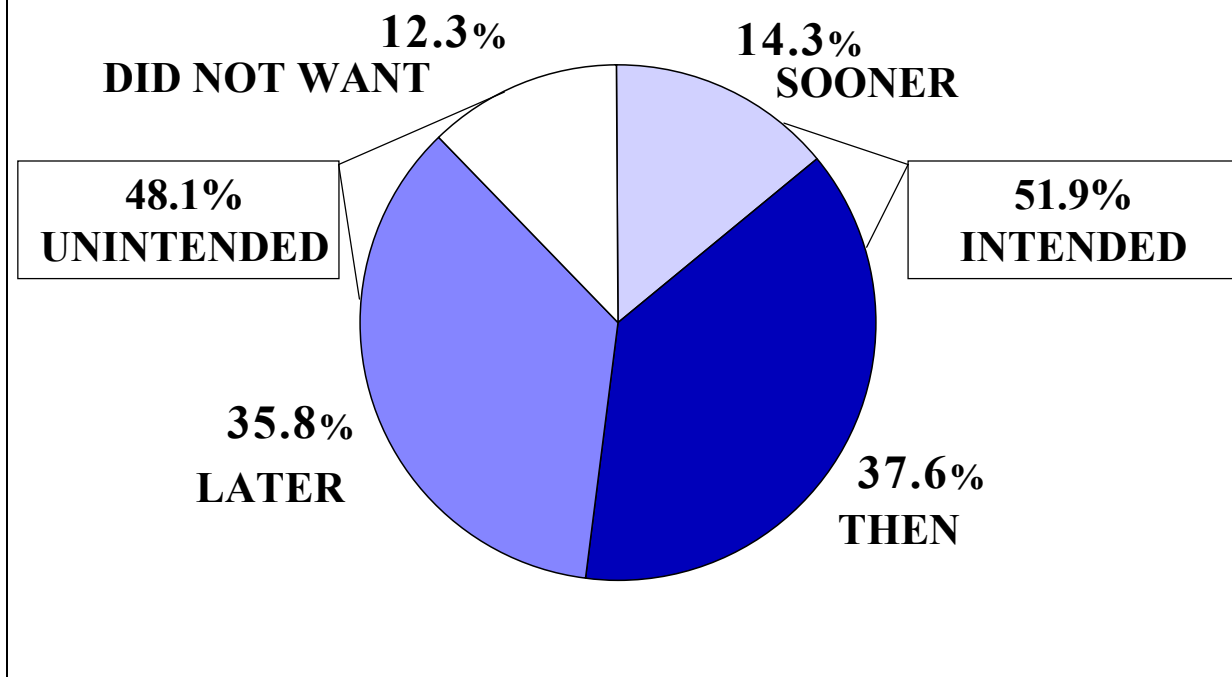
# Intendedness Of Births





## When Mother Intended to Become Pregnant, Alabama PRAMS 2000

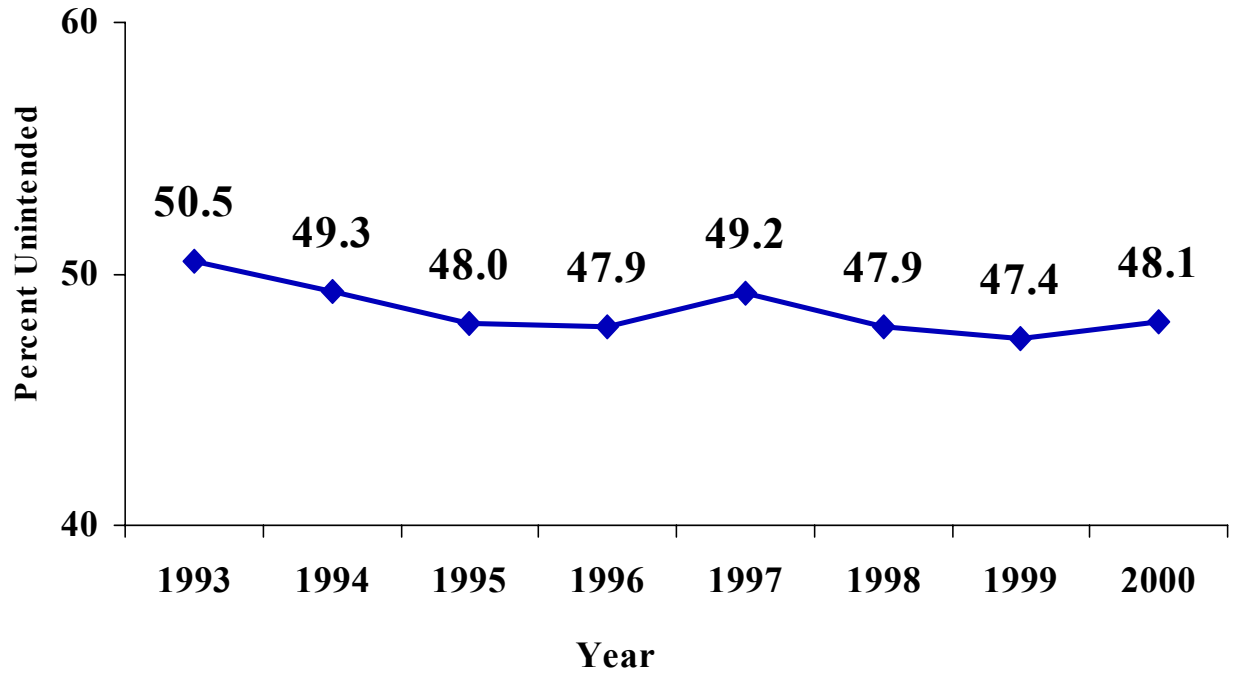
(Question #11 of the PRAMS Survey)



About one-third of Alabama mothers said they wanted to be pregnant *LATER*, while 12.3 percent said they *DID NOT WANT* to be pregnant at all. The responses *LATER* and *DID NOT WANT* are combined to form the category unintended. In 2000, 48.1 percent of births were unintended. On the other hand, 14.3 percent of Alabama mothers wanted to be pregnant *SOONER*, and 37.6 percent wanted to be pregnant *AT THE TIME* of conception; therefore, 51.9 percent of births were planned or intended in 2000.

CONFIDENCE INTERVALS						
INTENTION	SOONER	THEN	LATER	DID NOT WANT	UNINTENDED	INTENDED
PERCENT	12.1-16.4	34.6-40.6	32.8-38.7	10.3-14.4	45.2-51.1	48.9-54.8

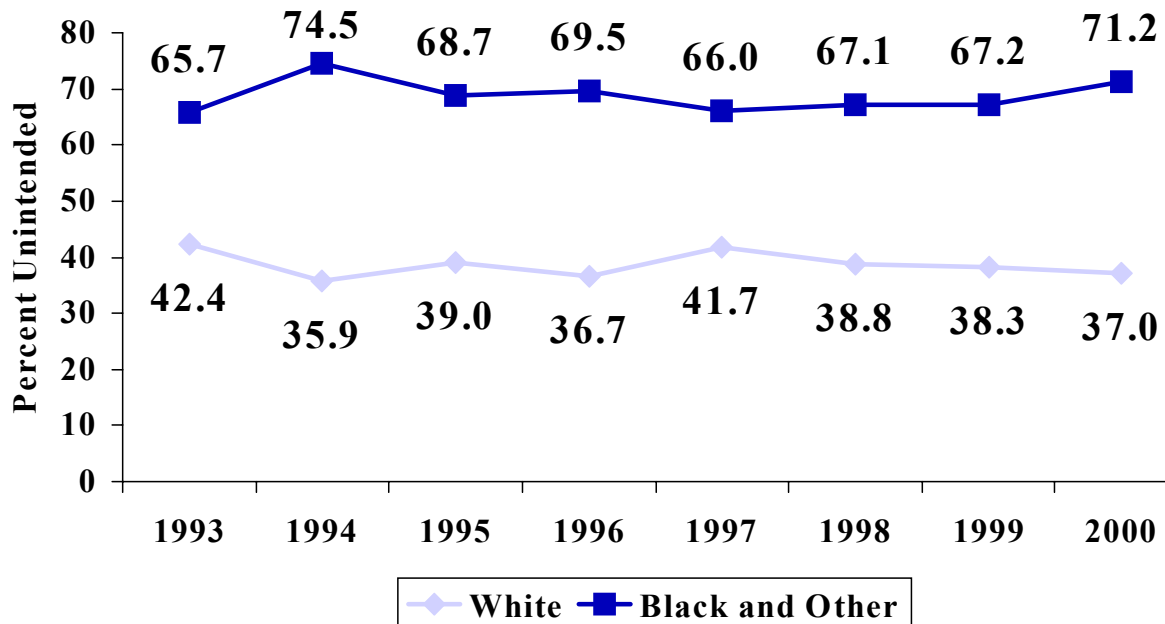
## Unintended Births in Alabama, Alabama PRAMS 1993 - 2000 (Question #11 of the PRAMS Survey)



There has been a gradual decline in the percent of births that are unintended in Alabama since 1993, although it is not a statistically significant decline. In 1993, 50.5 percent of Alabama mothers reported that their birth was unintended, while in 2000, 48.1 percent of Alabama mothers reported an unintended birth. The 4.9 percent decrease in percent unintended from 1993 to 2000 was not statistically significant.

CONFIDENCE INTERVALS								
YEAR	1993	1994	1995	1996	1997	1998	1999	2000
PERCENT UNINTENDED	47.8-53.3	46.4-52.2	45.0-51.0	45.1-50.8	46.2-52.2	44.9-50.9	44.3-50.5	45.2-51.1

## Unintended Births by Mother's Race, Alabama PRAMS 1993-2000 (Question #11 of the PRAMS Survey)

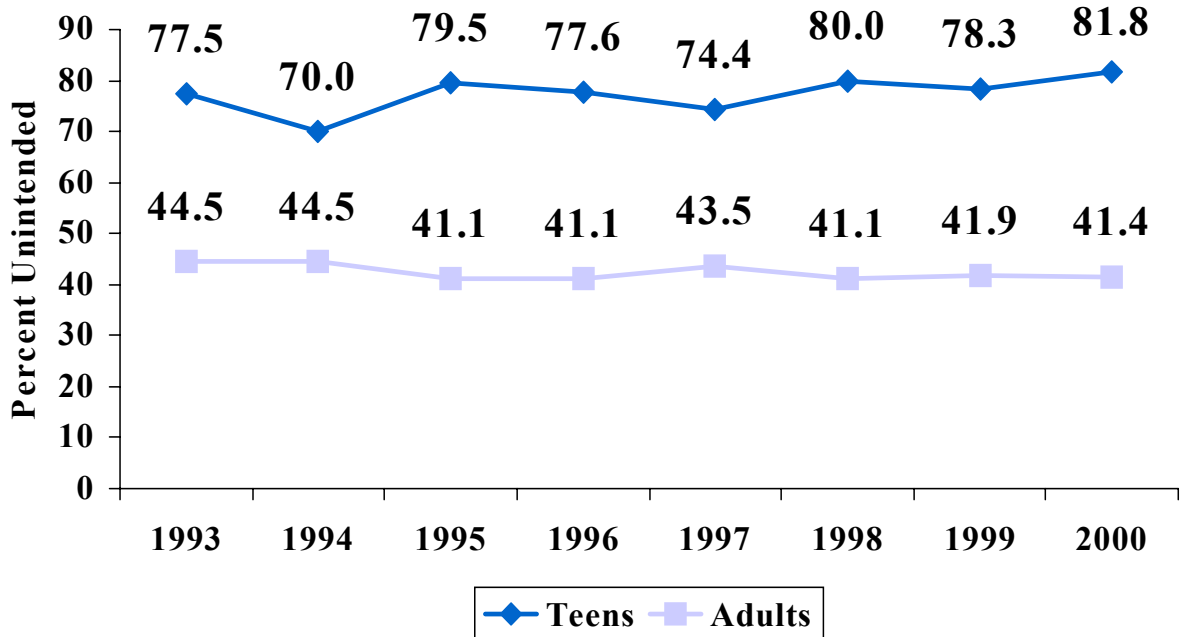


The percent of unintended births has been considerably higher among black and other race women, than among white women since 1993. One objective targeted in *Healthy People 2000* is to reduce unintended pregnancies overall to no more than 30 percent, and among black and other race women to 40 percent. Much improvement is needed to achieve such reductions in Alabama. While it appears that the racial disparity for unintended births increased from 1993 to 2000, neither the 8.4 percent increase in unintended births for black and other mothers, nor the 12.7 percent decrease for white mothers was statistically significant.

CONFIDENCE INTERVALS								
YEAR/ RACE	1993	1994	1995	1996	1997	1998	1999	2000
WHITE	38.9-45.8	32.3-39.5	35.4-42.6	33.3-40.1	38.1-45.3	35.2-42.4	34.5-42.1	33.3-40.6
BLACK & OTHER	61.1-70.3	69.8-79.1	63.3-74.1	64.6-74.4	60.6-71.3	61.6-72.6	62.0-72.4	66.3-76.1

## Unintended Births for Teens vs. Adults, Alabama PRAMS 1993-2000

(Question #11 of the PRAMS Survey)

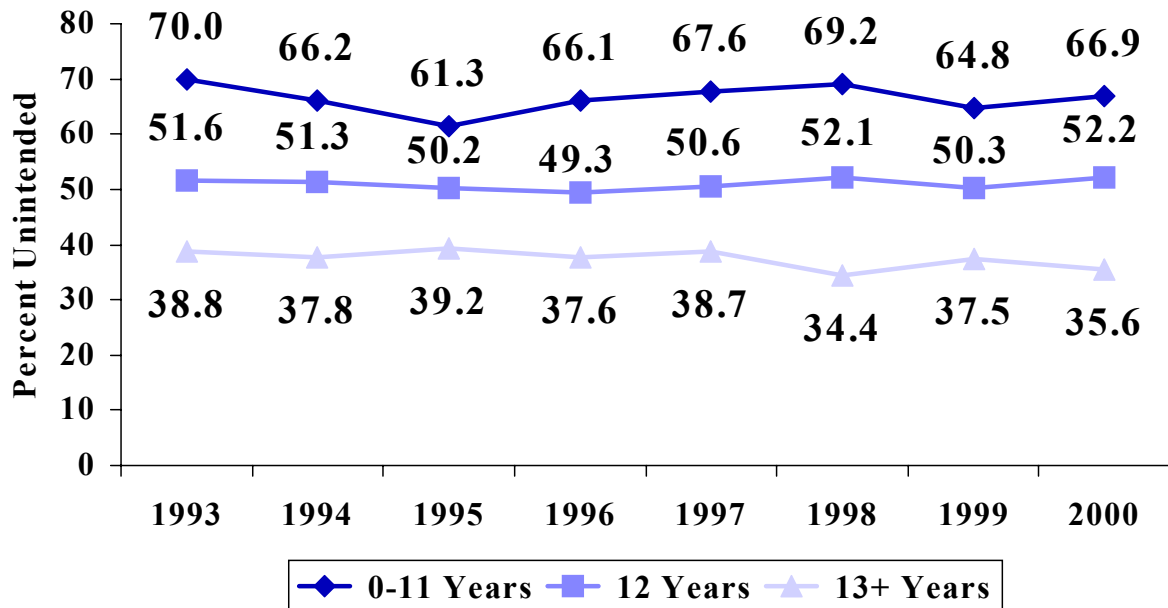


An inverse correlation exists between unintended births and maternal age. Teens are almost twice as likely to report having an unintended birth as adults. Over 80 percent of teenage mothers did not intend to give birth in 2000. One possible explanation for this trend is that older women are more capable of controlling the timing and spacing of pregnancies than are teenagers.

CONFIDENCE INTERVALS								
YEAR/ AGE	1993	1994	1995	1996	1997	1998	1999	2000
<b>TEENS</b>	71.8-83.1	63.3-76.7	73.7-85.3	72.0-83.1	68.2-80.6	74.2-85.8	72.1-84.6	75.8-87.7
<b>ADULTS</b>	41.4-47.5	41.2-47.7	37.7-44.5	37.8-44.4	40.1-46.9	37.6-44.5	38.4-45.3	38.1-44.7

## Unintended Births by Mother's Education, Alabama PRAMS 1993-2000

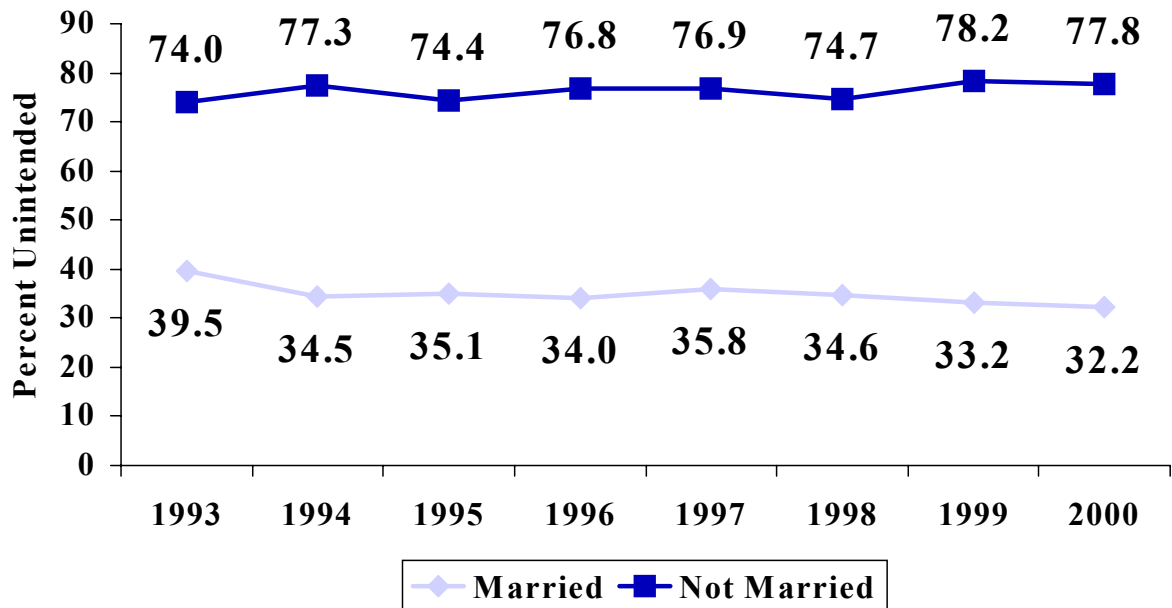
(Question #11 of the PRAMS Survey)



An inverse correlation also exists between unintended births and a mother's education. As the amount of formal education increases, the percent of unintended births decreases. About two-thirds of births among mothers with less than 12 years of education were unintended. Mothers who had attained more than 12 years of education accounted for the lowest percent of unintended births, which could be due to the older age of women in this category.

CONFIDENCE INTERVALS								
YEAR/ EDUCATION	1993	1994	1995	1996	1997	1998	1999	2000
<b>0 – 11 YEARS</b>	64.5-75.6	60.3-72.2	54.6-68.0	60.1-72.2	61.3-73.8	62.9-75.6	58.1-71.5	60.5-73.2
<b>12 YEARS</b>	46.9-56.2	45.8-56.9	44.9-55.5	44.0-54.6	45.4-55.8	46.5-57.8	44.6-56.0	46.9-57.4
<b>13 + YEARS</b>	34.4-43.1	33.3-42.4	34.6-43.7	33.1-42.0	34.1-43.4	29.9-38.8	32.9-42.1	31.0-40.2

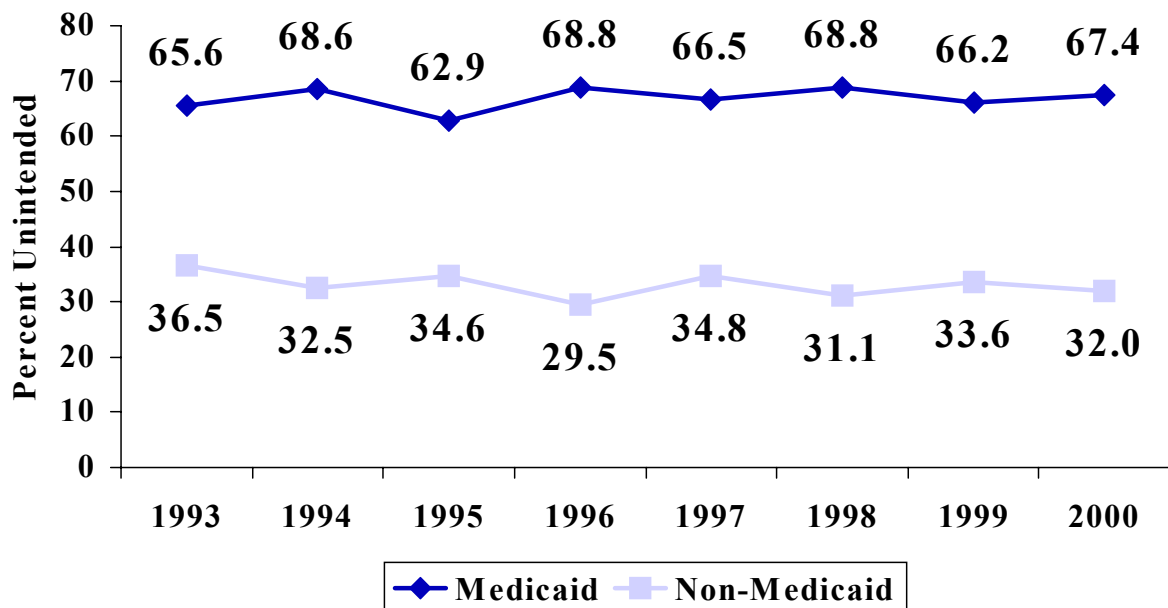
## Unintended Births by Marital Status, Alabama PRAMS 1993-2000 (Question #11 of the PRAMS Survey)



Unmarried women had a much higher percent of unintended births; over twice that of unintended births to married mothers. 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. The decline in unintended births for married women was statistically significant from 1993 to 2000, while the increase in unintended births for unmarried women was not statistically significant.

CONFIDENCE INTERVALS								
YEAR/ MARITAL STATUS	1993	1994	1995	1996	1997	1998	1999	2000
<b>MARRIED</b>	36.1-42.8	30.9-38.1	31.5-38.7	30.5-37.4	32.2-39.5	30.8-38.3	29.4-36.9	28.6-35.8
<b>NOT MARRIED</b>	69.5-78.4	72.8-81.8	69.6-79.2	72.3-81.4	72.4-81.5	69.8-79.6	73.6-82.8	73.4-82.3

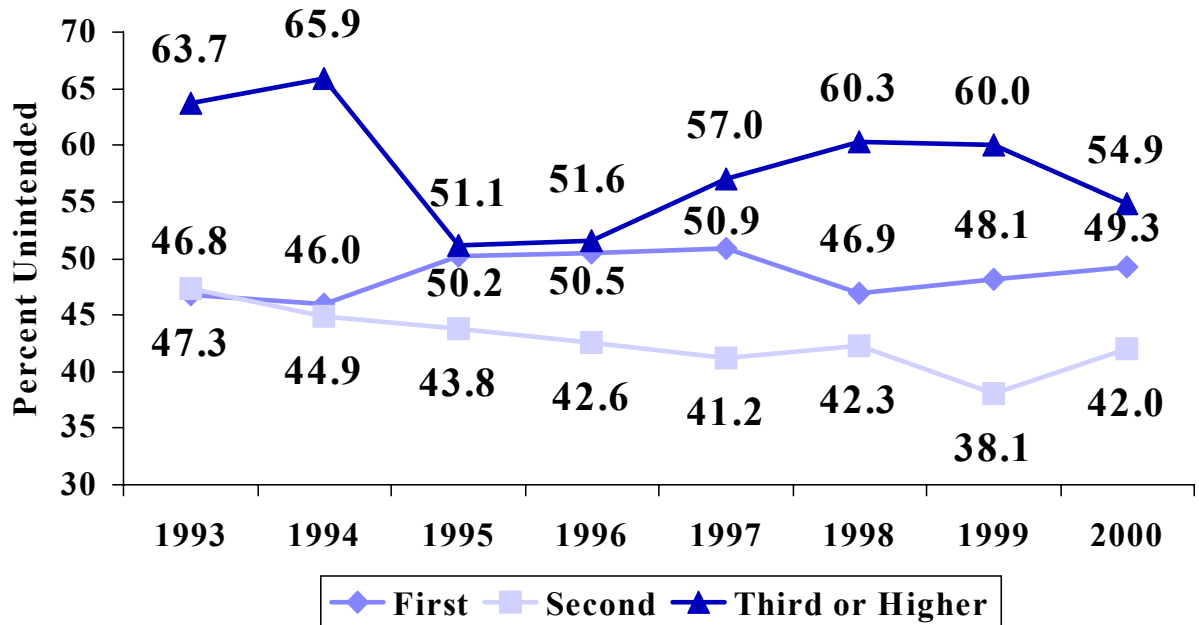
## Unintended Births by Method of Payment for Delivery, Alabama PRAMS 1993-2000 (Question #11 of the PRAMS Survey)



Two out of three births to women on Medicaid in Alabama were unintended, whereas about one out of three births was unintended among non-Medicaid mothers. Medicaid mothers were more than twice as likely to have an unintended birth as non-Medicaid mothers. This indicates that poorer mothers are more likely to have unplanned births.

CONFIDENCE INTERVALS								
YEAR/ PAYMENT METHOD	1993	1994	1995	1996	1997	1998	1999	2000
<b>MEDICAID</b>	61.7-69.5	64.4-72.7	58.6-67.2	64.8-72.8	62.3-70.6	64.5-73.0	61.8-70.7	63.3-71.5
<b>NON-MEDICAID</b>	32.6-40.4	28.4-36.7	30.3-38.9	25.4-33.5	30.5-39.0	26.9-35.3	29.3-37.9	27.8-36.3

## Unintended Births by Live Birth Order, Alabama PRAMS 1993-2000 (Question #11 of the PRAMS Survey)

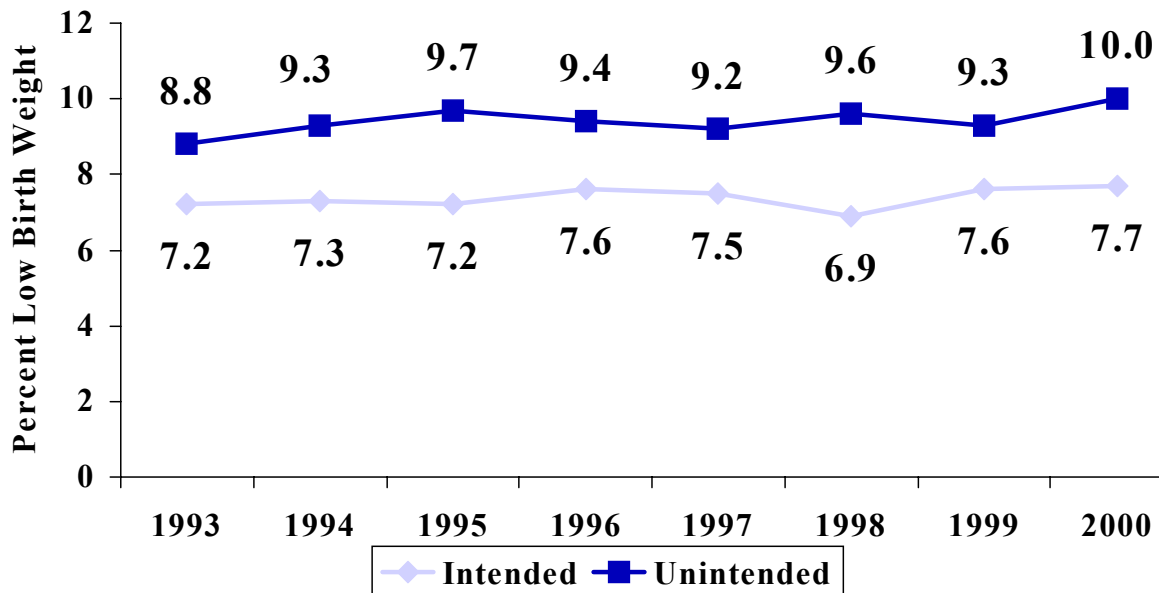


The percent of unintended births was lowest among mothers who had just given birth to their second child; meaning second births are most likely to be planned. In 2000, 54.9 percent of births to mothers having their third or higher birth order child were unintended, and about half of births to first-time mothers were unintended. There was no statistically significant change over time for any birth order from 1993 to 2000.

