

PRAMS Surveillance Report Alabama 2007

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DIVISION OF STATISTICAL ANALYSIS
CENTER FOR HEALTH STATISTICS**

**Principal Authors
Qun Zheng, M.S. and Louie Albert Woolbright, Ph.D.**

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

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

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PRAMS SURVEILLANCE REPORT

ALABAMA 2007

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INTRODUCTION AND METHODS

INTRODUCTION

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

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

METHODS

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

Beginning with the 2000 PRAMS survey, a Spanish language survey is sent along with an English language survey to mothers who are listed as 'Hispanic' on the birth certificate. Alabama currently does not have Spanish speaking interviewers for the phone phase.

The sample is selected through a complex, stratified sampling design. Mothers whose deliveries are paid by Medicaid are over sampled. Roughly equal numbers of mothers are selected from each of two sample strata, Medicaid and non-Medicaid.

The figures given in this publication are weighted to represent the 64,180 live births which occurred in Alabama in 2007 to women who were Alabama residents at the time of the births, excluding certain multiple births. The weights adjust for differential response rates by mother's marital status, age, and educational attainment. For infants born during 2007, 806 questionnaires were completed from 1,277 sampled. The overall **unweighted** response rate was 63.1 percent, and the **weighted** response rate was 64 percent. Because the CDC requires an overall weighted response rate of 70 percent to insure data is of the highest quality, caution should be used in interpreting data reported from 2007.

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

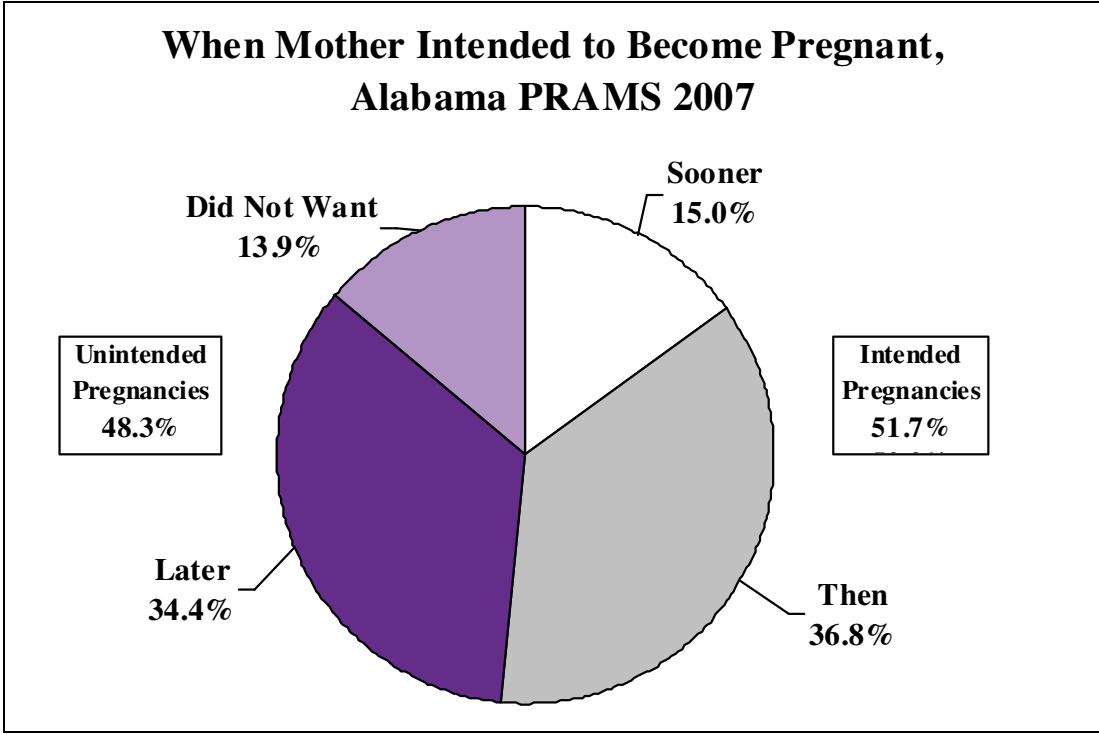
2007 PRAMS Surveillance Report Highlights

- 48.3 percent of Alabama births were unintended.
- 67.2 percent of Alabama mothers did not take any multivitamins before becoming pregnant.
- 24.2 percent of Alabama mothers reported having a urinary tract infection (UTI) during pregnancy.
- 13.5 percent of Alabama mothers indicated they continued smoking during pregnancy.
- 6.9 percent of Alabama mothers drank alcoholic beverages on a weekly basis during the last three months of pregnancy.
- 67.6 percent of Alabama mothers reported having a medical problem, such as nausea or vomiting, preterm labor, high blood pressure, kidney or bladder infections, vaginal bleeding, or diabetes during pregnancy.
- 58.0 percent of Alabama mothers participated in the Supplemental Food Program for Women, Infants, and Children (WIC) during pregnancy.
- 63.7 percent of Alabama mothers initiated breastfeeding their infants.
- 56.4 percent of Alabama women who did not plan to become pregnant reported using no birth control when they became pregnant.
- 87.7 percent of mothers were using some form of birth control at the time of the survey (postpartum).
- 35.7 percent of Alabama mothers reported they moved to a new address during their pregnancy.
- 14.9 percent of Alabama mothers reported they *always or almost always* felt down, depressed, or hopeless since the birth of their baby. 53.9 percent reported feeling this way *sometimes or on rare occasions*.
- 11.8 percent of Alabama mothers reported being *diagnosed* by their doctor or health care worker with depression since the birth of their infant.
- 33.1 percent of Alabama mothers reported having a dental cleaning during their pregnancy.
- 60.4 percent of Alabama mothers most often lay their babies on their backs for sleeping.
- 24.2 percent of Alabama mothers *never* allow their infant to co-sleep or share a bed with himself or herself or another person. 37.0 reported they *always or almost always* allow their infants to co-sleep.

Mothers' General Comments

- “I enjoyed participating in your survey.”
- “I would like to say I am very pleased to see you sending these surveys out. Maybe this will help other mothers realize how important it is to stay healthy during your pregnancy. There’s nothing like having a little miracle in your life. God has surely blessed me and my husband with a beautiful healthy baby boy. I couldn’t ask for anything better.”
- “I hope this helps to determine some of the many reasons for birth defects. Both of my pregnancies were great!”
- “I am very grateful to everyone who helped me to have a happy healthy baby.”

INTENDEDNESS OF BIRTHS

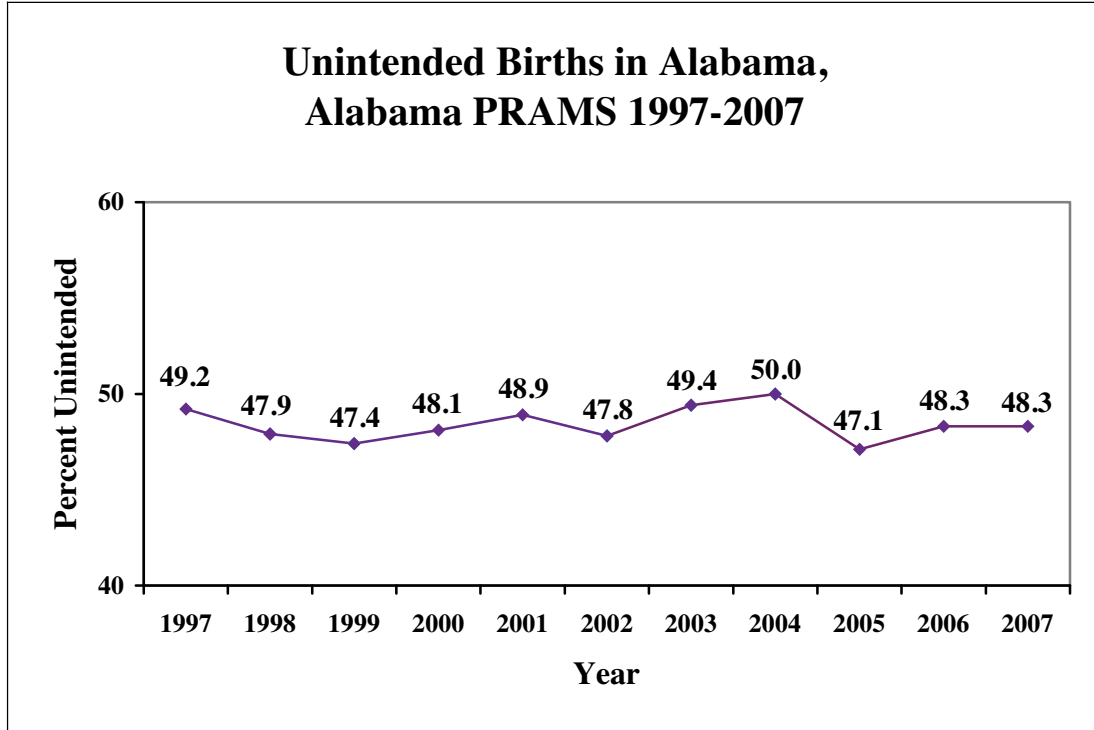


(Question #10 of the PRAMS Survey)

Pregnancies that are unwanted or mistimed are an important health care issue. The health of the infant is directly affected by the mother’s attitude, behaviors, and experiences during the pregnancy. In 2007, 48.3 percent of Alabama mothers reported their pregnancies as *unintended*. Over one-third of these women said they wanted to be pregnant *later* (34.4 percent), and 13.9 percent said they did not want to be pregnant then or at any time in the future. On the other hand, 51.7 percent of Alabama mothers reported either wanting to be pregnant *then* (36.8 percent) or even *sooner* (15.0 percent). The Healthy People 2010 Objective is to increase the proportion of pregnancies that are intended to 70 percent. Alabama women are still far from meeting this goal.

95 % Confidence Intervals						
Intention	Sooner	Then	Later	Did Not Want	Intended	Unintended
Percent	12.6-17.6	33.5-40.2	31.1-37.9	11.5-16.6	48.2-55.1	44.8-51.8

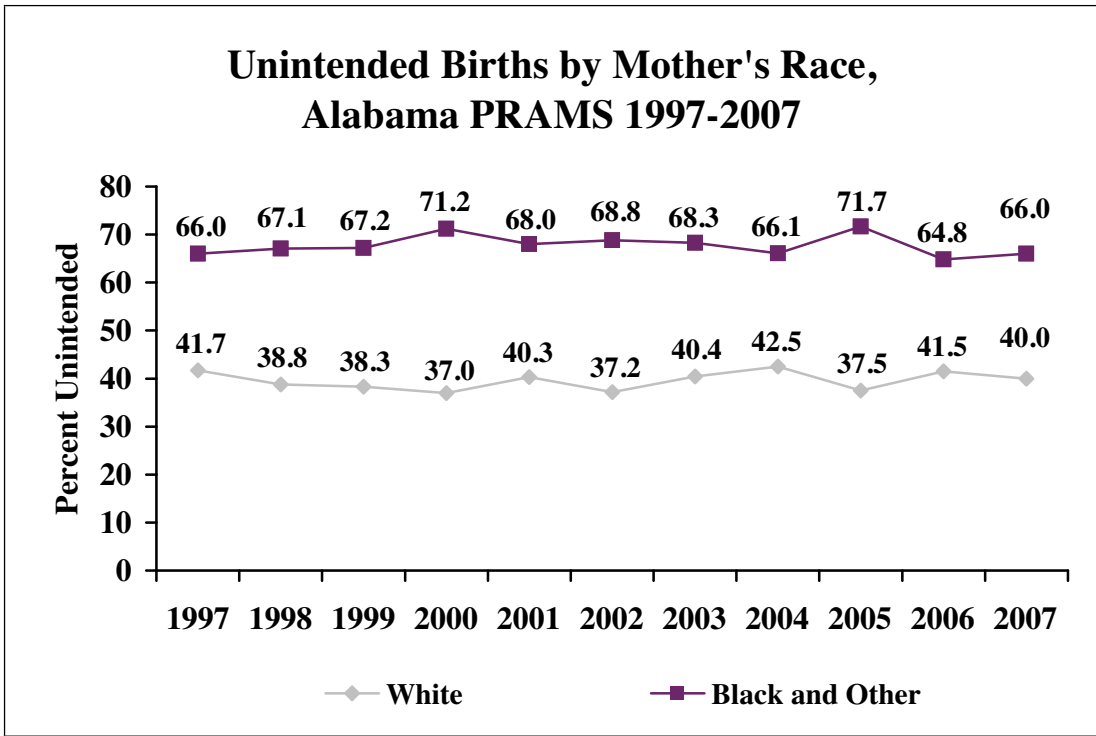
Unintended Births in Alabama, Alabama PRAMS 1997-2007



(Question #10 of the PRAMS Survey)

During the past twelve years, the highest percentage of unintended pregnancies occurred in 2004 at 50.0 percent. From 2004 to 2005, there was a 5.8% decrease in unintended births in Alabama. From 2005 to 2006, there was a 2.5% increase, but, from 2006 to 2007 there was no change in unintended births in Alabama. The difference from year to year has not been statistically significant.

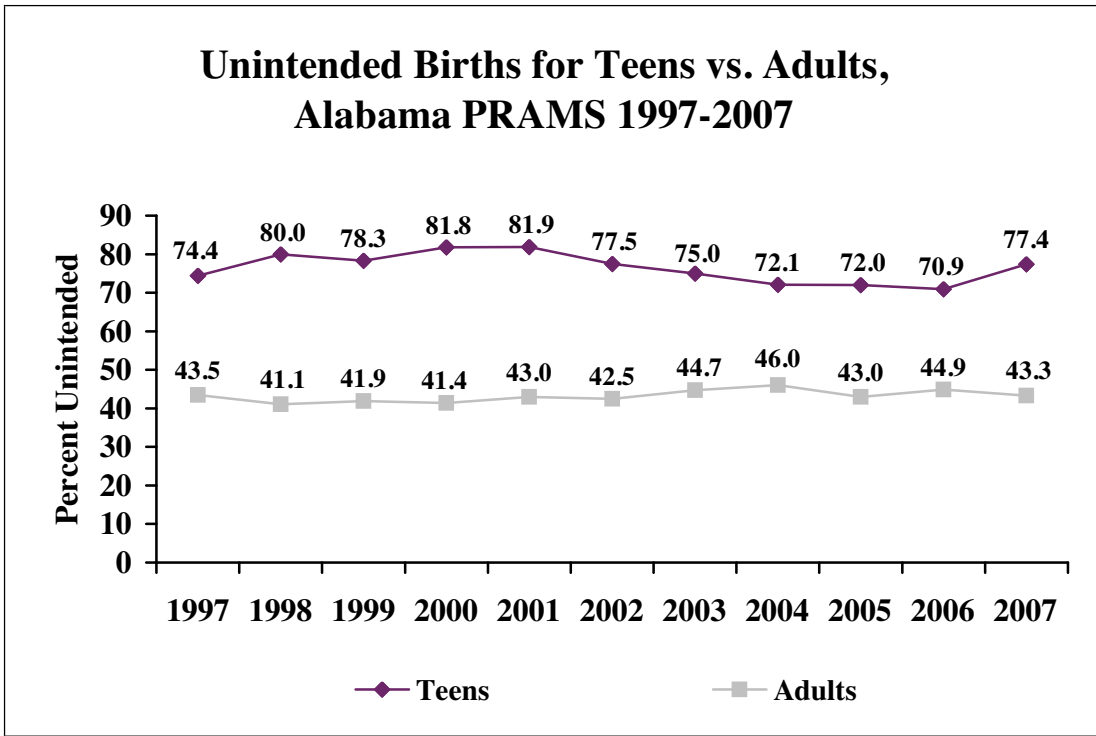
95 % Confidence Intervals											
Year	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Percent Unintended	46.2-52.2	44.9-50.9	44.3-50.5	45.2-51.1	46.0-51.7	44.8-50.8	46.3-52.5	46.5-53.5	43.7-50.6	44.9-51.8	44.8-51.8



(Question #10 of the PRAMS Survey)

For the past twelve years, the percentage of unintended births has been considerably higher among black and other race women than among white women. But, from 2005-2007, the percentage of unintended births to black and other women decreased by 7.9 percent. Conversely, the percentage of unintended births increased by 6.7 percent from 2005-2007 among white women. The percent change in both populations is not statistically significant.

95 % Confidence Intervals											
Year	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
White	38.1-45.3	35.2-42.4	34.5-42.1	33.3-40.6	36.7-43.9	33.6-40.8	36.6-44.3	38.3-46.8	33.6-41.6	37.5-45.7	35.9-44.2
Black & Other	60.6-71.3	61.6-72.6	62.0-72.4	66.3-76.1	63.1-72.9	63.9-73.7	62.9-73.3	59.7-71.9	65.3-77.3	58.3-70.8	59.8-71.7

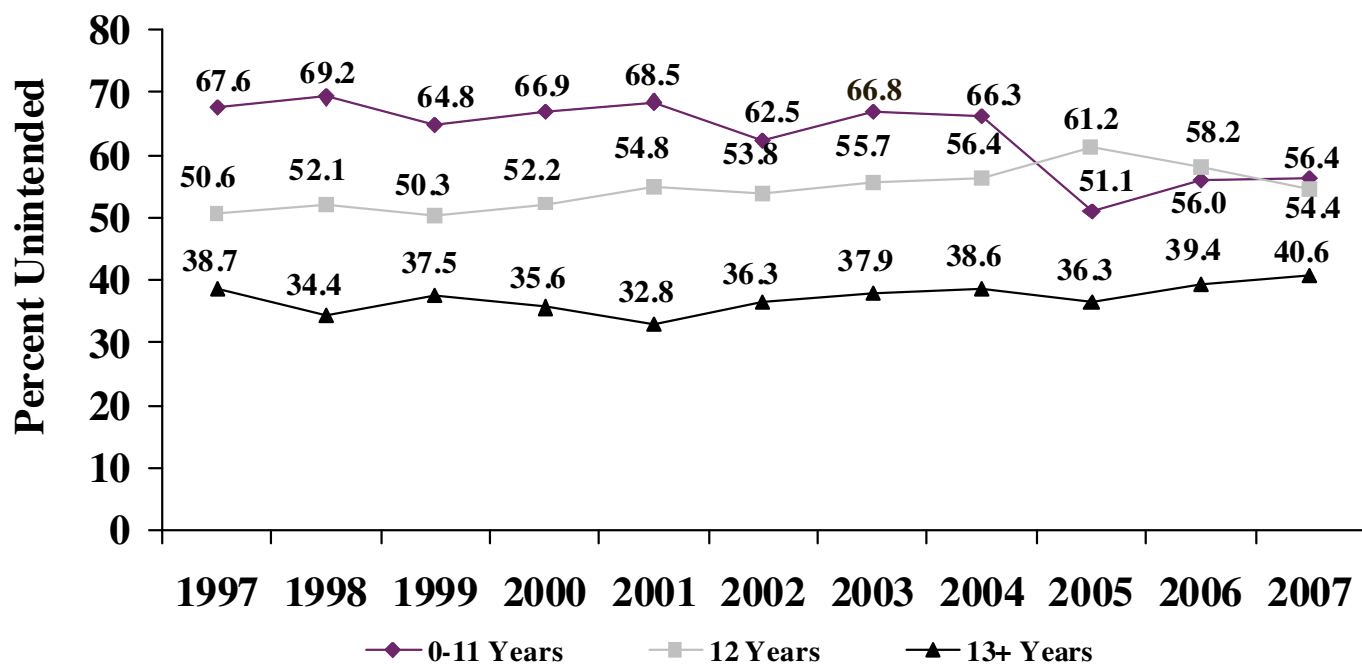


(Question #10 of the PRAMS Survey)

An inverse correlation exists between unintended births and maternal age. Teens, 10 to 19 years of age, have a higher percentage of unintended pregnancies than adult women. One possible explanation for this trend is that older women are more capable of controlling the timing and spacing of pregnancies than are teenagers. From 2001 through 2006, a decrease of 13.4 percent in the percentage of unintended pregnancies among Alabama’s teenagers was seen, but from 2006 to 2007 there was a 9.2 percentage increase. The highest percentage in twelve years of unintended pregnancies among adult women was reported in 2004. The percent difference in either age group was not statistically significant.

95 % Confidence Intervals											
Year	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Teens	68.2-80.6	74.2-85.8	72.1-84.6	75.8-87.7	76.0-87.8	71.4-83.6	66.9-81.6	63.5-79.3	62.9-79.5	61.2-79.1	67.7-84.8
Adults	40.1-46.9	37.6-44.5	38.4-45.3	38.1-44.7	39.8-46.2	39.2-45.8	41.3-48.1	42.3-49.9	39.3-46.8	41.2-48.6	39.7-47.1

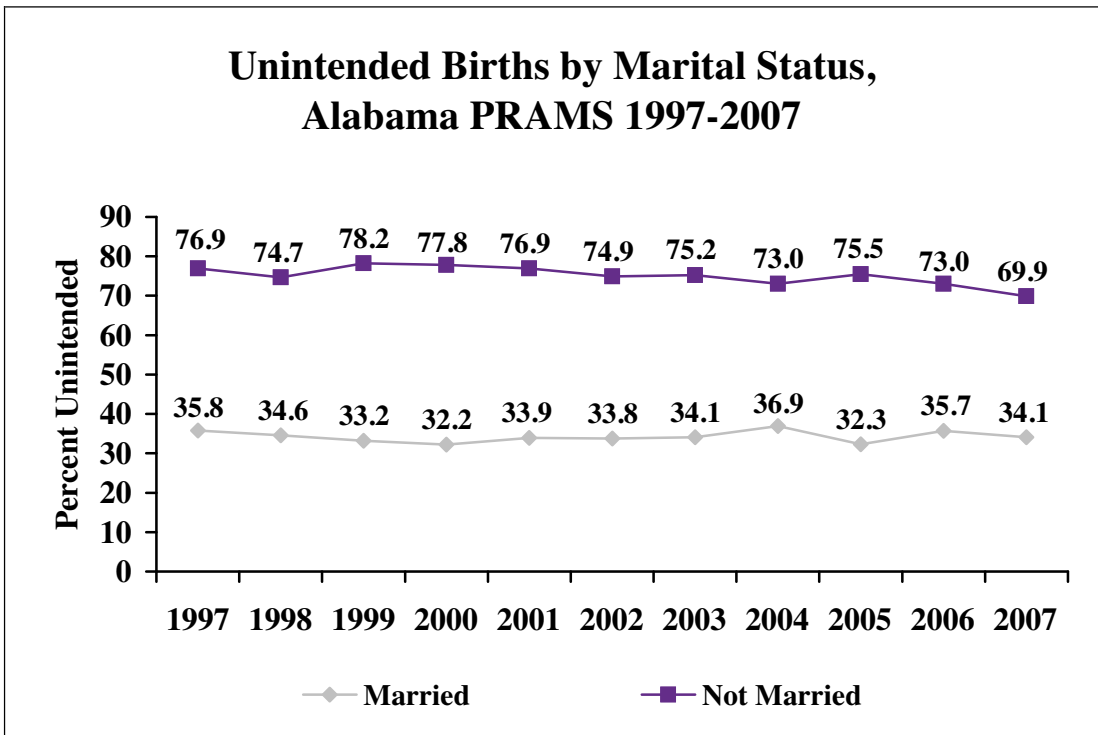
Unintended Births by Mother's Education, Alabama PRAMS 1997-2007



(Question #10 of the PRAMS Survey)

An inverse correlation exists between unintended births and a mother's education, or as the amount of formal education increases, the percent of unintended births decreases. However, in 2005, a 22.9% decrease in unintended pregnancies was reported among women with the lowest level of education. From 2005-2007, there was a 10.4% increase among women with the lowest level of education. And a slight decrease was seen among women with 12 years of education. There was a slight increase in unintended births among women with the highest levels of education. None of these changes were statistically significant.