CONFIDENCE INTERVALS								
YEAR/ BIRTH ORDER	1993	1994	1995	1996	1997	1998	1999	2000
FIRST	42.7-50.8	41.6-50.4	45.7-54.7	46.2-54.8	46.4-55.3	42.4-51.4	43.6-52.7	44.7-53.9
SECOND	42.2-52.5	39.6-50.1	38.7-48.9	37.4-47.8	35.7-46.6	36.8-47.7	32.5-43.7	36.6-47.3
THIRD OR HIGHER	57.8-69.7	59.2-72.6	43.7-58.6	44.7-58.6	50.3-63.7	52.9-67.7	53.2-66.9	48.4-61.4



## Percent Low Birth Weight by Intendedness of Births, Alabama PRAMS 1993-2000 (Question #11 of the PRAMS Survey)



Of all unintended births in 2000 in Alabama, 10.0 percent were low weight births, compared to 7.7 percent of intended births being low weight births. It is widely accepted that mothers who plan their births are more likely to exhibit other beneficial health behaviors which lead to normal weight babies. The percent low birth weight has increased since 1993 for both intended and unintended births, but the increases were not statistically significant.

CONFIDENCE INTERVALS								
YEAR/ INTENTION	1993	1994	1995	1996	1997	1998	1999	2000
<b>INTENDED</b>	6.6-7.8	6.7-7.9	6.5-7.8	6.9-8.2	6.9-8.2	6.2-7.5	6.9-8.3	7.0-8.3
<b>UNINTENDED</b>	8.1-9.5	8.5-10.1	8.9-10.5	8.6-10.2	8.4-10.0	8.7-10.5	8.4-10.2	9.1-10.8

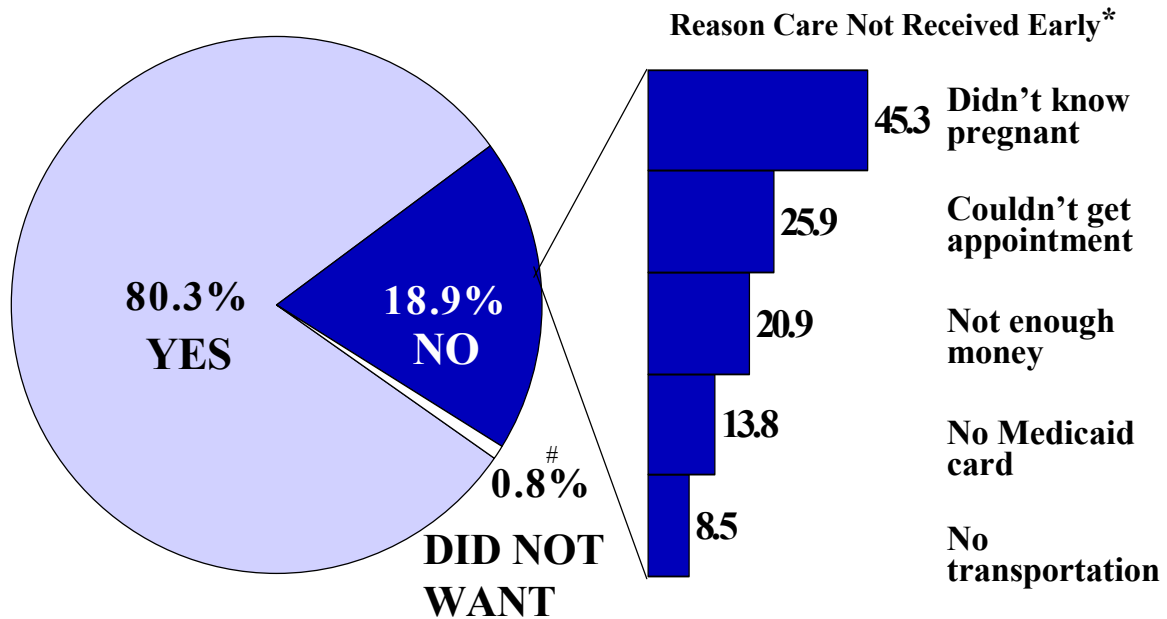
## Mother's Intendedness Comments

- Teenagers need to have school discussions about teen pregnancy, with a teen mother present. The teen mother could let them know how hard it is to be a teenage mother and answer questions. I had a baby at 19 and I was way too young! My life was just beginning and I had a baby to support.
- I believe that it has helped us to have healthy babies that we planned to have each one, and my doctor... got me started on pre-natal vitamins, and I did not smoke [or] drink any alcohol.
- Before we planned to have our baby, we went to the dr. for health check-ups... the dr. prescribed folic acid for me to take everyday. I do recommend that every mother planning to get pregnant have a health checkup before she begins trying.
- I love my baby and wanted another one before I got pregnant with him – just not so soon...
- We didn't plan on this baby because we already had 3 other children but my husband and I consider all of our children including our baby gifts from God.
- We have 3 other children and weren't expecting anymore. My husband had a vasectomy... so we thought we couldn't have anymore.
- I wanted children but I was not married yet and we were preparing for the coming year for children... and I was scared to... tell my partner.

# Prenatal Care



## Prenatal Care Received as Early as Mother Wanted, Alabama PRAMS 2000 (Question #19 & 20 of the PRAMS Survey)

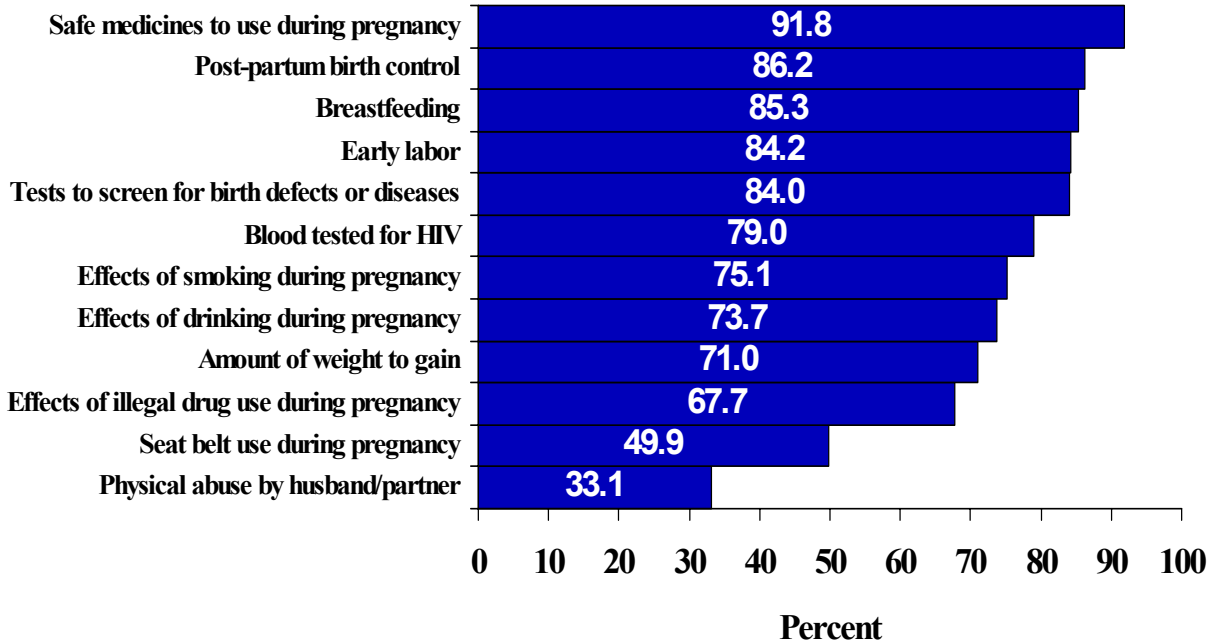


\*Items not mutually exclusive, therefore percentages will not equal 100. # Number of respondents is less than 20.

Early and adequate prenatal care is critical in detecting problems that may arise during pregnancy and treating them before they become serious or life-threatening. Nearly one mother out of five responded that she did not receive prenatal care as early in her pregnancy as she wanted. Barriers that hindered mothers from receiving prenatal care when desired included uncertainty of pregnancy, inability to get an appointment earlier in their pregnancies, lack of money, no Medicaid card, and no transportation. Almost half of mothers answered that they did not get care as soon as they wanted, because they did not know they were pregnant.

CONFIDENCE INTERVALS								
EARLY PNC	YES	NO	DID NOT WANT	DIDN'T KNOW	NO APPT	NO MONEY	NO MEDICAID	NO TRANSPORTATION
PERCENT	77.8-82.8	16.5-21.3	0.3-1.3	38.1-52.5	19.6-32.2	15.0-26.8	8.6-18.9	4.8-12.3

## Topics Discussed During Prenatal Care Visits, Alabama PRAMS 2000 (Question #23 of the PRAMS Survey)

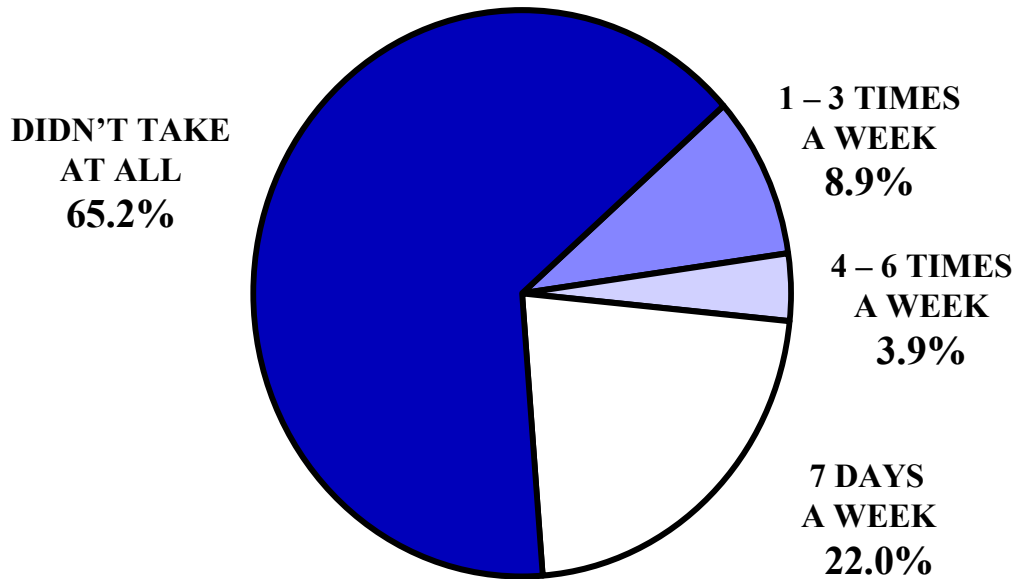


Mothers were asked if a doctor, nurse or other health care worker talked with them about the above topics during any of their prenatal care visits. The majority of mothers responded that most of the listed prenatal topics were discussed. However, approximately half of mothers were not instructed about proper seat belt use during pregnancy, and approximately two-thirds of mothers were not counseled about physical abuse to women by their husbands or partners.

CONFIDENCE INTERVALS						
TOPIC	SAFE MEDICINES	BIRTH CONTROL	BREAST-FEEDING	EARLY LABOR	BIRTH DEFECT/DISEASE SCREENING	HIV TEST
PERCENT	90.0-93.6	84.0-88.3	83.1-87.5	81.8-86.5	81.6-86.4	76.4-81.6

CONFIDENCE INTERVALS						
TOPIC	EFFECTS OF SMOKING	EFFECTS OF DRINKING	WEIGHT GAIN	EFFECTS OF DRUG USE	SEAT BELT USE	ABUSE BY HUSBAND
PERCENT	72.4-77.8	70.9-76.5	68.1-73.9	64.8-70.6	46.7-53.0	30.3-35.9

**Percent of Mothers Who Took a Multivitamin  
Before Pregnancy, Alabama PRAMS 2000\***  
(Question #3 of the PRAMS Survey)

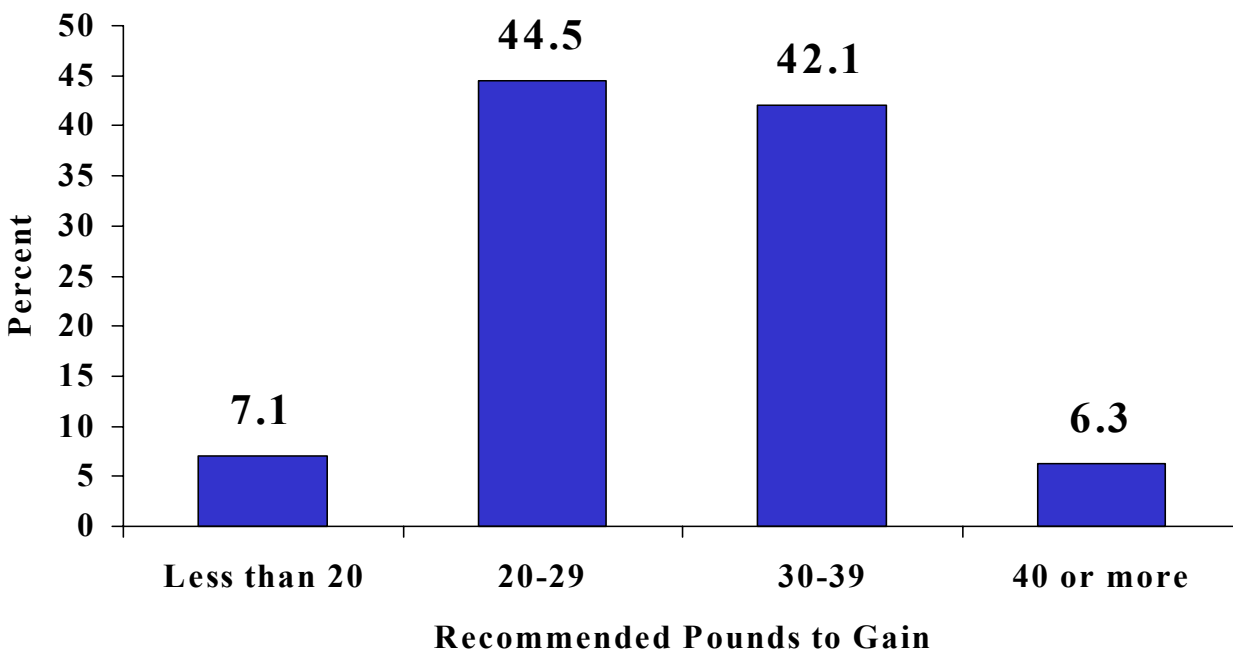


\* New question in 2000.

Mothers were asked about how many days they took multivitamins in an average week before their pregnancies. Nearly two-thirds of mothers stated they didn't take a multivitamin at all, while almost one quarter of mothers took a multivitamin daily. Prenatal vitamins are especially important early in pregnancy to prevent neural tube defects. Before the 2000 survey, mothers were asked about their awareness of folic acid preventing birth defects. The question was changed to obtain information on their actual practice in taking vitamins.

CONFIDENCE INTERVALS				
VITAMIN USAGE	DIDN'T TAKE	1-3 TIMES A WEEK	4-6 TIMES A WEEK	7 DAYS A WEEK
PERCENT	62.3-68.2	7.1-10.7	2.6-5.1	19.4-24.6

## Recommended Weight Gain of Mother During Pregnancy, Alabama PRAMS 2000 (Question #24 of the PRAMS Survey)



Mothers were asked, “At any time during your prenatal care, did a doctor, nurse, or other healthcare worker talk with you about how much weight you should gain during your pregnancy?” In 2000, 71.0 percent (68.1-73.9) responded “Yes.” This was a significant decrease from 81.0 percent (78.7-83.4) in 1996. Of the “Yes” respondents in 2000, almost 45 percent were advised to gain 20-29 pounds during pregnancy. The average recommended weight gain for Alabama mothers was 27.2 pounds.

CONFIDENCE INTERVALS				
WEIGHT GAIN	< 20	20 – 29	30 – 39	40 +
PERCENT	5.1-9.1	40.5-48.5	38.2-46.1	4.4-8.3

## Mother's Prenatal Care Comments

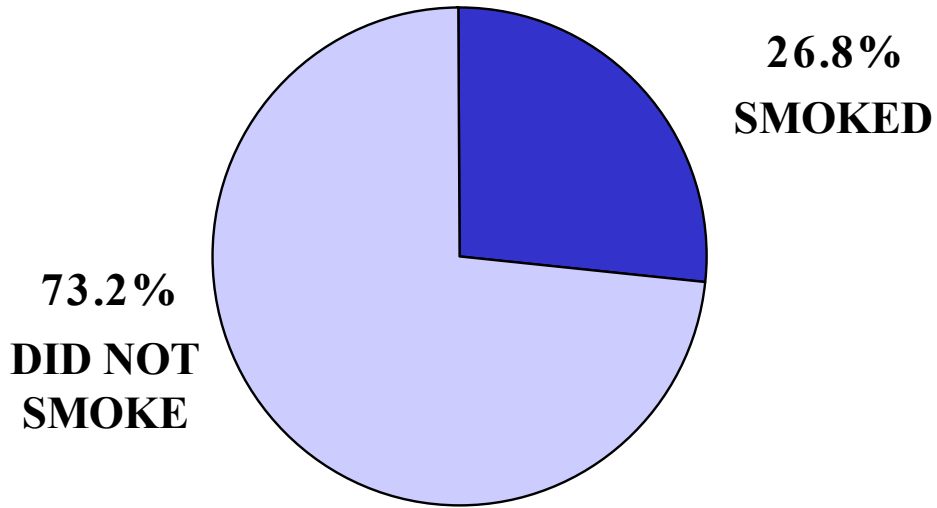
- There needs to be more awareness to seek prenatal care as soon as you know (or suspect) that you are pregnant. I didn't until I started having problems.
- I had no insurance and was embarrassed to apply for Medicaid. I waited to apply for Medicaid until it was too late to save my baby. I had no ready access to a doctor because I had no insurance.
- I didn't know how soon prenatal care should start.
- I didn't receive that much prenatal care because I had a very hard time getting on Medicaid.
- I think the doctor should talk to you more about premature labor and warning signs of premature labor. They should also let you know how many pounds you should gain and the ounces the baby should weigh a month.
- I think it would help if you put out information on premature babies and what mothers can expect.
- They need to have every kind of test there is, to check on the well-being of the baby. [My] daughter had a heart defect. She died... but I didn't have to ask what happened because I knew before her birth.
- All babies should have genetics testing at birth... My son was diagnosed with being a carrier for Alpha1 Antitrypsin which we would not have known if he hadn't had a high bilirubin count.
- ...mothers-to-be should be educated about choosing safe allergy medicines... It would be helpful if doctors would automatically address the topic in prenatal visit.
- I wish a nurse or doctor would have given me more information on what it would be like when I [brought] the baby home... information packet...on crying, fevers, vomiting, rashes, etc.
- Once I was confirmed pregnant by my doctor, my vitamins were switched to prescribed prenatal. I feel like these were more beneficial than the over-the-counter type...
- Pregnant mothers need to receive folic acid in her daily supplemental at least 6 to 9 months before conception. Make sure that they have it in their diet. That is very important.
- I lost one baby at 7 ½ months pregnant due to a neural tube defect "severe" from a folic acid deficiency.



# Negative Health Behaviors: Smoking and Drinking



**Smoked 100 Cigarettes or More in  
Past 2 Years, Alabama PRAMS 2000\***  
(Question #28 of the PRAMS Survey)

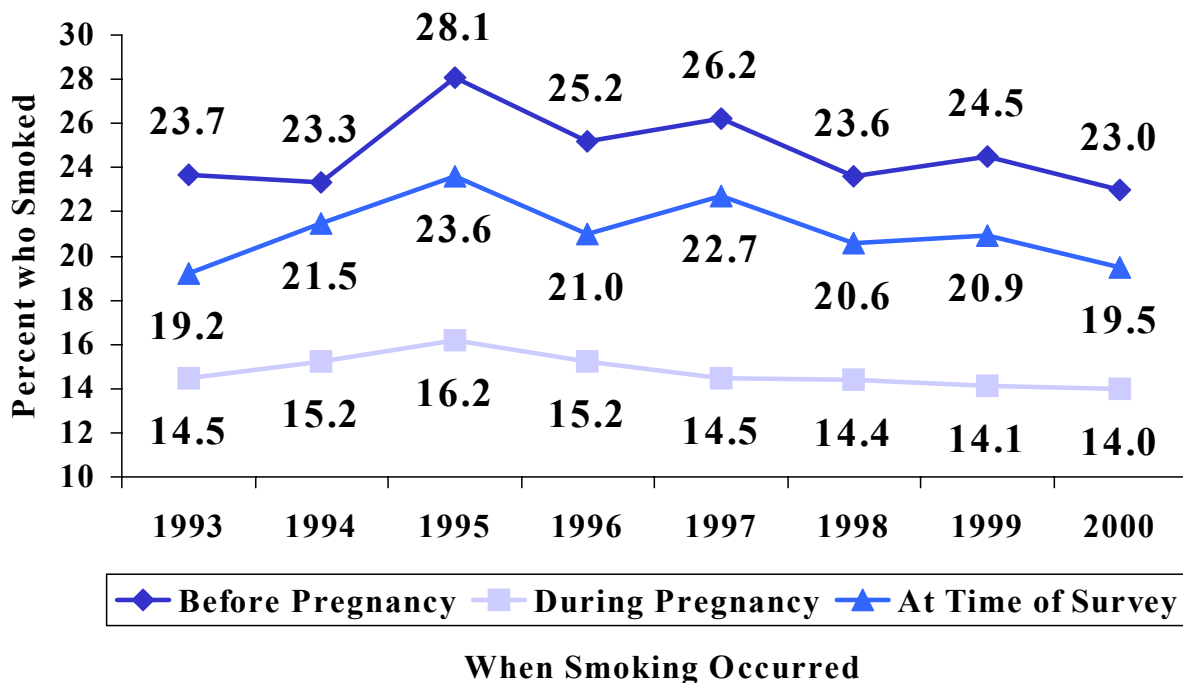


\* Question changed in 2000.

When Alabama mothers were asked if they had smoked at least 100 cigarettes in the past two years, 26.8 percent responded, “Yes.” Smoking during and after pregnancy can have serious health effects on both the mother and the baby. Babies whose mothers smoke are more likely to be born prematurely and at lower birth weights than are infants of non-smokers. In addition, infants of smokers are more likely to suffer greater respiratory problems and are more likely to die during infancy than babies of non-smokers.

CONFIDENCE INTERVALS		
SMOKING STATUS	DID NOT SMOKE	SMOKED
PERCENT	70.4-75.9	24.1-29.6

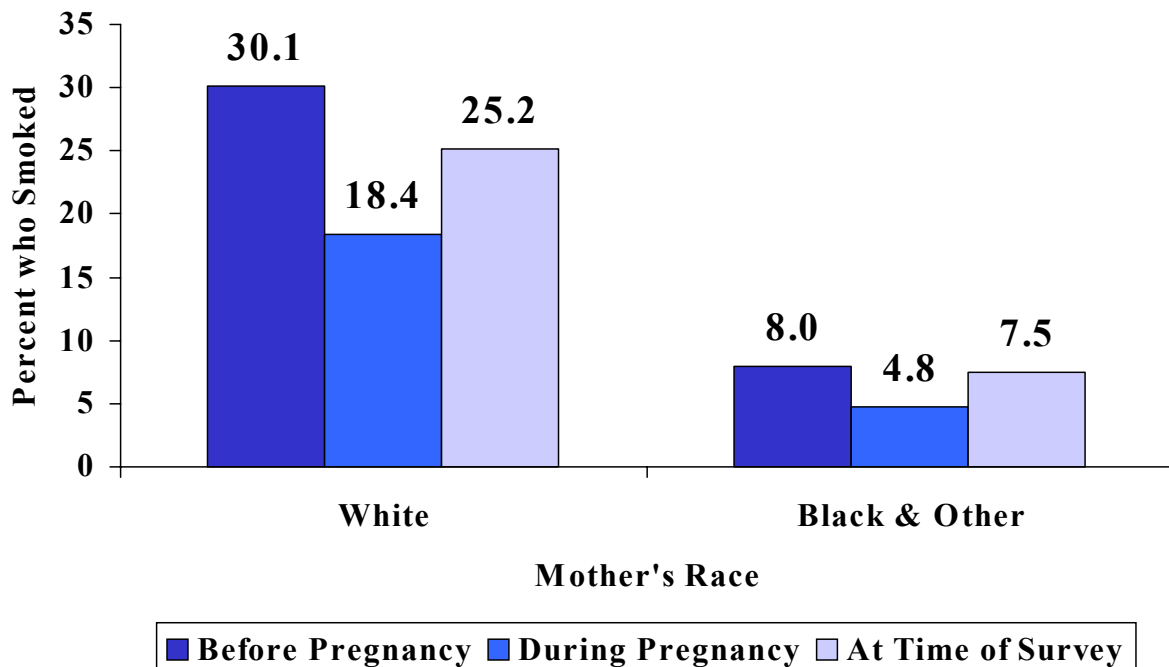
## Percent of Mothers who Smoked, Alabama PRAMS 1993-2000 (Question #29, 30, & 31 of the PRAMS Survey)



Approximately one mother in four stated she smoked in the three months before becoming pregnant. Many of the mothers who quit smoking while they were pregnant resumed smoking after their babies were born, but rates of smoking remained lower than before pregnancy. One objective of Healthy People 2000 was to reduce tobacco use among pregnant women to no more than 10 percent. According to the survey, 14.0 percent of Alabama’s pregnant women smoked in 2000. There has been no statistically significant change over time in the percent of mothers smoking before pregnancy, during pregnancy, or after pregnancy.

CONFIDENCE INTERVALS								
YEAR/ SMOKED	1993	1994	1995	1996	1997	1998	1999	2000
BEFORE PREGNANCY	21.4-26.1	20.8-25.8	25.4-30.8	22.7-27.8	23.5-28.8	21.0-26.2	21.9-27.2	20.3-25.6
DURING PREGNANCY	12.6-16.4	13.0-17.3	14.0-18.4	13.1-17.3	12.4-16.5	12.3-16.5	12.0-16.2	11.9-16.1
AT TIME OF SURVEY	17.0-21.3	19.1-23.9	21.1-26.2	18.6-23.4	20.2-25.1	18.2-23.0	18.4-23.4	17.1-22.0

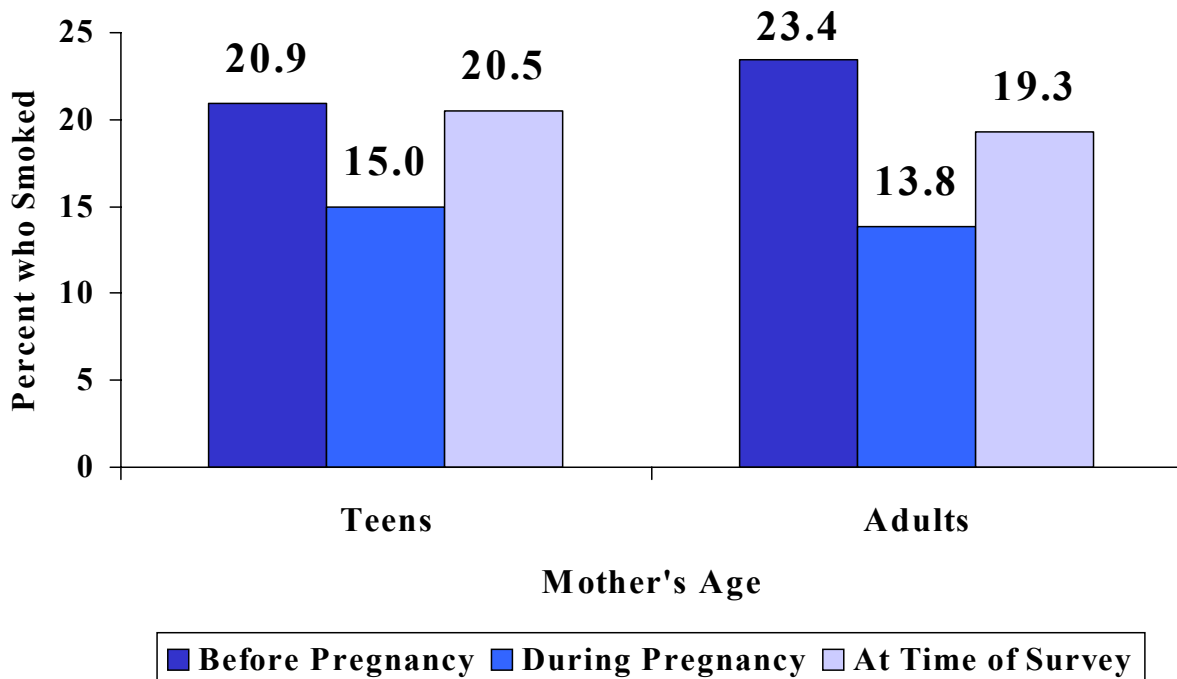
## Percent of Mothers who Smoked by Mother's Race, Alabama PRAMS 2000 (Question #29, 30, & 31 of the PRAMS Survey)



The percent of white mothers who smoked before pregnancy, during pregnancy, and after pregnancy was almost four times higher than that of black and other race mothers. Both white and black and other race smokers showed the same trend—smoking decreased during pregnancy, but increased again by the time of the survey.