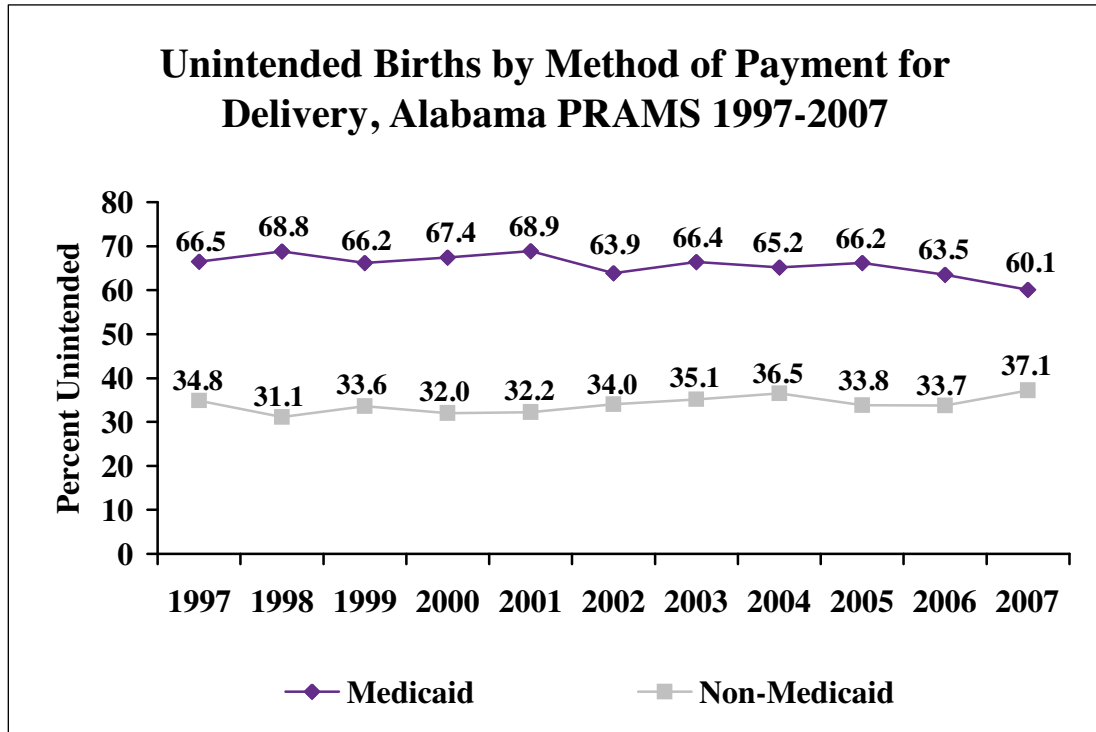
95 % Confidence Intervals											
Year/ Education	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
0-11 yrs.	61.3-73.8	62.9-75.6	58.1-71.5	60.5-73.2	63.0-74.0	56.4-68.7	59.9-73.0	58.2-73.6	43.2-58.8	48.0-63.8	47.6-64.9
12 yrs.	45.4-55.8	46.5-57.8	44.6-56.0	46.9-57.4	49.3-60.2	48.2-59.3	49.9-61.4	49.9-62.6	54.8-67.3	51.4-64.8	47.9-60.8
13 plus yrs.	34.1-43.4	29.9-38.8	32.9-42.1	31.0-40.2	28.4-37.2	31.9-40.7	33.6-42.4	33.8-43.7	31.5-41.3	34.8-44.2	36.1-45.3



(Question #10 of the PRAMS Survey)

The percent of unintended births to unmarried women was more than twice that of married women in 2007. Abstinence, postponement of childbearing and improved contraceptive use would be instrumental in the reduction and elimination of unintended births, especially among unmarried women for whom the consequences tend to be greatest. From 2006-2007, neither the 4.2 percent decrease of unintended births among unmarried women nor the 4.5 percent decrease of unintended births among married women was statistically significant.

95 % Confidence Intervals											
Year/ Marital Status	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Married	32.2-39.5	30.8-38.3	29.4-36.9	28.6-35.8	30.3-37.6	30.1-37.5	30.4-38.0	32.8-41.3	28.4-36.5	31.7-39.9	30.2-38.3
Not Married	72.4-81.5	69.8-79.6	73.6-82.8	73.4-82.3	72.7-81.1	70.5-79.4	70.1-79.6	67.3-78.0	69.8-80.3	67.1-78.2	64.0-75.3

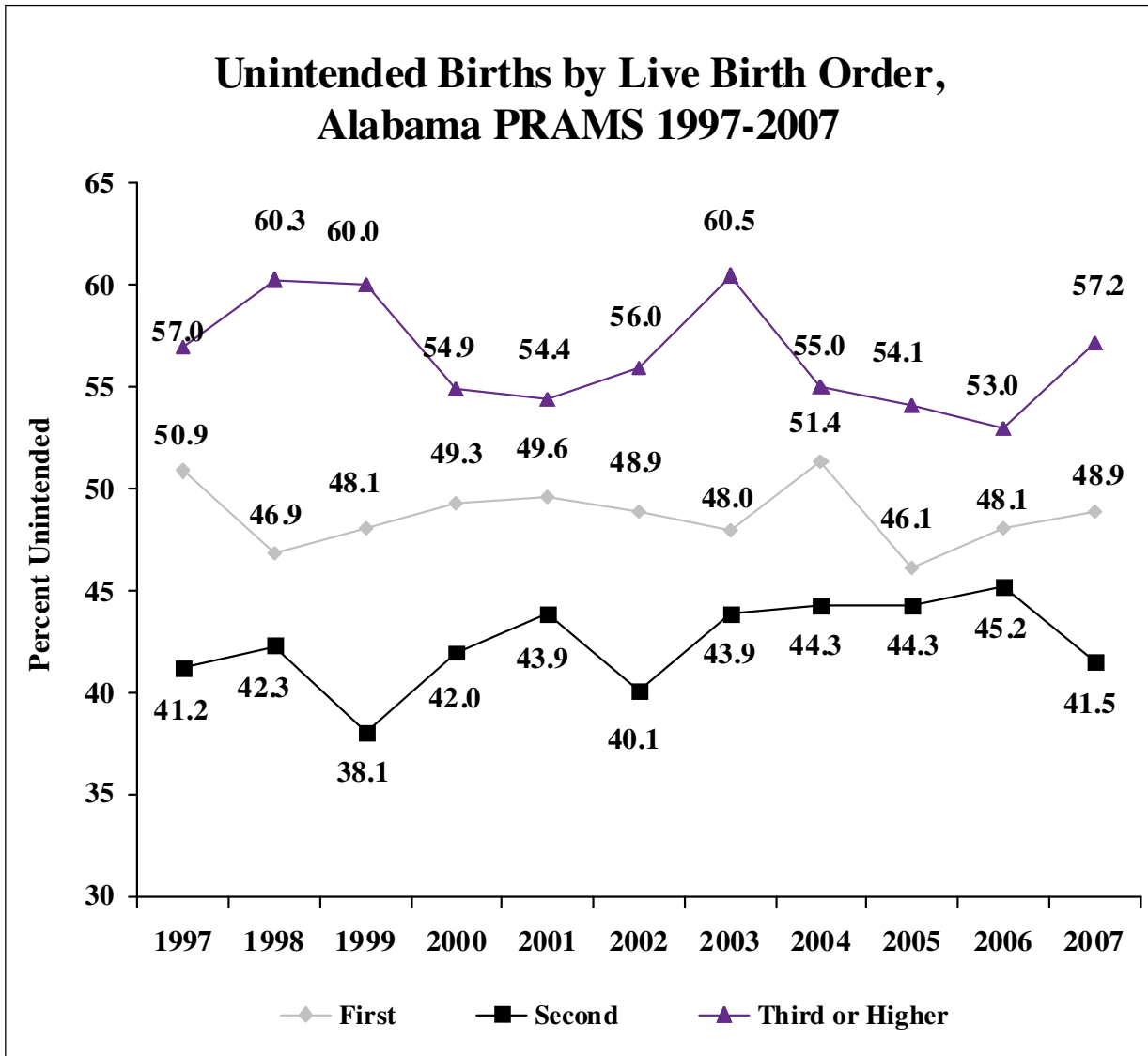


(Question #10 of the PRAMS Survey)

In 2007 in Alabama, 60.1 percent of births to women on Medicaid were unintended compared to 37.1 percent among non-Medicaid women. This indicates that poorer women are more likely to have unplanned births.

95 % Confidence Intervals											
Year/ Payment	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Medicaid	62.3-70.6	64.5-73.0	61.8-70.7	63.3-71.5	64.9-72.8	59.7-68.0	62.0-70.6	60.3-69.7	61.2-70.9	58.5-68.1	54.9-65.0
Non-Medicaid	30.5-39.0	26.9-35.3	29.3-37.9	27.8-36.3	28.1-36.3	29.7-38.3	30.8-39.7	31.5-41.7	29.1-38.9	29.1-38.7	32.4-42.1

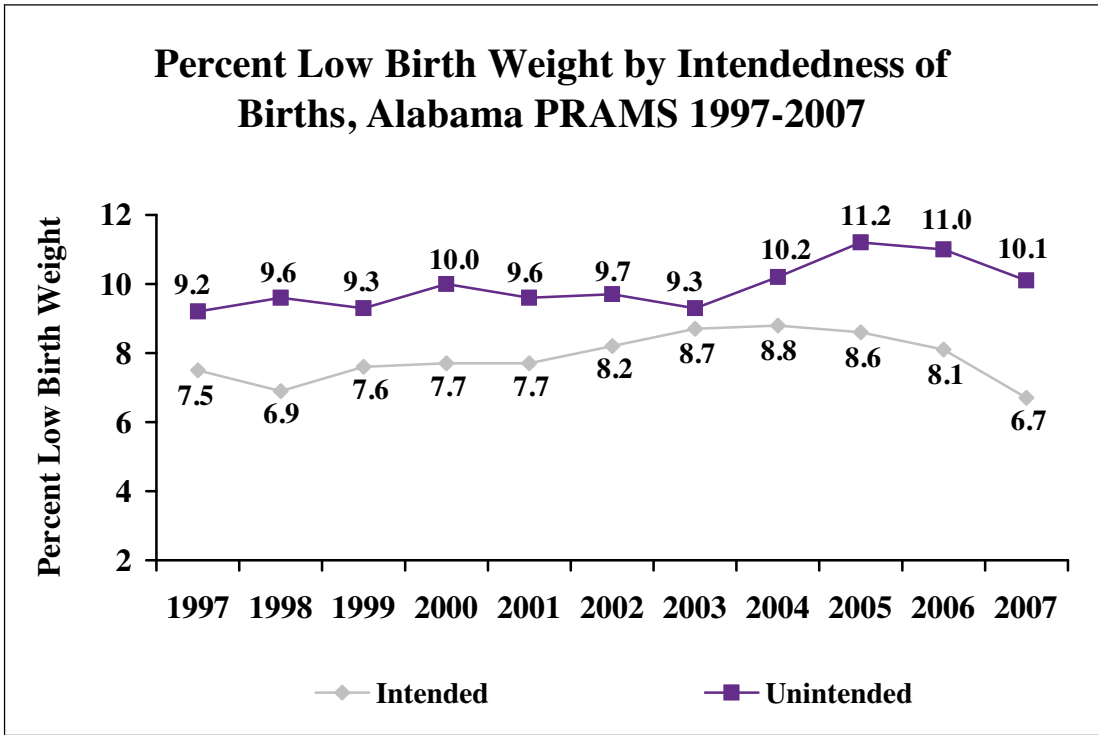
Unintended Births by Live Birth Order, Alabama PRAMS 1997-2007



(Question #10 of the PRAMS Survey)

The percent of unintended births was lowest among mothers who had given birth to their second child, meaning second births are most likely to be planned. In 2007, 48.9 percent of mothers having their first child were unintended. There was an increase in unintended births among mothers who were giving birth to their third or higher birth order child. There was 8.2 percentage decrease in unintended births among mothers who were giving birth to their second birth order child. None of the changes from 2006 to 2007 were statistically significant.

95 % Confidence Intervals											
Year/ Birth Order	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
First	46.4-55.3	42.4-51.4	43.6-52.7	44.7-53.9	45.0-54.2	44.3-53.5	43.0-53.0	46.1-56.7	40.9-51.4	42.8-53.4	43.7-54.2
Second	35.7-46.6	36.8-47.7	32.5-43.7	36.6-47.3	38.7-49.0	34.8-45.4	38.8-49.3	38.3-50.6	38.5-50.2	39.1-51.4	35.6-47.7
Third +	50.3-63.7	52.9-67.7	53.2-66.9	48.4-61.4	48.4-60.5	49.7-62.3	53.9-66.8	47.4-62.3	46.2-61.8	45.8-60.1	49.5-64.5



(Question #10 of the PRAMS Survey)

Low birth weight is defined as birth weight of less than 2,500 grams or 5 lbs. 8oz. Infants delivered at this weight are at increased risk of death during their first year of life or lifelong disabilities. Of births reported as unintended in 2007, 10.1 percent were low weight births, down by 8.2 percent from 2006. Of intended births, the percentage of low weight births decreased by 17.2 percent in 2007. The decrease for intended births is statistically significant.

95 % Confidence Intervals											
Year/ Intention	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Intended	6.9-8.2	6.2-7.5	6.9-8.3	7.0-8.3	7.1-8.4	7.5-8.9	8.0-9.5	8.0-9.7	7.8-9.5	7.3-9.0	7.3-13.7
Unintended	8.4-10.0	8.7-10.5	8.4-10.2	9.1-10.8	8.8-10.4	8.9-10.6	8.5-10.2	9.2-11.2	10.1-12.4	9.9-12.1	4.7-9.6

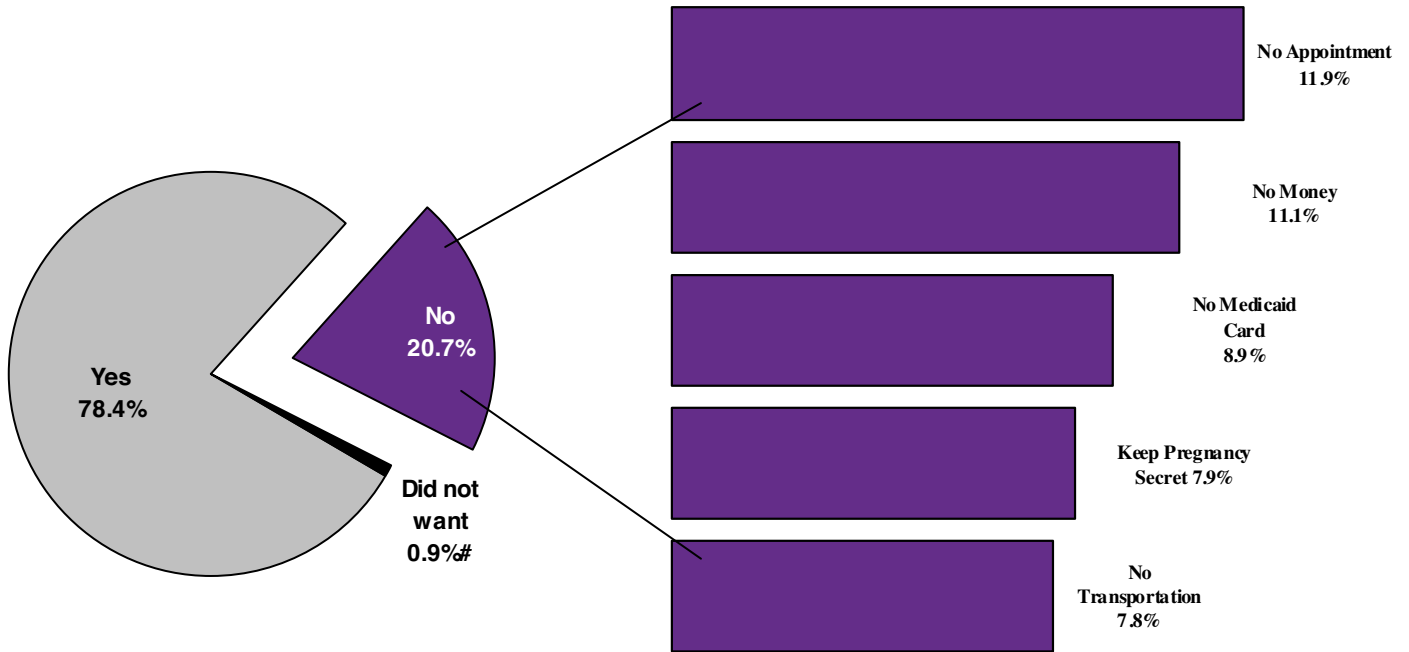
Mothers' Intendedness Comments

- “I wanted another child way before this...We are blessed.”
- “I went through four years of infertility treatments to get pregnant.”
- “I was supposed to start my pills after I started my period but it never started because I was pregnant. My other baby was 3 months old.”

PRENATAL CARE

Prenatal Care Received as Early as Mother Wanted, Alabama PRAMS 2007

Reason Care Not Received Early*



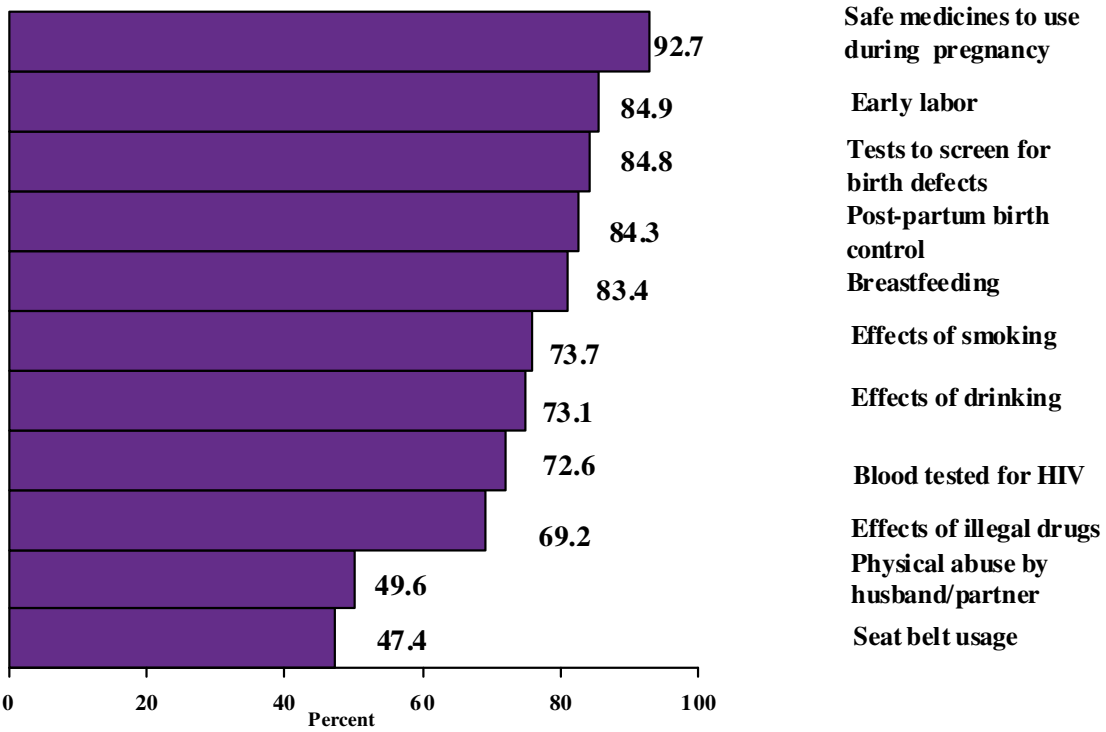
*Items not mutually exclusive, therefore percentages will not equal 100. # number of respondents is less than 20.

(Questions 17 & 18 of the PRAMS Survey)

Early and adequate prenatal care is critical in detecting problems that arise during pregnancy and in treating them before they become serious or life-threatening. In 2007, 20.7 percent of Alabama mothers reported they did not get prenatal care as early as they wanted. Barriers which hindered them included: no money to pay for the prenatal care visits, no Medicaid coverage yet, not able to get an appointment early, trying to keep their pregnancy a secret and no transportation available for doctor visits.

95% Confidence Intervals								
Early PNC	Yes	No	Did Not Want	No Appt.	No Money	No Medicaid Card	Secret	No Trans.
Percent	75.3-81.2	17.9-23.7	0.4-2.1	9.8-14.5	9.0-13.7	7.1-11.3	6.0-10.4	5.9-10.1

Topics Discussed During Prenatal Care Visits, Alabama PRAMS 2007



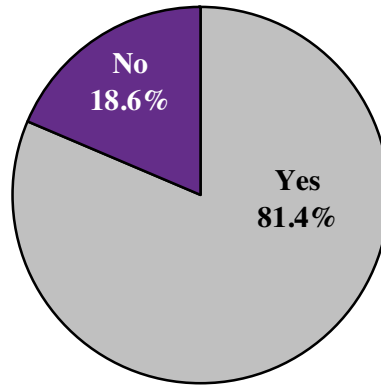
(Question 20 of the PRAMS Survey)

Mothers were asked if a doctor, nurse, or health care worker talked with them about the above topics during any of their prenatal care visits. In 2007, nine out of ten Alabama mothers reported being informed about safe medications to take during their pregnancies. Approximately eight out of ten mothers reported discussions about post partum birth control, screening tests for birth defects or diseases which run in their families, breastfeeding, and what to do if premature labor occurs. Only 47.4 percent reported any discussion on seat belt usage during pregnancy, and 49.6 percent of Alabama’s mothers reported having a discussion about physical abuse by a husband or partner.

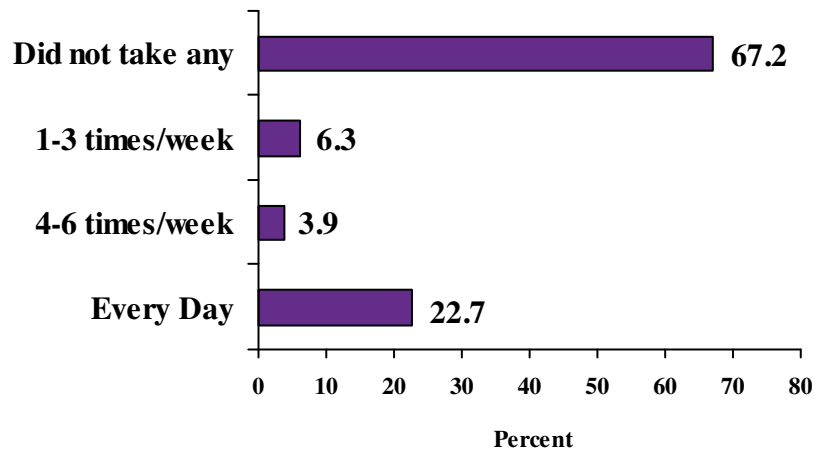
95% Confidence Intervals					
Topics	Safe Medicines	Birth defects	PP Birth control	Early labor	Breastfeeding
Percent	90.6-94.4	82.0-87.2	81.6-86.7	82.1-87.2	80.7-85.8

95% Confidence Intervals					
Smoking	HIV testing	Drinking	Illegal drug usage	Seat belt usage	Physical abuse
70.6-76.5	69.4-75.6	70.0-76.0	66.0-72.2	43.8-51.0	46.3-53.0

Knowledge of Folic Acid, Alabama PRAMS 2007
Question 22: Have you ever heard or read that taking the vitamin folic acid can help prevent some birth defects?



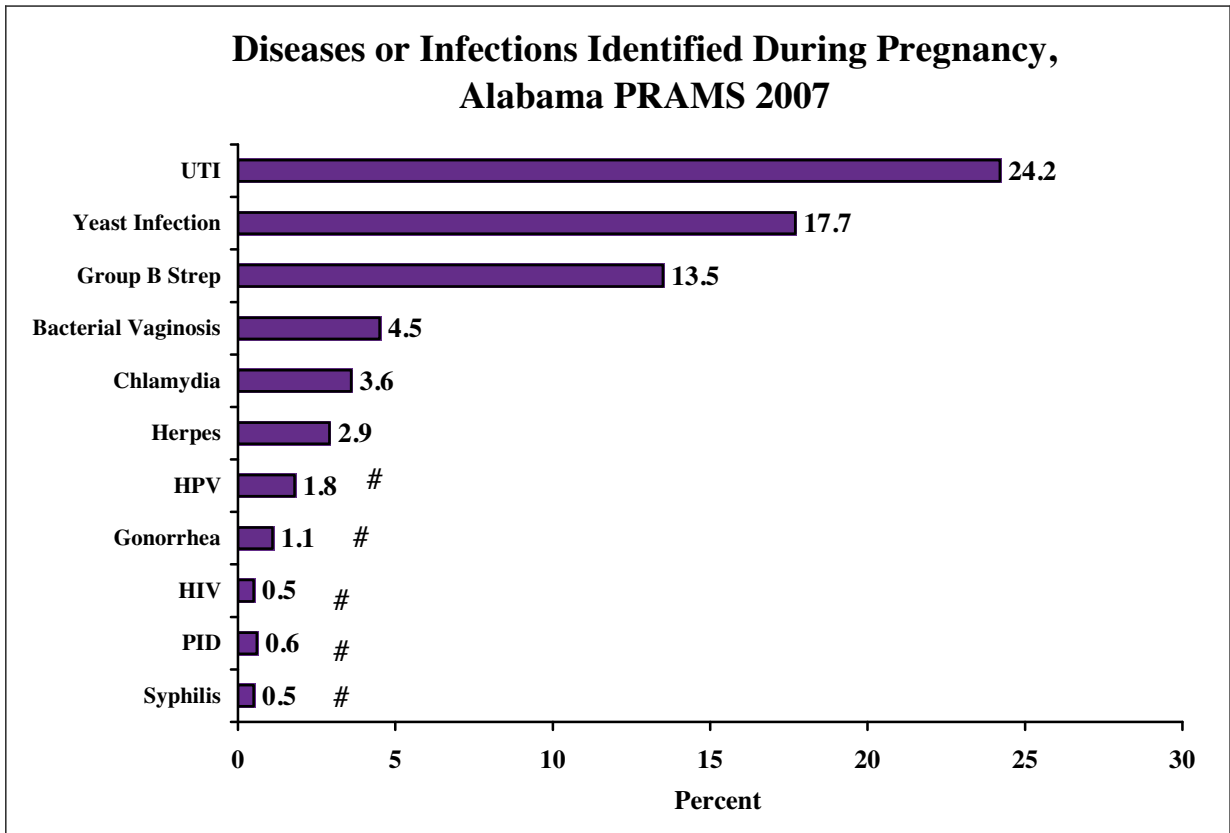
Percent of Mothers Who Took a Multivitamin Before Pregnancy, Alabama PRAMS 2007



(Question 3 of the PRAMS Survey)

Studies have shown that women who consume 400 micrograms of folic acid daily *before* becoming pregnant can greatly reduce the incidence of neural tube defects, such as spina bifida and anencephaly, in their infants. In 2007, eight out of ten Alabama mothers reported they had either read or heard that taking folic acid could help prevent some birth defects, but this knowledge was not translated into action. Approximately 67.2 percent of mothers took no multivitamins (contains the required amount of folic acid) the month before their pregnancy occurred. Only one in five Alabama mothers consumed a daily multivitamin during the month prior to becoming pregnant.

95% Confidence Intervals						
Questions	Knowledge? Yes	Knowledge? No	None Taken	1-3 times/wk.	4-6 times/wk.	Taken Daily
Percent	78.5-84.0	16.0-21.5	64.0-70.3	4.8-8.2	2.8-5.3	20.0-25.6



(Question 64 of the PRAMS Survey) # number of respondents is less than 20.

Pregnant women are not immune from having sexually transmitted diseases (STDs), and some STDs can seriously affect the health of the mother as well as the baby. Early labor, premature rupture of the membranes, and pelvic infections can occur in women infected with some STDs. HPV (human papilloma virus) is associated with cervical cancer. Gonorrhea, chlamydia, hepatitis B, and genital herpes can be passed from mother to infant during delivery. Conjunctivitis, low birth weight, neonatal sepsis, blindness, deafness, liver disease, and death can result in infants of women infected with certain STDs.

Mothers were asked, “During your most recent pregnancy, did a doctor, nurse, or other health care worker tell you that you had any of the following diseases or infections?” Nearly one in four Alabama mothers were told they had a UTI or a urinary tract infection, and nearly one in five had a yeast infection. Nearly fourteen percent of Alabama mothers reported having a positive test for Group B Strep, which can cause infections in newborns.

95% Confidence Intervals					
Infection	UTI	Yeast	Group B Strep	Bacterial vaginosis	Chlamydia
Percent	21.2-27.3	15.2-20.5	11.3-16.0	3.2-6.2	2.4-5.3

95% Confidence Intervals					
HPV	Gonorrhea	Herpes	PID	HIV	Syphilis
1.1-3.1	0.5-2.3	1.9-4.3	0.2-1.6	0.2-1.6	0.2-1.5

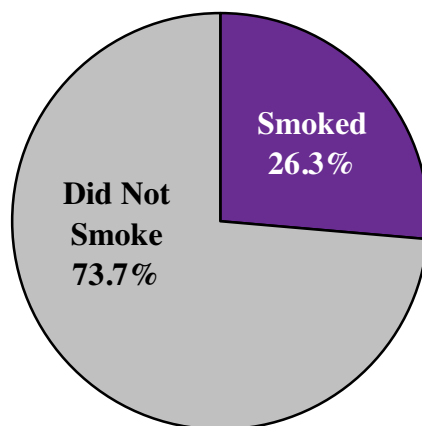
Mothers' Prenatal Care Comments

- “The hospitals should let the mothers know how important prenatal care is.”
- “Just wish I would have known I was pregnant sooner so I could have started prenatal earlier.”
- “During prenatal visits or any healthcare worker seeing the pregnant woman should discuss birth control, breastfeeding, physical relationship, exercise during pregnancy, medications.”
- “I had wonderful prenatal care by my doctor’s office. My husband and I attended prepared childbirth class. I attended a breastfeeding class.”

NEGATIVE HEALTH BEHAVIORS:

SMOKING AND DRINKING

**Smoked 100 Cigarettes or More in Past 2 Years,
Alabama PRAMS 2007**



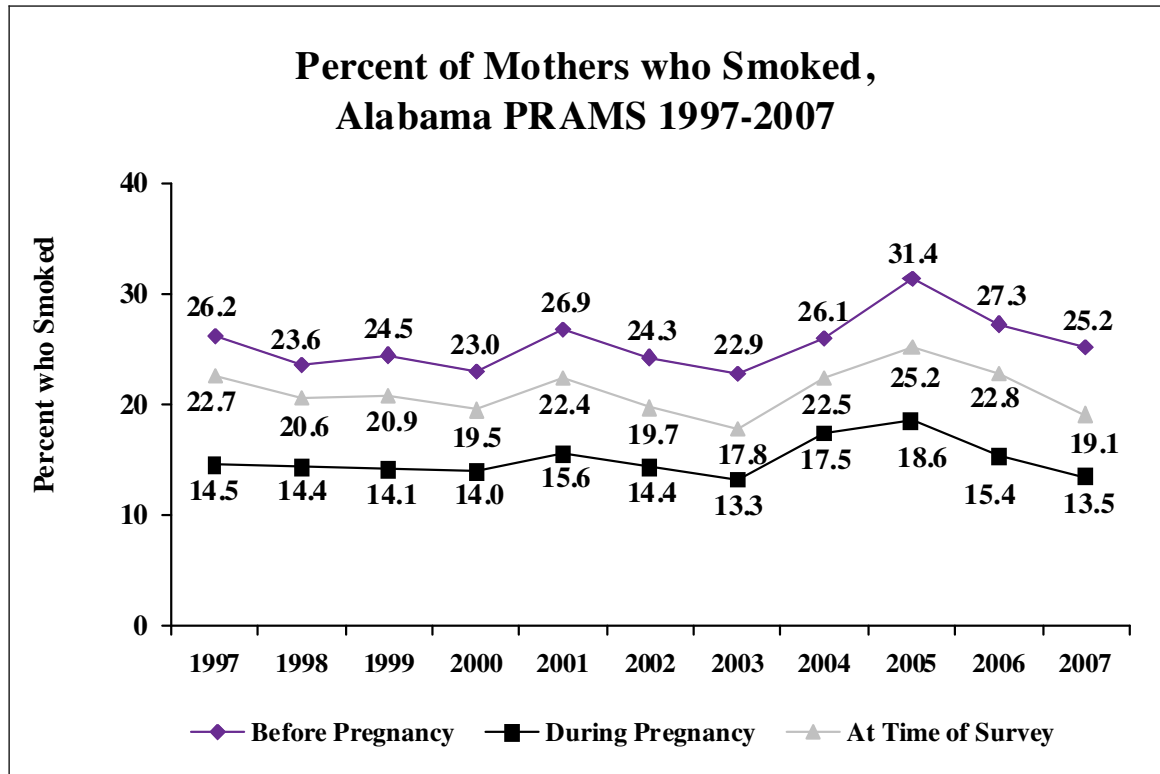
(Question 27 of the PRAMS Survey)

The Centers for Disease Control and Prevention (CDC) have reported that “Smoking during pregnancy is the single most preventable cause of illness and death among mothers and infants.”¹ They report that pregnant women who smoke are at increased risk of having an ectopic pregnancy or a miscarriage, and that approximately 8 percent of infants who die within a week after birth expire due to conditions caused by maternal smoking during pregnancy. Infants born to mothers who smoked while pregnant are more likely to be low birth weight infants, that is, less than 2,500 grams, and may experience lifelong health problems.

In 2007, when Alabama mothers were asked if they had smoked 100 cigarettes or more in the past two years, 26.3 percent answered ‘Yes’.

95% Confidence Intervals		
Smoking Status	Smoked	Did Not Smoke
Percent	23.3-29.6	70.5-76.7

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

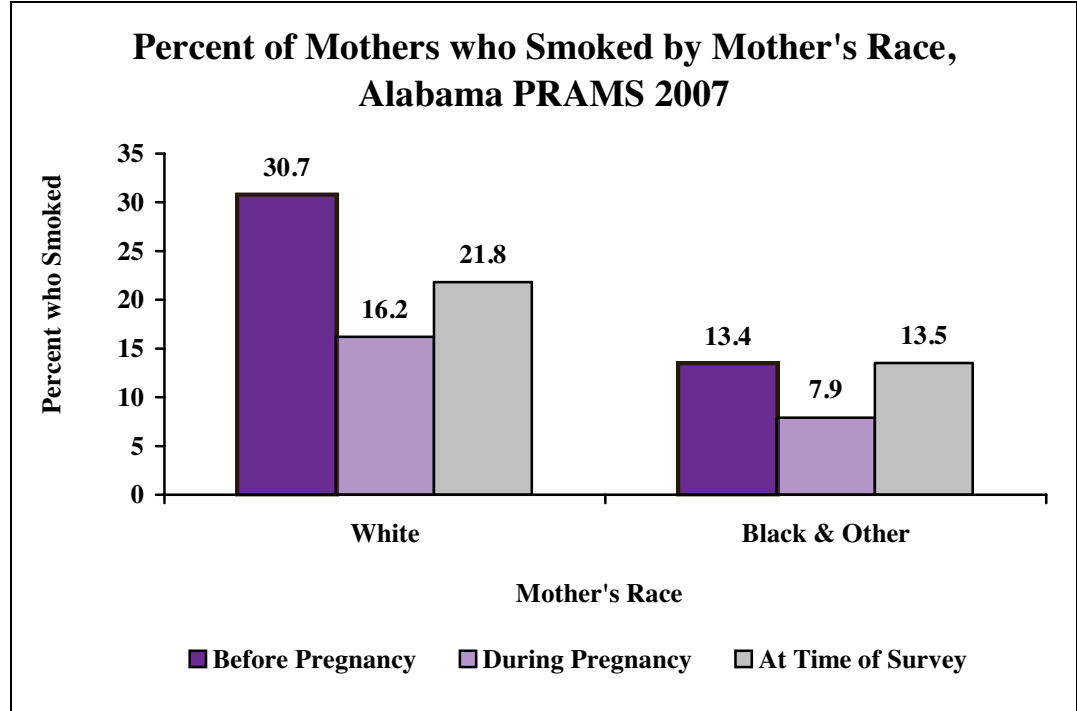


(Questions 28, 29, & 30 of the PRAMS Survey)

The Healthy People 2010 Objective is to increase abstinence from cigarette smoking by pregnant women to 99 percent. Alabama is not close to achieving this goal. Historically in Alabama, smoking decreases during pregnancy in the majority of women, only to increase again after the birth of their infants. This pattern was repeated in 2007, although 13.5 percent of Alabama mothers continued to smoke while pregnant. In 2007, the decrease in smoking before pregnancy and the increase in smoking at the time of the survey were not statistically significant. Additionally, the decrease in smoking during pregnancy was not statistically significant.

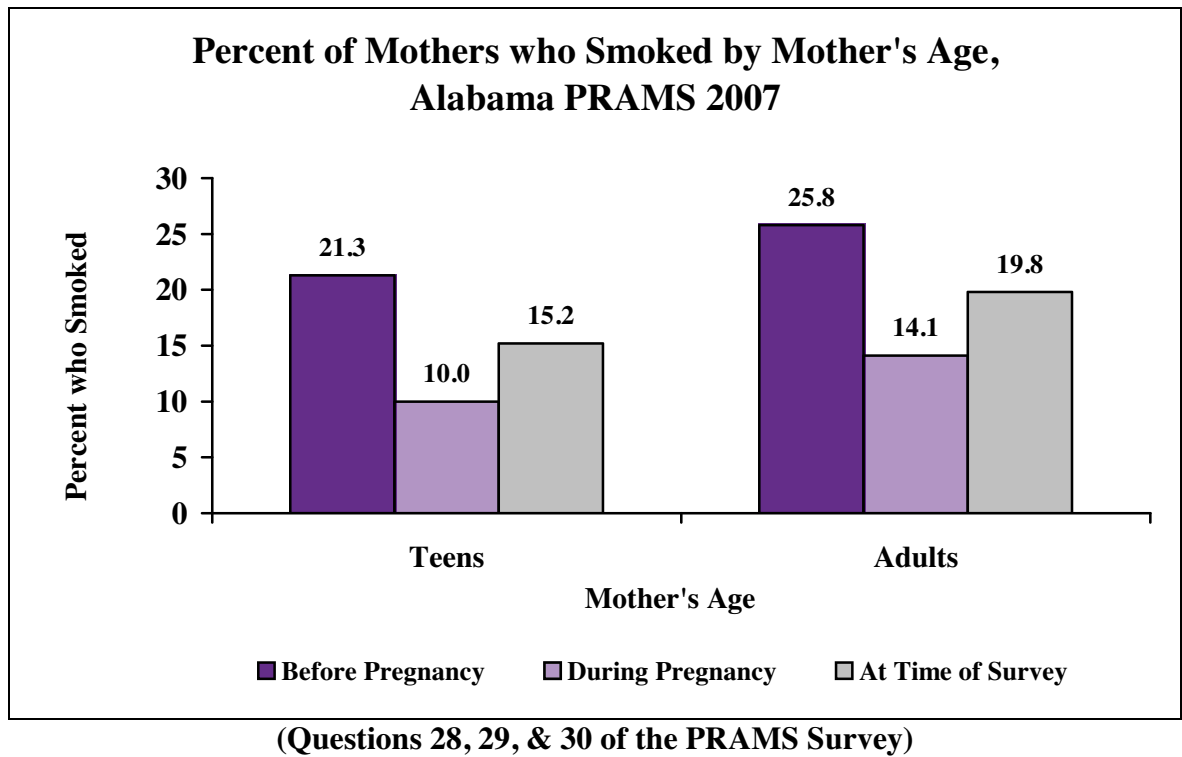
95% Confidence Intervals											
Year/ Smoked	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Before Pregnancy	23.5-28.8	21.0-26.2	21.9-27.2	20.3-25.6	24.2-29.6	21.7-27.0	20.3-25.7	23.1-29.3	28.2-34.8	24.3-30.5	22.2-28.4
During Pregnancy	12.4-16.5	12.3-16.5	12.0-16.2	11.9-16.1	13.4-17.8	12.3-16.5	11.3-15.6	15.0-20.3	16.0-21.5	13.1-18.1	11.3-16.1
At Time of Survey	20.2-25.1	18.2-23.0	18.4-23.4	17.1-22.0	19.9-24.9	17.4-22.1	15.5-20.4	19.7-25.6	22.2-28.4	20.0-25.9	16.5-22.1

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



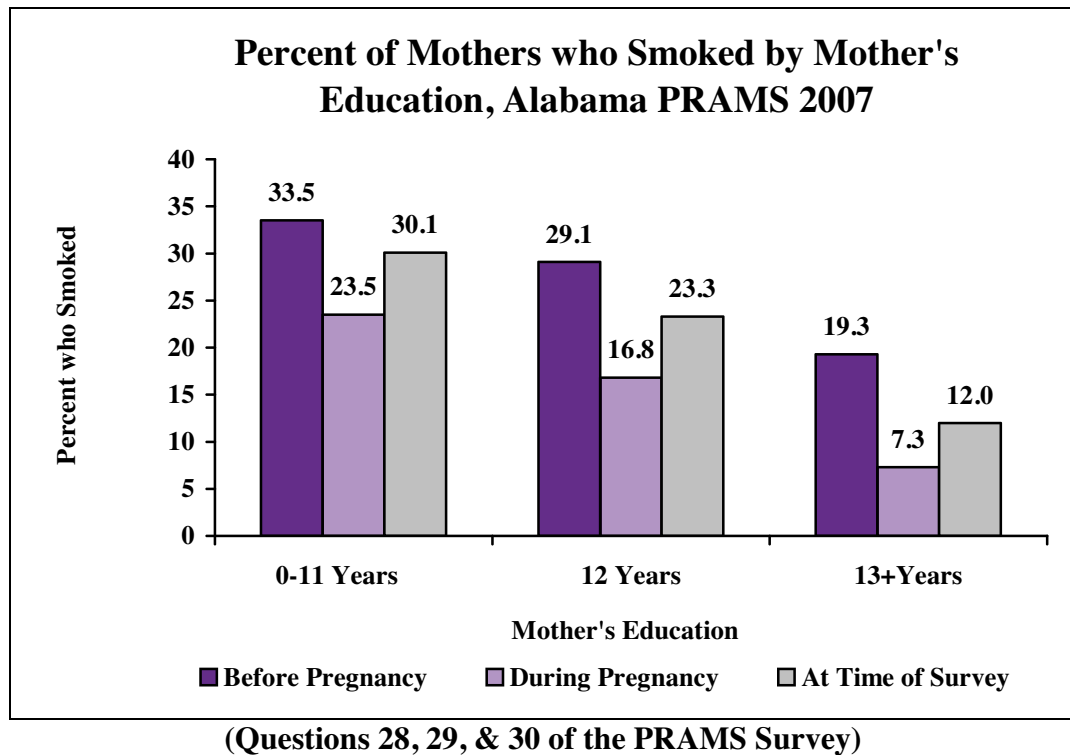
Both white and black and other smokers showed the same trend - smoking decreased during pregnancy but increased again by the time of the survey. Among white smokers, there was a statistically significant decrease in smoking from before pregnancy to during pregnancy. There was also a statistically significant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

95 % Confidence Intervals			
Smoked/ Race:	Before Pregnancy	During Pregnancy	At Time of Survey
White	<i>27.0-34.7</i>	<i>13.3-19.5</i>	<i>18.5-25.5</i>
Black and Other	<i>9.6-18.5</i>	<i>5.1-11.9</i>	<i>9.6-18.5</i>



In 2007, teen and adult women smokers followed the same pattern - decreasing smoking during pregnancy and increasing after delivery. The decrease in smoking during pregnancy among adult women was statistically significant, but among teen women, the decrease was not statistically significant.