CONFIDENCE INTERVALS			
SMOKED/ RACE	BEFORE PREGNANCY	DURING PREGNANCY	AT TIME OF SURVEY
WHITE	26.7-33.6	15.6-21.2	22.0-28.4
BLACK & OTHER	4.9-11.2	2.2-7.4	4.5-10.6

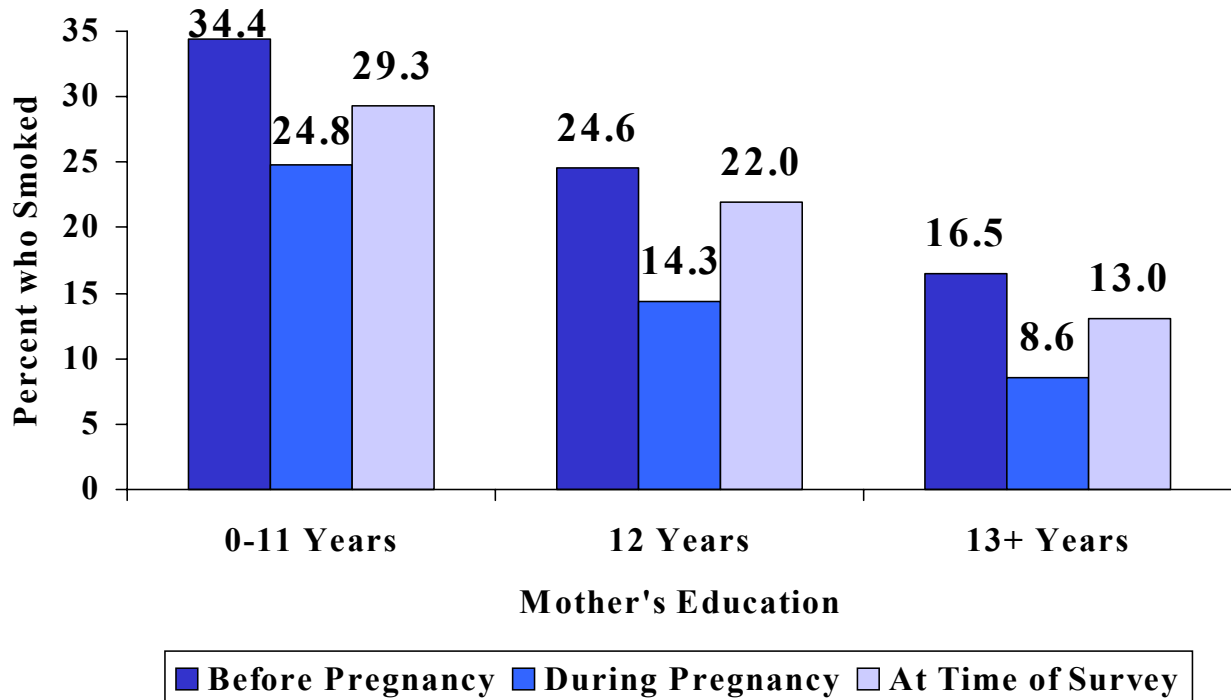
## Percent of Mothers who Smoked by Mother's Age, Alabama PRAMS 2000 (Question #29, 30, & 31 of the PRAMS Survey)



For both teens and adults, smoking declined during pregnancy, but increased after delivery to almost the same percent as before pregnancy. This trend was statistically significant for adults only. There was no statistically significant change in smoking habits before pregnancy, during pregnancy, or after pregnancy among teenagers in 2000. The differences between adults and teens smoking before, during, or after pregnancy were not statistically significant.

CONFIDENCE INTERVALS			
SMOKED/ AGE	BEFORE PREGNANCY	DURING PREGNANCY	AT TIME OF SURVEY
TEENS	14.6-27.1	9.6-20.4	14.3-26.6
ADULT	20.5-26.3	11.5-16.1	16.6-22.0

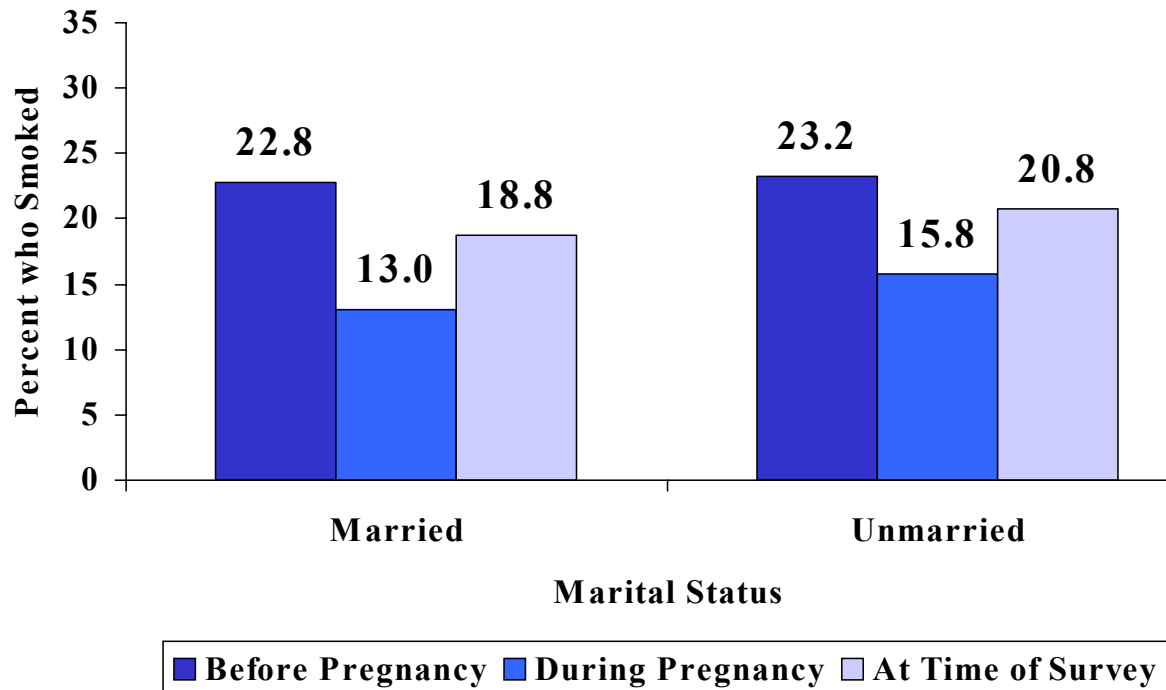
## Percent of Mothers who Smoked by Mother's Education, Alabama PRAMS 2000 (Question #29, 30, & 31 of the PRAMS Survey)



There is an inverse correlation between mother's education and smoking before pregnancy, during pregnancy, and after pregnancy. As the mother's education increases, the percent of mothers smoking decreases. Smoking is lowest for mothers with more than a high school education, but almost nine percent of those smoked during pregnancy.

CONFIDENCE INTERVALS			
SMOKED/ EDUCATION	BEFORE PREGNANCY	DURING PREGNANCY	AT TIME OF SURVEY
0-11 YEARS	27.8-40.9	19.0-30.5	23.3-35.4
12 YEARS	20.1-29.2	10.7-18.0	17.6-26.4
13+ YEARS	12.9-20.1	5.9-11.2	9.8-16.3

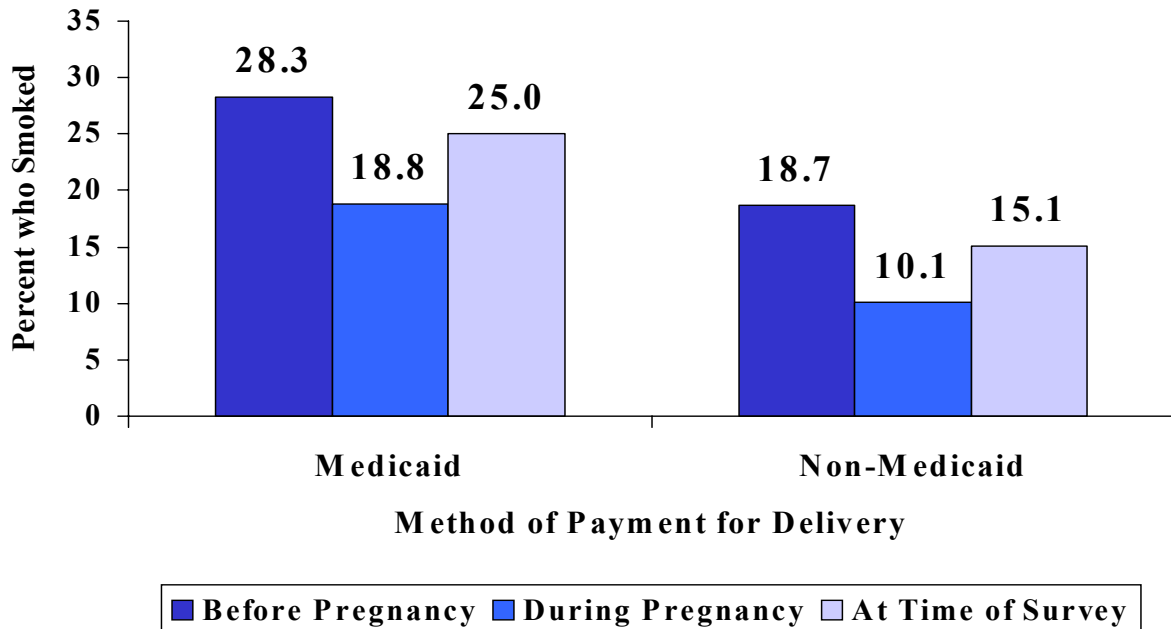
## Percent of Mothers who Smoked by Marital Status, Alabama PRAMS 2000 (Question #29, 30, & 31 of the PRAMS Survey)



There was no statistically significant difference in smoking before pregnancy, during pregnancy, and after pregnancy between married and unmarried mothers. For both marital statuses, many mothers who ceased smoking during pregnancy resumed smoking after pregnancy.

CONFIDENCE INTERVALS			
SMOKED/ MARITAL STATUS	BEFORE PREGNANCY	DURING PREGNANCY	AT TIME OF SURVEY
MARRIED	19.6-26.0	10.6-15.5	15.9-21.8
UNMARRIED	18.7-27.8	11.9-19.6	16.4-25.2

**Percent of Mothers who Smoked by  
Method of Payment,  
Alabama PRAMS 2000  
(Question #29, 30, & 31 of the PRAMS Survey)**



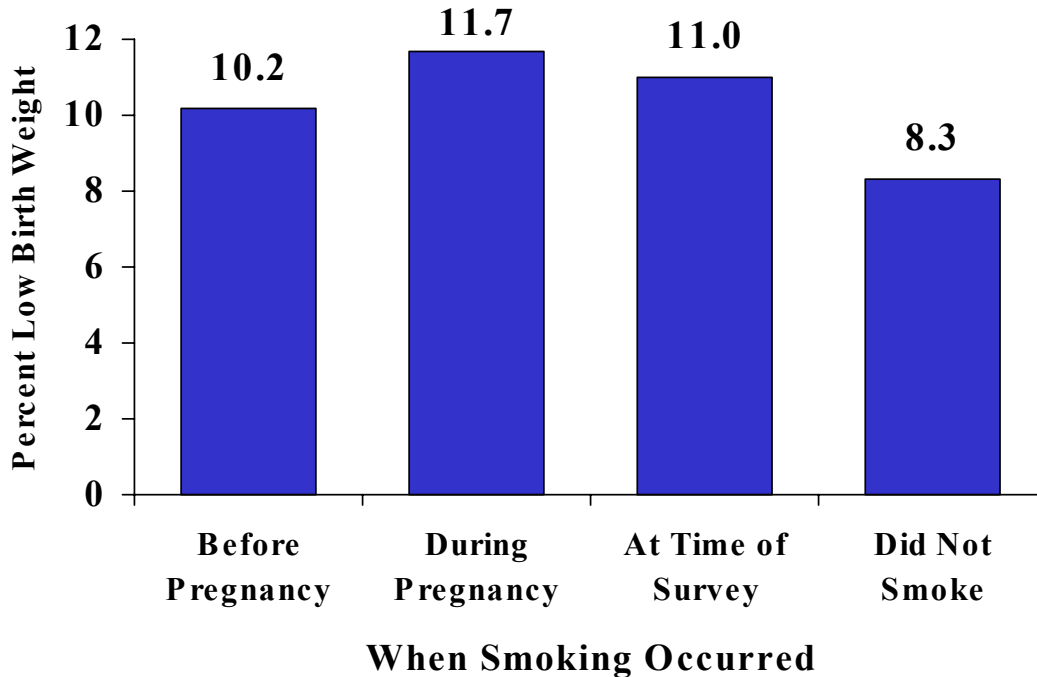
Cigarette smoking was significantly higher among mothers on Medicaid before, during and after pregnancy than non-Medicaid mothers. Smoking decreased 33.6 percent during pregnancy among mothers whose deliveries were covered by Medicaid and decreased 46.0 percent among mothers whose deliveries were not covered by Medicaid.

CONFIDENCE INTERVALS			
SMOKED/ PAYMENT METHOD	BEFORE PREGNANCY	DURING PREGNANCY	AT TIME OF SURVEY
MEDICAID	24.3-32.3	15.3-22.2	21.2-28.8
NON- MEDICAID	15.2-22.2	7.4-12.7	11.8-18.3



## Percent Low Birth Weight by Smoking Status of Mother and Period of Smoking, Alabama PRAMS 2000

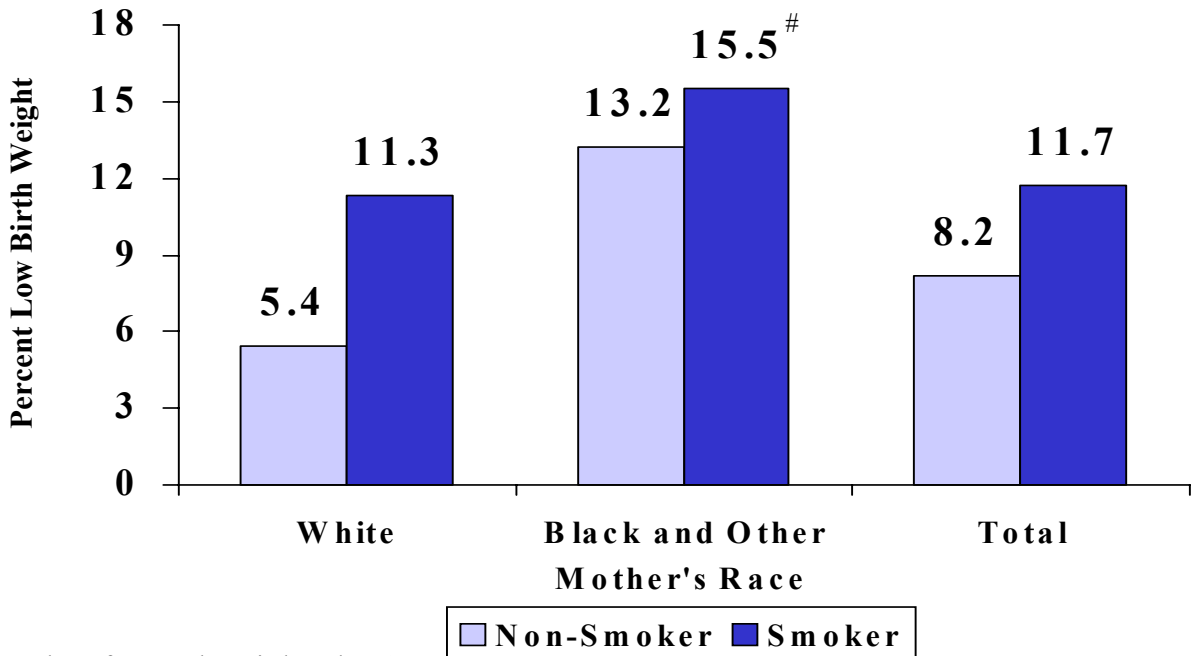
(Questions #29, 30, & 31 of the PRAMS Survey)



Numerous studies have shown that smoking is associated with low birth weight and premature births. The percent of low weight births was slightly higher among mothers who smoked during pregnancy, compared to those who smoked before pregnancy or at the time of the survey. The percent of low weight births was significantly higher for mothers who smoked during pregnancy, than for those who did not smoke at all.

CONFIDENCE INTERVALS				
PERIOD OF SMOKING	BEFORE PREGNANCY	DURING PREGNANCY	AT TIME OF SURVEY	DID NOT SMOKE
PERCENT	8.6-11.8	9.4-14.1	9.2-12.9	7.8-8.8

## Percent Low Birth Weight by Race and Smoking Status of Mother During Pregnancy, Alabama PRAMS 2000 (Question #30 of the PRAMS Survey)

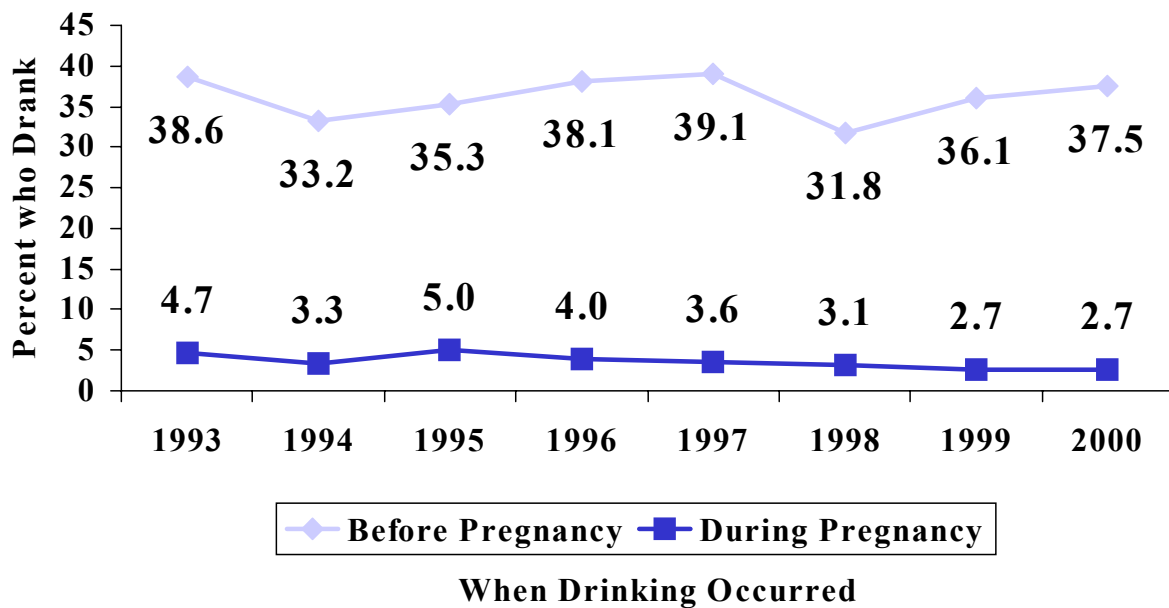


Low weight births were more evident among black and other race mothers regardless of smoking status during pregnancy. In fact, low weight births to black and other *non*-smokers were 16.8 percent higher than low weight births to white women who *did* smoke. The percent of low weight births to white women who smoked was more than twice as high as the percent of low weight births to non-smoking white women.

SMOKING STATUS/RACE	NON-SMOKER	SMOKER
WHITE	4.9-5.9	8.8-13.7
BLACK & OTHER	11.7-14.7	5.3-25.8
TOTAL	7.8-8.6	9.3-14.1

## Percent of Mothers who Drank Before and During Pregnancy, Alabama PRAMS 1993-2000

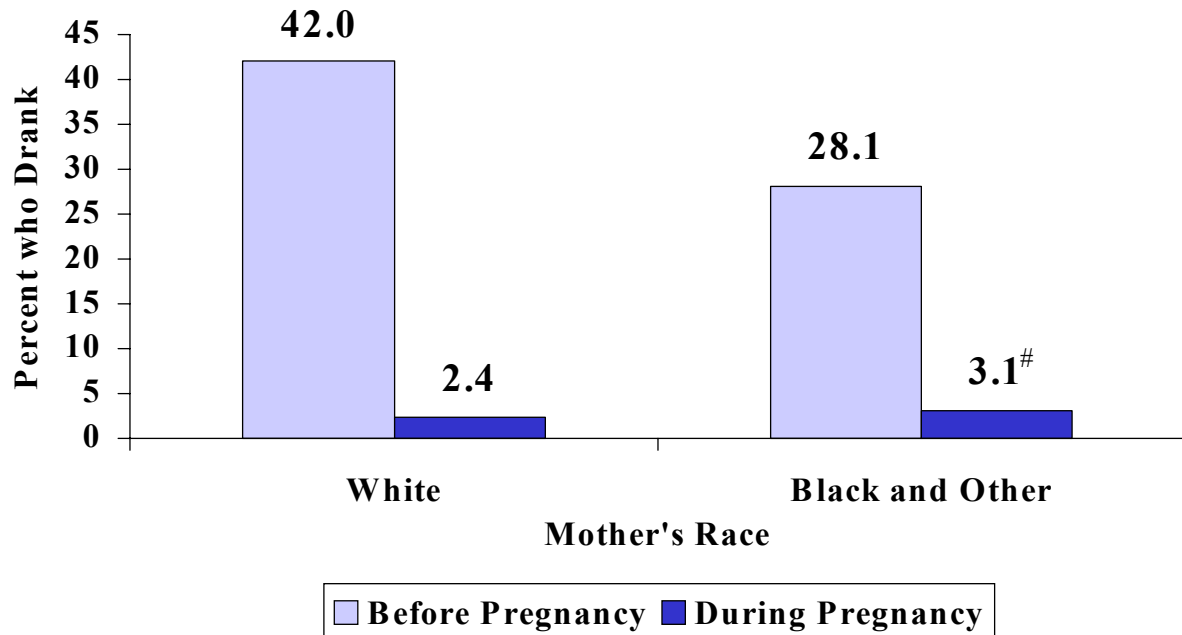
(Question #32, 33, & 34 of the PRAMS Survey)



In the survey, mothers were asked how many alcoholic drinks they drank in an average week in the three months before becoming pregnant and in the last three months of pregnancy. More than one-third of Alabama mothers responded that they drank alcoholic beverages before pregnancy in 2000. Mothers significantly reduced their alcohol intake during pregnancy, a possible outcome of health care providers counseling mothers on the ill effects of drinking while pregnant. The decline in drinking during pregnancy since 1993 is not statistically significant.

CONFIDENCE INTERVALS								
YEAR/ DRANK	1993	1994	1995	1996	1997	1998	1999	2000
<b>BEFORE PREGNANCY</b>	35.9-41.4	30.3-36.1	32.4-38.2	35.2-41.0	36.1-42.1	28.9-34.8	33.1-39.2	34.4-40.5
<b>DURING PREGNANCY</b>	3.5-5.9	2.3-4.3	3.6-6.3	2.9-5.2	2.4-4.7	2.0-4.1	1.7-3.7	1.6-3.7

## Percent of Mothers who Drank by Mother's Race, Alabama PRAMS 2000 (Question #32, 33, & 34 of the PRAMS Survey)

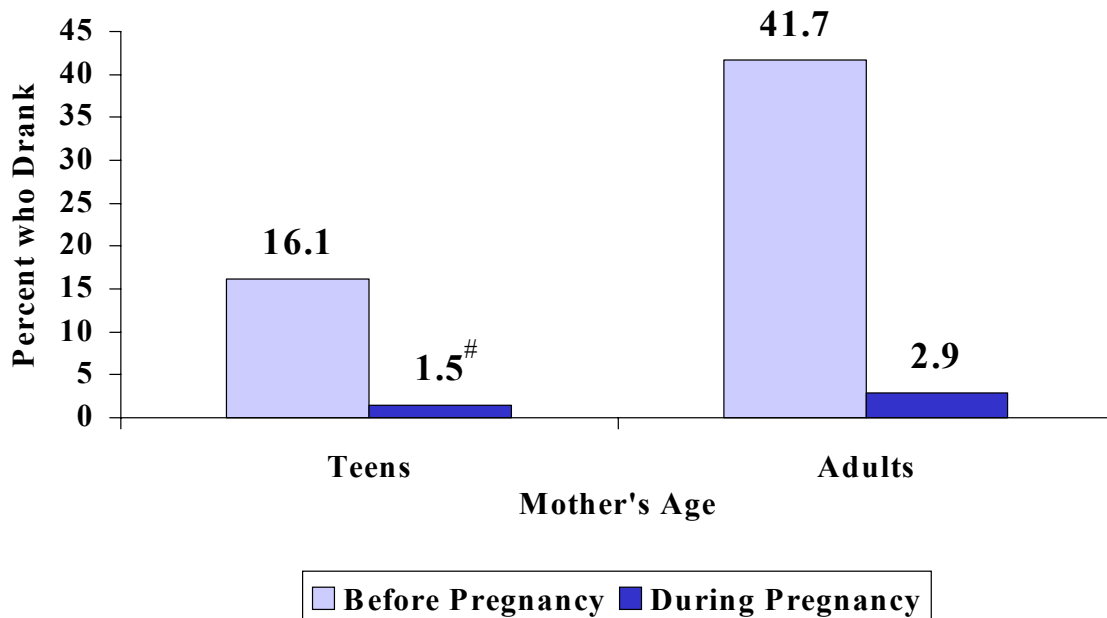


<sup>#</sup>Number of respondents is less than 20.

White mothers were significantly more likely to drink than black and other race mothers before pregnancy. Drinking declined among both white and black and other race mothers during pregnancy. There was no statistically significant difference in the percent drinking during pregnancy by mother's race.

CONFIDENCE INTERVALS		
DRANK/ RACE	BEFORE PREGNANCY	DURING PREGNANCY
WHITE	38.2-45.8	1.2-3.7
BLACK & OTHER	23.2-33.1	1.3-5.0

## Percent of Mothers who Drank by Mother's Age, Alabama PRAMS 2000 (Question #32, 33, & 34 of the PRAMS Survey)

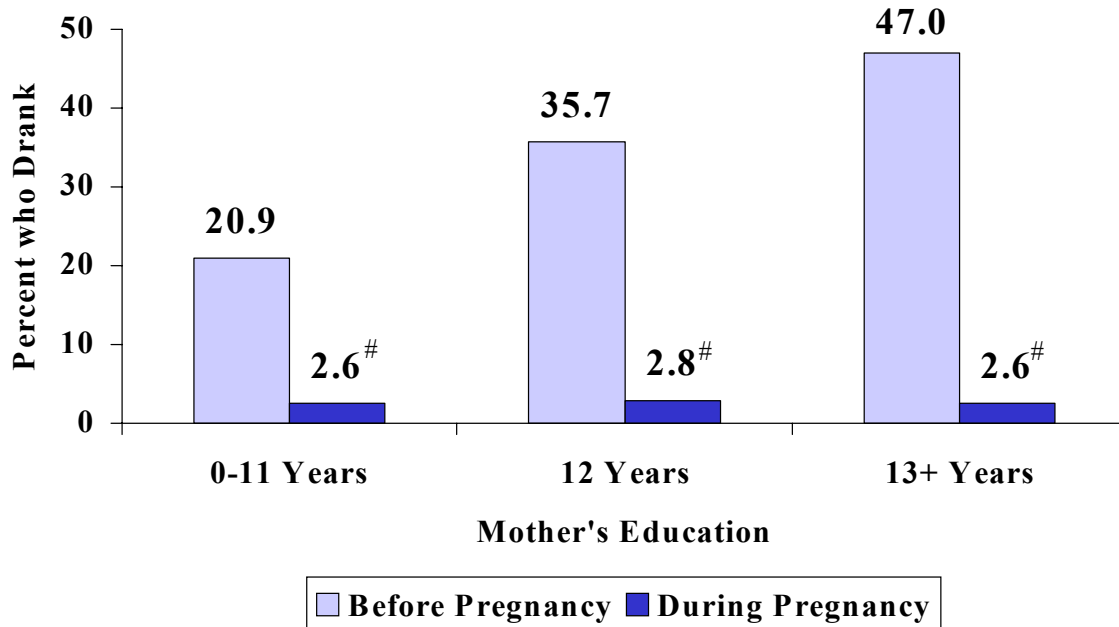


<sup>#</sup> Number of respondents is less than 20.