95 % Confidence Intervals			
Smoked/ Age:	Before Pregnancy	During Pregnancy	At Time of Survey
Teens	14.2-30.8	5.5-17.4	9.1-24.2
Adults	22.6-29.2	11.7-16.9	16.9-23.0

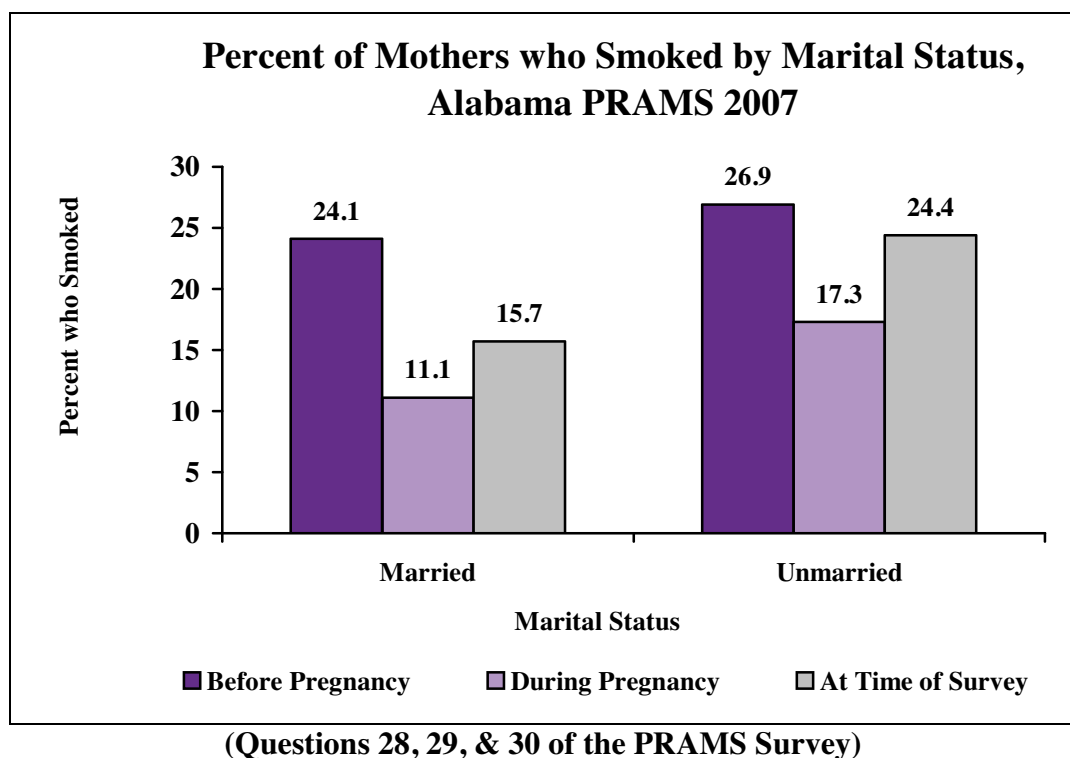


Generally in Alabama, there is an inverse correlation between a woman's educational attainment and smoking: as a woman's level of education *increases*, smoking *decreases*. In 2007, for women with 0-11 years of education who smoked, the differences in smoking before pregnancy and during pregnancy and at the time of the survey were not statistically significant. In fact, almost one in four Alabama mothers in this educational level continued to smoke while pregnant.

For women with 12 years of education who smoked, the difference in smoking before pregnancy, during pregnancy, and after delivery were not significant.

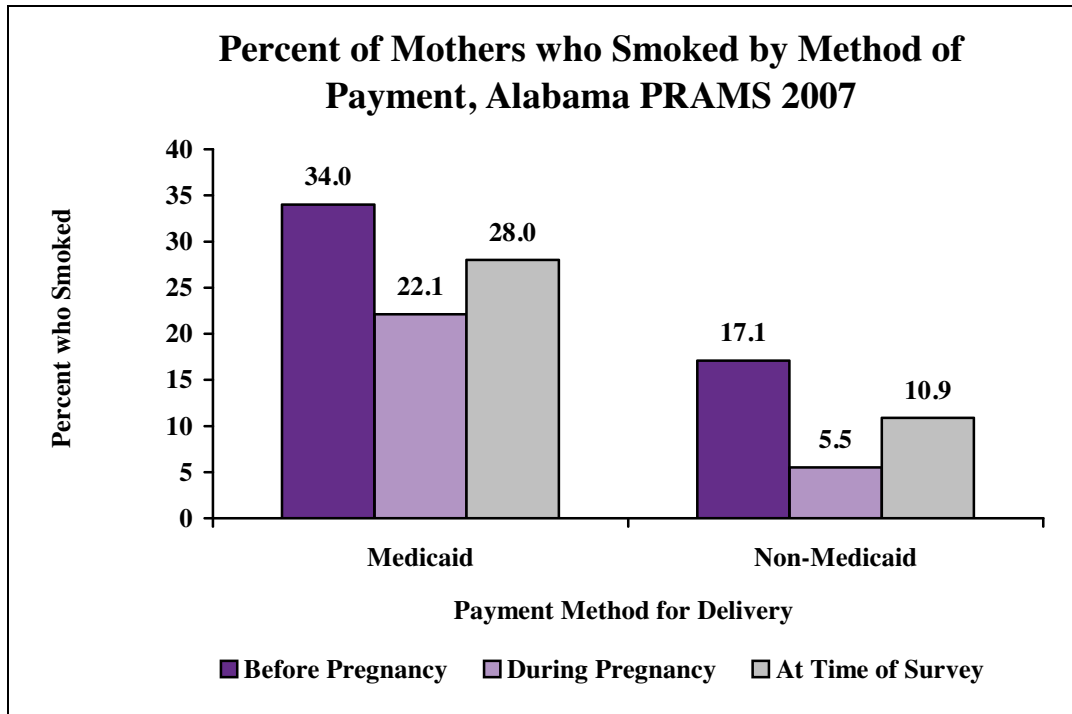
The lower percentages of smoking (before pregnancy, during pregnancy, and after delivery) among women with 13+ years of education were statistically significant from the other two educational groups. The drop in smoking from before pregnancy and during pregnancy was statistically significant.

95 % Confidence Intervals			
Smoked/ Education:	Before Pregnancy	During Pregnancy	At Time of Survey
0-11 Years	25.6-42.4	16.9-31.7	22.6-38.8
12 Years	23.5-35.4	12.5-22.2	18.2-29.4
13+ Years	15.9-23.3	5.2-10.2	9.3-15.4



In 2007, married and unmarried mothers followed the same pattern - they decreased their smoking during pregnancy only to increase it again after delivery. During pregnancy, married women decreased their smoking by nearly 54 percent, which was a statistically significant decrease. Unmarried women decreased smoking while pregnant by 36 percent, which was not statistically significant.

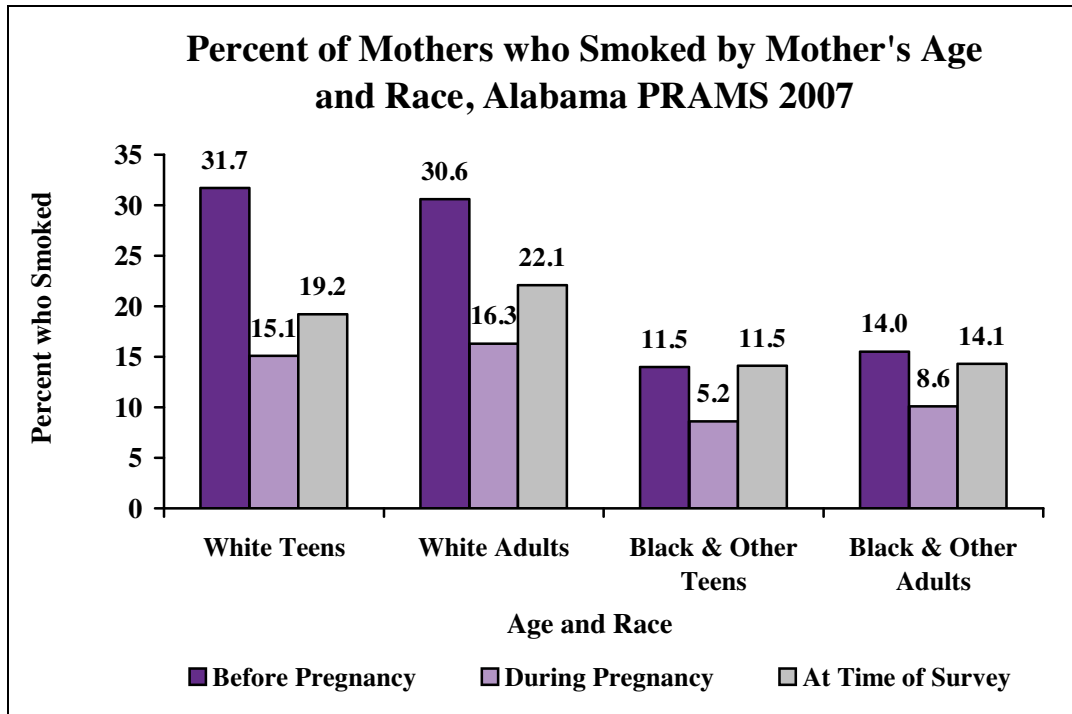
95 % Confidence Intervals			
Smoked/ Marital Status:	Before Pregnancy	During Pregnancy	At Time of Survey
Married	20.6-27.9	8.6-14.1	12.8-19.1
Unmarried	21.8-32.7	13.2-22.3	19.5-30.1



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

In 2007, cigarette smoking was significantly higher among mothers on Medicaid before, during, and after their pregnancies than non-Medicaid mothers. The decreases in smoking from before pregnancy and during pregnancy among Medicaid and non-Medicaid mothers were statistically significant.

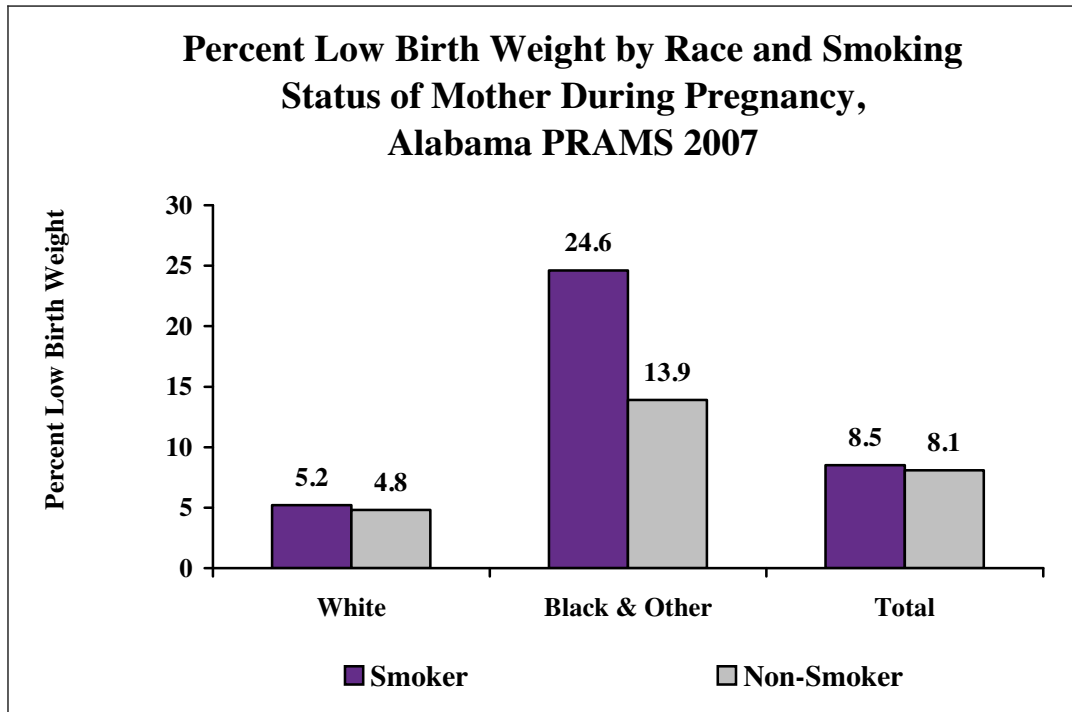
95 % Confidence Intervals			
Smoked/ Payment Method:	Before Pregnancy	During Pregnancy	At Time of Survey
Medicaid	29.2-39.1	18.1-26.8	23.5-32.9
Non-Medicaid	13.6-21.2	3.6-8.3	8.1-14.6



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

In 2007, a higher percentage of white mothers smoked than did black and other mothers. The decrease in smoking for white adult mothers during pregnancy was statistically significant.

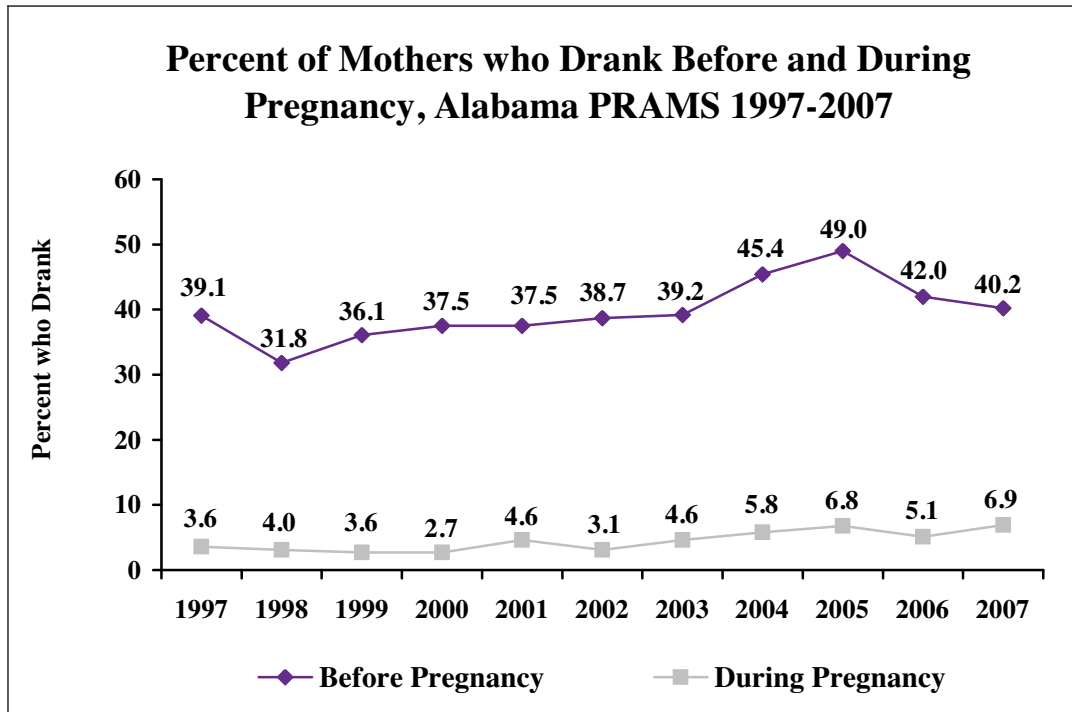
95 % Confidence Intervals			
Smoked/ Race and Age:	Before Pregnancy	During Pregnancy	At Time of Survey
White Teens	20.0-46.3	7.5-27.9	10.3-32.8
White Adults	26.7-34.8	13.3-19.8	18.6-26.0
Black & Other Teens	4.7-25.6	1.7-15.2	4.7-25.6
Black & Other Adults	9.7-19.7	5.4-13.5	9.8-19.8



(Question 29 of the PRAMS Survey)

In 2007, low weight births were more prevalent among mothers who smoked *during their pregnancies* than among mothers who did not smoke during that time. No statistical difference was seen in the percentages of low weight births to black and other smokers and black and other non-smokers.

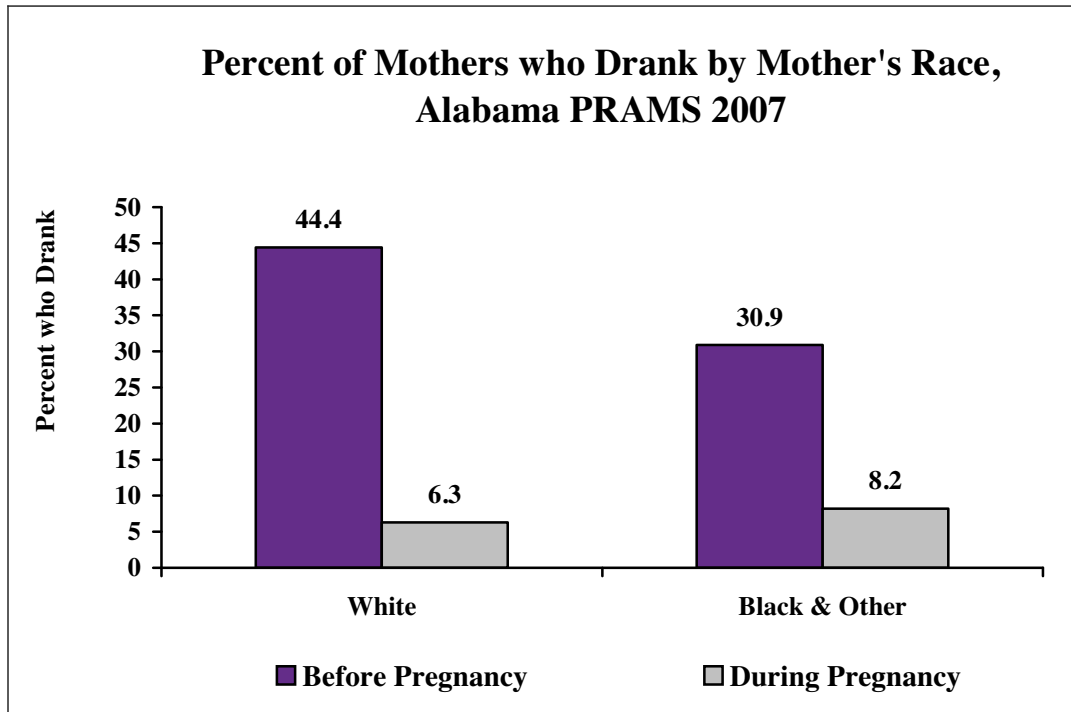
95% Confidence Intervals		
Smoking Status/ Race	Smoker	Non-Smoker
White	3.4-7.7	1.8-12.3
Black & Other	10.6-47.5	9.9-19.2
Total	4.4-15.6	6.3-10.5



(Questions 32 and 33 of the PRAMS Survey)

From 2006 to 2007, there was a decrease of nearly 4 percent in drinking *before* becoming pregnant and an increase of 35 percent in drinking *during* the last three months of pregnancy reported by Alabama mothers. Neither the decrease nor increase was statistically significant. From 1997-2007, Alabama women who drank before becoming pregnant did significantly decrease drinking during their pregnancies.

95% Confidence Intervals											
Year/ Drank	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Before Pregnancy	36.1-42.1	28.9-34.8	33.1-39.2	34.4-40.5	34.5-40.5	35.7-41.8	36.1-42.5	41.8-49.0	45.4-52.6	38.6-45.6	36.7-43.7
During Pregnancy	2.4-4.7	2.0-4.1	1.7-3.7	1.6-3.7	3.3-5.9	2.0-4.2	3.5-6.1	4.3-7.7	5.2-8.8	3.8-6.9	5.3-9.0

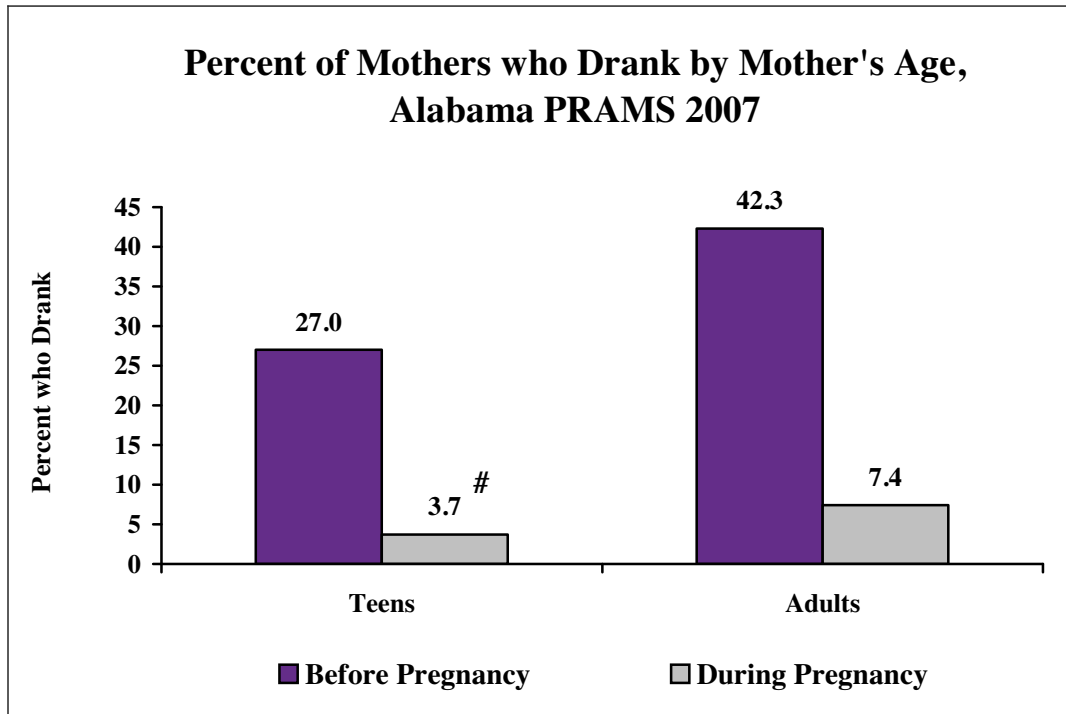


(Questions 32 and 33 of the PRAMS Survey)

In 2007, over forty percent of white Alabama mothers reported drinking alcoholic beverages *before* becoming pregnant; however a statistically significant decrease was observed in drinking *during* the last three months of their pregnancies.

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

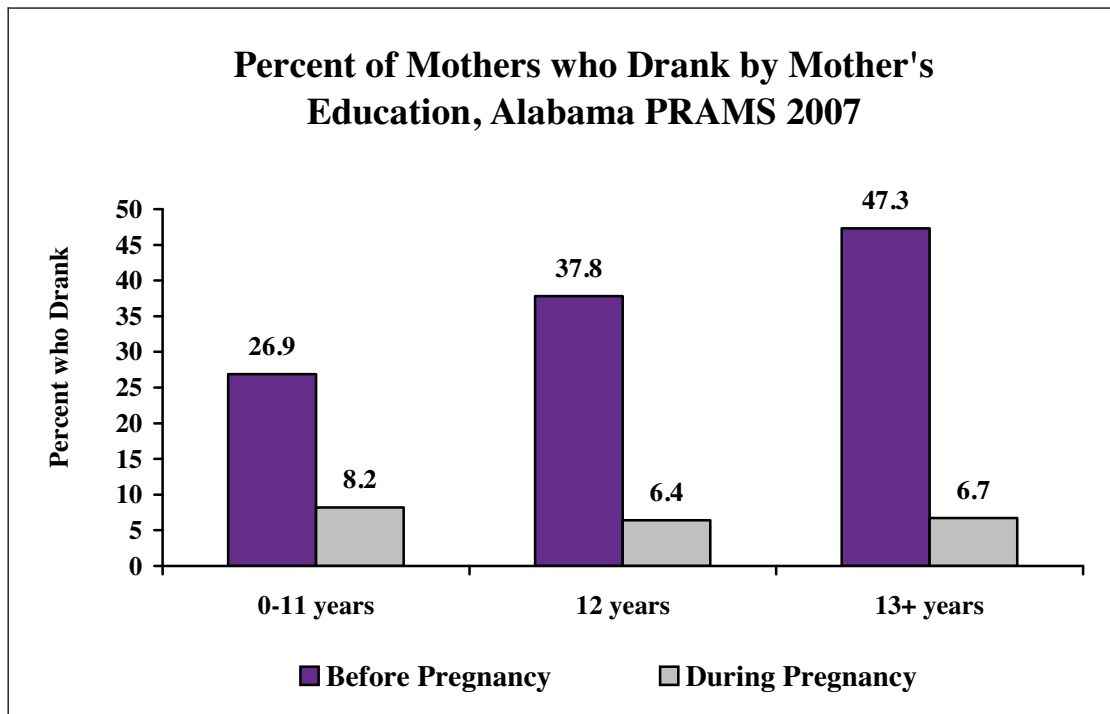
95% Confidence Intervals		
Drank / Race	Before Pregnancy	During Pregnancy
White	40.2-48.7	4.6-8.7
Black and Other	25.2-37.3	5.2-12.8



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

As expected, a higher percentage of adult women reported consuming alcohol than teenage women. Yet in 2007, 27.0 percent of teenage mothers reported using alcohol before becoming pregnant and 3.7 percent reported drinking during their pregnancies, despite being underage. In both populations, drinking significantly declined during the last three months of their pregnancies.

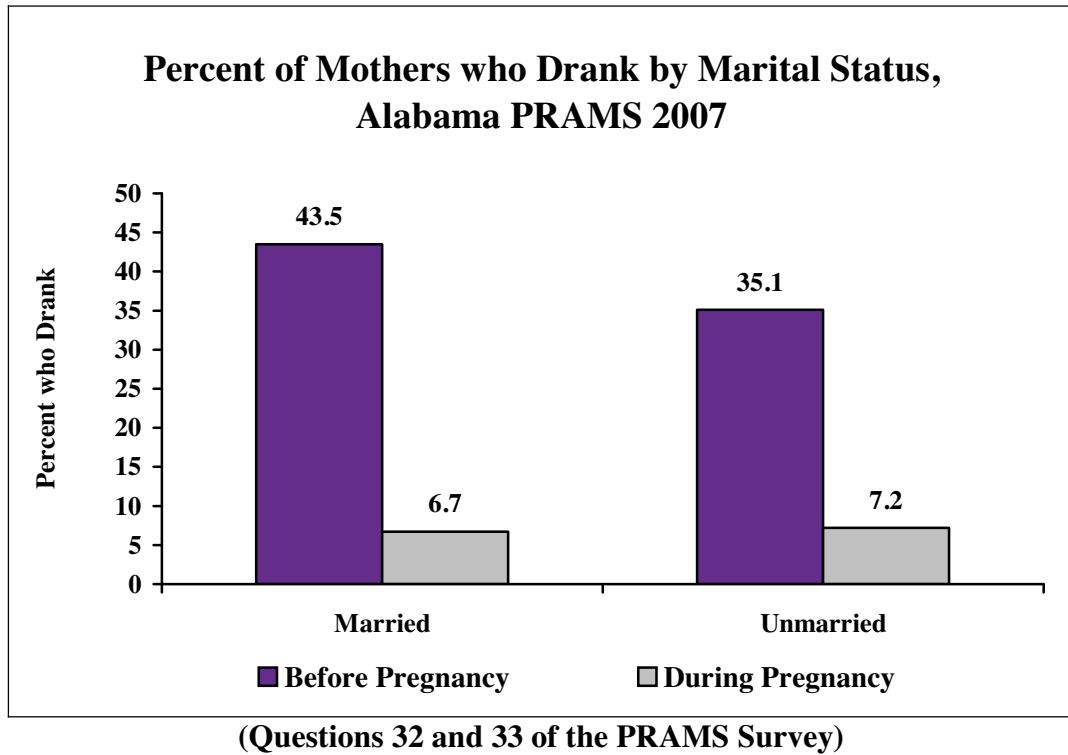
95% Confidence Intervals		
Drank / Mother's Age	Before Pregnancy	During Pregnancy
Teens	18.6-37.4	1.2-10.8
Adults	38.6-46.1	5.7-9.7



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

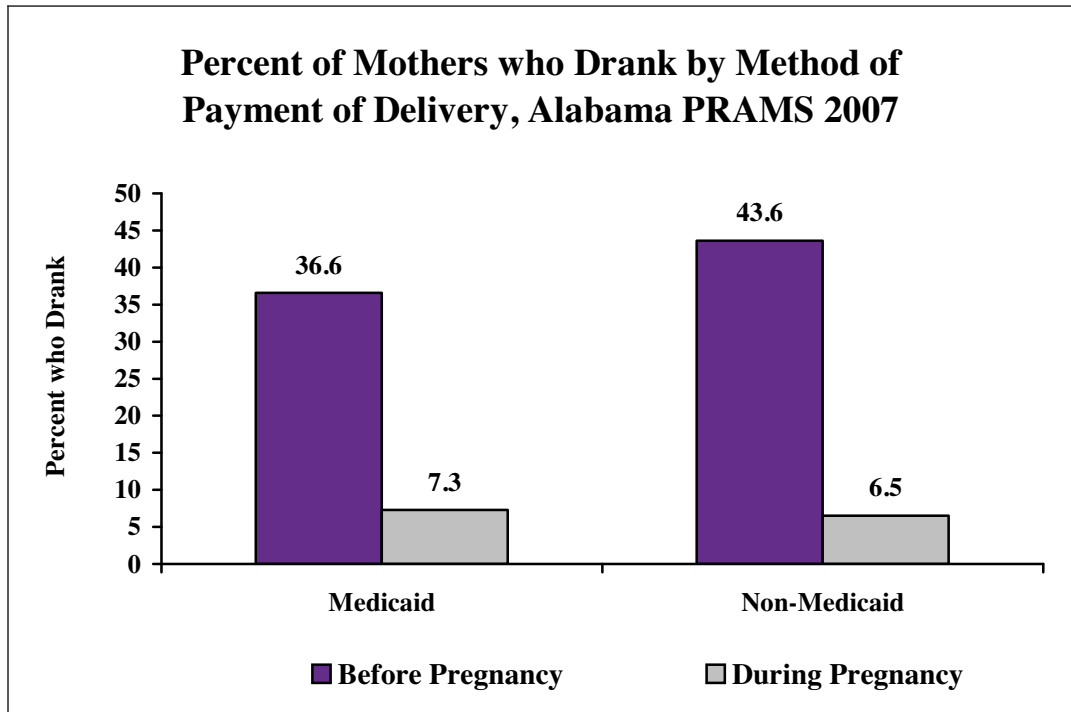
In 2007, women with higher levels of education were more likely to drink than those women with lower educational attainment. This could be attributable to age, since women with lower educational levels are probably younger and underage. For each educational level, women who drank before becoming pregnant significantly decreased drinking during pregnancy.

95% Confidence Intervals		
Drank/ Education	Before Pregnancy	During Pregnancy
0-11 years	19.7-35.6	4.5-14.4
12 years	31.6-44.4	3.8-10.7
13+ years	42.6-52.0	4.7-9.4



In 2007, unmarried mothers were as likely to drink *before* and *during* pregnancy as married mothers. The differences between the two groups were not statistically significant. Both unmarried and married mothers significantly decreased drinking during the last three months of their pregnancies.

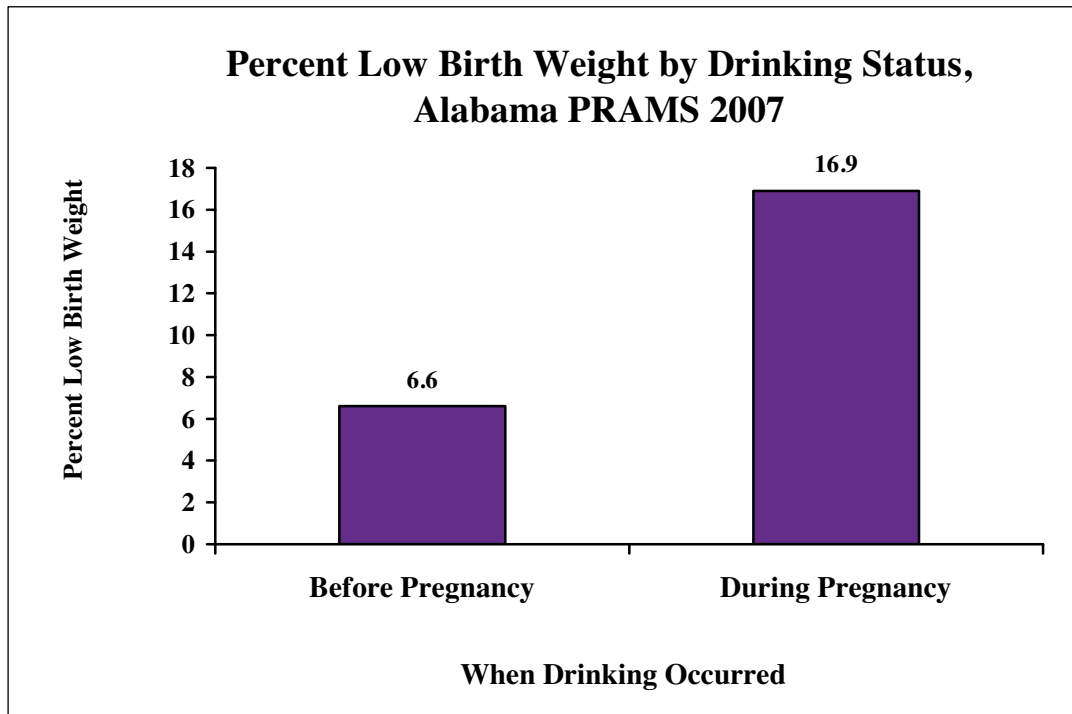
95 % Confidence Intervals		
Drank/ Marital Status	Before Pregnancy	During Pregnancy
Married	39.3-47.8	4.9-9.2
Unmarried	29.4-41.2	4.5-11.2



(Questions 32 and 33 of the PRAMS Survey)

In Alabama in 2007, mothers whose delivery was not paid by Medicaid drank more *before* their pregnancies than did their Medicaid counterparts. Also, mothers whose delivery was paid by Medicaid drank less during their pregnancies than did their non-Medicaid counterparts. The differences between the two groups were not statistically significant, but in both groups, a statistically significant decrease in drinking was reported during the last three months of their pregnancies.

95% Confidence Intervals		
Drank/ Payment Method	Before Pregnancy	During Pregnancy
Medicaid	31.7-41.8	5.0-10.7
Non-Medicaid	38.8-48.5	4.5-9.3



(Questions 32 and 33 of the PRAMS Survey)

In 2007, 6.6 percent of women who drank before pregnancy had a low weight infant. Among women who drank while pregnant, 16.9 percent delivered a low weight infant. There is no statistically significant difference in the percentage of low weight births to mothers who drank before pregnancy or during pregnancy.

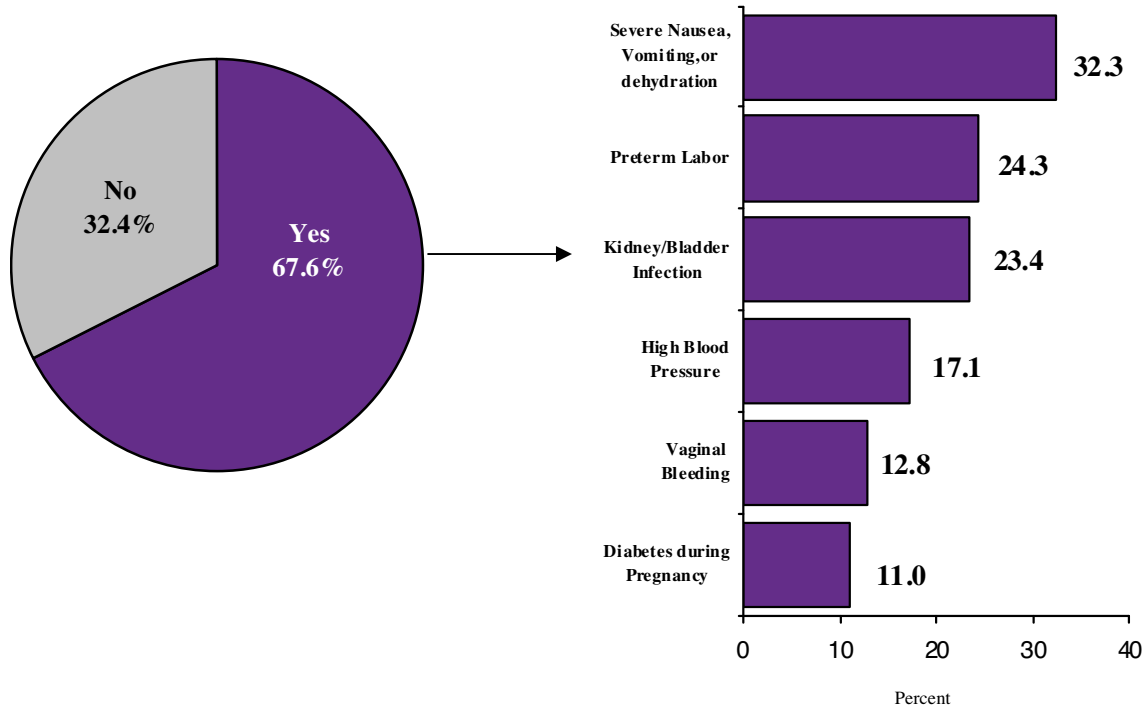
95% Confidence Intervals		
Drank	Before Pregnancy	During Pregnancy
Percent LBW	4.4-9.9	8.9-29.8

Mothers' Negative Health Behaviors Comments

- “I had two good pregnancies and labors. Both of my babies are healthy. I didn’t drink or smoke during either one. If there is anything else I can do please let me know.”
- “The hospitals should stress the importance of a balanced diet during the pregnancy and not to smoke or [sic] alcohol.”
- “Every time I got pregnant, I always quit smoking and I never [sic] drunk alcohol. I always tried to avoid people who smoked as well, so that I wouldn’t inhale secondhand smoke.”
- “Sadly, I have seen pregnant women smoke or go to places where people smoke. I have seen children in a car (12 years or younger) with a smoking person. I personally think that women should be encouraged often by their families and healthcare professionals to totally avoid such situations during pregnancy.”

HEALTH CARE SYSTEM ISSUES

**Mother Experienced a Medical Problem During Pregnancy,
Alabama PRAMS 2007**

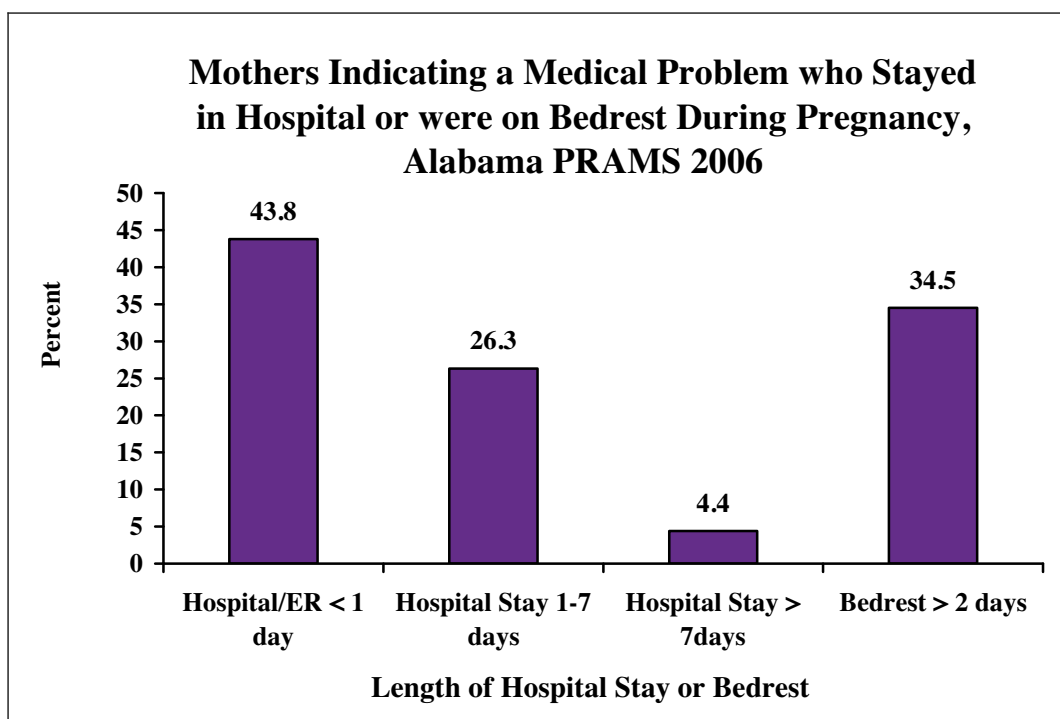


Items are not mutually exclusive, therefore percentages will not equal 100.

(Question 25 of the PRAMS Survey)

In 2007, 67.6 percent of Alabama mothers reported having a medical problem during their pregnancy. Of those, the highest percentage (32.3) reported having nausea, vomiting, and/or dehydration. Nearly one in four mothers reported experiencing preterm labor or a kidney/bladder infection. 12.8 percent of mothers reported vaginal bleeding, while 17.1 percent of mothers reported having high blood pressure, and 4.1 percent of mothers developed gestational diabetes.

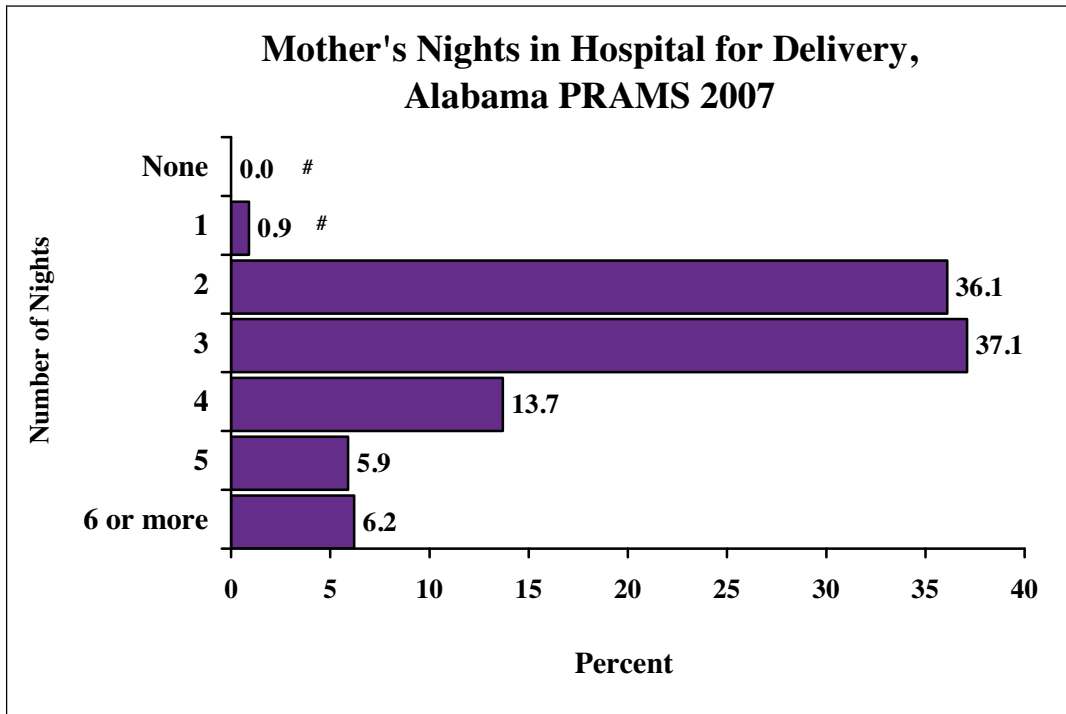
95% Confidence Intervals								
Problems	Yes	No	Nausea, vomiting or dehydration	Preterm labor	Kidney/Bladder infection	Vaginal Bleeding	HBP	Diabetes During Preg.
Percent	64.1-70.8	29.2-35.9	29.1-35.7	21.4-27.5	20.6-26.5	10.6-15.4	14.6-20.0	8.9-13.5



(Question 26 of the PRAMS Survey)

Mothers who answered “Yes” to experiencing at least one medical problem during their pregnancy were asked if they stayed in the hospital or were on bed rest because of the medical problem. Of those who reported at least one problem, about 44 percent of mothers visited a hospital and stayed less than a day; 26.3 percent stayed from one to seven days; 4.4 percent stayed longer than seven days; and 34.5 percent stayed in bed for more than two days at a doctor’s or nurse’s advice.

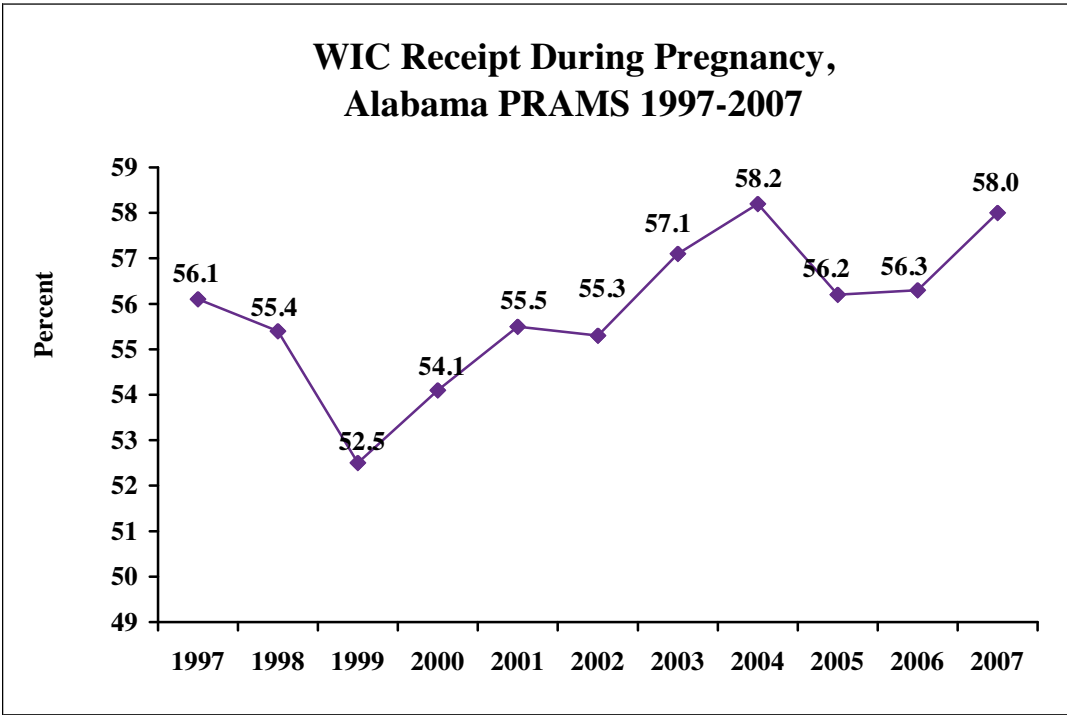
95% Confidence Intervals				
Length of Stay or bedrest	Hospital or ER < 1 day	Hospital Stay 1-7 days	Hospital Stay >7 days	Bedrest > 2 days
Percent	39.4-48.2	22.5-30.5	2.8-6.9	30.4-38.9



(Questions 38 and 40 of the PRAMS Survey) #Number of Respondents is less than 20

In 2007, the majority of Alabama mothers stayed two nights (36.1 percent) or three nights (37.1 percent) in the hospital following delivery of their infants. Only 0.9 percent reported staying one night and one in four mothers reported staying four or more nights.