As expected, older mothers were significantly more likely to drink than teen mothers before pregnancy. However, about 16 percent of mothers under the age of 20 reported consuming alcohol before pregnancy, despite being underage. Drinking decreased significantly by approximately 90 percent for both age groups during pregnancy.

CONFIDENCE INTERVALS		
DRANK/ AGE	BEFORE PREGNANCY	DURING PREGNANCY
TEENS	10.7-21.5	0.0-3.1
ADULTS	38.3-45.1	1.7-4.1

## Percent of Mothers who Drank by Mother's Education, Alabama PRAMS 2000 (Question #32, 33, & 34 of the PRAMS Survey)

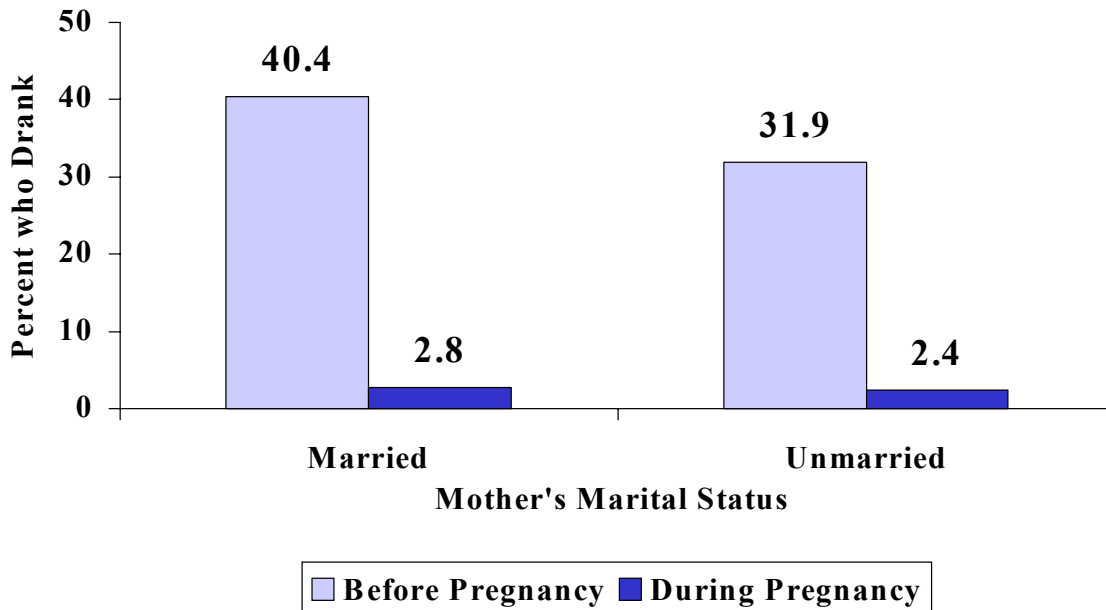


<sup>#</sup> Number of respondents is less than 20.

Mothers with higher levels of education were significantly more likely to drink before pregnancy. Drinking before pregnancy was highest among mothers with one or more years of college, and lowest among mothers with less than 12 years of education. Less drinking among women with lower education levels may be attributable in part to age. There was no statistically significant difference in the percent drinking during pregnancy by mother's education.

CONFIDENCE INTERVALS		
DRANK/ EDUCATION	BEFORE PREGNANCY	DURING PREGNANCY
0 – 11 YEARS	15.4-26.4	0.6-4.6
12 YEARS	30.6-40.7	1.1-4.5
13 + YEARS	42.2-51.9	1.0-4.3

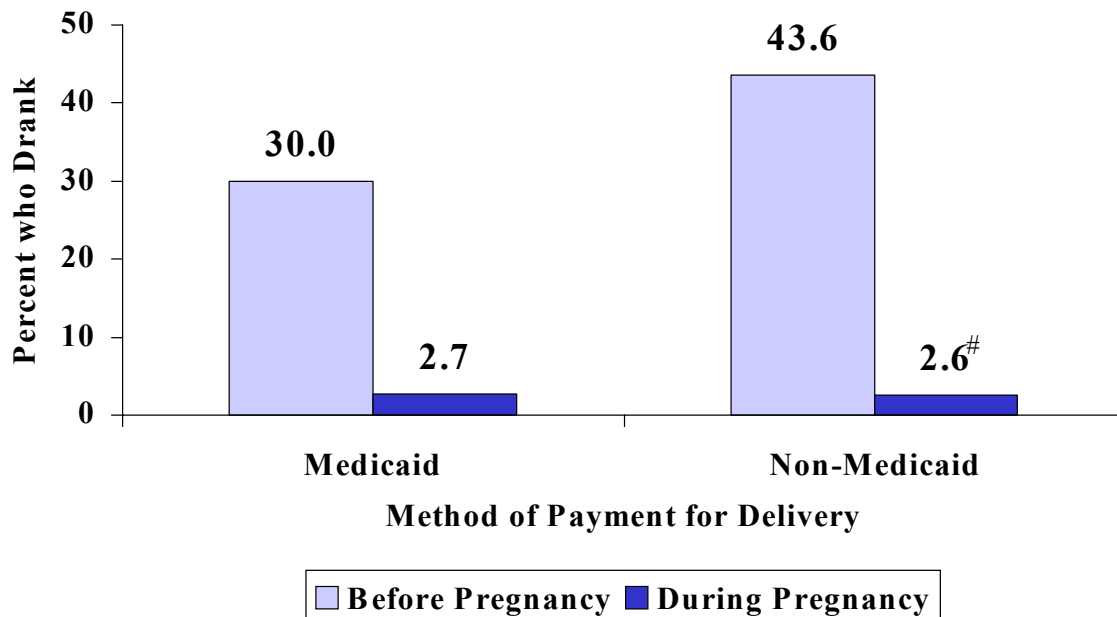
## Percent of Mothers who Drank by Marital Status, Alabama PRAMS 2000 (Question #32, 33, & 34 of the PRAMS Survey)



Both married and unmarried mothers drank significantly less during pregnancy, with both experiencing approximately a 90 percent decrease in drinking. There was no statistically significant difference in the percent drinking before pregnancy or during pregnancy by mother's marital status.

CONFIDENCE INTERVALS		
DRANK/ MARITAL STATUS	BEFORE PREGNANCY	DURING PREGNANCY
MARRIED	36.5-44.3	1.4-4.1
UNMARRIED	26.9-36.9	0.9-3.9

## Percent of Mothers who Drank by Method of Payment, Alabama PRAMS 2000 (Question #32, 33, & 34 of the PRAMS Survey)



<sup>#</sup> Number of respondents is less than 20.

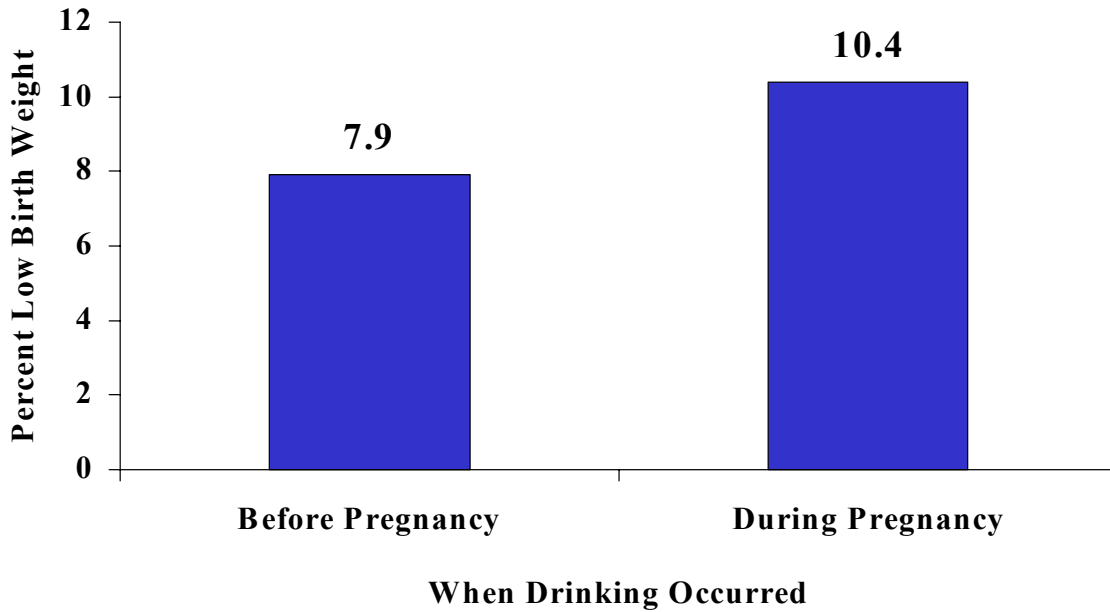
Mothers whose deliveries were not covered by Medicaid were significantly more likely to drink before pregnancy, than mothers whose deliveries were covered by Medicaid. Alcohol consumption decreased approximately 90 percent during pregnancy for mothers regardless of the method of payment for delivery. There was no statistically significant difference in the percent drinking during pregnancy by mother's method of payment for delivery.

CONFIDENCE INTERVALS		
DRANK/ PAYMENT METHOD	BEFORE PREGNANCY	DURING PREGNANCY
MEDICAID	26.0-34.0	1.3-4.1
NON-MEDICAID	39.2-48.1	1.1-4.1



## Percent Low Birth Weight by Drinking Status, Alabama PRAMS 2000

(Question #32, 33, & 34 of the PRAMS Survey)



About 7.9 percent of mothers who drank before pregnancy had a low birth weight baby. Among mothers who drank during pregnancy, approximately 10.4 percent of the births were low weight births. Since small numbers of women drank during pregnancy, there is not a statistically significant difference between mothers who drank before pregnancy or during pregnancy.

CONFIDENCE INTERVALS		
DRANK	BEFORE PREGNANCY	DURING PREGNANCY
PERCENT LBW	7.0-8.9	5.0-15.7

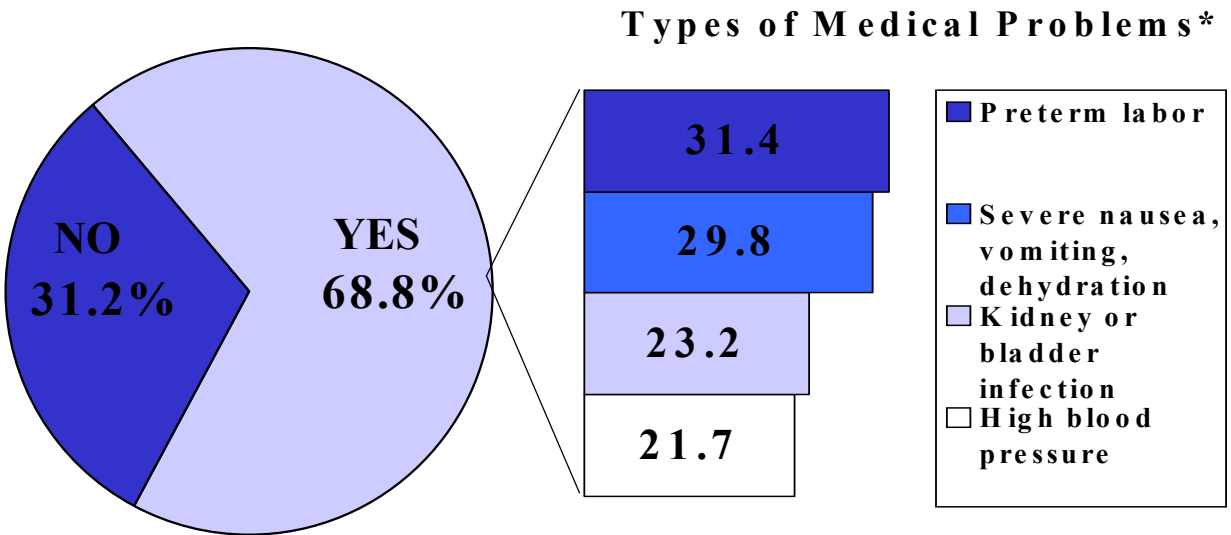
## **Mother's Negative Health Behaviors Comments**

- ... if you don't smoke please don't ever start. I wish I could stop but it's hard to do, also, if you smoke, don't smoke in the house with your children respect them enough to go out-side.
- I quit smoking when I found out I was pregnant. I started back after [the] baby was born.
- I did smoke during my pregnancy with all 3 of my children. I am not proud of it. I pray everyday that my children will continue to be healthy.
- I would like for mothers to put their babies first. If they smoke or drink please stop.
- In response to answering 'No' to doctor talking with mother about smoking, drinking, or drugs during prenatal care visits – “My doctor has know me for 13 years and knew I didn't drink alcohol, smoke or do drugs.”
- Please keep your child away from smoke as much as possible. My father smokes in the restroom. [My child] got an ear infection because of the few times she was around smoke.
- I believe because I have never smoked, or partaken of any kind of alcohol or coffee or tea that all my pregnancies have been good.
- The workers should respect a patient's choices – I smoke – but, not around him. I've smoked since I was 7 to 9 yrs... I've smoke 20 yrs. I cut back.
- Although my doctor did not talk to me one on one about HIV, drugs, smoking, or alcohol, the office gave me adequate reading material... They asked if I used these things. After I said no, they went no further.
- I did not smoke and when [I] thought it was possible that I might be pregnant – did not drink any alcohol.
- Spend time to find the right doctor for your baby, don't smoke or drink with pregnancy, it has a lot to do with birth weight.

# Health Care System Issues



# Mother Experienced Medical Problem During Pregnancy, Alabama PRAMS 2000 (Question #26 of the PRAMS Survey)

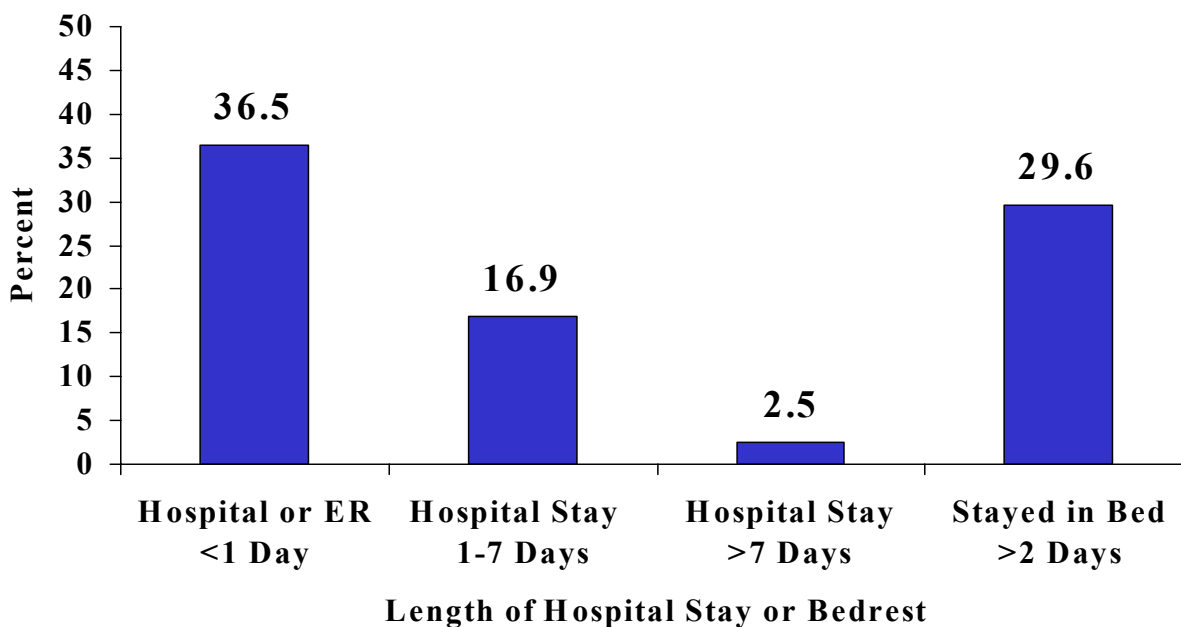


\*Items not mutually exclusive, therefore percentages will not equal 100.

Over two-thirds of Alabama mothers reported having a medical problem during pregnancy. Almost a third of mothers reported preterm labor. About 30 percent reported severe nausea, vomiting, or dehydration. Almost a quarter reported kidney or bladder infection, and 21.7 percent reported high blood pressure.

CONFIDENCE INTERVALS						
PROBLEMS	YES	NO	PRETERM LABOR	NAUSEA, VOMITING, DEHYDRATION	KIDNEY OR BLADDER INFECTION	HIGH BLOOD PRESSURE
PERCENT	65.8-71.8	28.2-34.2	28.6-34.3	26.9-32.6	20.6-25.9	19.1-24.3

## Mother Stayed in Hospital or was on Bedrest During Pregnancy, Alabama PRAMS 2000 (Question #27 of the PRAMS Survey)

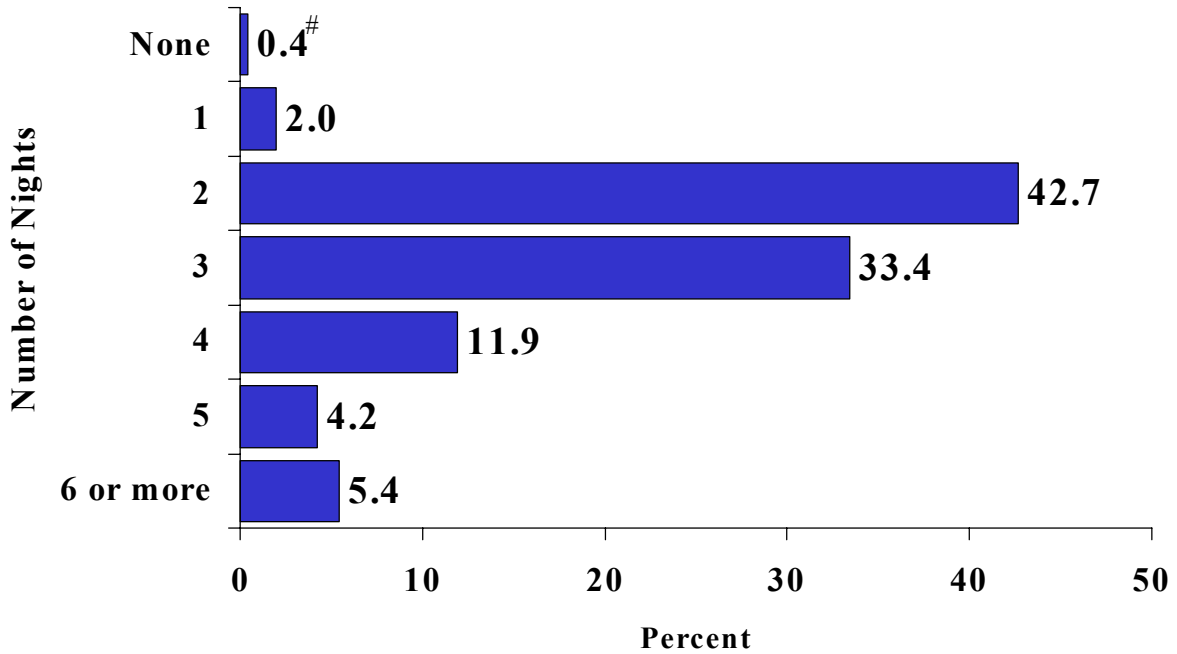


Mothers who answered yes to experiencing at least one medical problem during their pregnancy, were asked if they stayed in the hospital or were on bedrest because of the medical problem. Of those who reported at least one problem, over a third of mothers visited a hospital and stayed less than a day, 16.9 percent stayed from one to seven days, 2.5 percent stayed longer than seven days, and 29.6 percent stayed in bed for more than 2 days at a doctor or nurse's advice.

CONFIDENCE INTERVALS				
LENGTH OF STAY OR BEDREST	HOSPITAL OR ER <1 DAY	HOSPITAL STAY 1-7 DAYS	HOSPITAL STAY >7 DAYS	STAYED IN BED >2 DAYS
PERCENT	32.9-40.1	14.3-19.5	1.7-3.3	26.3-32.9

## Mother's Nights in Hospital for Delivery, Alabama PRAMS 2000

(Question #39 & 41 of the PRAMS Survey)



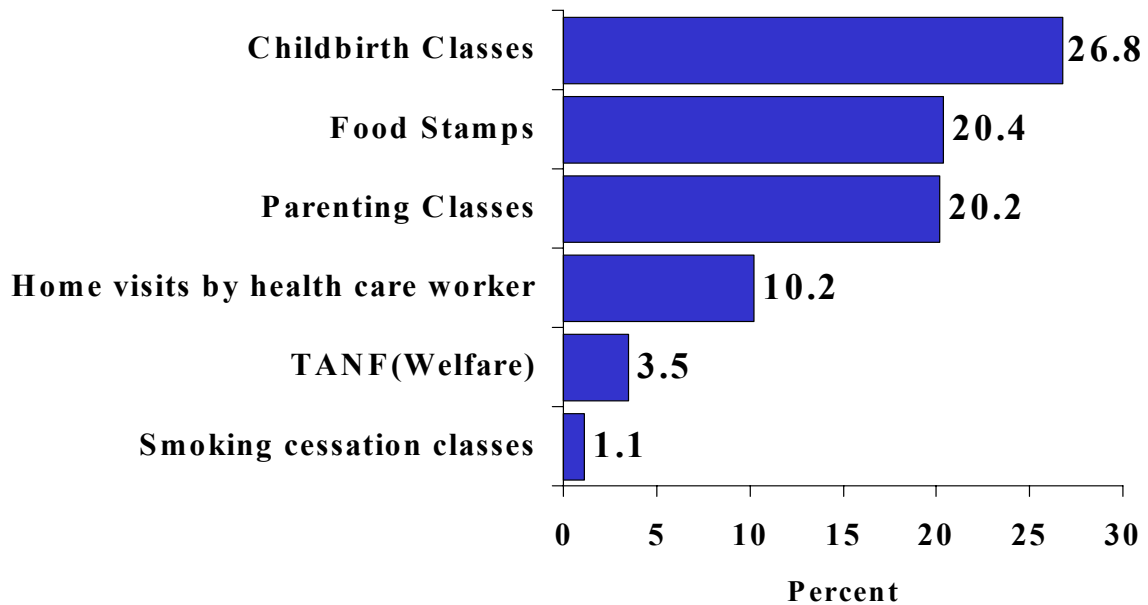
<sup>#</sup> Number of respondents is less than 20.

Over 40 percent of mothers stayed two nights in the hospital following delivery of their babies, and approximately one mother out of three stayed three nights. More than 5 percent of mothers stayed in the hospital six or more nights. Early discharge after delivery has been a health concern in recent years. There has been a marked decrease in the percent of mothers who stayed only one night in the hospital following delivery. One-night discharges had a statistically significant decrease from 15.7 percent (13.5-17.9) in 1996, to 2.0 percent (1.1-2.9) in 2000.

CONFIDENCE INTERVALS							
NUMBER OF NIGHTS	NONE	1	2	3	4	5	6 OR MORE
PERCENT	0.0-0.8	1.1-2.9	39.5-45.9	30.4-36.4	9.9-13.9	3.0-5.3	4.2-6.5

# Percent of Mothers Receiving Selected Services During Pregnancy, Alabama PRAMS 2000

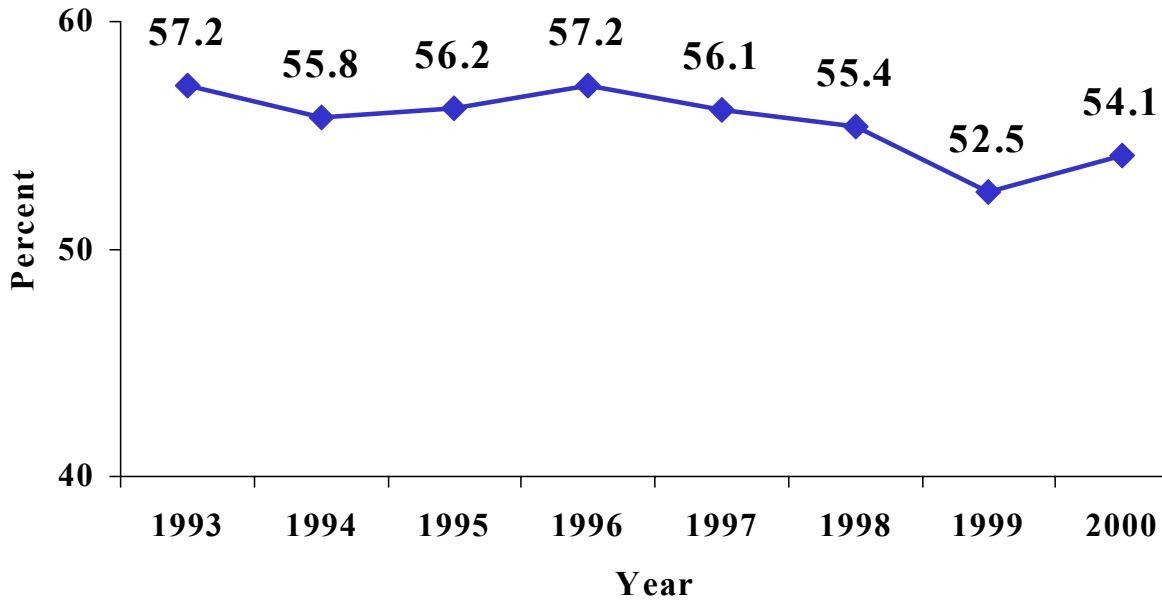
(Question #68 of the PRAMS Survey)



Just over one-quarter of Alabama mothers reported receiving childbirth classes in 2000. One mother in five received food stamps, and one in five received parenting classes. About 10 percent had home visits by a health care worker. Only 3.5 percent of Alabama mothers reported receiving Temporary Assistance for Needy Families (TANF) in 2000. One percent received smoking cessation classes.

CONFIDENCE INTERVALS						
SELECTED SERVICES	CHILDBIRTH CLASSES	FOOD STAMPS	PARENTING CLASSES	HOME VISITS	TANF (WELFARE)	SMOKING CESSATION CLASSES
PERCENT	24.0-29.5	18.1-22.7	17.6-22.8	8.5-11.9	2.5-4.6	0.5-1.7

**WIC Receipt During Pregnancy,  
Alabama PRAMS 1993-2000  
(Question #25 of the PRAMS Survey)**



More than half (54.1%) of Alabama mothers said they received the Supplemental Food Program for Women, Infants, and Children (WIC) benefits during pregnancy in 2000. There is a statistically significant decrease in the percent of women who received WIC from 1993 to 1999.