95% Confidence Intervals							
Number of Nights	None	1	2	3	4	5	6 or more
Percent	0	0.4-2.0	32.8-39.6	33.7-40.6	11.4-16.5	4.5-7.9	4.6-8.2



(Questions 23 of the PRAMS Survey)

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

In 2007, 58.0 percent of Alabama mothers received WIC benefits.

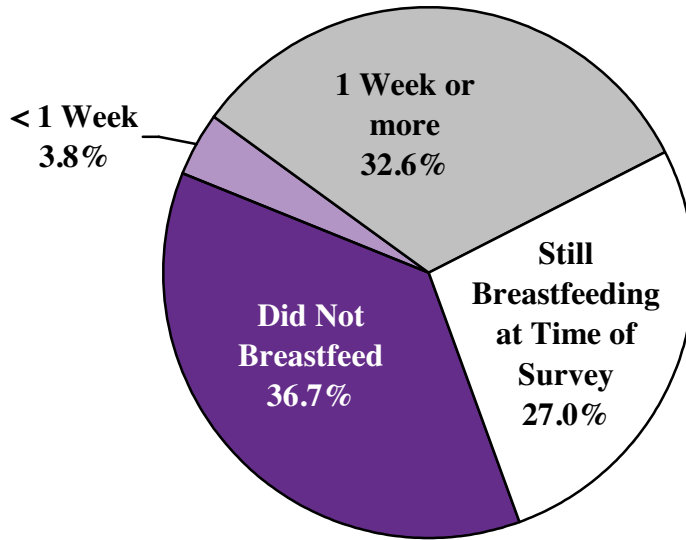
95% Confidence Intervals											
Year	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Percent	53.8-58.3	53.1-57.7	50.0-54.9	51.7-56.5	53.1-57.8	53.0-57.7	54.5-59.6	55.5-60.9	53.5-58.8	53.6-58.9	55.2-60.8

Mothers' Health Care System Comments

- “While there was a lactation specialist at the hospital, there was not a very integrated effort between the ob and pediatrics and hospital staff to encourage breastfeeding.”
- “I couldn't get the doctor I wanted until I was hospitalized for diabetes.”
- “Medicaid workers need to be more helpful in helping pregnant women get on Medicaid as soon as possible, so pregnant women can get help as soon as possible.”
- “I think doctors should be screening all women early for diabetes, regardless of signs. A lot of doctors attribute quick weight gain to overeating but that may not be the case.”
- “Thank you for providing help with the care of my child. I don't know what we would have done but acquired a huge amount of debt between the doctor's visit and the delivery. We were blessed to have Medicaid and WIC.”
- “Sometimes it felt like my doctors didn't know me or what was in my chart. I had to keep telling and reminding them of everything.”
- “My labor, delivery and post-partum nurses at the hospital were fabulous and very helpful. A lactation consultant also visited me at the hospital. I am very grateful to everyone who helped me to have a happy healthy baby.”
- “I have noticed the increase in c-sections and wonder if doctors are not promoting natural child births.”
- “Healthcare providers in this state place a great deal of emphasis on healthy labor and delivery, which is great, but maybe not enough emphasis on taking care of the baby once you bring him/her home.”

BREASTFEEDING

**Percent of Mothers who Breastfed,
Alabama PRAMS 2007**

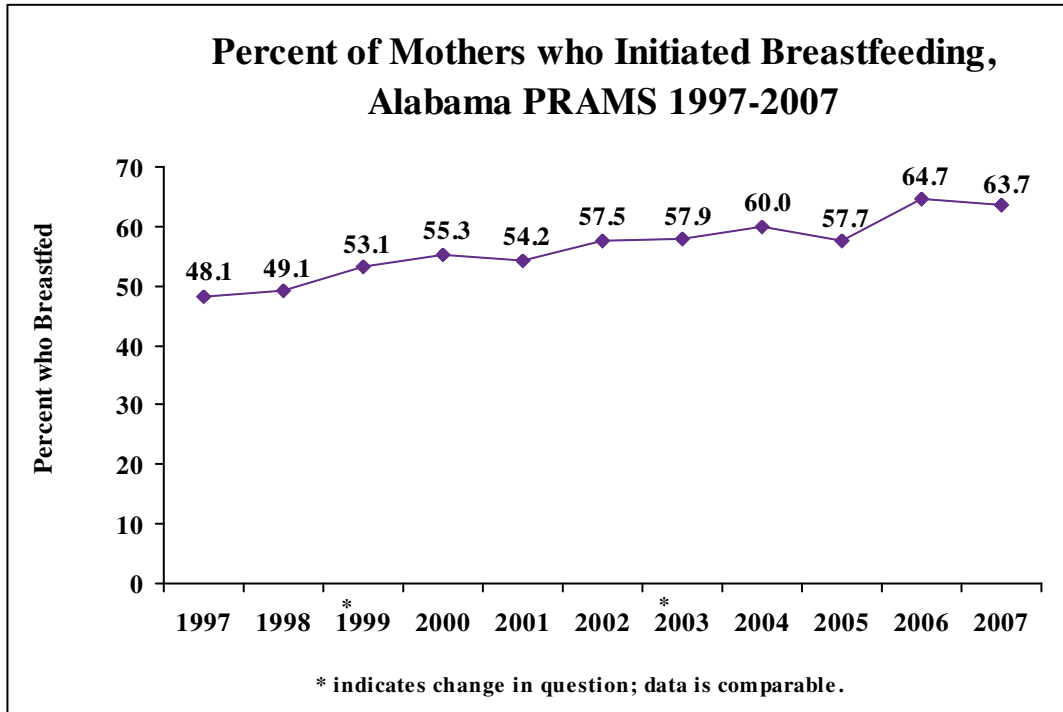


(Questions 46, 48, and 49 of the PRAMS Survey)

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

In Alabama in 2007, 36.7 percent of mothers did not attempt to breastfeed their babies. Only 27.0 percent Alabama mothers were still breastfeeding their infants at the time of the survey, two to six months after delivery.

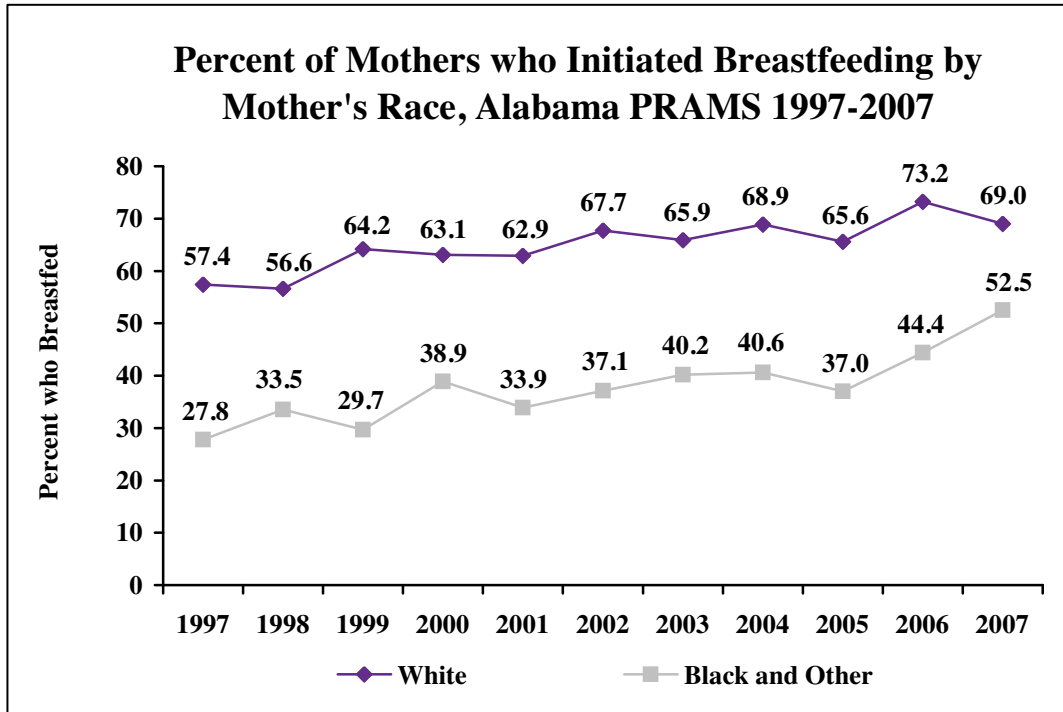
95% Confidence Intervals				
Time Breastfed:	Did Not Breastfeed	<1 week	1 week or more	Still Breastfeeding
Percent	33.4-40.2	2.6-5.4	29.3-36.1	24.0-30.1



(Question 46 of the PRAMS Survey)

From 1997-2007, the percentage of Alabama mothers who initiated breastfeeding increased seven out of the ten years. In 2007, 63.7 percent of mothers reported they initiated breastfeeding; however, from 2004-2007, the changes have not been statistically significant. Comparing 1997 and 2007 data, there has been a statistically significant increase of 32.4 percent in mothers who initiated breastfeeding.

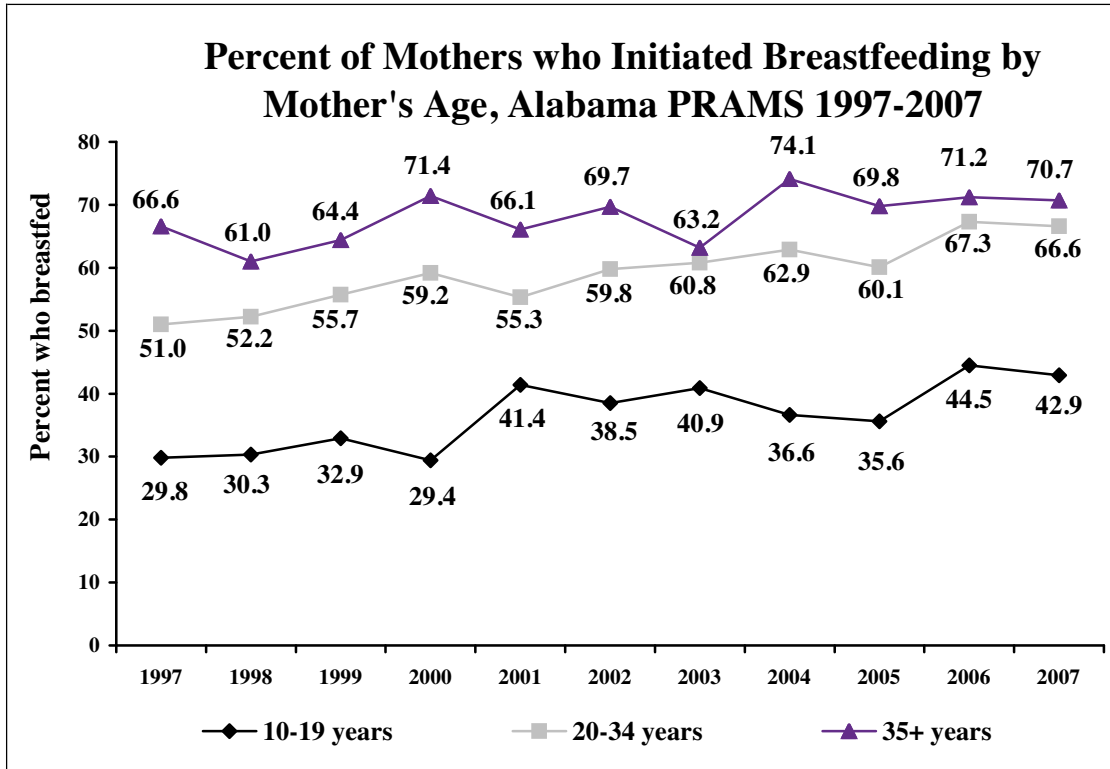
95% Confidence Intervals											
Year	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Percent	45.1-51.0	46.0-52.2	50.0-56.1	52.3-58.3	51.2-57.3	54.5-60.5	54.7-61.1	56.5-63.4	54.2-61.1	61.3-67.9	60.3-67.0



(Question 46 of the PRAMS Survey)

From 1997 to 2007, there has been a statistically significant increase in breastfeeding in both racial groups. The prevalence of breastfeeding has been consistently higher among white women compared to black and other race women. The percentage of black and other race women who initiated breastfeeding increased from 2006 to 2007 by 18.2 percent. However, in 2007, the percentage of white women who initiated breastfeeding decreased by 5.7 percent from 2006.

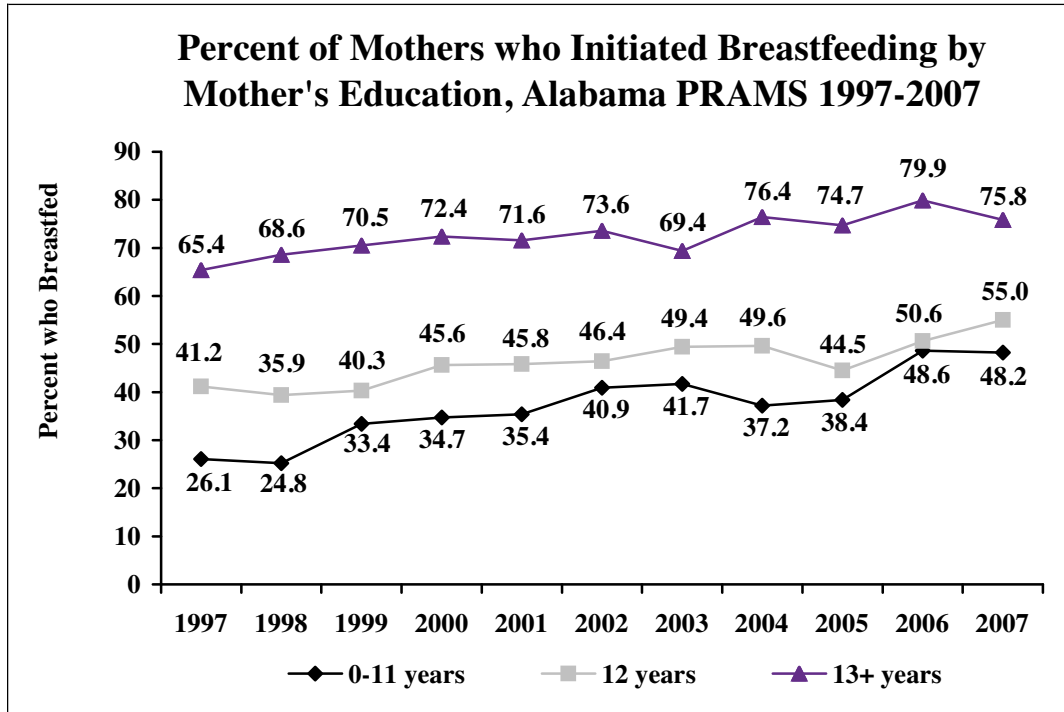
95% Confidence Intervals											
Year/ Race	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
White	53.8-61.1	52.8-60.3	60.6-67.9	59.4-66.8	59.2-66.6	64.1-71.2	62.0-69.6	64.8-72.8	61.5-69.4	69.3-76.8	64.9-72.8
Black and Other	22.8-32.9	27.9-39.0	24.6-34.8	33.3-44.4	28.7-39.1	31.7-42.4	34.5-46.1	34.3-47.2	30.7-43.9	38.1-51.0	46.1-58.9



(Question 46 of the PRAMS Survey)

During the period from 1997 through 2007, the percentage of women initiating breastfeeding increased in all three age groups. When examining each group, the oldest mothers, 35 plus years, had the highest percentage of breastfeeding with teenage mothers having the lowest percentage. Of the three age groups, mothers 10-19 and 20-34 years have increased significantly. However, in 2007 each of the three age groups had a slight decrease.

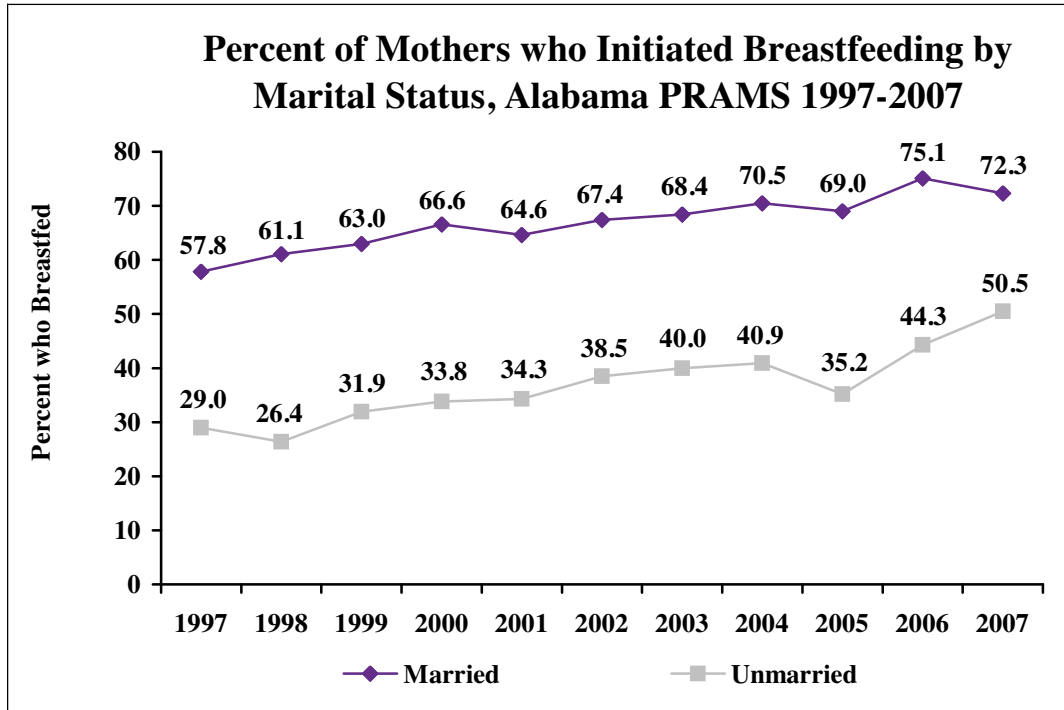
95% Confidence Intervals											
Year/ Age	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
10-19	23.6-36.0	23.6-37.0	25.8-40.1	22.2-36.7	33.7-49.2	30.9-46.1	32.6-49.7	28.1-45.9	27.0-45.2	35.0-54.4	32.8-53.7
20-34	47.5-54.6	48.6-55.8	52.1-59.3	55.8-62.7	51.7-58.8	56.2-63.3	57.0-64.4	58.8-66.8	56.1-64.0	63.4-70.9	62.7-70.2
35+	55.6-77.5	49.3-72.6	54.8-73.9	60.0-82.8	56.3-76.0	59.8-79.6	51.4-73.6	62.1-83.3	58.0-79.4	60.5-80.0	59.9-79.6



(Question 46 of the PRAMS Survey)

In Alabama, breastfeeding prevalence is highest among women with 13 or more years of education. Comparing percentages from 1997 to percentages in 2007, there have been significant increases in breastfeeding Alabama mothers with every level of education.

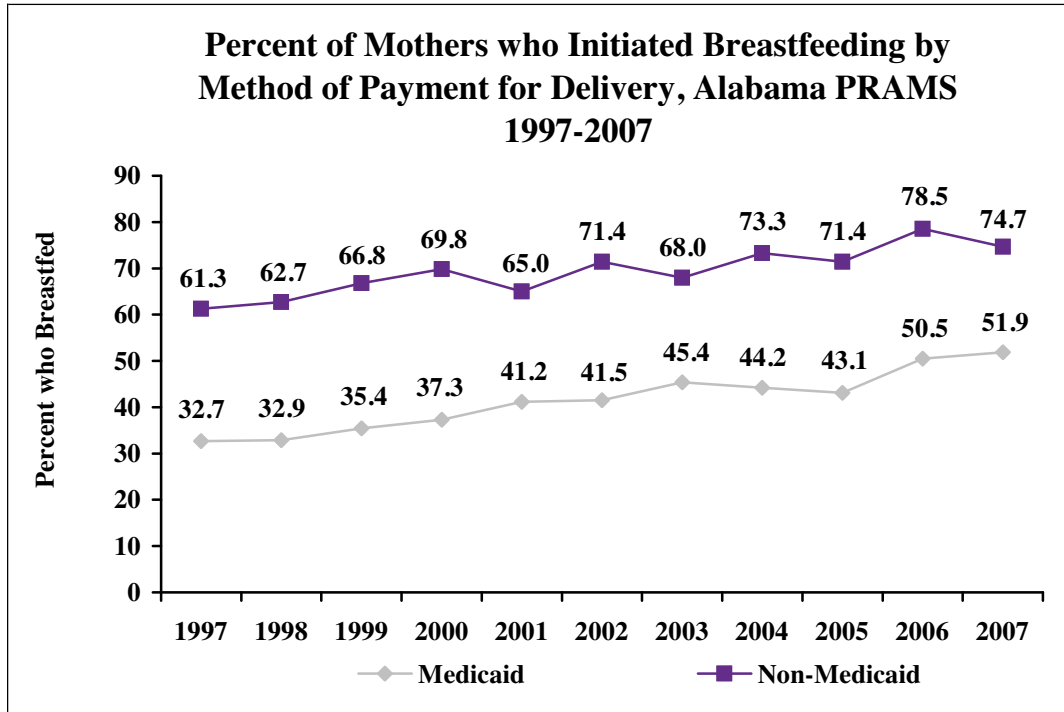
95% Confidence Intervals											
Year/ Educ.	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
0-11 yrs.	20.4-31.8	19.5-31.0	26.8-39.9	28.0-41.4	29.6-41.2	34.4-47.5	34.4-49.4	29.6-45.6	30.8-46.6	40.7-56.5	39.4-57.2
12 yrs.	36.1-46.2	33.9-44.8	34.8-45.7	40.2-50.9	40.2-51.5	40.7-52.0	43.4-55.5	43.0-56.2	38.2-50.9	43.7-57.4	48.3-61.5
13+ yrs.	60.9-70.0	64.2-73.0	66.2-74.8	68.0-76.8	67.2-76.0	69.4-77.8	64.8-73.6	71.7-80.5	69.9-79.0	75.7-83.6	71.5-79.6



(Question 46 of the PRAMS Survey)

Comparing 1997 levels to 2007 levels, there have been statistically significant increases in breastfeeding initiation in married women and unmarried women. Over the past 10 years, the percentage of mothers who initiated breastfeeding has been significantly higher among married mothers compared to unmarried mothers. Factors affecting this trend include that married mothers may be older and have a higher educational attainment than their unmarried counterparts.

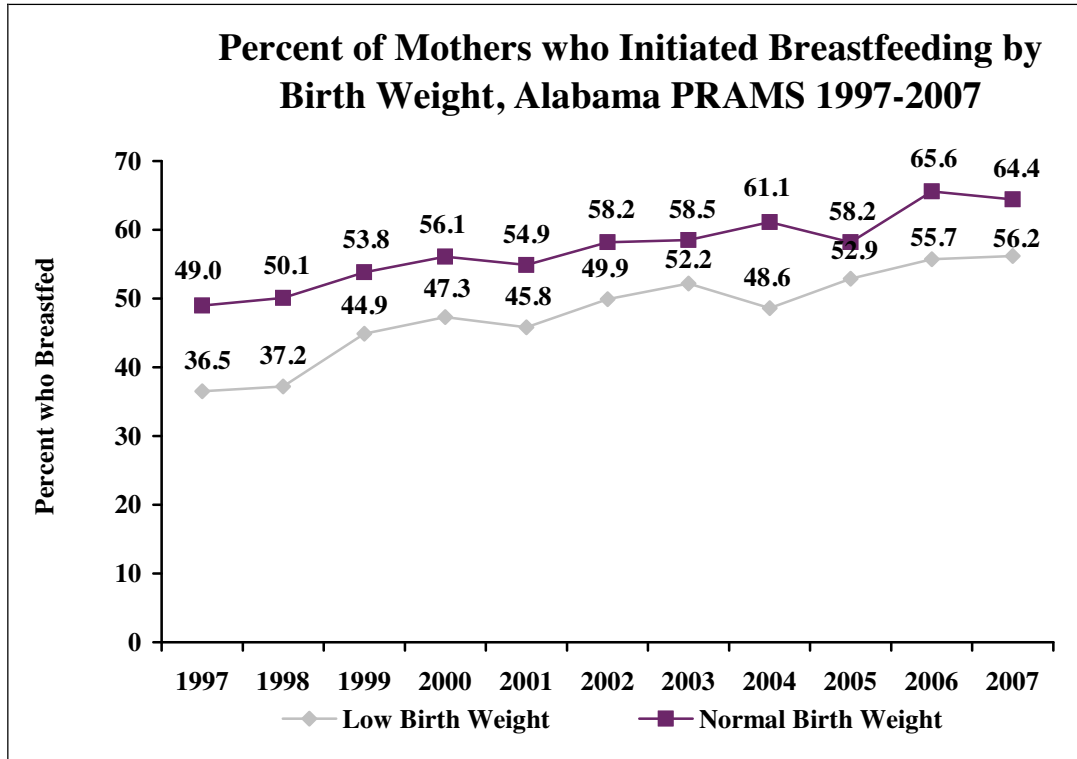
95% Confidence Intervals											
Year/ Married Status	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Married	54.0-61.6	57.2-64.9	59.3-66.7	63.0-70.3	60.8-68.3	63.7-71.2	64.5-72.0	66.2-74.4	64.8-73.0	71.1-78.6	68.4-75.9
Unmarried	24.3-33.8	21.7-31.1	26.8-37.1	28.5-39.0	29.4-39.2	33.4-43.6	34.5-45.7	34.9-47.2	29.5-41.4	38.2-50.6	44.3-56.6



(Question 46 of the PRAMS Survey)

From 1997 through 2007 in Alabama, women whose delivery was not paid by Medicaid were significantly more likely to breastfeed their infants than those women whose delivery was covered by Medicaid. When comparing percentages in 1997 to those in 2007, each group has significantly increased in the percentage of women who initiated breastfeeding their infants.

95% Confidence Intervals											
Year/ Payment	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Medicaid	28.6-36.8	28.7-37.1	31.1-39.7	33.0-41.7	36.9-45.5	37.1-45.8	40.8-50.2	39.2-49.3	38.1-48.2	45.5-55.5	46.7-57.1
Non-Medicaid	57.0-65.5	58.4-67.1	62.5-71.0	65.6-74.0	60.7-69.3	67.2-75.5	63.5-72.2	68.4-77.7	66.5-75.9	73.9-82.5	70.3-78.7

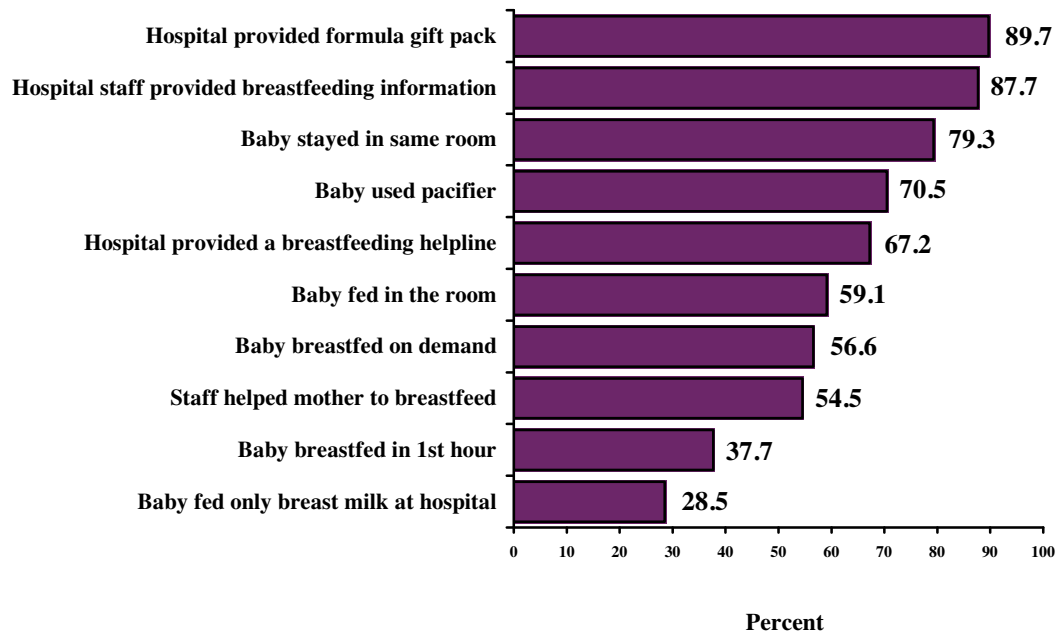


(Question 46 of the PRAMS Survey)

Of babies born in 2007 at a normal birth weight, 64.4 percent were breastfed. Of low birth weight babies, that is, weight less than 2,500 grams, 56.2 percent were breastfed, which may be related to a separation from the mother if the infant was admitted to the neonatal intensive care unit. Comparing 1997 percentages with 2007 percentages, there have been statistically significant increases in both groups initiating breastfeeding.

95% Confidence Intervals											
Year/ BW	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
LBW	33.6-39.5	33.7-40.7	41.3-48.6	43.7-50.8	42.4-49.1	46.3-53.5	48.6-55.8	44.8-52.5	48.8-57.0	51.6-59.7	43.6-68.1
NBW	45.8-52.2	46.8-53.4	50.5-57.1	52.8-59.4	51.6-58.3	54.9-61.5	55.0-62.0	57.3-64.8	54.3-61.9	61.9-69.1	60.8-67.8

Breastfeeding Events at Hospital after Delivery, Alabama PRAMS 2007

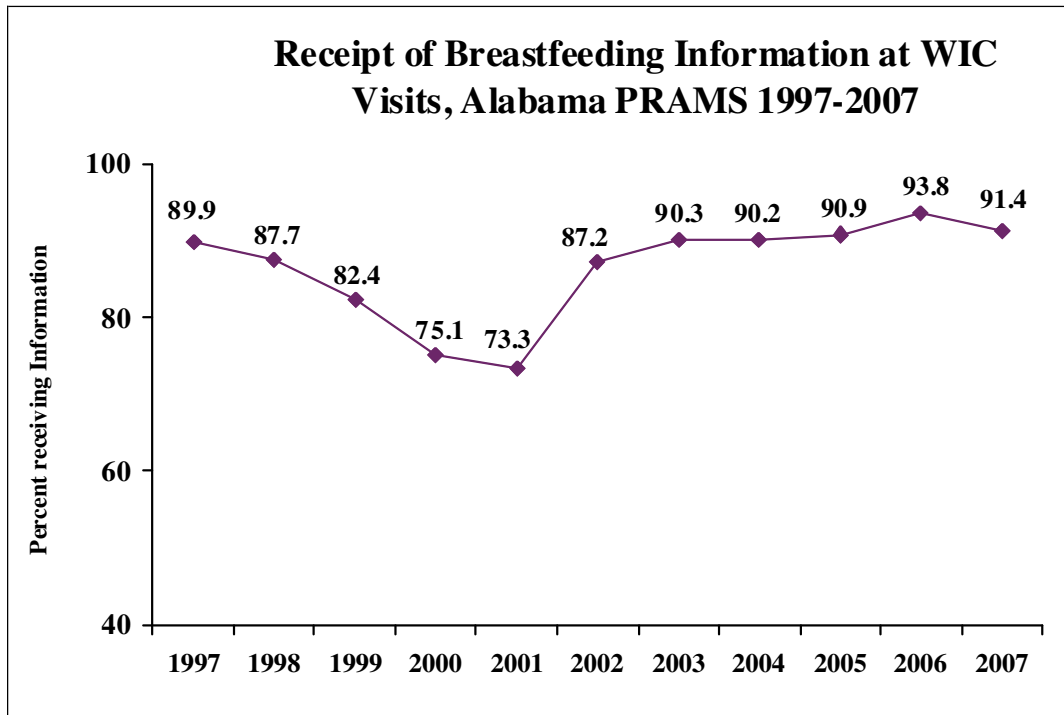


(Question 52 of the PRAMS Survey)

One Healthy People 2010 objective is for at least 75 percent of mothers to breastfeed their infants in the first six weeks after delivery. In 2007, about 54.5 percent of mothers reported they received direct help from hospital staff in learning how to breastfeed their babies, whereas 87.7 percent reported the hospital provided them information on breastfeeding. 37.7 percent reported they breastfed their babies in the first hour after delivery. Only 28.5 percent reported that their infants received breast milk exclusively while in the hospital, and almost 90 percent were given a formula gift pack to take home upon discharge.

95% Confidence Intervals					
Events	Given gift pack	Breastfeeding information	Baby in room	Baby used pacifier	Breastfeeding helpline
Percent	87.2-91.7	85.1-90.0	76.2-82.0	67.1-73.6	63.8-70.5

95% Confidence Intervals					
Events	Fed in room	Breastfed on demand	Staff helped	Breastfed in first hour	Fed only breast milk in hospital
Percent	55.6-62.6	53.0-60.1	50.9-58.0	34.3-41.2	25.4-31.7



(Question 24 of the PRAMS Survey)

A goal of WIC is to educate pregnant women about breastfeeding and to increase its prevalence among Alabama mothers. During 2007, 91.4 percent of mothers receiving WIC benefits reported they received breastfeeding information during their WIC visits.

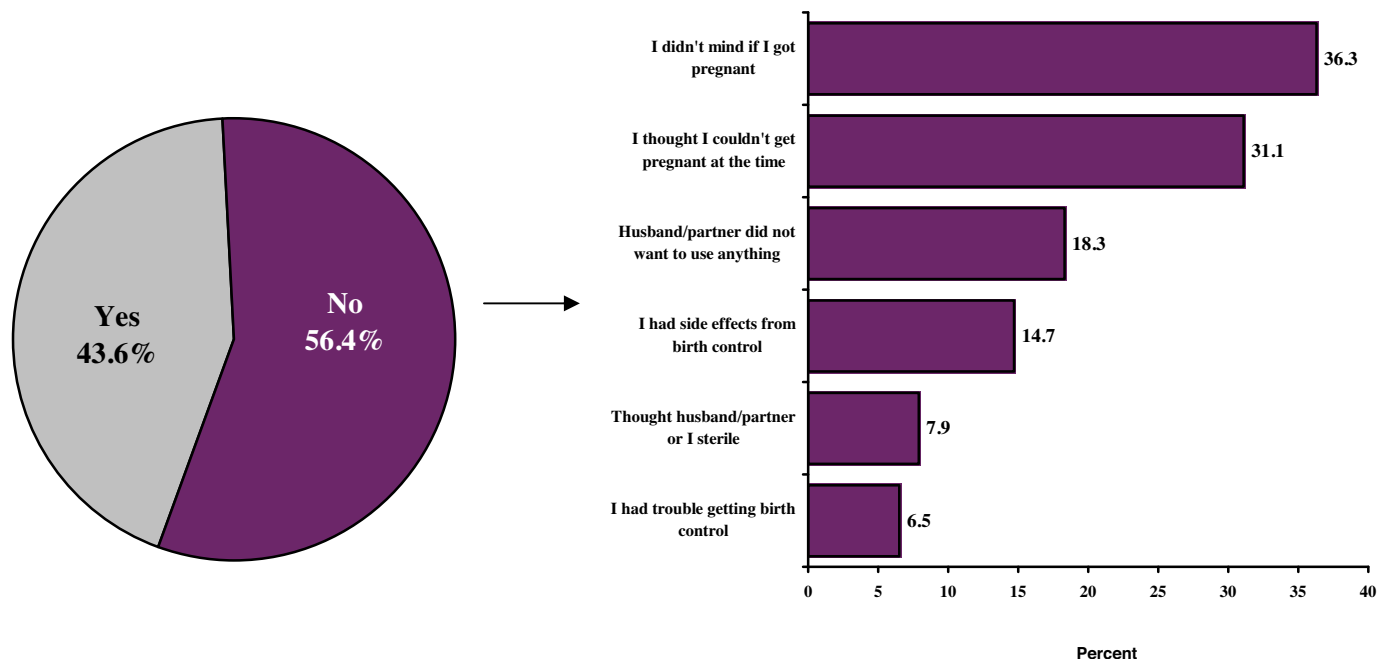
95% Confidence Intervals											
Year	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Received Information	87.6-92.2	85.2-90.3	79.3-85.6	71.6-78.7	69.9-76.8	84.3-90.1	87.2-92.7	87.1-92.7	87.8-93.2	91.2-95.7	88.3-93.8

Mothers' Breastfeeding Comments

- “There was no significant effort to make breastfeeding assistance available in first weeks after birth. I was fortunate because I had breastfed my first and was easily able to do so with this baby.”
- “Pediatricians and obstetricians should be more informed about breastfeeding.”
- “Breastfeeding is great! More new moms need to at least try to breastfeed at least six weeks after delivery.”
- “I asked my employer for a 5-10 minute break once a day and my request was denied. However, I do still pump with a freestyle Medela pump during lunch. If Alabama had some kind of law to help with this then I believe more working mothers would breastfeed/pump.”
- “I totally believe in breastfeeding if possible. This was my fourth child and I have breastfed all of them and none have ever been sick.”
- “The last two pregnancies and births, I felt way too pressured to breastfeed my child by the lactation consultant.”
- “I tended to hear more about the benefits of breastfeeding after the birth in the hospital. I think it would be more beneficial to discuss breastfeeding prior to birth to give the mother time to prepare. (Buying pumps, freezing colostrums, etc.)”

CONTRACEPTION

Mother *Not* Planning Pregnancy using Birth Control at Conception, Alabama PRAMS 2007



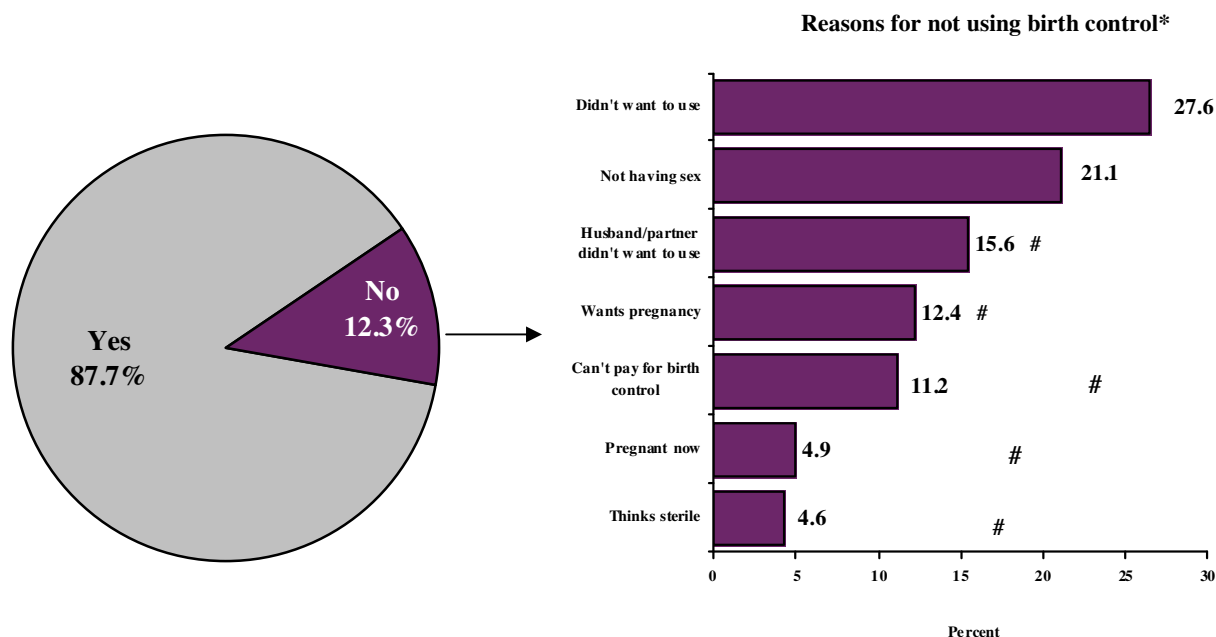
(Questions 12 & 13 of the PRAMS Survey) * Items are not mutually exclusive.

In 2007, 56.4 percent of Alabama mothers *who did not want a pregnancy* answered “no” to using any kind of birth control to prevent it. A Healthy People 2010 objective is to increase the proportion of females at risk of unintended pregnancy who use contraception to 100 percent.

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

95% Confidence Intervals								
Birth Control	Yes	No	Didn't mind	Thought I couldn't	Husb/partner didn't want to use anything	Side effects	Trouble getting birth control	Thought sterile
Percent	38.9-48.5	51.5-61.1	30.7-42.3	25.5-37.2	13.8-23.7	10.9-19.5	3.9-10.4	5.0-12.2

Mothers Currently Using Birth Control, Alabama PRAMS 2007

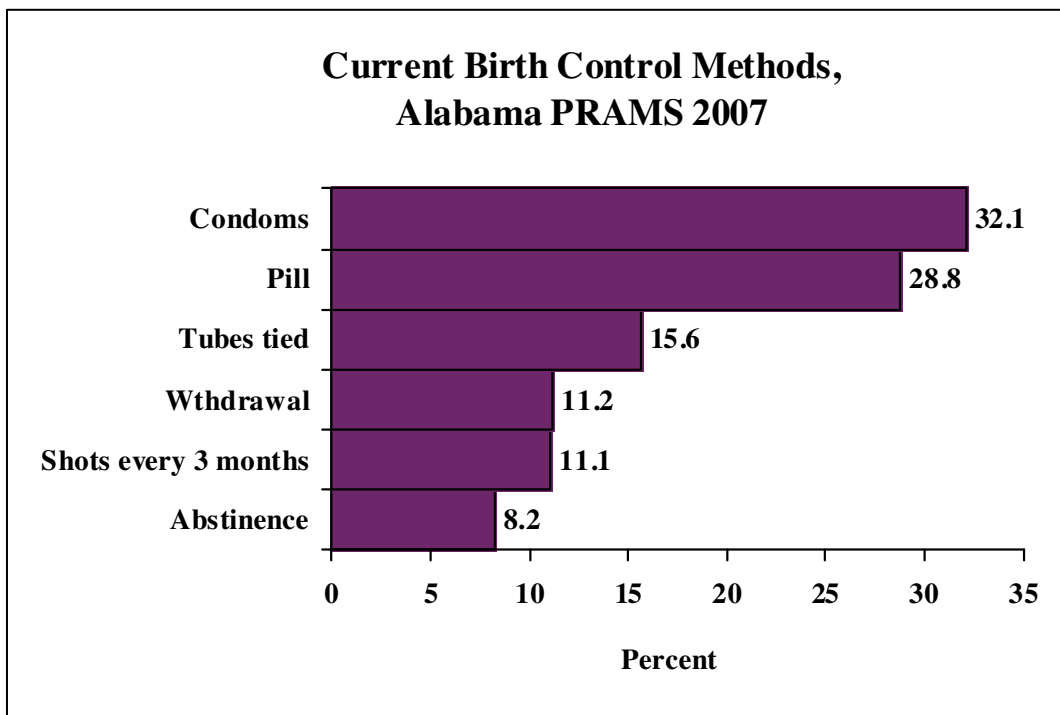


(Questions 58 & 59 of the PRAMS Survey) *Items are not mutually exclusive.
Number of respondents is less than 20.

The correct usage of contraception is invaluable in preventing unintended pregnancies. Almost 90 percent of Alabama mothers in 2007 reported they *were* using some sort of birth control at the time they participated in the survey. Of those who were not using birth control, 27.6 percent of women said they did not want to use anything, 21.1 percent reported they were not having sex, 15.6 percent reported their spouse or partner did not want to use any contraception and 12.4 percent were wanting to be pregnant. At the time of the survey, 4.9 percent reported that they were already pregnant again.

95% Confidence Intervals					
Birth Control	Yes	No	Didn't want to use anything	Not having sex	Wants a pregnancy
Percent	85.2-89.9	10.1-14.8	19.4-37.7	14.3-30.0	7.4-20.1

95% Confidence Intervals				
Birth Control	Husband/partner didn't want to use	Pregnant now	Can't pay for birth control	Thinks sterile
Percent	6.0-20.1	1.8-12.5	9.4-24.7	1.6-12.3



(Question 60 of the PRAMS Survey)

In 2007, 32.1 percent of women reported condom usage as the preferred method of contraception. 28.8 percent reported they were taking the pill. Sterilization was the choice of 15.6 percent of women who had their tubes tied after delivery.