CONFIDENCE INTERVALS								
YEAR/ WIC RECEIPT	1993	1994	1995	1996	1997	1998	1999	2000
PERCENT	55.3-59.1	53.7-57.9	54.1-58.2	55.0-59.4	53.8-58.3	53.1-57.7	50.0-54.9	51.7-56.5



## Mother's Health Care System Comments

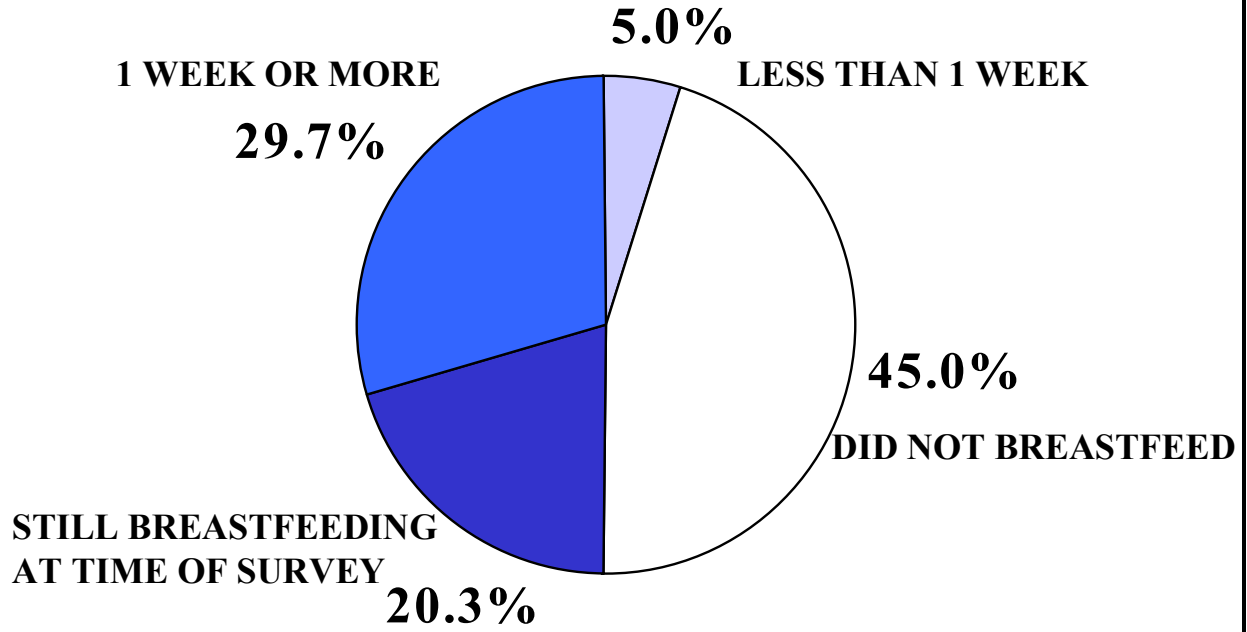
- Please stress the importance of knowing the signs of toximia. I had seizures and was in the ICU for 3 days. My son... was 6 wks early.
- Because I had high blood pressure [and diabetes] with my pregnancy... I [only] went 30 weeks.
- Hospital stays after birth should not be so short. Seventy-two (72) hours after a C-section would be better than forty-eight (48) hours.
- The time that the hospital gives for mothers to stay in the hospital after having a baby needs to be extended. Two (2) days is not enough time for a person to be discharged after they give birth.
- Childbirth classes and parenting classes are not offered by the Health Department.
- There need[s to be more] information about high risk pregnancies especially in the birth classes.
- I would like to apply for Public Assistance and food stamps.
- Make available everything to young mothers – start programs to help them not... feel bad about getting help from WIC, food stamps or welfare...
- WIC is a vital resource for mothers whom cannot breast-feed. Without WIC we could not afford the formula. It has been a blessing sent from God.
- They need to keep mothers on WIC after the baby is born because we need to stay healthy for future pregnancies and we are not able to go back to work right away.
- Also the WIC program is great. I would have not known about it, unless my friend mentioned it to me. Need to provide more information on WIC and how to apply and eligibility.
- I feel that WIC should be for all mothers that would like the benefits of it. I feel that more mothers such as myself would be able to stay home with their babies if they could get assistance from WIC.
- ... we are on a very limited income and once I discontinue breastfeeding I think formula should be either more reasonably priced or all babies supplied with a certain amount during their first year. I know there is the WIC program but middle-low-income families (like us) don't qualify. With all the other added expenses of a new baby this would surely help.
- Many things are too high in cost... my husband and I both work... and make it pay check to pay check. There is no reason for babies to cost so much for things they cannot do without, but yet we make too much for WIC.

# Breastfeeding



## Percent of Mothers Who Breastfed, Alabama PRAMS 2000\*

(Question #49, 50, & 51 of the PRAMS Survey)



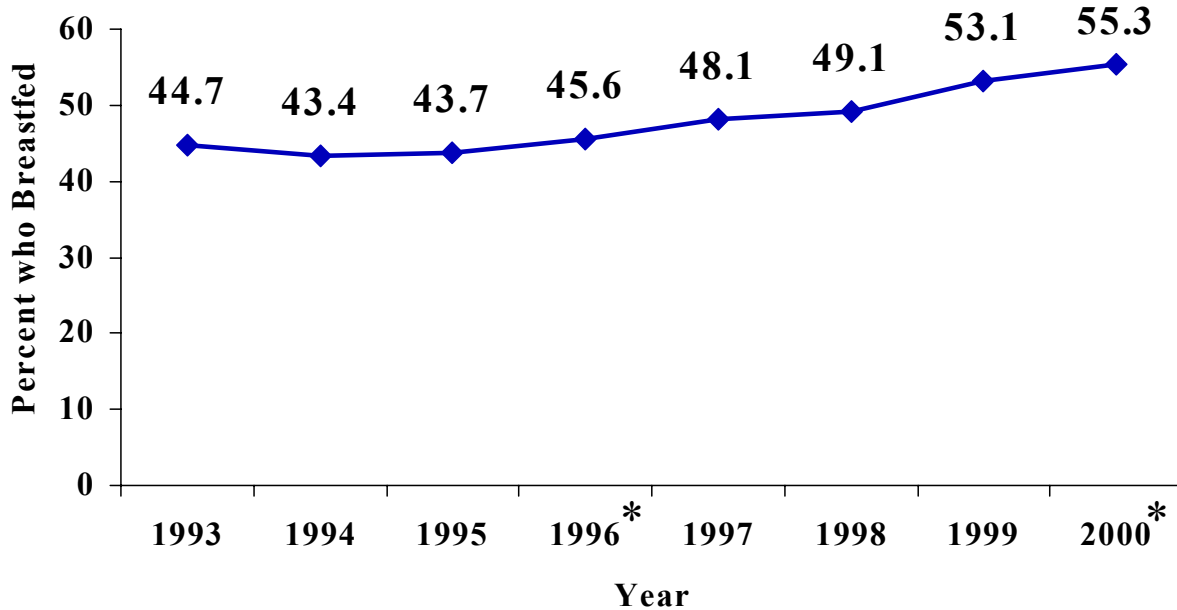
\*Change in Question from 1999.

Numerous benefits are associated with breastfeeding, not only for the infant, but for the mother as well. A national goal expressed in *Health People 2000* is to increase the proportion of mothers who breastfed in the early postpartum period to at least 75 percent. In 2000, only 55.0 percent of Alabama mothers attempted to breastfeed their babies, and 50.0 percent breastfed for more than 1 week. Many mothers (45.0%) did not breastfeed their newborns at all. Only one mother in five was still breastfeeding at the time of the survey.

CONFIDENCE INTERVALS				
TIME BREASTFED	DID NOT BREASTFEED	LESS THAN 1 WEEK	1 WEEK OR MORE	STILL BREASTFEEDING
PERCENT	41.9-48.0	3.7-6.4	26.8-32.7	17.7-22.9

## Percent of Mothers who Initiated Breastfeeding, Alabama PRAMS 1993-2000

(Question #49 of the PRAMS Survey)



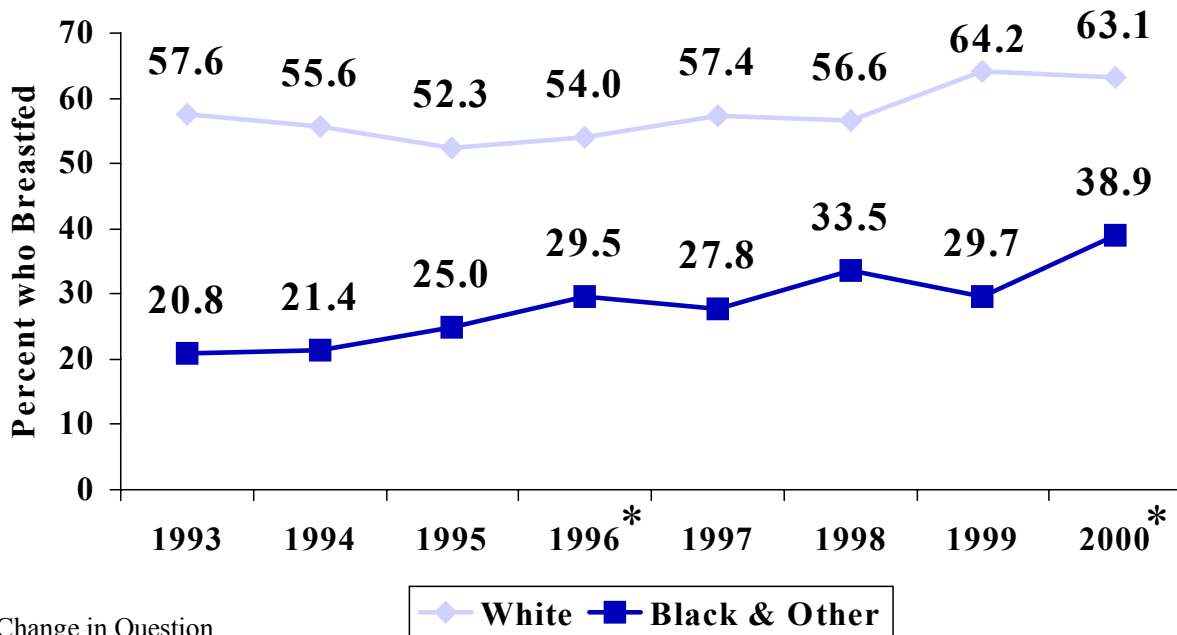
\*Change in Question.

The percent of Alabama mothers breastfeeding has been increasing since 1993. The question about breastfeeding changed in 1996 and in 2000, but the numbers are comparable. When the question was consistent from 1996 to 1999, the increase in percent breastfeeding was statistically significant.

CONFIDENCE INTERVALS								
YEAR	1993	1994	1995	1996	1997	1998	1999	2000
PERCENT BREASTFED	42.1-47.3	40.6-46.2	40.8-46.6	42.7-48.5	45.1-51.0	46.0-52.2	50.0-56.1	52.3-58.3

## Percent of Mothers who Initiated Breastfeeding by Mother's Race, Alabama PRAMS 1993-2000

(Question #49 of the PRAMS Survey)

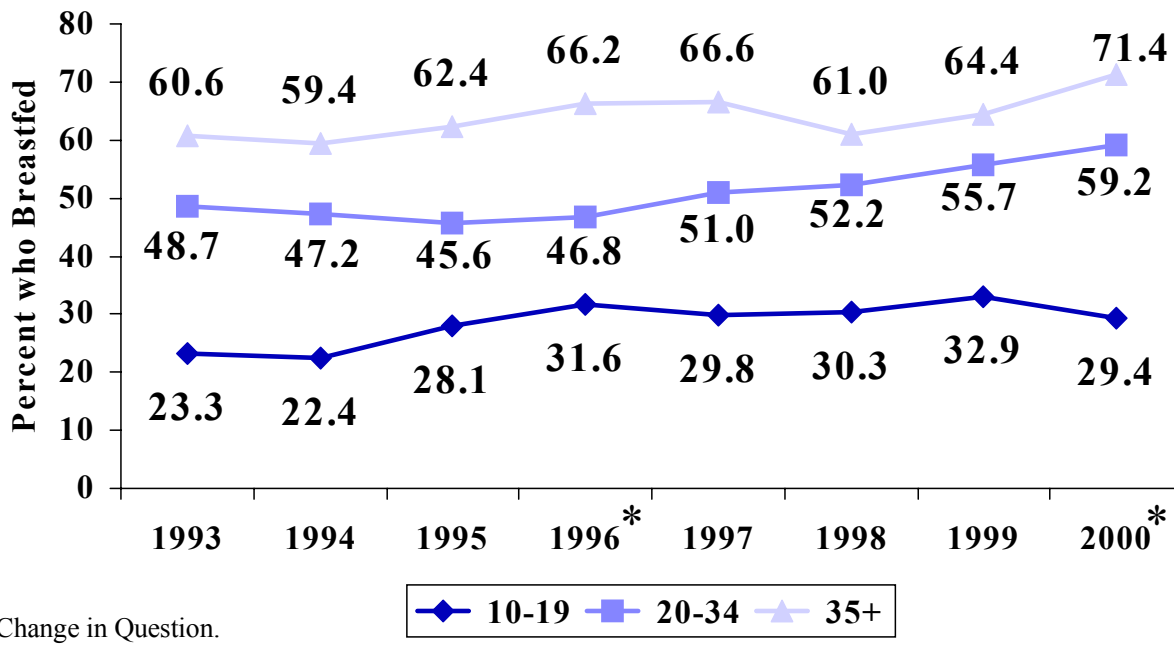


White mothers continue to show a significantly higher prevalence of breastfeeding when compared to black and other race mothers. However, since 1993, the percent of white mothers initiating breastfeeding increased just 9.5 percent; while the percent of black and other race mothers initiating breastfeeding increased 87.0 percent.

CONFIDENCE INTERVALS								
YEAR/ RACE	1993	1994	1995	1996	1997	1998	1999	2000
<b>WHITE</b>	54.3-60.9	52.0-59.2	48.7-55.9	50.3-57.6	53.8-61.1	52.8-60.3	60.6-67.9	59.4-66.8
<b>BLACK &amp; OTHER</b>	16.9-24.6	17.1-25.6	20.3-29.7	24.5-34.4	22.8-32.9	27.9-39.0	24.6-34.8	33.3-44.4

## Percent of Mothers who Initiated Breastfeeding by Mother's Age, Alabama PRAMS 1993-2000

(Question #49 of the PRAMS Survey)

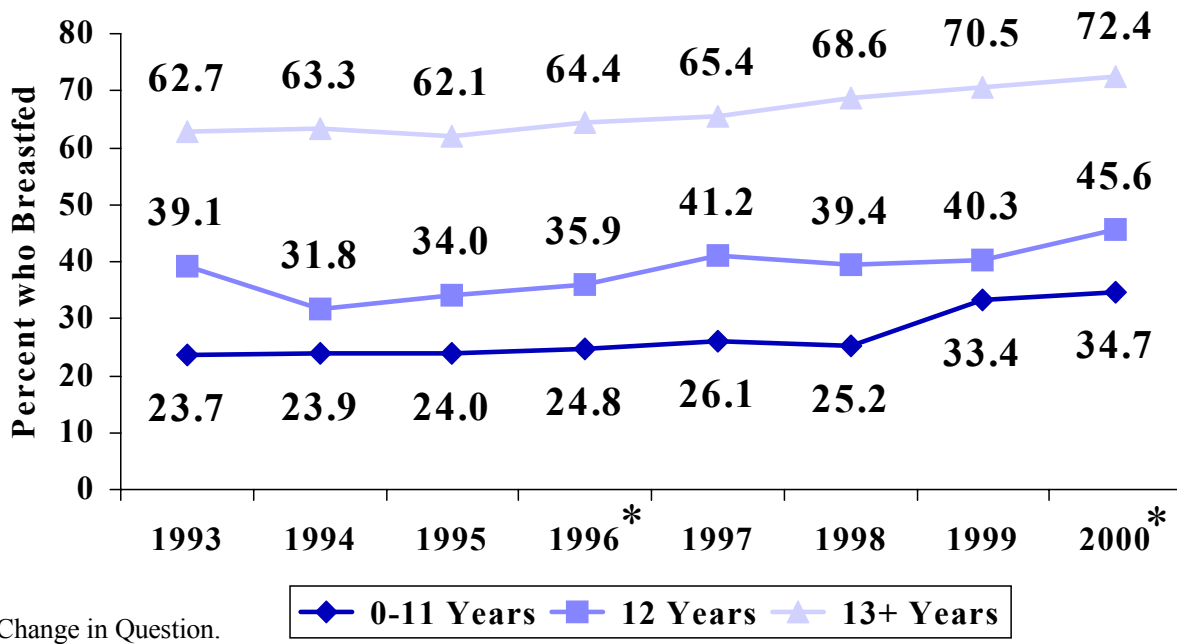


As age increased among Alabama mothers, so did the prevalence of breastfeeding initiation. The highest percent of mothers who breastfed was among women 35 and older, which was more than twice the percent of teenage mothers who breastfed. Over half of mothers 20-34 years of age attempted to breastfeed their babies.

CONFIDENCE INTERVALS								
YEAR/ AGE	1993	1994	1995	1996	1997	1998	1999	2000
10 – 19	17.8-28.7	16.6-28.2	21.8-34.4	25.2-38.0	23.6-36.0	23.6-37.0	25.8-40.1	22.2-36.7
20 - 34	45.6-51.8	43.8-50.6	42.2-49.1	43.3-50.2	47.5-54.6	48.6-55.8	52.1-59.3	55.8-62.7
35 +	50.5-70.6	49.5-69.3	51.5-73.2	56.6-75.7	55.6-77.5	49.3-72.6	54.8-73.9	60.0-82.8

## Percent of Mothers who Initiated Breastfeeding by Mother's Education, Alabama PRAMS 1993-2000

(Question #49 of the PRAMS Survey)

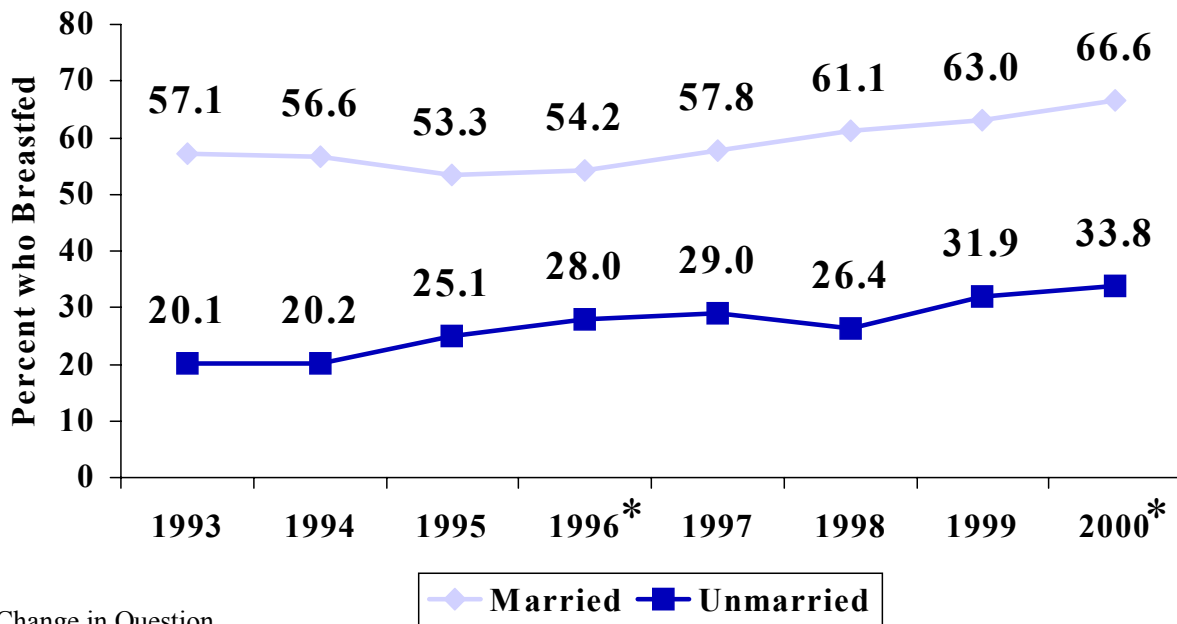


While mothers of all educational levels have experienced increased prevalence for breastfeeding initiation since 1993, breastfeeding prevalence remains higher for mothers with higher educational attainment. In 2000, over 72 percent of mothers who completed one of more years of college initiated breastfeeding, compared to just over one third of mothers who did not complete high school.

CONFIDENCE INTERVALS								
YEAR/ EDUCATION	1993	1994	1995	1996	1997	1998	1999	2000
0-11 YEARS	18.8-28.7	18.7-29.0	18.3-29.6	19.4-30.2	20.4-31.8	19.5-31.0	26.8-39.9	28.0-41.4
12 YEARS	34.7-43.5	26.8-36.7	29.1-38.8	30.9-41.0	36.1-46.2	33.9-44.8	34.8-45.7	40.2-50.9
13+ YEARS	58.4-67.0	58.9-67.7	57.6-66.5	60.0-68.9	60.9-70.0	64.2-73.0	66.2-74.8	68.0-76.8

## Percent of Mothers who Initiated Breastfeeding by Marital Status, Alabama PRAMS 1993-2000

(Question #49 of the PRAMS Survey)

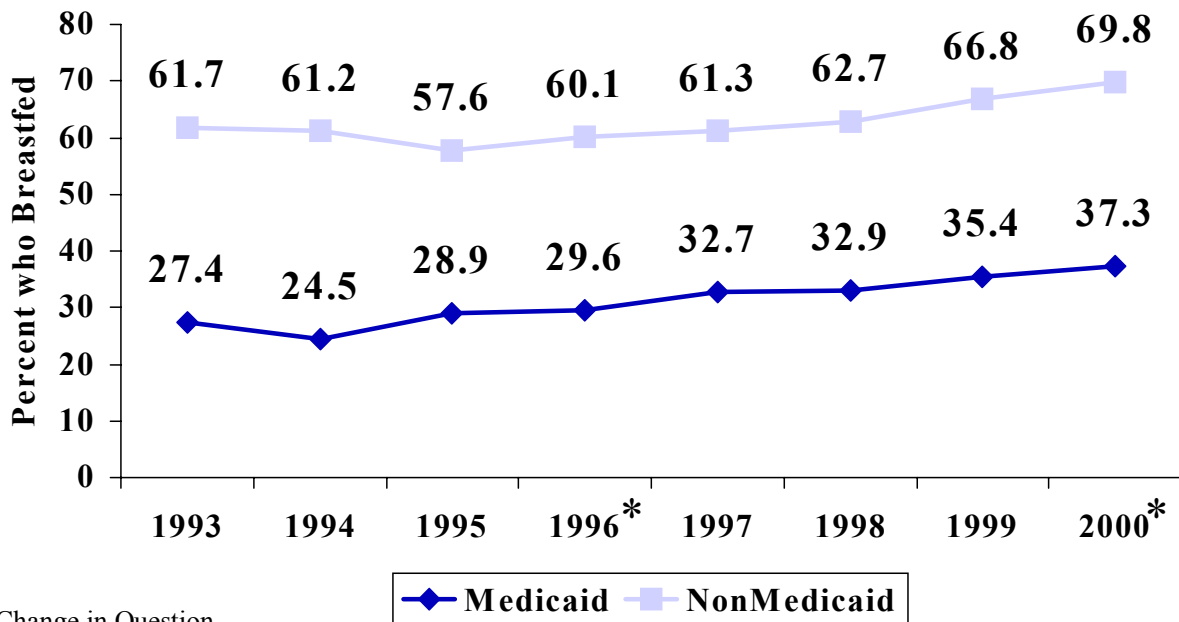


Married mothers continue to be about twice as likely to breastfeed their babies as their unmarried counterparts. This may be partly attributable to other factors, since married mothers were more likely to be older and have attended college.

CONFIDENCE INTERVALS								
YEAR/ MARITAL STATUS	1993	1994	1995	1996	1997	1998	1999	2000
<b>MARRIED</b>	53.8-60.4	52.9-60.2	49.6-56.9	50.5-57.9	54.0-61.6	57.2-64.9	59.3-66.7	63.0-70.3
<b>UNMARRIED</b>	16.2-23.9	16.1-24.3	20.5-29.6	23.2-32.8	24.3-33.8	21.7-31.1	26.8-37.1	28.5-39.0



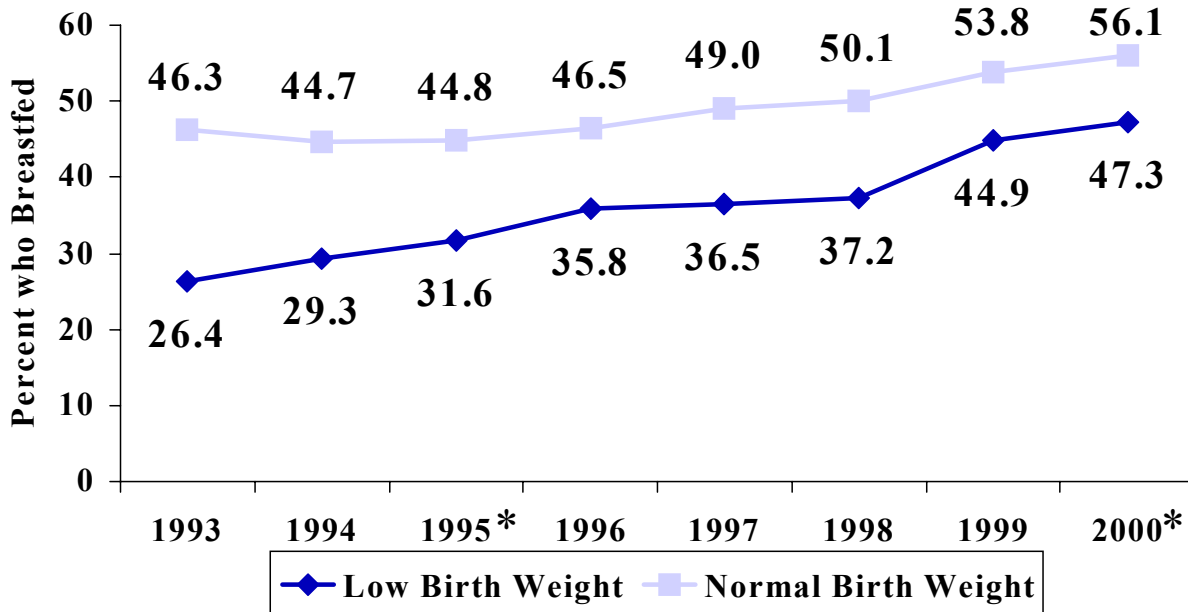
## Percent of Mothers who Initiated Breastfeeding by Method of Payment for Delivery, Alabama PRAMS 1993-2000 (Question #49 of the PRAMS Survey)



Almost 70 percent of mothers whose deliveries were not paid for by Medicaid breastfed their babies in 2000. The percent of non-Medicaid mothers who breastfed continues to be two times higher than the percent of Medicaid mothers who breastfed their babies.

CONFIDENCE INTERVALS								
YEAR/ PAYMENT METHOD	1993	1994	1995	1996	1997	1998	1999	2000
MEDICAID	23.9-30.9	20.9-28.2	25.1-32.7	25.6-33.5	28.6-36.8	28.7-37.1	31.1-39.7	33.0-41.7
NON- MEDICAID	57.8-65.5	57.0-65.4	53.3-61.9	55.8-64.3	57.0-65.5	58.4-67.1	62.5-71.0	65.6-74.0

## Percent of Mothers who Initiated Breastfeeding by Birth Weight, Alabama PRAMS 1993-2000 (Question #49 of the PRAMS Survey)

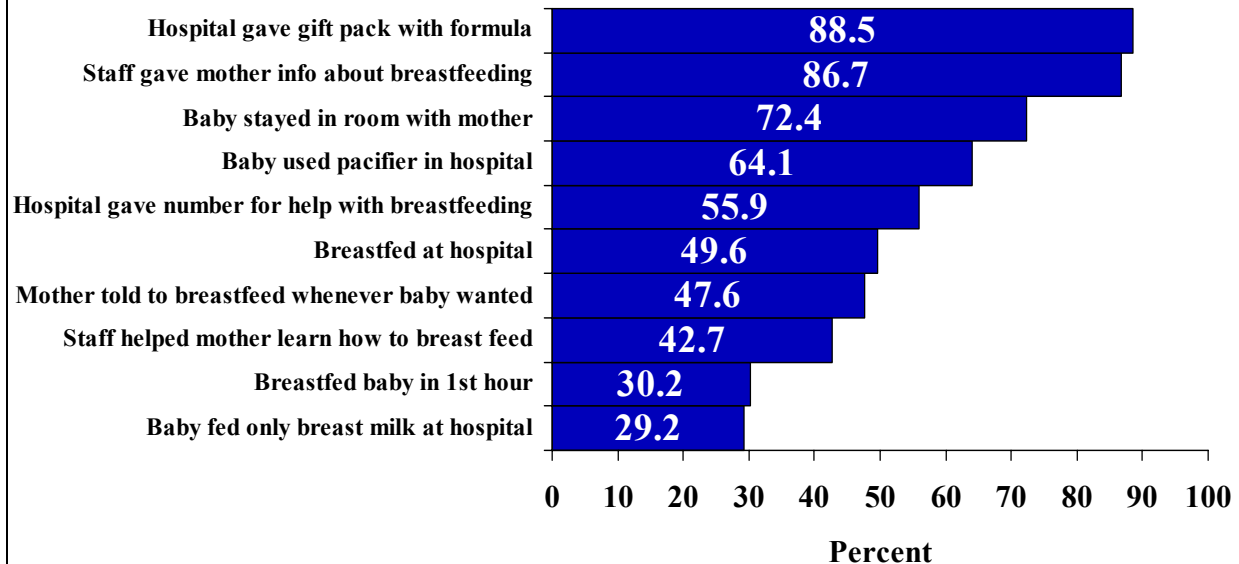


\*Change in Question.

Among babies born in 2000 at a normal birth weight, over 56 percent were breastfed. Among babies born at a low birth weight, almost half were breastfed. This is related to hospital practice, since low weight babies are often separated from their mothers and put in neonatal intensive care nurseries, and the mother may not be able to breastfeed. The prevalence of breastfeeding among mothers of low birth weight babies appears to be approaching that of the prevalence of breastfeeding among mothers of normal birth weight babies.

CONFIDENCE INTERVALS								
YEAR/ BIRTH WEIGHT	1993	1994	1995	1996	1997	1998	1999	2000
LOW WEIGHT	23.7-29.0	26.7-31.9	29.0-34.3	33.0-38.6	33.6-39.5	33.7-40.7	41.3-48.6	43.7-50.8
NORMAL WEIGHT	43.5-49.1	41.6-47.7	41.6-47.9	43.3-49.6	45.8-52.2	46.8-53.4	50.5-57.1	52.8-59.4

## Breastfeeding Events at Hospital After Delivery, Alabama PRAMS 2000 (Question #75 of the PRAMS Survey)



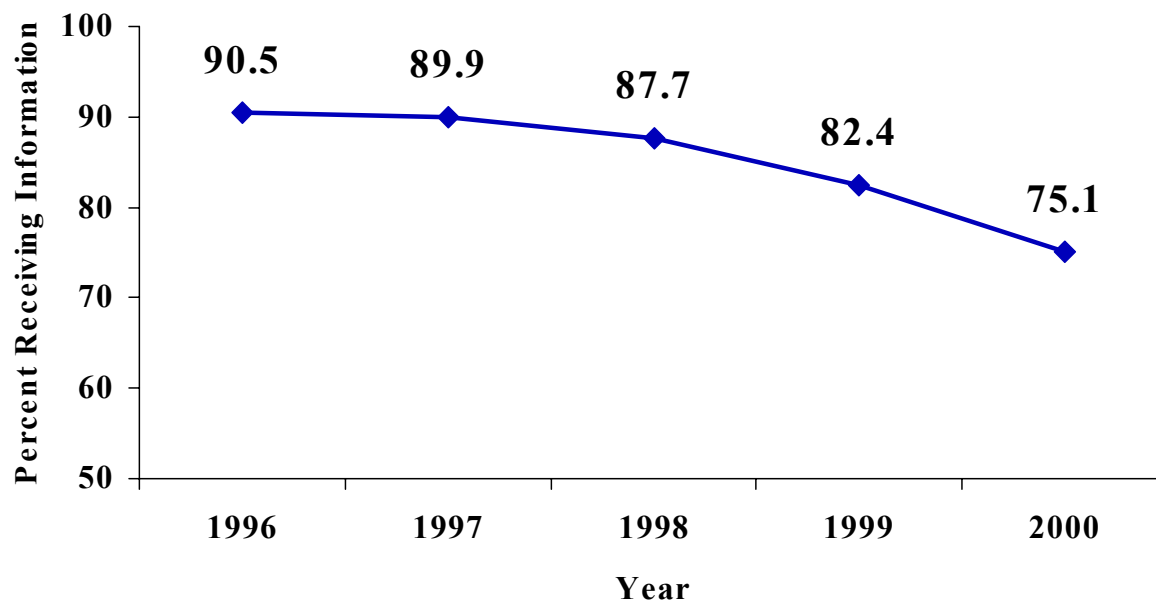
Although breastfeeding was discussed with the majority of new mothers by hospital staff following delivery of their new baby (86.7%), almost 90 percent of mothers received formula from the hospital. About half of new mothers breastfed their infants at the hospital, and 42.7 percent of mothers reported that hospital staff helped them learn how to breastfeed.

CONFIDENCE INTERVALS					
EVENTS	GIFT PACK	BREASTFEEDING INFO	BABY IN ROOM	PACIFIER	BREASTFEEDING NUMBER
PERCENT	86.5-90.5	84.6-88.9	69.7-75.2	61.1-67.2	52.8-58.9

CONFIDENCE INTERVALS					
EVENTS	BREASTFED AT HOSPITAL	BREASTFED WHEN BABY WANTED	HELPED MOTHER BREASTFEED	BREASTFED IN FIRST HOUR	ONLY BREAST MILK AT HOSPITAL
PERCENT	46.6-52.6	44.5-50.7	39.6-45.8	27.2-33.1	26.4-32.0

## Receipt of Breastfeeding Information at WIC Visits, Alabama PRAMS 1996 - 2000

(Question #77 of the PRAMS Survey)



The percent of Alabama mothers receiving breastfeeding information at WIC visits has been steadily decreasing since 1996. A goal of WIC is to relate the importance of breastfeeding through education and increase its prevalence among new mothers. The decrease in women reporting receiving breastfeeding information was statistically significant between 1996 and 2000.

CONFIDENCE INTERVALS					
YEAR	1996	1997	1998	1999	2000
PERCENT INFORMATION	88.3-92.7	87.6-92.2	85.2-90.3	79.3-85.6	71.6-78.7

## Mother's Breastfeeding Comments

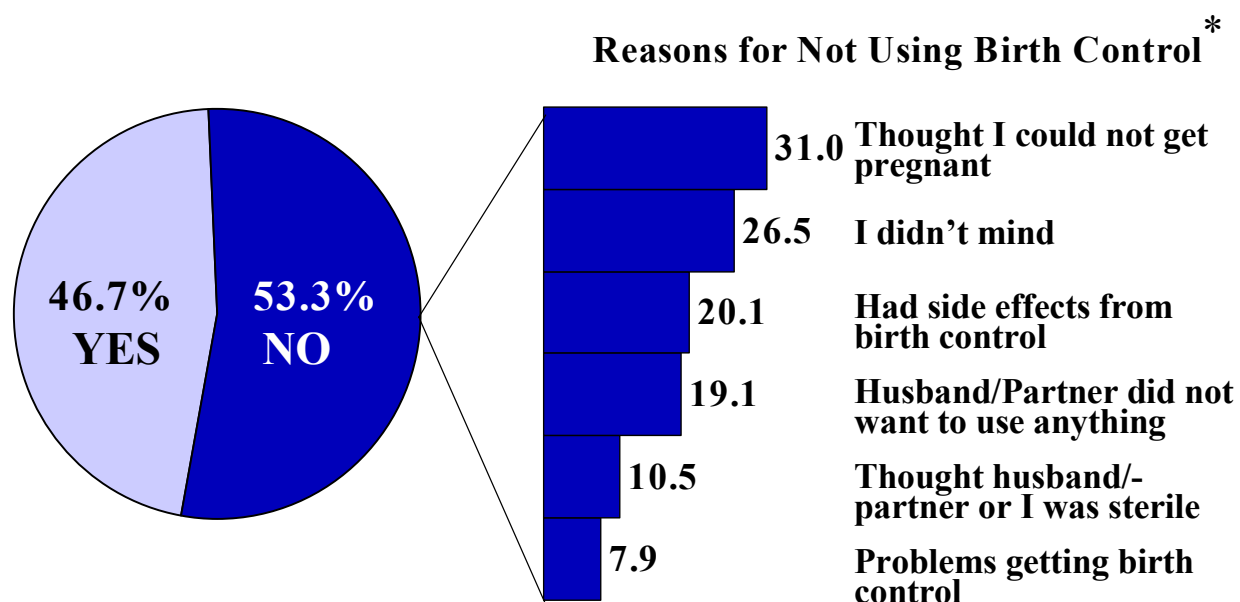
- Please try to give new mothers in the hospital more lessons on breastfeeding. ...I didn't know how and was too scared to try alone.
- Lactation consultation services were available, but not offered until I requested. Neither were resources for pumping breast milk.
- ...Also, as a breast-feeding mother, I'm disappointed in the lack of accommodations in public places. It's incredibly difficult to find a private or semi-private place to sit and feed my baby.
- I know that breastfeeding him probably helped him more than anything else when he was in the hospital. Breastfeeding is the best way, and I am so glad we were able to get on WIC.
- I did breastfeed... And I feel like I did not get the help I need to start. They brought me [the baby] and then told me to feed him and left.
- I... was unable to produce sufficient milk for my 3<sup>rd</sup> baby after the first 3 weeks. Without WIC we could not afford the formula. It has been a blessing...
- Something that was helpful on the financial end..., were the coupon checks sent out by the formula companies. They were generous and helped us get use[d] to the added expense...
- My son was four months premature... I am a breastfeeding mom. I just pump the milk and take it to the hospital, where they are feeding him by tube.
- ...the hospital gave my baby formula the 1<sup>st</sup> night even though I stated that I was breastfeeding. I did get to breastfeed within 3-4 hours after the birth.
- ...it should be the mothers' choice if a baby is bottlefed in the hospital... the hospital facility gave the baby a bottle in the nursery which caused problems for plans to breastfeed. The healthiest baby's are breastfed babies!!
- He received my milk but was too small to nurse.
- I really wanted to breastfeed my baby. But my milk was not enough. I tried and tried. I just hope a little was better than nothing.
- The hospital staff wanted me to breastfeed on a schedule. I chose to feed on demand.
- I wanted to breastfeed, but the medication [given during delivery] dried my milk up.
- Nurses and Doctors should [place more emphasis] on breastfeeding the babies, because [it] is the best for both the mother and the baby.

# Contraception



# Mother Not Planning Pregnancy Using Birth Control at Conception, Alabama PRAMS 2000<sup>1</sup>

(Question #12, 13, & 14 of the PRAMS Survey)



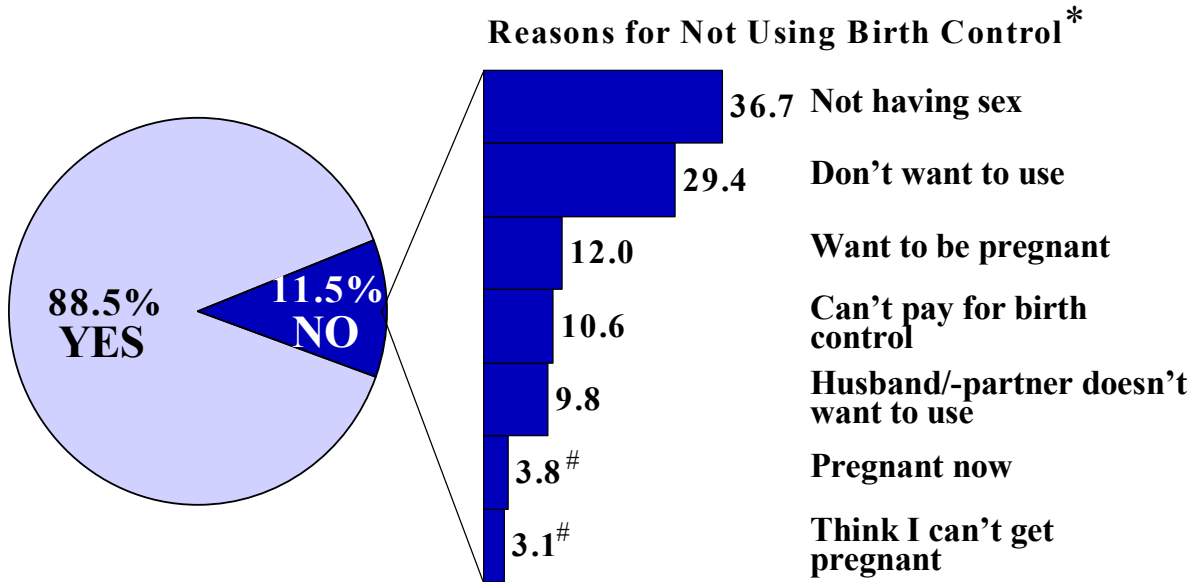
<sup>1</sup> Change in question from 1999. \*Items not mutually exclusive, therefore percentages will not equal 100.

In 2000, over half of Alabama mothers who did not plan to become pregnant, reported they were not using birth control when they became pregnant. The most prevalent reason for not using birth control was that the mother thought she could not get pregnant (31.0%). One in five mothers were not using birth control because they had side effects, or their husband/partner did not want them to use anything. Eight percent had trouble obtaining birth control.

CONFIDENCE INTERVALS								
BIRTH CONTROL	YES	NO	THOUGHT COULDN'T GET PREGNANT	DIDN'T MIND	SIDE EFFECTS	PARTNER DID NOT WANT	THOUGHT STERILE	PROBLEMS GETTING BIRTH CONTROL
PERCENT	42.6-50.8	49.2-57.4	25.9-36.1	21.8-31.2	15.7-24.6	14.9-23.4	7.1-13.9	5.0-10.8

# Mother Currently Using Birth Control, Alabama PRAMS 2000

(Question #62 & 63 of the PRAMS Survey)



\*Items not mutually exclusive, therefore percentages will not equal 100. <sup>#</sup> Number of respondents is less than 20.

The correct usage of contraception is invaluable in preventing unintended pregnancies. At the time of survey, almost 90 percent of Alabama mothers in 2000 stated they were currently using some form of contraception. Of those who were not using birth control at the time of the survey, 36.7 percent of them said it was because they were not having sex, 29.4 percent of them did not want to use birth control, 12.0 percent wanted to be pregnant again, and 3.8 percent of them were pregnant again a few months after birth.

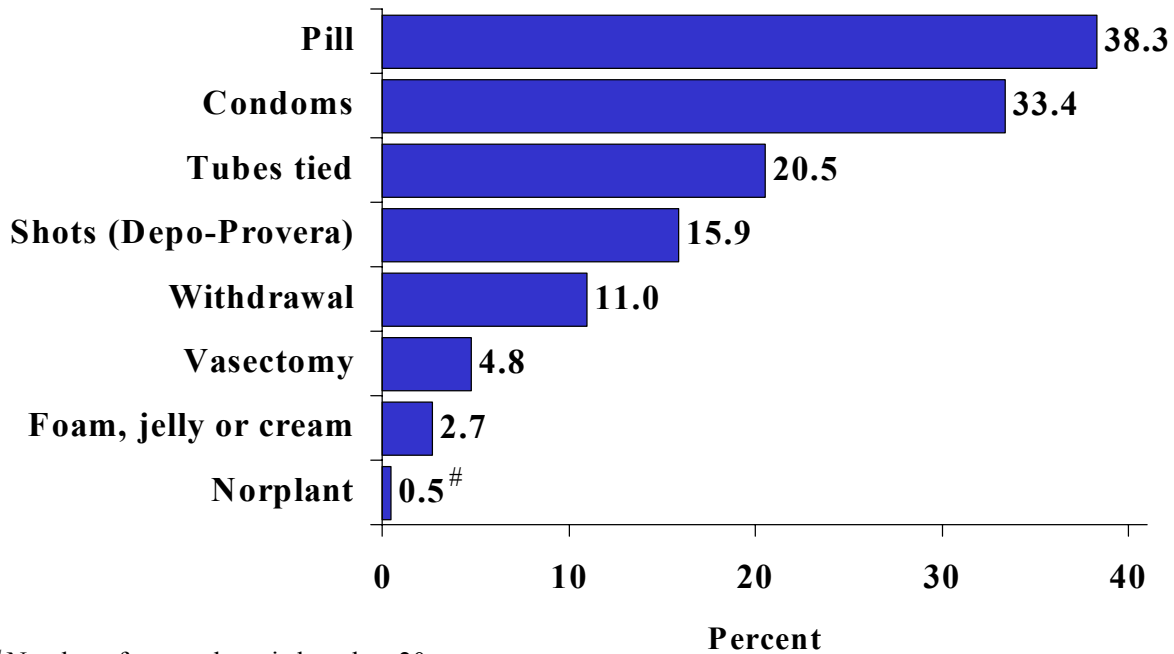
CONFIDENCE INTERVALS					
BIRTH CONTROL	YES	NO	NOT HAVING SEX	DON'T WANT TO USE	WANT TO BE PREGNANT
PERCENT	86.5-90.5	9.5-13.5	27.7-45.6	21.2-37.7	6.2-17.7

CONFIDENCE INTERVALS				
BIRTH CONTROL	CAN'T PAY	PARTNER DOESN'T WANT	PREGNANT NOW	CAN'T GET PREGNANT
PERCENT	5.2-15.9	4.6-14.9	0.6-7.0	0.4-5.9



## Current Birth Control Methods, Alabama PRAMS 2000

(Question #64 of the PRAMS Survey)



<sup>#</sup> Number of respondents is less than 20.

The most common birth control methods used by new mothers were the pill (38.3%) and condoms (33.4%). Many mothers, especially those 35 years of age and older, relied on sterilization (tubes tied) as their chosen method of birth control. About 16 percent of new mothers relied on Depo-Provera, while 11 percent relied on a natural method (withdrawal) for contraception.

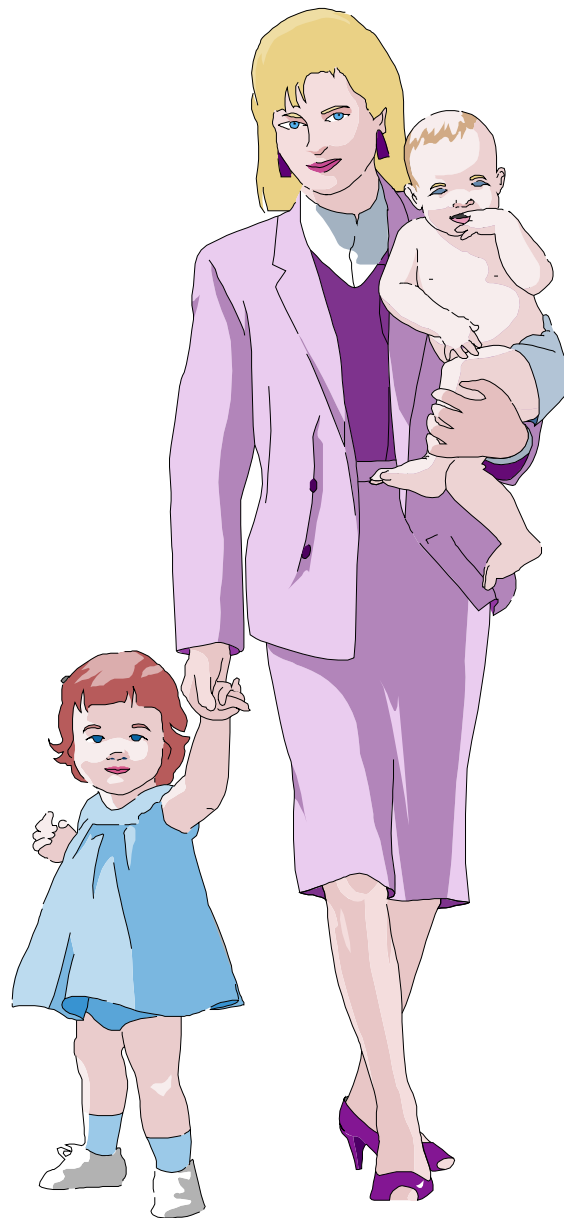
CONFIDENCE INTERVALS				
BIRTH CONTROL METHODS	PILL	CONDOMS	TUBES TIED	SHOTS
PERCENT	35.0-41.5	30.3-36.6	17.8-23.2	13.6-18.2

BIRTH CONTROL METHODS	WITHDRAWAL	VASECTOMY	FOAM, JELLY, CREAM	NORPLANT
PERCENT	8.9-13.2	3.4-6.3	1.6-3.7	0.0-0.9

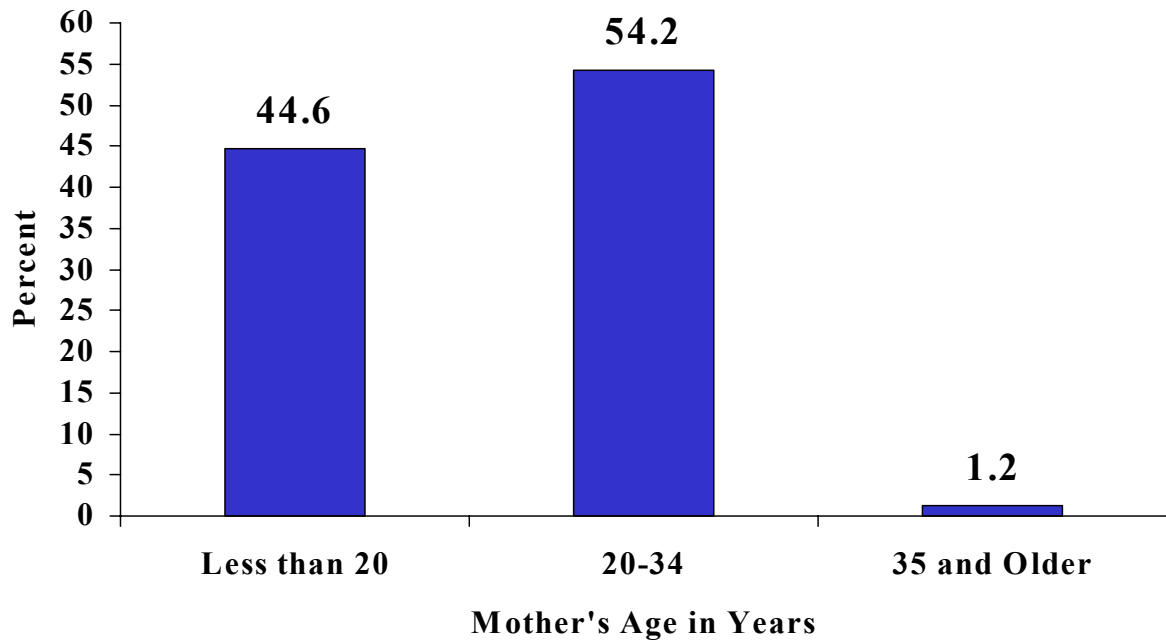
## Mother's Contraceptive Comments

- I believe that Medicaid should cover birth control pills for at least 1 year after the baby is born.
- The literature on condoms and birth control needs to be changed. I became pregnant with both my children on birth control. They are not 99.9% effective when used in combination with one another.
- ...I was taking birth control, but missed a few pills.
- Reason for mother not using birth control at time of conception, who wanted to be pregnant later – “If it happened, it happened.”
- I wanted my tubes tied, but Medicaid would not help.
- Reason for mother not using birth control at time of conception, who didn't want to be pregnant then or at any time in the future – “forgot to use something that one time”
- I was under a fertility specialist so I was under their care before I became pregnant.
- Mother not currently using birth control – “Although not 100% effective, I'm hoping breastfeeding will prevent pregnancy.”
- Mother not currently using birth control – “God will bless us in his time.”

# Miscellaneous



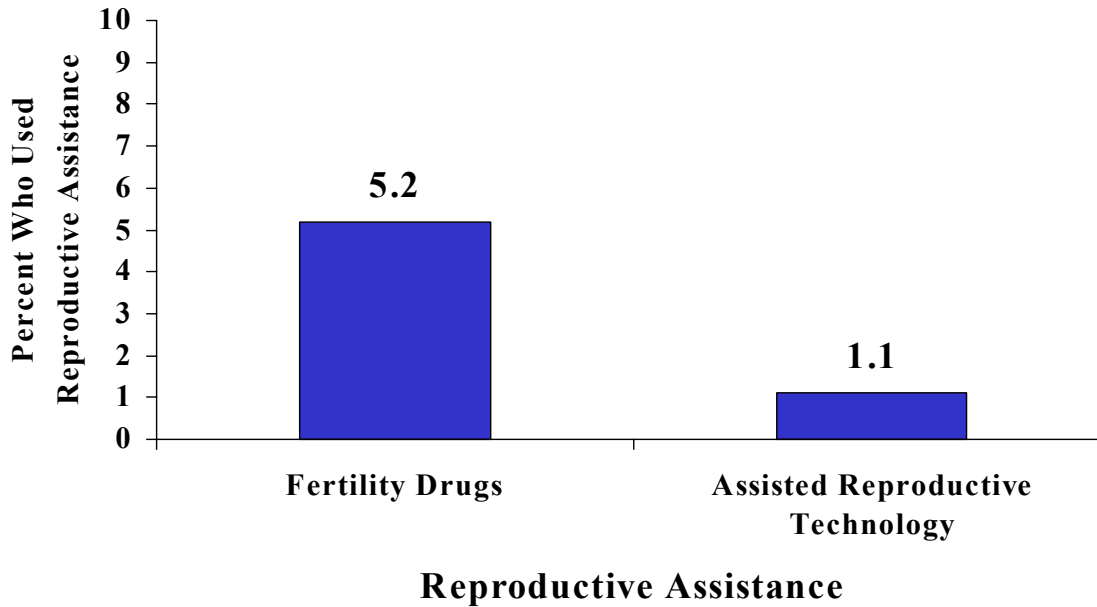
## Mother's Age at First Conception, Alabama PRAMS 2000 (Question #10 of the PRAMS Survey)



Nearly 45 percent of mothers conceived their first child as teenagers, yet very few mothers initially conceived in their latter reproductive years. More than half of Alabama mothers were between the ages of 20 and 34 when they conceived their first child.

CONFIDENCE INTERVALS			
AGE	10 – 19	20 – 34	35 +
PERCENT	41.8-47.4	51.3-57.0	0.5-1.9

## Use of Reproductive Assistance for Conception, Alabama PRAMS 2000 (Question #15 & 16 of the PRAMS Survey)

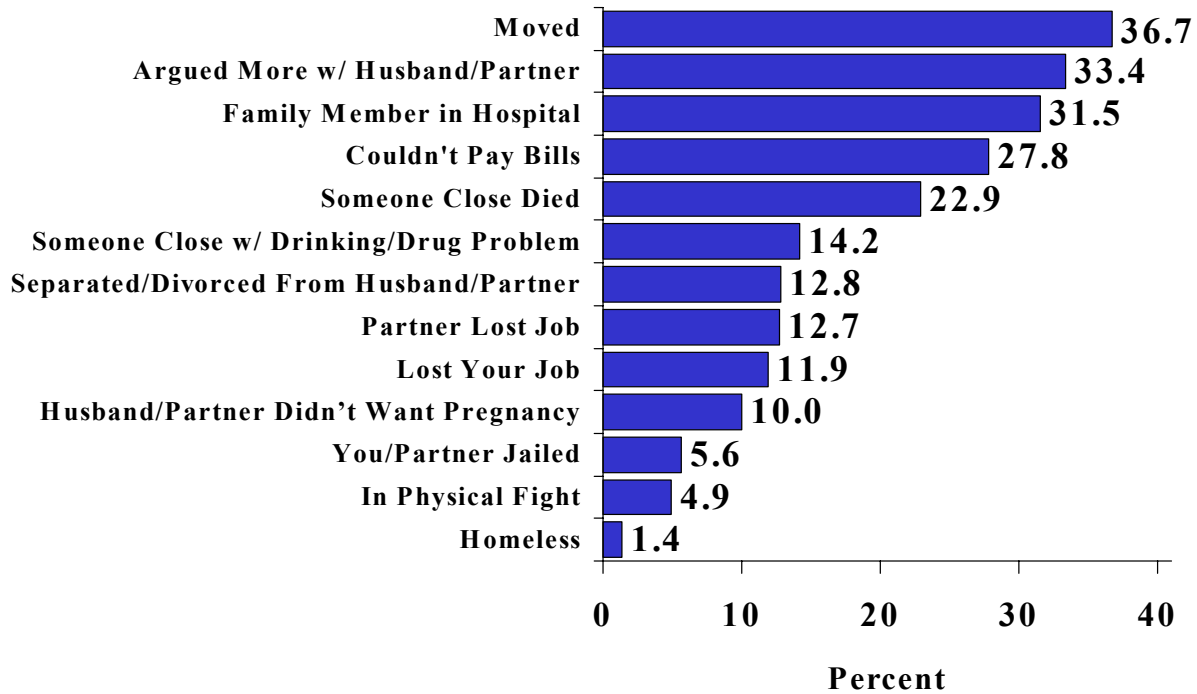


About 5 percent of Alabama women who gave birth in 2000, reported using fertility drugs to help them become pregnant. Fertility drugs include Clomid, Serophene, Pergonal, or any other drugs taken to help the mother become pregnant. Only about 1 percent of women who gave birth in 2000, reported using assisted reproductive technology. Assisted reproductive technology (ART) procedures include in vitro fertilization (IVF), gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), embryo transfer, and donor oocytes.

CONFIDENCE INTERVALS		
REPRODUCTIVE ASSISTANCE	FERTILITY DRUGS	ART
PERCENT	3.6-6.7	0.4-1.8

# Sources of Stress 12 Months Before Delivery, Alabama PRAMS 2000

(Question #35 of the PRAMS Survey)

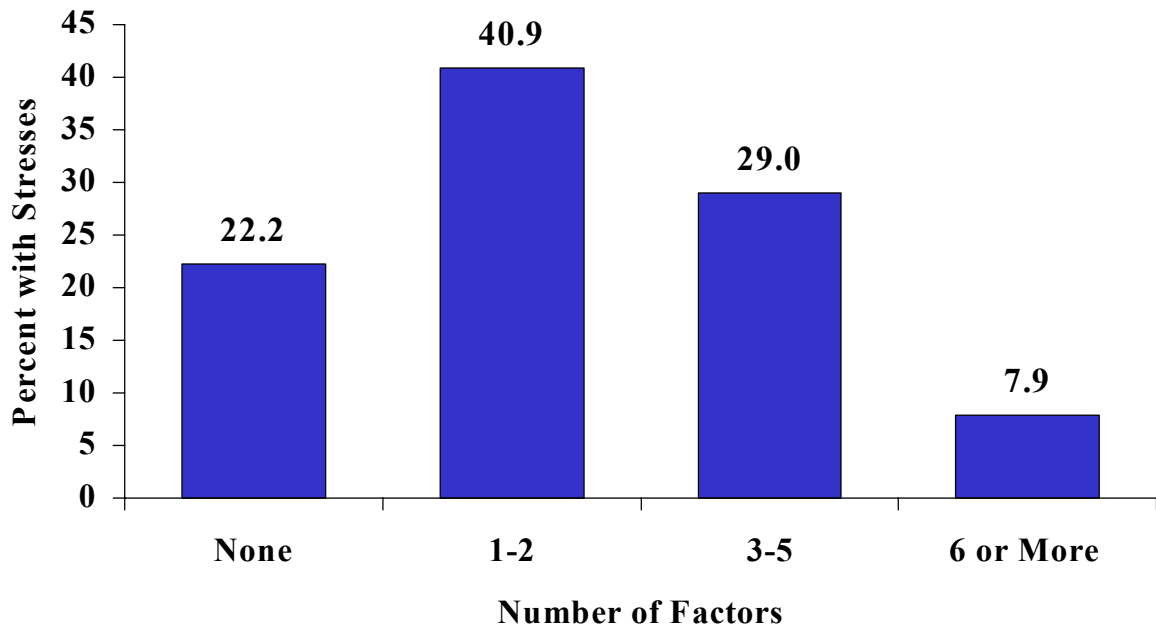


Stressful events experienced during pregnancy could have negative effects on the health of the expectant mother as well as her unborn child. Alabama mothers reported various sources of stress during the 12 months before delivery of their new babies. Almost 40 percent relocated, and about a third argued with their partners more than usual or experienced the illness of a family member. Many mothers also experienced a financial hardship or the death of a loved one.

CONFIDENCE INTERVALS							
SOURCES OF STRESS	MOVED	ARGUED MORE W/ PARTNER	FAMILY MEMBER HOSPITALIZED	COULDN'T PAY BILLS	SOMEONE CLOSE DIED	SOMEONE DRINKING/ DRUGS	SEPARATED/ DIVORCED
PERCENT	33.7-39.7	30.5-36.4	28.5-34.4	25.1-30.6	20.2-25.5	12.1-16.4	10.8-14.8

CONFIDENCE INTERVALS						
SOURCES OF STRESS	PARTNER LOST JOB	LOST YOUR JOB	PARTNER DIDN'T WANT	YOU/ PARTNER JAILED	IN PHYSICAL FIGHT	HOMELESS
PERCENT	10.7-14.8	10.0-13.9	8.1-11.8	4.2-7.0	3.6-6.1	0.8-2.1

## Number of Stress Factors Before Delivery, Alabama PRAMS 2000 (Question #35 of the PRAMS Survey)

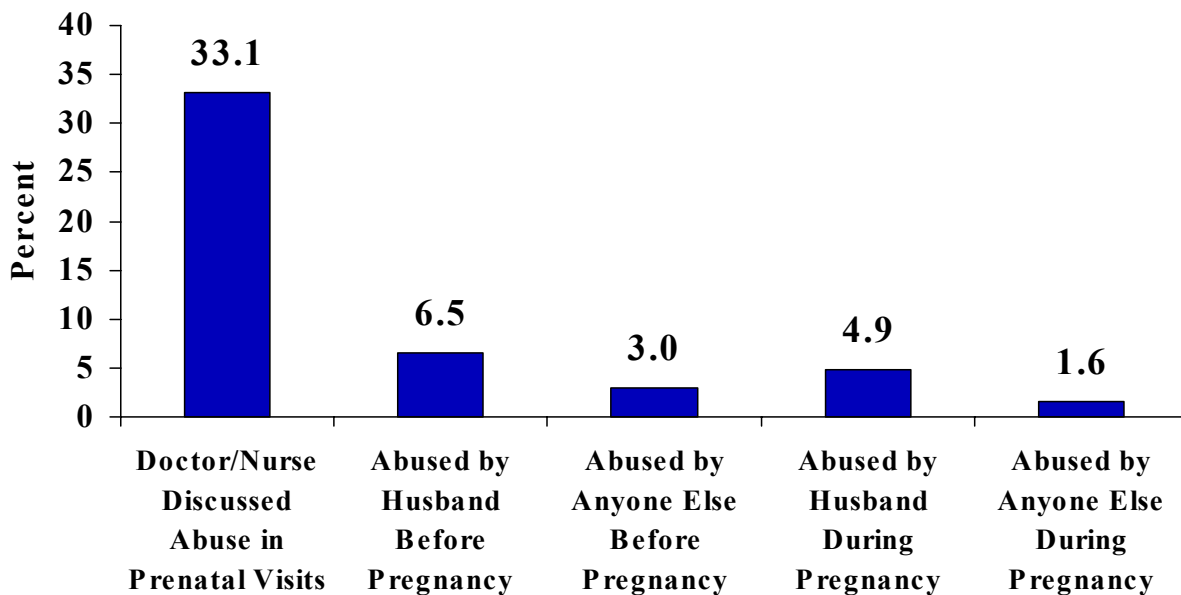


About one-fifth of Alabama mothers reported they did not experience any of the potential sources of stress illustrated on the previous graph. Over 40 percent of mothers stated that they experienced one or two of these stresses, and 29.0 percent experienced three to five of the stresses. Almost 8 percent experienced six or more stress factors during pregnancy.

CONFIDENCE INTERVALS				
NUMBER OF STRESS FACTORS	NONE	1 – 2	3 – 5	6 +
PERCENT	19.6-24.8	37.8-44.0	26.2-31.8	6.3-9.5

## Percent of Mothers who Experienced Physical Abuse, Alabama PRAMS 2000

(Question #23, 36, & 37 of the PRAMS Survey)

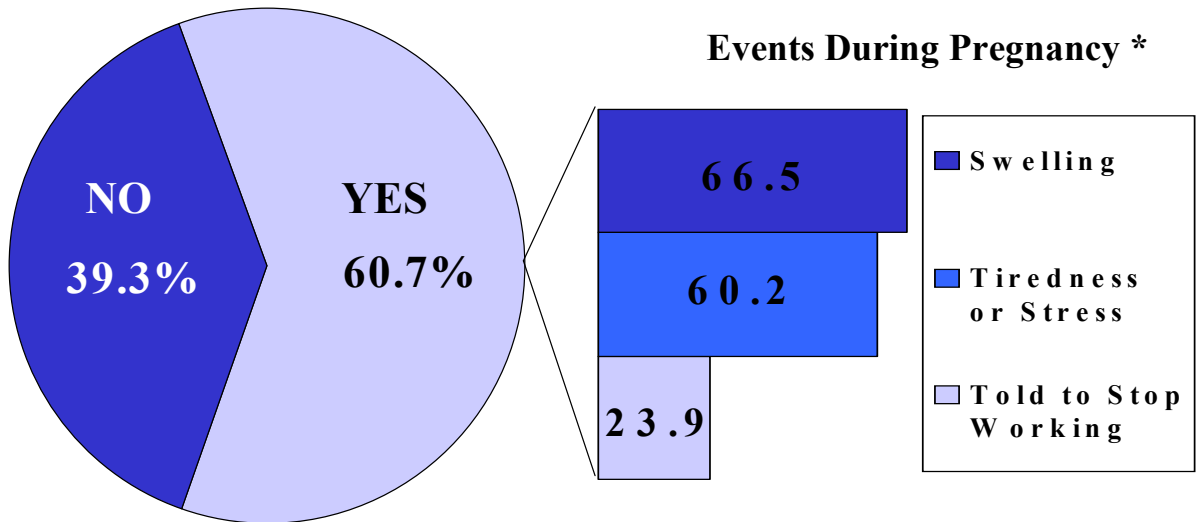


About a third of mothers discussed physical abuse with a doctor or health care worker during their prenatal visits. Almost 7 percent of mothers experienced abuse by their husbands before pregnancy, and 3.0 percent were abused by someone other than their husband. Almost 5 percent of mothers were abused during pregnancy by their husband, while 1.6 percent were abused by someone other than their husband during pregnancy.

CONFIDENCE INTERVALS					
PHYSICAL ABUSE	PRENATAL DISCUSSION	ABUSED BY HUSBAND BEFORE PREGNANCY	ABUSED BY SOMEONE ELSE BEFORE PREGNANCY	ABUSED BY HUSBAND DURING PREGNANCY	ABUSED BY SOMEONE ELSE DURING PREGNANCY
PERCENT	30.3-35.9	4.9-8.1	1.9-4.0	3.5-6.3	0.8-2.4



## Percent of Mothers who Worked During Pregnancy, Alabama PRAMS 2000<sup>1</sup> (Question #69 & 71 of the PRAMS Survey)

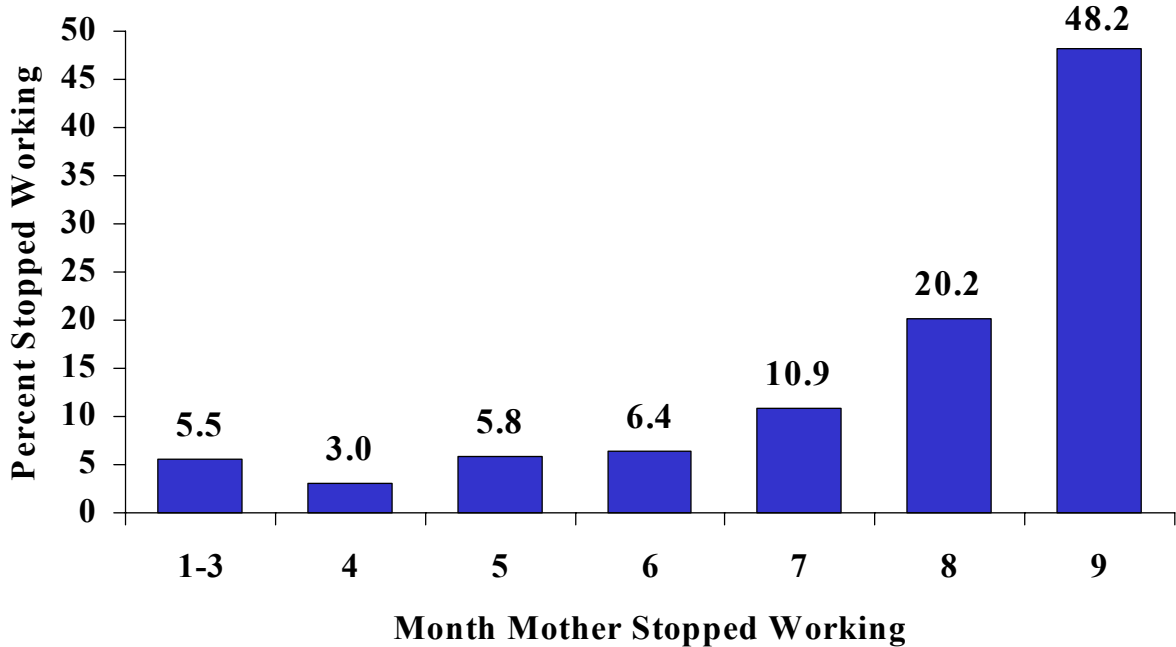


<sup>1</sup>Change in questions from 1999. \*Items not mutually exclusive, therefore percentages will not equal 100.

About 60 percent of Alabama women who gave birth in 2000 worked at least 10 hours per week during pregnancy. The majority of women working experienced swelling during pregnancy, or tiredness or work-related stress. Almost a quarter were told to stop working by their doctor or nurse.

CONFIDENCE INTERVALS					
MOTHERS WHO WORKED/ EVENTS	YES	NO	SWELLING	TIREDNESS OR STRESS	TOLD TO STOP WORKING
PERCENT	57.7-63.7	36.3-42.3	62.6-70.4	56.2-64.3	20.5-27.3

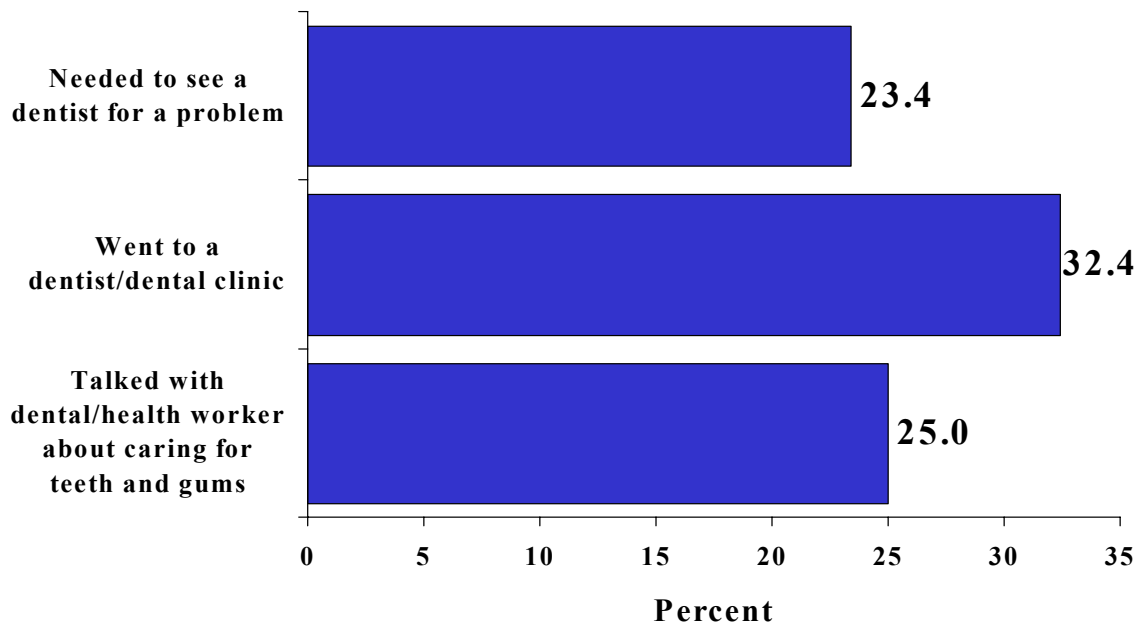
## Month Mother Stopped Working Due to Pregnancy, Alabama PRAMS 2000 (Question #70 of the PRAMS Survey)



Among mothers who worked during pregnancy, 5.5 percent quit working in their first trimester. Almost half of working pregnant women in Alabama continued to work through the ninth month of their pregnancy.

CONFIDENCE INTERVALS							
MONTH STOPPED WORKING	1 – 3	4	5	6	7	8	9
PERCENT	3.7-7.4	1.7-4.4	3.9-7.7	4.5-8.2	8.5-13.3	16.8-23.5	44.2-52.2

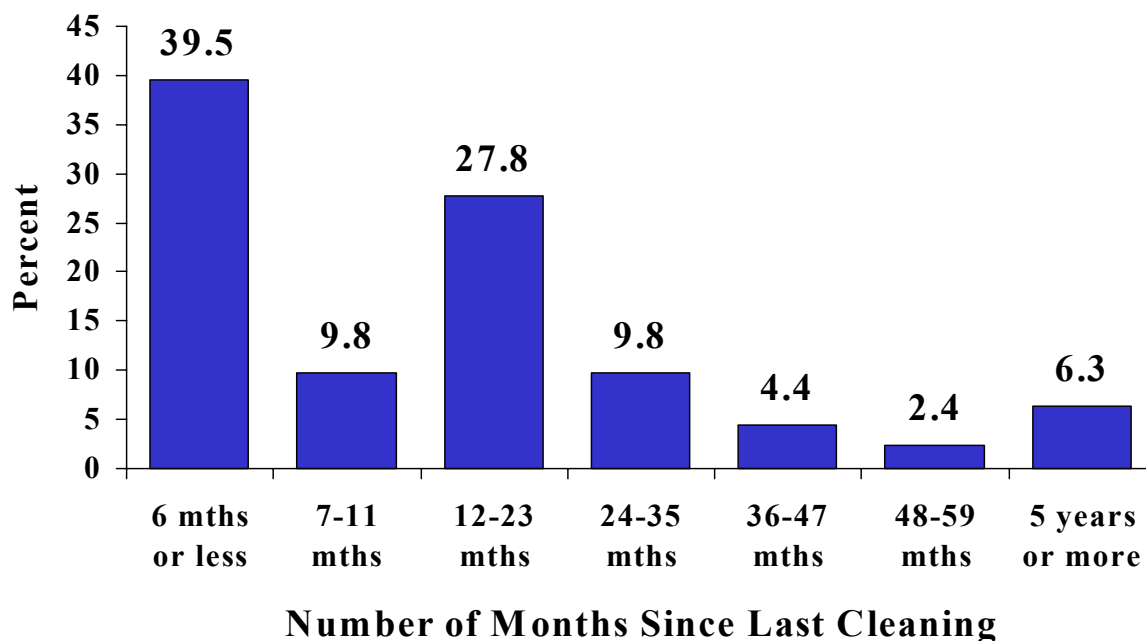
## Dental Care During Pregnancy, Alabama PRAMS 2000 (Question #72 of the PRAMS Survey)



Alabama women were asked about their dental care during pregnancy. About a quarter of women reported that they needed to see a dentist for a problem during their pregnancy. Only a third saw a dentist during their pregnancy, and a quarter talked with a dental/health care worker about caring for their teeth. All women should have seen a dentist during their pregnancy if they followed the recommended visit schedule of seeing a dentist every 6 months.

CONFIDENCE INTERVALS			
EVENTS DURING PREGNANCY	NEEDED TO SEE DENTIST	SAW A DENTIST	TALKED WITH DENTAL/HEALTH WORKER
PERCENT	20.6-26.1	29.4-35.3	22.3-27.8

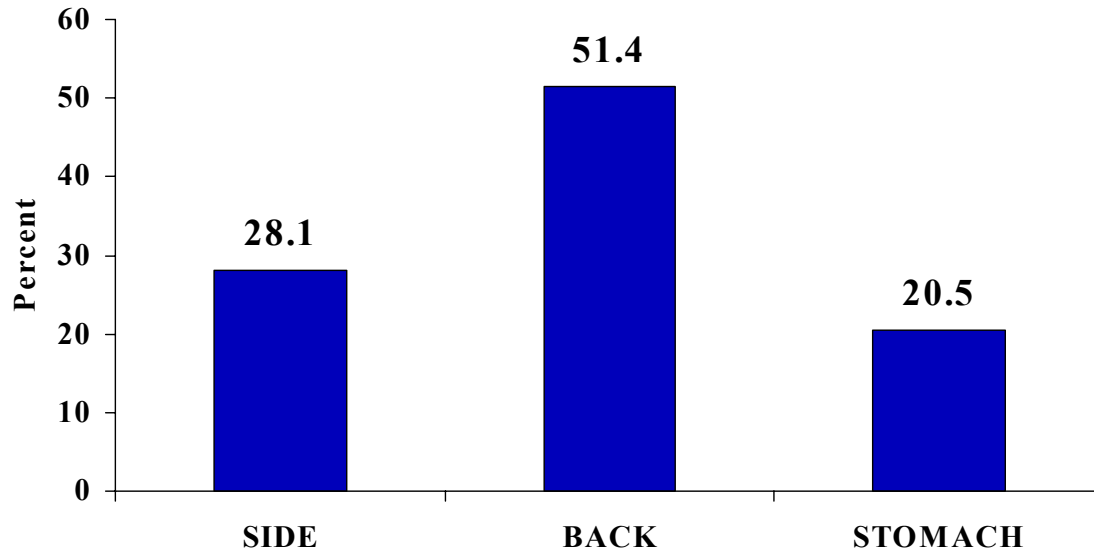
## Months Since Last Dental Cleaning, Alabama PRAMS 2000 (Question #73 of the PRAMS Survey)



Mothers were asked, “How long has it been since you had your teeth cleaned by a dentist or a dental hygienist?” \_\_\_months. More than half of Alabama mothers waited a year or longer to have their teeth cleaned in 2000. Only 39.5 percent of mothers had their teeth cleaned in the last 6 months.

CONFIDENCE INTERVALS							
MONTHS SINCE LAST CLEANING	6 MTHS OR LESS	7-11	12-23	24-35	36-47	48-59	5 YEARS OR MORE
PERCENT	36.3-42.8	7.7-11.8	24.7-30.8	7.8-11.8	3.0-5.8	1.4-3.4	4.7-7.9

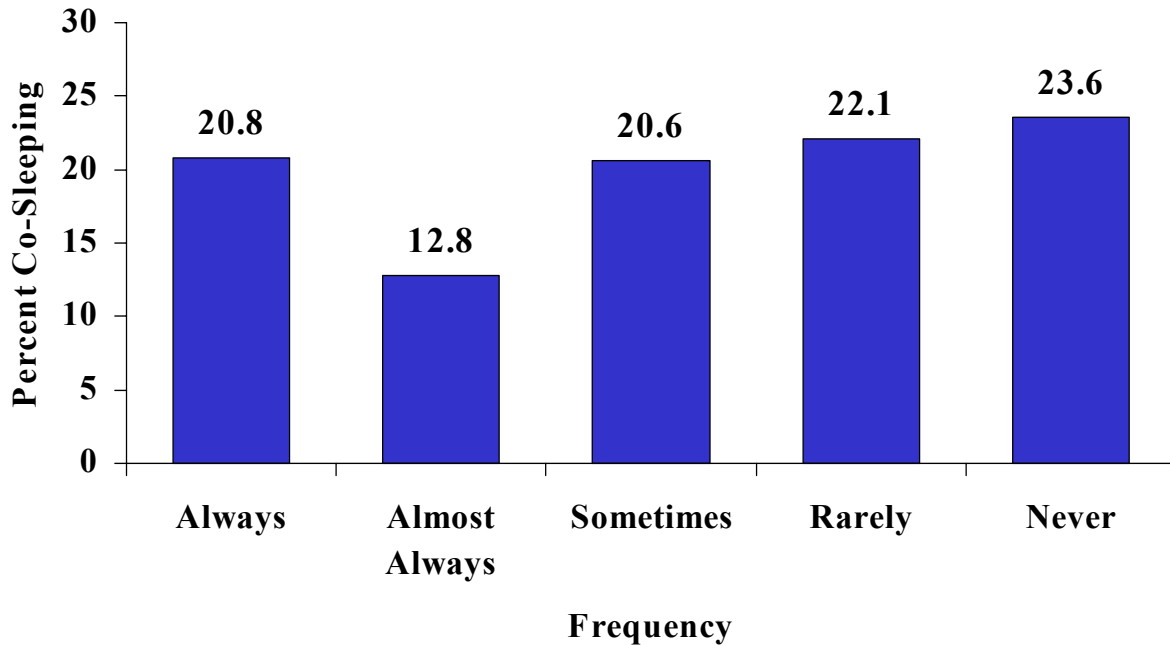
**Baby's Sleeping Position,  
Alabama PRAMS 2000**  
(Question #54 of the PRAMS Survey)



When mothers were asked how they put their babies down to sleep most of the time, about one in five responded they place their infants on their stomachs and one in four on their side. Health providers suggest placing an infant to sleep on his/her back, which could reduce the risk of Sudden Infant Death Syndrome (SIDS). The percent of mothers putting their babies to sleep on their backs has shown a statistically significant increase from 27.0 percent (24.3-29.7) in 1996, to 51.4 percent (48.1-54.6) in 2000.

CONFIDENCE INTERVALS			
SLEEP POSITION	SIDE	BACK	STOMACH
PERCENT	25.2-31.0	48.1-54.6	17.9-23.2

## Frequency of Baby Co-Sleeping, Alabama PRAMS 2000 (Question #55 of the PRAMS Survey)

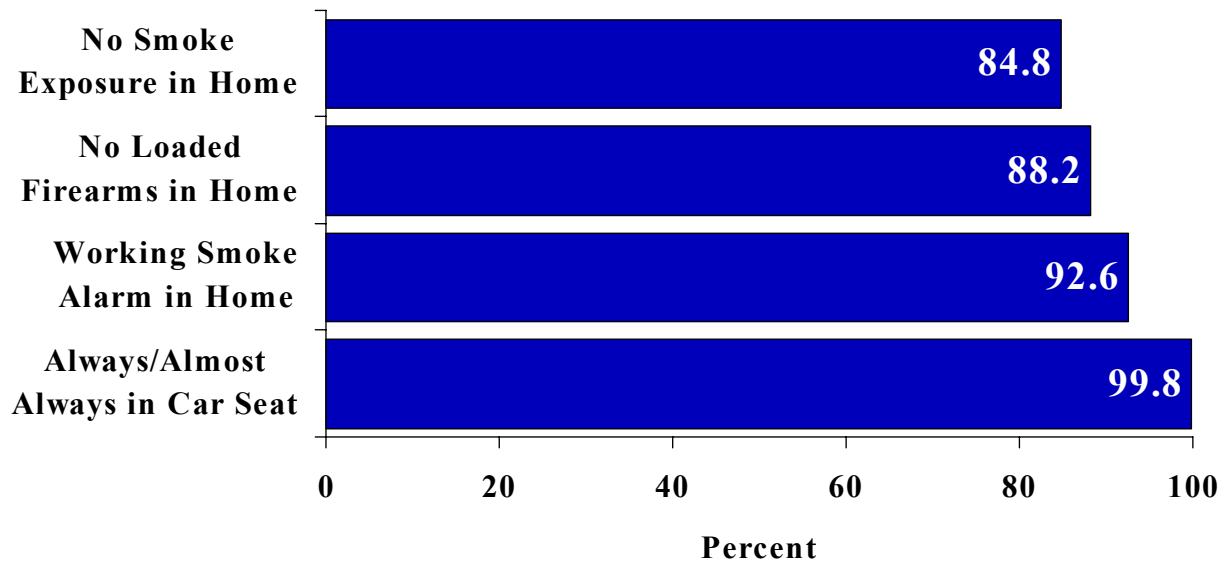


About one-third of Alabama mothers stated that their babies always or almost always sleep in the same bed with the mother or someone else. About 21 percent sometimes allow their baby to co-sleep, and about 24 percent never allow their baby to co-sleep. Health care providers recommend infants sleep in their cribs or beds to reduce the risk of accidental injury or suffocation.

CONFIDENCE INTERVALS					
FREQUENCY OF COSLEEPING	ALWAYS	ALMOST ALWAYS	SOMETIMES	RARELY	NEVER
PERCENT	18.3-23.4	10.6-15.0	18.1-23.2	19.5-24.8	20.9-26.3

## Selected Safety Characteristics, Alabama PRAMS 2000

(Question #53 & #78 of the PRAMS Survey)



Alabama’s mothers were concerned with safety. Almost 85 percent of mothers stated their babies had no smoke exposure in the home. Exposure to tobacco smoke is of great concern due to the harmful effects of secondhand smoke. About nine out of ten mothers stated there were no loaded firearms in the home. More than nine out of ten mothers stated their home had a working smoke alarm, and almost 100 percent of mothers responded that their baby always or almost always rides in a car seat.

CONFIDENCE INTERVALS				
SAFETY	NO SMOKE EXPOSURE	NO LOADED FIREARMS	WORKING SMOKE ALARM	ALWAYS IN CAR SEAT
PERCENT	82.5-87.1	86.1-90.3	90.9-94.4	99.6-100.0

## Mother's Miscellaneous Comments

- As a college student, I experienced stress during my 1<sup>st</sup> and 2<sup>nd</sup> trimesters. It is important that mothers take time for themselves and use stress to better themselves rather than let it tear them down.
- I had a lot of emotional stress and physical abuse during my pregnancy. I lost [my baby]. I don't want anyone else to have to go through the same tragedy(sic) I had to.
- I had to stand on my feet while working the whole eight months. My feet continued to stay swollen to the point that wearing shoes was impossible for 2 weeks AFTER the baby was born.
- Dental care affected me the most since I had no dental insurance. I knew how important it was to take care of my teeth during my pregnancy, but it is too expensive without insurance.
- Florida has a real good system with keeping pregnant women up on seeing about having teeth repaired, cavities taken care of at beginning of pregnancy or if you had any problems, what could be done to help you.
- Insurance did not cover cleaning, only pulled tooth.
- Many companies only [accept] Medicaid for dental care only if there's an emergency. And I didn't have any dental insurances to go then or now.
- My first child died of SIDS at a very young age (9 days) and although I was aware of SIDS... I felt it would never happen to me. My son was on his back when he died...
- Mother who places baby on 'stomach' to sleep – She seems to rest better that way despite what the "norm" is.
- Mother who answered there are loaded firearms in her home – "out of reach".



# 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 three 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. In 2000, the Phase 4 survey began. Changes in the wording of a question from one phase to another, such as the breastfeeding question, are noted in the chart.

## Weighting

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

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

\* For 2000, 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; ie. smoking, drinking, use of birth control.

## The Sample

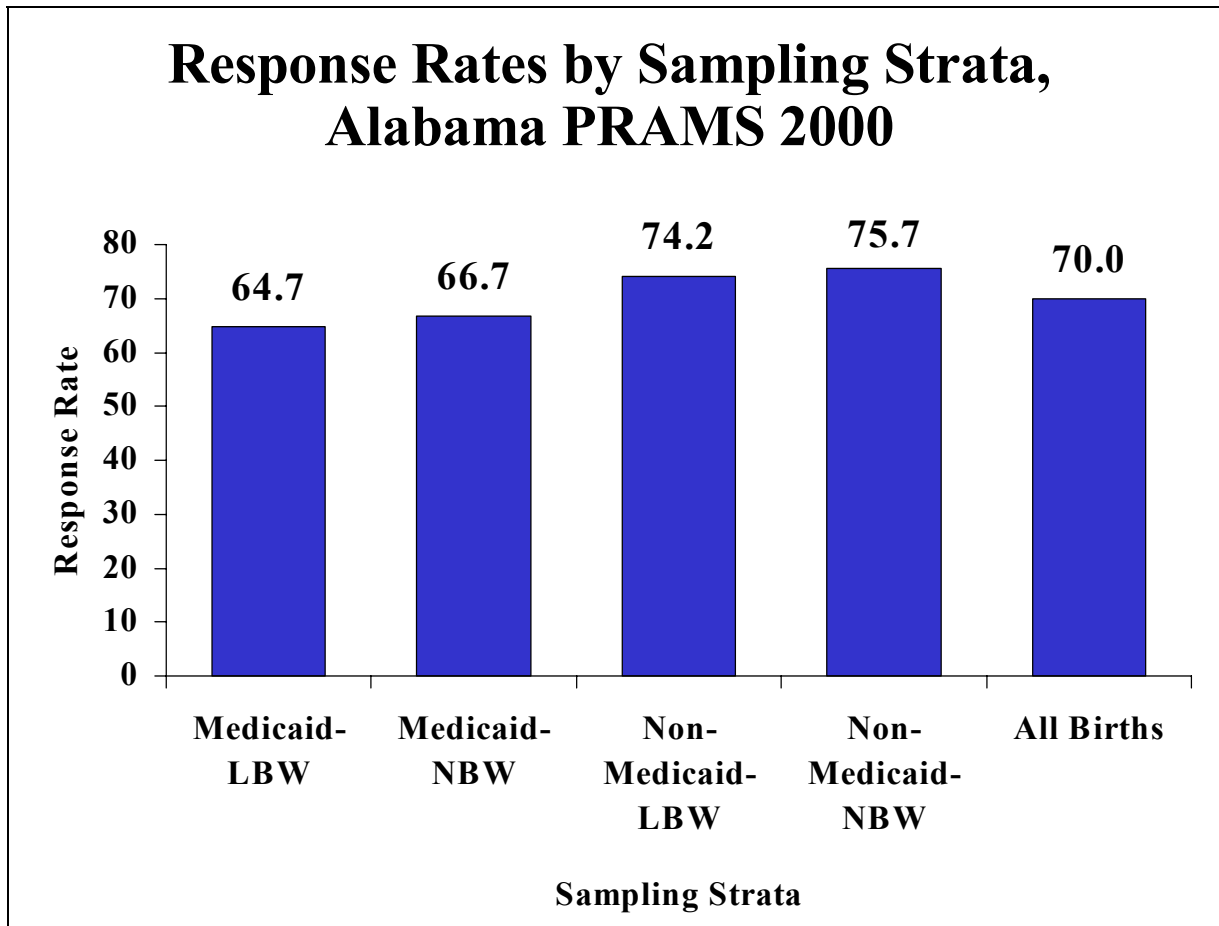
Each month approximately 180-200 women who have given birth two to four months before the sampling date are selected for the sample. The survey is divided into four strata: Medicaid low birth weight, Medicaid normal birth weight, non-Medicaid low birth weight, and non-Medicaid normal birth weight. Women 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 are approximately as follows:

Medicaid low birth weight	1:5
Medicaid normal birth weight	1:40
Non-Medicaid low birth weight	1:5
Non-Medicaid normal birth weight	1:54

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

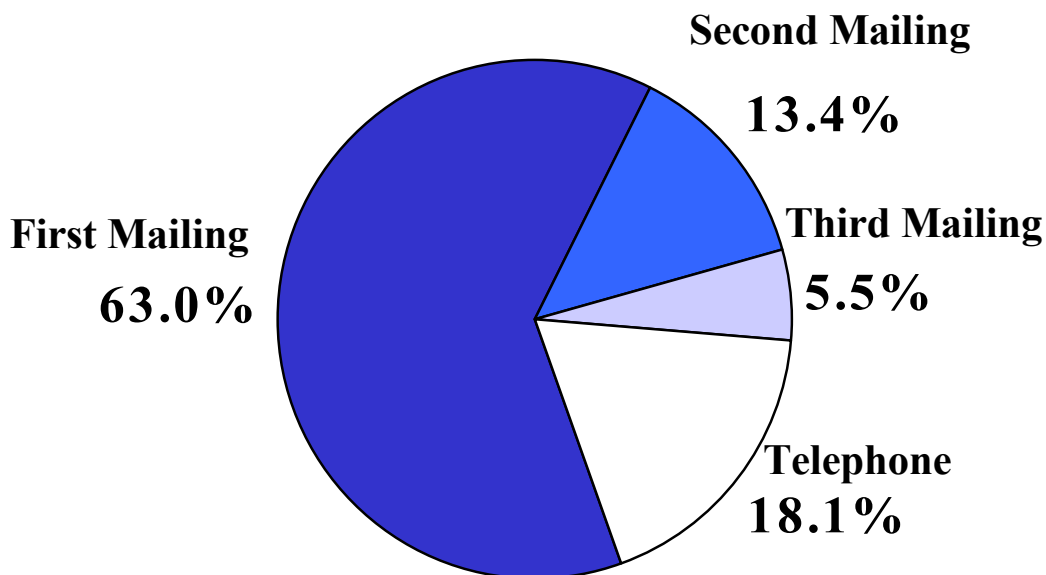
Strata were chosen to allow for oversampling of mothers who give birth to low birth weight babies and mothers whose birth was paid for by Medicaid. Both low birth weight births and Medicaid births are of special interest to the state of Alabama. Oversampling allows for large enough numbers of births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

## Response Rates



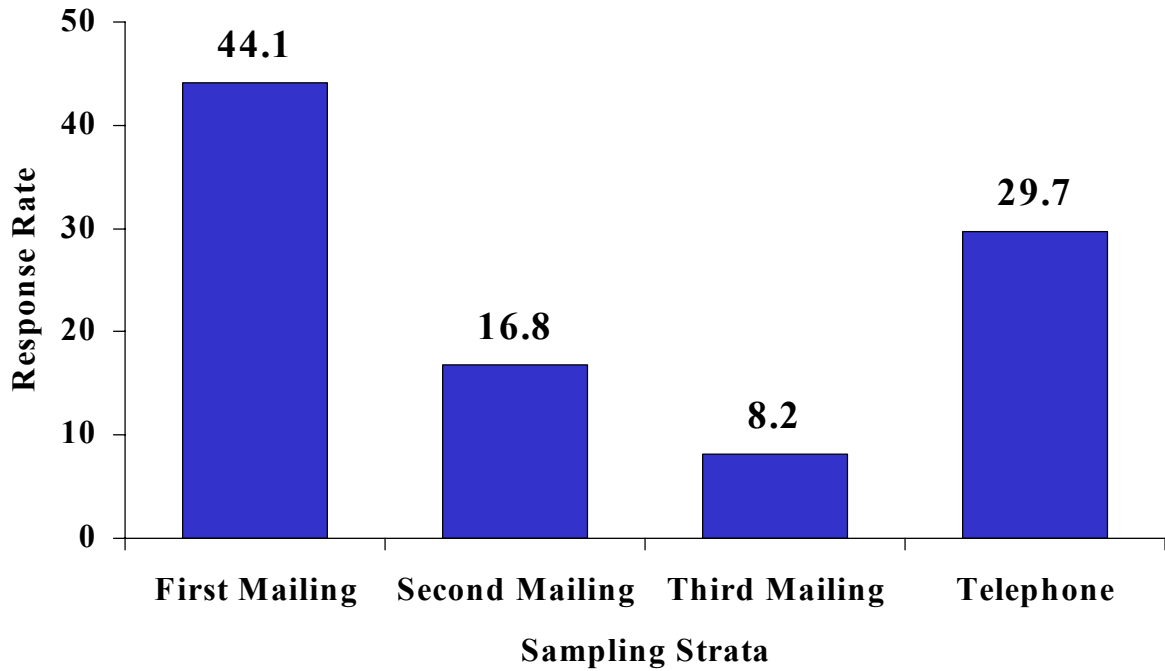
As a rule of thumb, CDC requires at least 400 completed questionnaires and a response rate of 70 percent in a stratum before the data are considered statistically reliable. Since the Medicaid-Low Birth Weight and the Medicaid-Normal Birth Weight response rates are below 70 percent, CDC recommends against doing stratum-specific analyses for these groups. An analysis of these groups could result in biased estimates.

## Percent Distribution of Completed Questionnaires by Survey Phase of Completion, Alabama PRAMS 2000



The majority of completed questionnaires are received as a result of the initial mailing (63.0%). The second mailing accounts for 13.4 percent of the completed questionnaires, and 5.5% of the surveys are returned as a result of the third mailing. Telephone interviews account for 18.1% of the total completed questionnaires.

## Response Rates by Survey Phase, Alabama PRAMS 2000



Of all the women who were sent the first mailing, 44.1 percent responded. The second mailing had a 16.8 percent response rate. The response rate for the third mailing was only 8.2 percent. Of those who entered the phone phase, 29.7 percent completed the questionnaire over the telephone. 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



First, we would like to ask a few questions about you and the time before you became pregnant with your new baby. Please check the box next to your answer.

**1. Just before you got pregnant, did you have health insurance? (Do not count Medicaid.)**

- No
- Yes

**2. Just before you got pregnant, were you on Medicaid?**

- No
- Yes

**3. In the month before you got pregnant with your new baby, how many times a week did you take a multivitamin (a pill that contains many different vitamins and minerals)?**

- I didn't take a multivitamin at all
- 1 to 3 times a week
- 4 to 6 times a week
- Every day of the week

**4. What is your date of birth?**

\_\_\_\_\_  
Month      Day      Year

**5. Just before you got pregnant, how much did you weigh?**

\_\_\_\_\_ Pounds    **OR**    \_\_\_\_\_ Kilos

**6. How tall are you without shoes?**

\_\_\_\_\_ Feet    \_\_\_\_\_ Inches  
**OR**    \_\_\_\_\_ Centimeters

**7. Before your new baby, did you ever have any other babies who were born alive?**

- No → Go to Question 10
- Yes



**8. Did the baby born just before your new one weigh 5 pounds, 8 ounces (2.5 kilos) or less at birth?**

- No
- Yes

**9. Was the baby just before your new one born *more* than 3 weeks before its due date?**

- No
- Yes

**10. How old were you when you got pregnant with your first baby?**

\_\_\_\_\_ Years old

The next questions are about just before you became pregnant with your new baby.

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

Check one answer

- I wanted to be pregnant sooner
- I wanted to be pregnant later
- I wanted to be pregnant then
- I didn't want to be pregnant then or at any time in the future

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

- No
- Yes

→ Go to Question 15

**13. When you got pregnant with your new baby, were you or your husband or partner doing anything to keep from getting pregnant?** (Some things people do to keep from getting pregnant include not having sex at certain times [rhythm], and using birth control methods such as the pill, Norplant®, shots [Depo-Provera®], condoms, diaphragm, foam, IUD, having their tubes tied, or their partner having a vasectomy.)

- No
- Yes

→ Go to Question 15

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

**Check all that apply**

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

**15. Did you take any fertility drugs to help you get pregnant with your new baby?**  
(Fertility drugs include Clomid®, Serophene®, Pergonal®, or any other drugs that you may have taken to help you get pregnant.)

- No
- Yes

**16. Did you use any medical procedures (assisted reproductive technology) to help you get pregnant with your new baby?** (Assisted reproductive technology procedures include in vitro fertilization [IVF], GIFT, ZIFT, embryo transfer, and donor oocytes.)

- No
- Yes

**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 a calendar when you answer these questions.)**

**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.)

\_\_\_\_\_ Weeks OR \_\_\_\_\_ Months

- I don't remember

**18. How many weeks or months pregnant were you when you had your first visit for prenatal care?** (Don't count a visit that was only for a pregnancy test or only for WIC [the Special Supplemental Nutrition Program for Women, Infants, and Children].)

\_\_\_\_\_ Weeks OR \_\_\_\_\_ Months

I didn't go for prenatal care

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

No

Yes \_\_\_\_\_

I didn't want prenatal care \_\_\_\_\_

Go to  
Question 21

**20. Did any of these things keep you from getting prenatal care as early as you wanted?**

Check all that apply

- I couldn't get an appointment earlier in my pregnancy
- I didn't have enough money or insurance to pay for my visits
- I didn't know that I was pregnant
- I had no way to get to the clinic or doctor's office
- The doctor or my health plan would not start care earlier
- I didn't have my Medicaid card
- I had no one to take care of my children
- I had too many other things going on
- Other → Please tell us:

\_\_\_\_\_

If you did not go for prenatal care, go to Question 25.

**21. Where did you go *most of the time* for your prenatal visits? (Do not include visits for WIC.)**

Check one answer

- Hospital clinic
- Health department clinic
- Private doctor's office or HMO clinic
- Community health center
- Military facility
- Other → Please tell us:

\_\_\_\_\_

**22. How was your prenatal care paid for?**

**Check all that apply**

- Medicaid
  - Personal income (cash, check, or credit card)
  - Health insurance or HMO
  - Military
  - Health department
  - Other → Please tell us:
- 

**23. During any of your prenatal care visits, did a doctor, nurse, or other health care worker talk with you about any of the things listed below? (Please count only discussions, not reading materials or videos.) For each item, circle Y (Yes) if someone talked with you about it or circle N (No) if no one talked with you about it.**

	No	Yes
a. How smoking during pregnancy could affect your baby.....	N	Y
b. Breastfeeding your baby.....	N	Y
c. How drinking alcohol during pregnancy could affect your baby.....	N	Y
d. Using a seat belt during your pregnancy.....	N	Y
e. Birth control methods to use after your pregnancy.....	N	Y
f. Medicines that are safe to take during your pregnancy.....	N	Y
g. How using illegal drugs could affect your baby.....	N	Y
h. Doing tests to screen for birth defects or diseases that run in your family.....	N	Y
i. What to do if your labor starts early.....	N	Y
j. Getting your blood tested for HIV (the virus that causes AIDS).....	N	Y
k. Physical abuse to women by their husbands or partners.....	N	Y

**24. At any time during your prenatal care, did a doctor, nurse, or other health care worker talk with you about how much weight you should gain during your pregnancy?**

- No
- Yes → How many pounds did he or she recommend you gain?

\_\_\_\_\_ Pounds

The next questions are about your most recent pregnancy and things that might have happened during your pregnancy.

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

- No
- Yes

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

	No	Yes
a. Labor pains more than 3 weeks before your baby was due (preterm or early labor) .....	N	Y
b. High blood pressure (including preeclampsia or toxemia) or retained water (edema) .....	N	Y
c. Vaginal bleeding.....	N	Y
d. Problems with the placenta (such as abruptio placentae, placenta previa) .....	N	Y
e. Severe nausea, vomiting, or dehydration.....	N	Y
f. High blood sugar (diabetes).....	N	Y
g. Kidney or bladder (urinary tract) infection.....	N	Y
h. Water broke more than 3 weeks before your baby was due (premature rupture of membranes, PROM).....	N	Y
i. Cervix had to be sewn shut (incompetent cervix, cerclage).....	N	Y
j. You were hurt in a car accident.....	N	Y

If you did not have any of these problems, go to Question 28.

**27. Did you do any of the following things because of these problem(s)?**

Check all that apply

- I went to the hospital or emergency room and stayed less than 1 day
- I went to the hospital and stayed 1 to 7 days
- I went to the hospital and stayed more than 7 days
- I stayed in bed at home more than 2 days because of my doctor's or nurse's advice

The next questions are about smoking cigarettes and drinking alcohol.

**28. Have you smoked at least 100 cigarettes in the past 2 years? (A pack has 20 cigarettes.)**

- No → Go to Question 32  
 Yes

**29. In the 3 months before you got pregnant, how many cigarettes or packs of cigarettes did you smoke on an average day? (A pack has 20 cigarettes.)**

\_\_\_\_\_ Cigarettes OR \_\_\_\_\_ Packs

- Less than 1 cigarette a day  
 I didn't smoke  
 I don't know

**30. In the last 3 months of your pregnancy, how many cigarettes or packs of cigarettes did you smoke on an average day?**

\_\_\_\_\_ Cigarettes OR \_\_\_\_\_ Packs

- Less than 1 cigarette a day  
 I didn't smoke  
 I don't know

**31. How many cigarettes or packs of cigarettes do you smoke on an average day now?**

\_\_\_\_\_ Cigarettes OR \_\_\_\_\_ Packs

- Less than 1 cigarette a day  
 I don't smoke  
 I don't know

**32. Have you had any alcoholic drinks in the past 2 years? (A drink is 1 glass of wine, wine cooler, can or bottle of beer, shot of liquor, or mixed drink.)**

- No → Go to Question 35  
 Yes

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

- I didn't drink then
- Less than 1 drink a week
- 1 to 3 drinks a week
- 4 to 6 drinks a week
- 7 to 13 drinks a week
- 14 drinks or more a week
- I don't know

**b. During the 3 months before you got pregnant, how many times did you drink 5 alcoholic drinks or more in one sitting?**

\_\_\_\_\_ Times

- I didn't drink then
- I don't know

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

- I didn't drink then
- Less than 1 drink a week
- 1 to 3 drinks a week
- 4 to 6 drinks a week
- 7 to 13 drinks a week
- 14 drinks or more a week
- I don't know

**b. During the last 3 months of your pregnancy, how many times did you drink 5 alcoholic drinks or more in one sitting?**

\_\_\_\_\_ Times

- I didn't drink then
- I don't know

Pregnancy can be a difficult time for some women. These next questions are about things that may have happened before and during your most recent pregnancy.

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

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

**36. a. During the 12 months before you got pregnant, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?**

- No
- Yes

**b. During the 12 months before you got pregnant, did anyone else physically hurt you in any way?**

- No
- Yes

**37. a. 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

**b. During your most recent pregnancy, did anyone else physically hurt you in any way?**

- No
- Yes



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

**38. When was your baby due?**

                                      
Month      Day      Year

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

                                      
Month      Day      Year

I didn't have my baby in a hospital

**40. When was your baby born?**

                                      
Month      Day      Year

**41. When were you discharged from the hospital after your baby was born?**  
(It may help to use the calendar.)

                                      
Month      Day      Year

I didn't have my baby in a hospital

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

- No
- Yes
- I don't know

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

- Less than 24 hours (Less than 1 day)
- 24–48 hours (1–2 days)
- 3 days
- 4 days
- 5 days
- 6 days or more
- My baby was not born in a hospital
- My baby is still in the hospital

**44. How was your delivery paid for?**

Check all that apply

- Medicaid
- Personal income (cash, check, or credit card)
- Health insurance or HMO
- Military
- Health department
- Other → Please tell us:

\_\_\_\_\_

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

**45. What is today's date?**

\_\_\_\_\_  
Month      Day      Year

**46. Is your baby alive now?**

- No
- Yes → Go to Question 48

**47. When did your baby die?**

\_\_\_\_\_  
Month      Day      Year

Go to Question 61

**48. Is your baby living with you now?**

- No → Go to Question 61
- Yes

**49. Did you ever breastfeed or pump breast milk to feed your new baby after delivery?**

- No → Go to Question 53  
 Yes

**50. Are you still breastfeeding or feeding pumped milk to your new baby?**

- No  
 Yes → Go to Question 52

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

\_\_\_\_\_ Weeks OR \_\_\_\_\_ Months

- Less than 1 week

**52. How old was your baby the first time you fed him or her anything besides breast milk?**  
(Include formula, baby food, juice, cow's milk, water, sugar water, or anything else you fed your baby.)

\_\_\_\_\_ Weeks OR \_\_\_\_\_ Months

- My baby was less than one week old  
 I have not fed my baby anything besides breast milk

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

**53. About how many hours a day, on average, is your new baby in the same room with someone who is smoking?**

\_\_\_\_\_ Hours

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

**54. How do you *most often* lay your baby down to sleep now?**

Check one answer

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

**55. How often does your new baby sleep in the same bed with you or anyone else?**

- Always
- Almost always
- Sometimes
- Rarely
- Never

**56. Was your baby seen by a doctor, nurse, or other health care provider in the first week after he or she left the hospital?**

- No → Go to Question 58
- Yes

**57. Was your new baby seen at home or at a health care facility?**

- At home
- At a doctor's office, clinic, or other health care facility

**58. Has your baby had a well-baby checkup?**

- No → Go to Question 61
- Yes

**59. How many times has your baby been to a doctor or nurse for a well-baby checkup? (It may help to use the calendar.)**

\_\_\_\_\_ Times

**60. Where do you usually take your baby for well-baby checkups?**

Check one answer

- Hospital clinic
- Health department clinic
- Private doctor's office or HMO clinic
- Community health center
- Military facility
- Other → Please tell us:  
\_\_\_\_\_

The next few questions are about the time after you gave birth to your new baby and things that may have happened after delivery.

**61. After your new baby was born, did a doctor, nurse, or other health care worker talk with you about using birth control?**

- No
- Yes

**62. 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 having their tubes tied or their partner having a vasectomy, using birth control methods like the pill, Norplant®, shots [Depo-Provera®], condoms, diaphragm, foam, IUD, and not having sex at certain times [rhythm].)

- No
- Yes → Go to Question 64

**63. What are your or your husband's or partner's reasons for not doing anything to keep from getting pregnant *now* ?**

**Check all that apply,  
then go to Question 65**

- I am not having sex
- I want to get pregnant
- I don't want to use birth control
- My husband or partner doesn't want to use anything
- I don't think I can get pregnant (sterile)
- I can't pay for birth control
- I am pregnant now
- Other → Please tell us:  

---

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

Check all that apply

- Tubes tied (sterilization)
- Vasectomy (sterilization)
- Pill
- Condoms
- Foam, jelly, cream
- Norplant®
- Shots (Depo-Provera®)
- Withdrawal
- Other → Please tell us:

\_\_\_\_\_

The next questions are about your family and the place where you live.

**65. Which rooms are in the house, apartment, or trailer where you live?**

Check all that apply

- Living room
- Separate dining room
- Kitchen
- Bathroom(s)
- Recreation room, den, or family room
- Finished basement
- Bedroom → How many? \_\_\_\_\_

**66. Counting yourself, how many people live in your house, apartment, or trailer?**

\_\_\_\_\_ Adults (people aged 18 years or older)

\_\_\_\_\_ Babies, children, or teenagers (people aged 17 years or younger)

**67. What were the sources of your household's income during the past 12 months ?**

Check all that apply

- Paycheck or money from a job
- Aid such as Temporary Assistance for Needy Families (TANF), welfare, public assistance, general assistance, food stamps, or Supplemental Security Income
- Unemployment benefits
- Child support or alimony
- Social security, workers' compensation, veteran benefits, or pensions
- Money from a business, fees, dividends, or rental income
- Money from family or friends
- Other → Please tell us:

\_\_\_\_\_

On the last few pages, there are questions on a variety of topics. Your answers should be for your most recent birth and the pregnancy leading up to that birth.

**68. During your most recent pregnancy, did you get any of these services? Circle Y (Yes) if you got the service or circle N (No) if you did not get it.**

	No	Yes
a. Childbirth classes.....	N	Y
b. Parenting classes.....	N	Y
c. Classes on how to stop smoking.....	N	Y
d. Visits to your home by a nurse or other health care worker.....	N	Y
e. Food stamps.....	N	Y
f. TANF (Welfare).....	N	Y

**69. Did you work for pay for at least 10 hours per week during your pregnancy?**

- No → Go to Question 72  
 Yes

**70. What was the last month of your pregnancy that you worked for pay for 10 hours or more per week?**

- First, second, or third month  
 Fourth month  
 Fifth month  
 Sixth month  
 Seventh month  
 Eighth month  
 Ninth month

**71. Did any of these things happen to you during your pregnancy. For each thing, circle Y (Yes) if it did happen to you or circle N (No) if it did not .**

	No	Yes
a. My doctor or nurse told me to stop going to work.....	N	Y
b. I had tiredness or work-related stress.....	N	Y
c. I had swelling in my ankles, hands, face, or elsewhere.....	N	Y

**72. This question is about the care of your teeth during your most recent pregnancy. For each thing, circle Y (Yes) if it is true or circle N (No) if it is not true.**

	No	Yes
a. I needed to see a dentist for a problem .....	N	Y
b. I went to a dentist or dental clinic.....	N	Y
c. A dental or other health care worker talked with me about how to care for my teeth and gums.....	N	Y

**73. How long has it been since you had your teeth cleaned by a dentist or a dental hygienist?**

\_\_\_\_\_ Months

**If you did not go for prenatal care, go to Question 75.**

**74. During any of your prenatal care visits, did a doctor, nurse, or other health care worker talk to you about how HIV (the virus that causes AIDS) could affect your baby?**

- No
- Yes

**If your baby is not alive, or is not living with you, go to Page 15.**

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

	No	Yes
a. Hospital staff gave me information about breastfeeding.....	N	Y
b. My baby stayed in the same room with me at the hospital.....	N	Y
c. I breastfed my baby in the hospital.....	N	Y
d. I breastfed my baby in the first hour after my baby was born.....	N	Y
e. Hospital staff helped me learn how to breastfeed.....	N	Y
f. My baby was fed only breast milk at the hospital.....	N	Y
g. Hospital staff told me to breastfeed whenever my baby wanted.....	N	Y
h. The hospital gave me a gift pack with formula.....	N	Y
i. The hospital gave me a telephone number to call for help with breastfeeding.....	N	Y
j. My baby used a pacifier in the hospital.....	N	Y

**76. Since your new baby was born, have you used WIC services for your new baby?**

- No →
- Yes

**Go to Question 78**



**77. When you went for WIC visits for your new baby, did you receive information on breastfeeding?**

- No
- Yes

**78. Listed below are some things about safety.** For each thing, circle **Y** (Yes) if it applies to you or circle **N** (No) if it does not.

	No	Yes
a. My infant was brought home from the hospital in an infant car seat.....	N	Y
b. My baby always or almost always rides in an infant car seat.....	N	Y
c. My home has a working smoke alarm.....	N	Y
d. There are loaded guns, rifles, or other firearms in my home.....	N	Y

**79. How old was your baby when he or she went for his or her first well-baby checkup?**

\_\_\_\_\_ Weeks old

- Less than 1 week
- My baby has never had a well-baby checkup

**Please use this space for any additional comments you would like to make about 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.*