95% Confidence Intervals			
Method of Birth Control	Condoms	Pill	Tubes tied
Percent	28.6-35.7	25.5-32.3	13.1-18.5

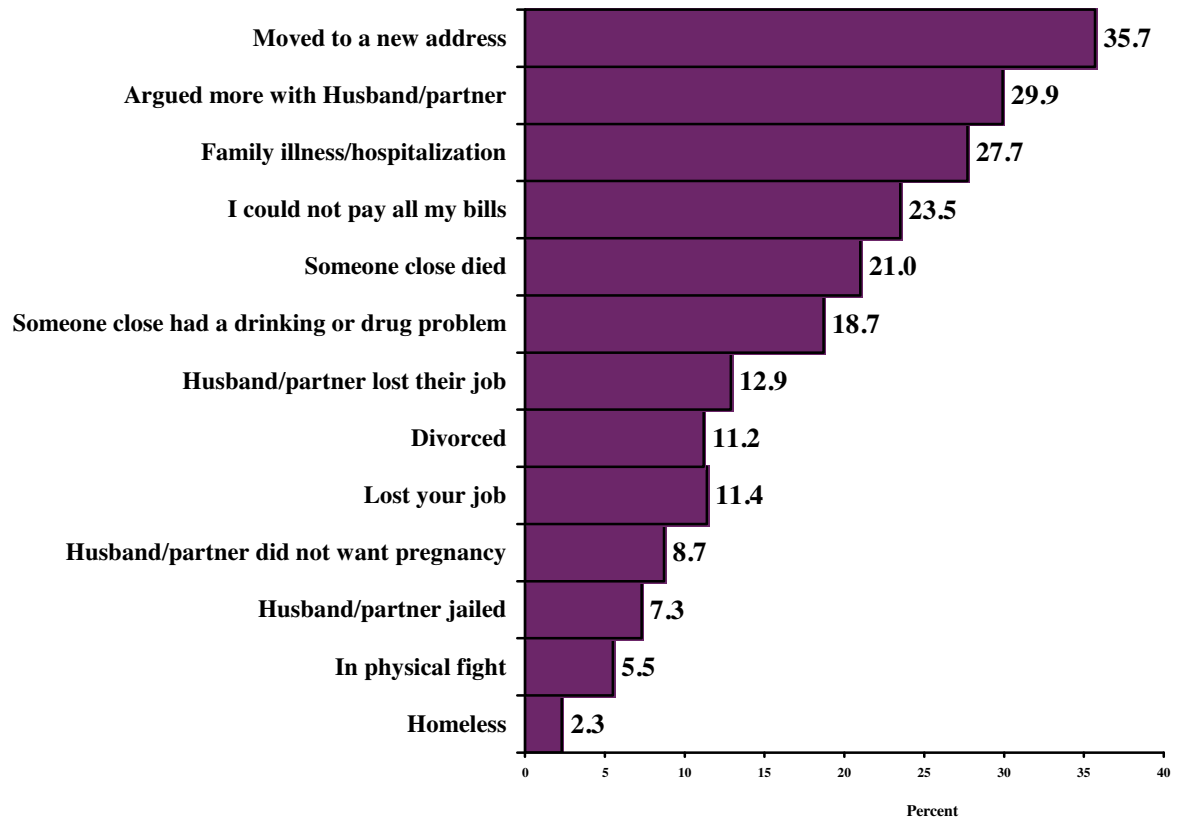
95% Confidence Intervals			
Method of Birth Control	Withdrawal	Shots every 3 mos.	Abstinence
Percent	9.0-13.9	8.8-13.8	6.3-10.7

Mothers' Birth Control Comments

- “Birth control pills and antibiotics didn’t play well together, so my primary care pulled me off of my birth control pills.”
- “Please wait for your body to heal before you get pregnant again. Because I didn’t and I had a lot of problems and hurt all the time. My babies are 11 months apart.”
- “I used IUD during my first visit to doctor after my baby was born. But IUD has gone after two week check.”

MISCELLANEOUS

Sources of Stress 12 Months Before Pregnancy, Alabama PRAMS 2007



(Question 34 of the PRAMS Survey)

Stressful events experienced during pregnancy can have negative effects on the health of the expectant mother and her unborn baby. When asked about various sources of stress during the twelve months preceding delivery, 35.7 percent of Alabama mothers reported they had moved to a new address, 29.9 percent reported they argued more with their husband/partner, 27.7 percent had a family illness or hospitalization, and 23.5 percent reported they were unable to pay all of their bills. About one in five mothers suffered the loss of someone close to them.

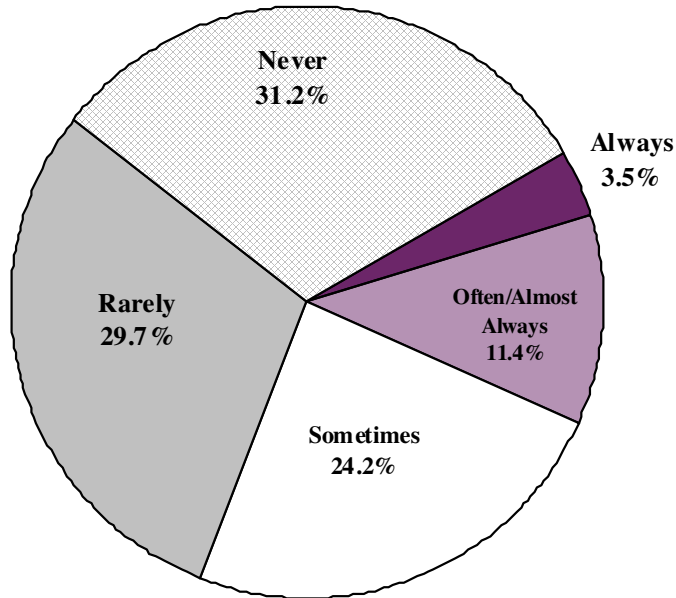
95% Confidence Intervals						
Source of Stress:	Moved	Argued more with Husb/partner	Family illness	Financial difficulties	Someone close died	Someone close with a drug/alcohol problem
Percent	32.3-39.1	26.7-33.2	24.6-31.0	20.6-26.7	18.2-24.0	16.1-21.6

95% Confidence Intervals							
Source of Stress:	Divorced	Lost job	Husb/partner lost their job	Husb/partner did not want preg.	In physical fight	Husb/partner jailed	Homeless
Percent	9.1-13.7	9.3-13.9	10.7-15.4	6.9-11.0	4.1-7.4	5.7-9.4	1.4-3.8

Mental Health of Mothers, Alabama PRAMS 2007

Question 65a asks:

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



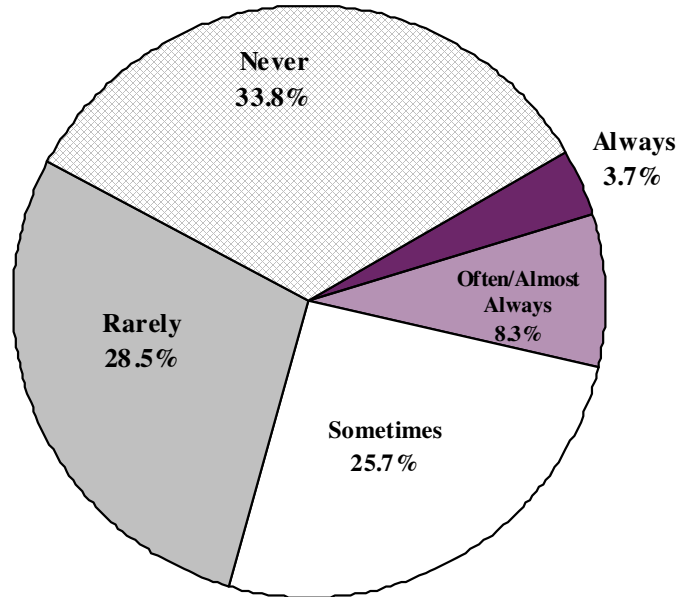
In 2007, 14.9 percent of Alabama mothers reported they always or almost always felt down, depressed, or hopeless since the birth of their baby. About 53.9 percent reported feeling this way sometimes and on rare occasions.

95% Confidence Intervals					
Depression	Never	Always	Often/Almost Always	Sometimes	Rarely
Percent	27.9-34.6	2.4-5.2	9.3-13.9	21.3-27.4	26.6-33.0

Mental Health of Mothers, Alabama PRAMS 2007, (continued)

Question 65b asks:

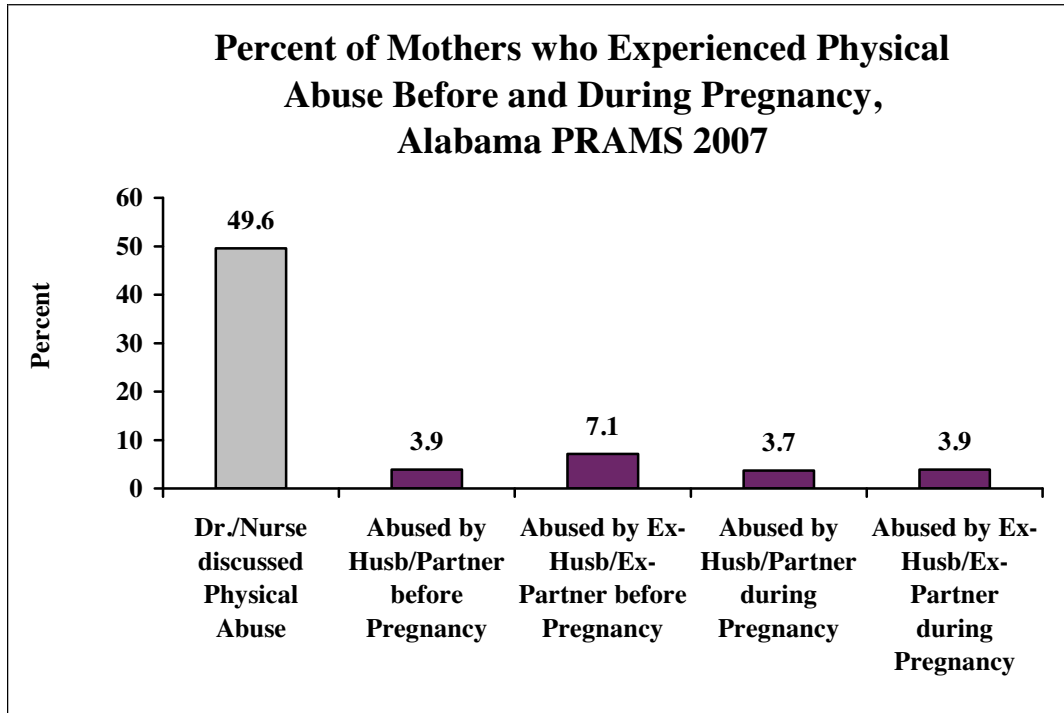
“Since your new baby was born, how often have you had little interest Or little pleasure in doing things?”



In 2007, When Alabama mothers were asked how often they had little interest or received little pleasure in doing things, 12.0 percent responded they felt this way always or almost always.

Depression among women who have recently given birth has become an important healthcare issue. Some women experience feelings of sadness, anxiety, or irritability within hours to a few weeks after giving birth (called Baby Blues). However in some women, these feelings and mood swings do not disappear in a few weeks, but instead intensify and may last up to a year after giving birth. This type of depression is called postpartum depression. This more serious form of depression requires medication and possibly counseling to deal with the symptoms. In 2007 in Alabama, 11.8 percent of mothers reported their doctor or other health care worker had diagnosed them with depression since the birth of their baby.

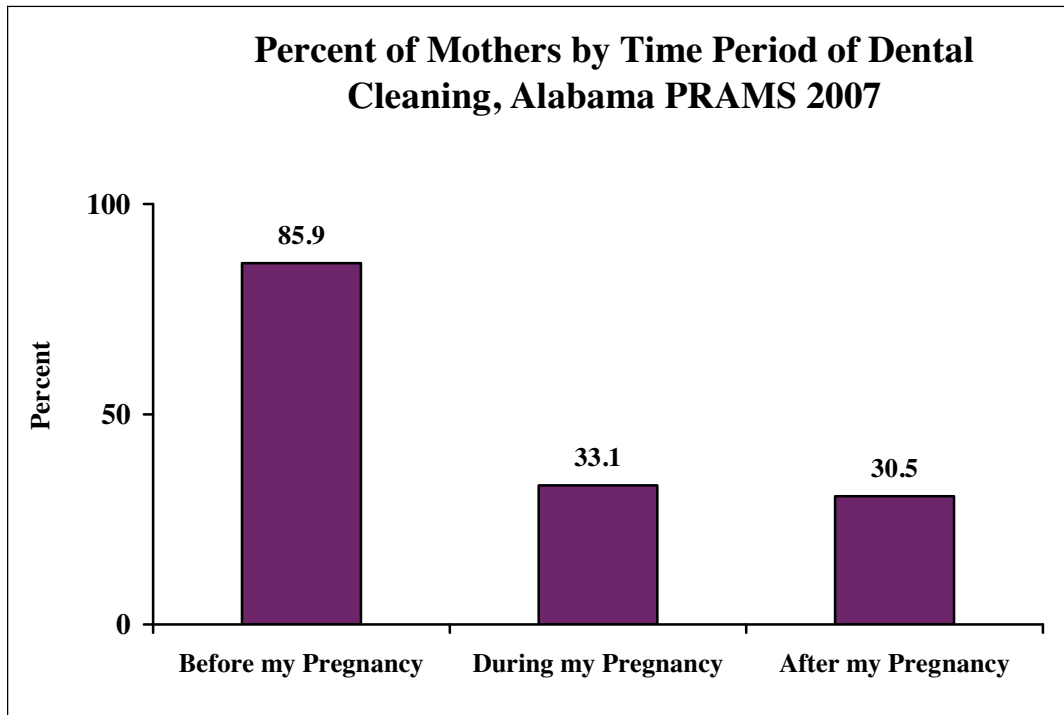
95% Confidence Intervals					
Depression	Never	Always	Often/Almost Always	Sometimes	Rarely
Percent	30.5-37.3	2.6-5.3	6.4-10.5	22.7-29.0	25.4-31.8



(Questions 20, 35, & 36 of the PRAMS Survey)

One Healthy People 2010 Objective is to reduce the incidence of physical assault by a current or former husband or partner to 3.3 assaults per 1,000 persons (or 0.3 percent), aged 12 years or older. In 2007, 3.9 percent Alabama mothers reported physical abuse by their *current* husband/partner and 7.1 percent mothers reported abuse by a *former* husband/partner twelve months before becoming pregnant. The abuse decreased during pregnancy by 5 percent by *current* spouse/partner and 45 percent by *former* husband/partner. All of the decreases in abuse reported during pregnancy are not statistically significant.

95% Confidence Intervals					
Physical abuse	Abuse Discussed At Prenatal Visits	Abused by Current Husb/partner 12 mos. Before pregnancy	Abused by Former Husb/partner 12 mos. Before pregnancy	Abused by Current Husb/partner During pregnancy	Abused by Former Husb/partner During pregnancy
Percent	46.3-53.0	2.6-5.7	5.4-9.4	2.5-5.5	2.6-5.8

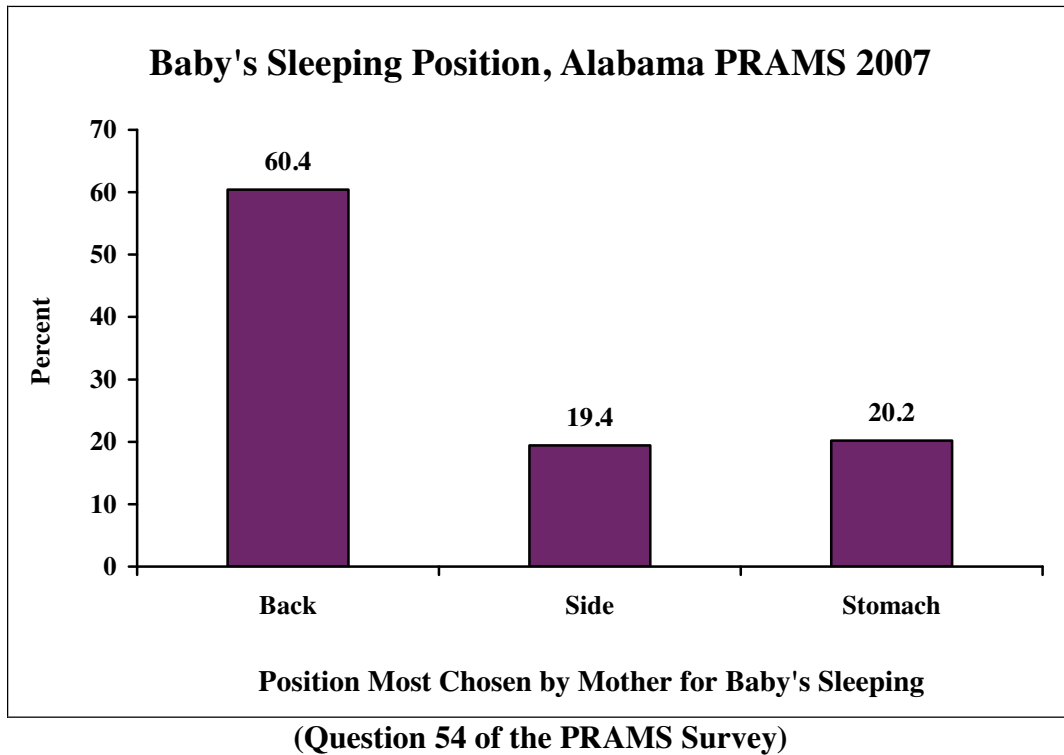


(Question 68 of the PRAMS Survey)

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

In 2007 when Alabama mothers were asked, “When did you have your teeth cleaned by a Dentist or dental hygienist?” 85.9 percent reported having had their teeth cleaned *before* their most recent pregnancy, 33.1 percent had their teeth cleaned *during* their pregnancy, and 30.5 percent reported a cleaning *after* their most recent pregnancy. Nearly 10.4 percent of Alabama mothers had never had a dental cleaning. If following the recommended guidelines for good dental health, all mothers should have visited the dentist at least once during their pregnancy for a check and cleaning.

95 % Confidence Intervals			
When cleaning was performed:	Before Pregnancy	During Pregnancy	After Pregnancy
Percent	82.9-88.4	29.7-36.8	27.0-34.2



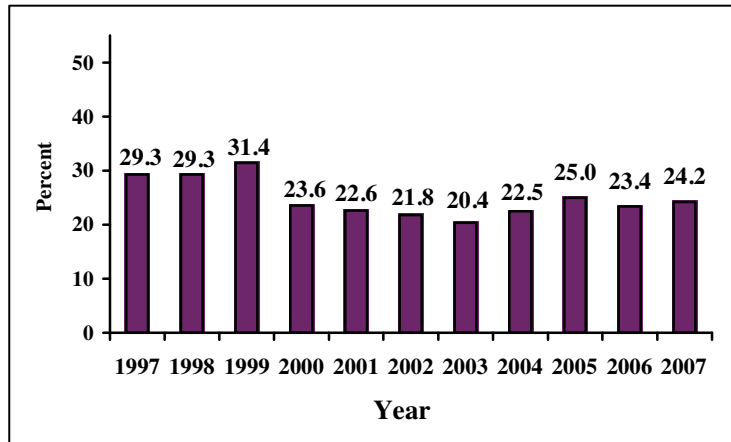
Health providers suggest placing an infant on his/her back (face up) for resting, sleeping, or when left alone can reduce the risk of Sudden Infant Death Syndrome or SIDS. A Healthy People 2010 objective is to increase the percentage of healthy full-term infants who are placed on their backs for sleeping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

In 2007 in Alabama, 39.6 percent of mothers reported placing their babies *most often* on their side or stomach for sleeping.

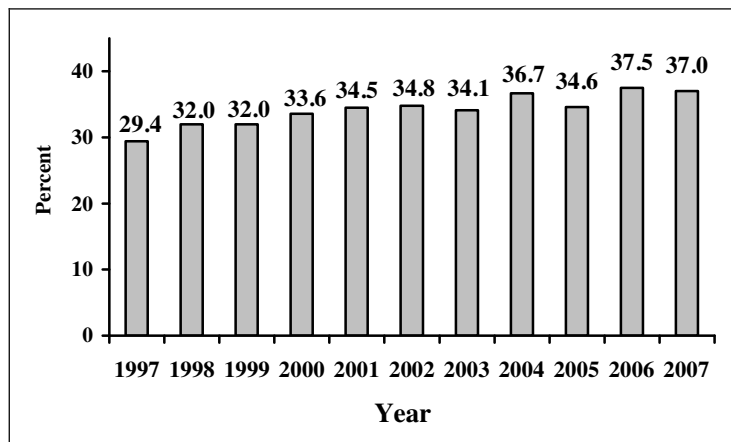
95% Confidence Intervals			
Sleep Position	Back	Side	Stomach
Percent	56.7-64.0	16.6-22.6	17.4-23.4

Frequency of Infant Co-Sleeping, Alabama PRAMS 1997-2007 (Question 55 of the 2005 PRAMS Survey)

Frequency of Infants Sleeping Alone (Never Co-Sleeps), Alabama PRAMS, 1997-2007



Frequency of Infants Always or Almost Always Co-Sleeping, Alabama PRAMS, 1997-2007



The safest location for an infant to sleep is alone, in a crib (conforming to Consumer Product Safety Commission safety standards) which is free of extra bedding or soft toys and which is located near the parents' bed. These safety precautions reduce the risk of suffocation from soft, fluffy bedding or from accidental overlaying by someone sharing the bed with the infant.

In 2007, almost one in four Alabama mothers never allowed their infant to co-sleep or share a bed with themselves or someone else, however 37.0 percent reported they always or almost always allowed their infants to co-sleep.

95% Confidence Intervals- 2007 only		
Frequency	Never Co-sleeps	Always or Almost Always
Percent	21.3-27.3	33.6-40.5

Mothers' Miscellaneous Comments

- “I was feeling down because my daddy died not even a year ago.”
- “Take time to get everything ready for your child, and if you are in an abusive relationship get help or tell someone right away.”
- “During the last six weeks of my pregnancy our house caught on fire and we were displaced from our home for the holidays with two other small children to take care of on top of dealing with the stress...my baby was healthy but born early. I went through a divorce, then found out I was pregnant. I was struggling looking for a job and I also had two kids already to take care of. I believe stress is a big factor during pregnancy. I stayed sick from stress.”

TECHNICAL NOTES

Survey Questions

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

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

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

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

The survey has gone through four revisions, or phases, since Alabama began using the PRAMS survey: 1993 to 1995 data were gathered in the Phase 2 survey; 1996 to 1999 data were gathered from the Phase 3 survey; and in 2000, the Phase 4 survey began. In 2002, a slight revision was made to Phase 4. In 2004, the Phase 5 survey was implemented. 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 2007, there was no adjustment for noncoverage.**

Calculation of Confidence Intervals

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

Limitations

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

The Sample

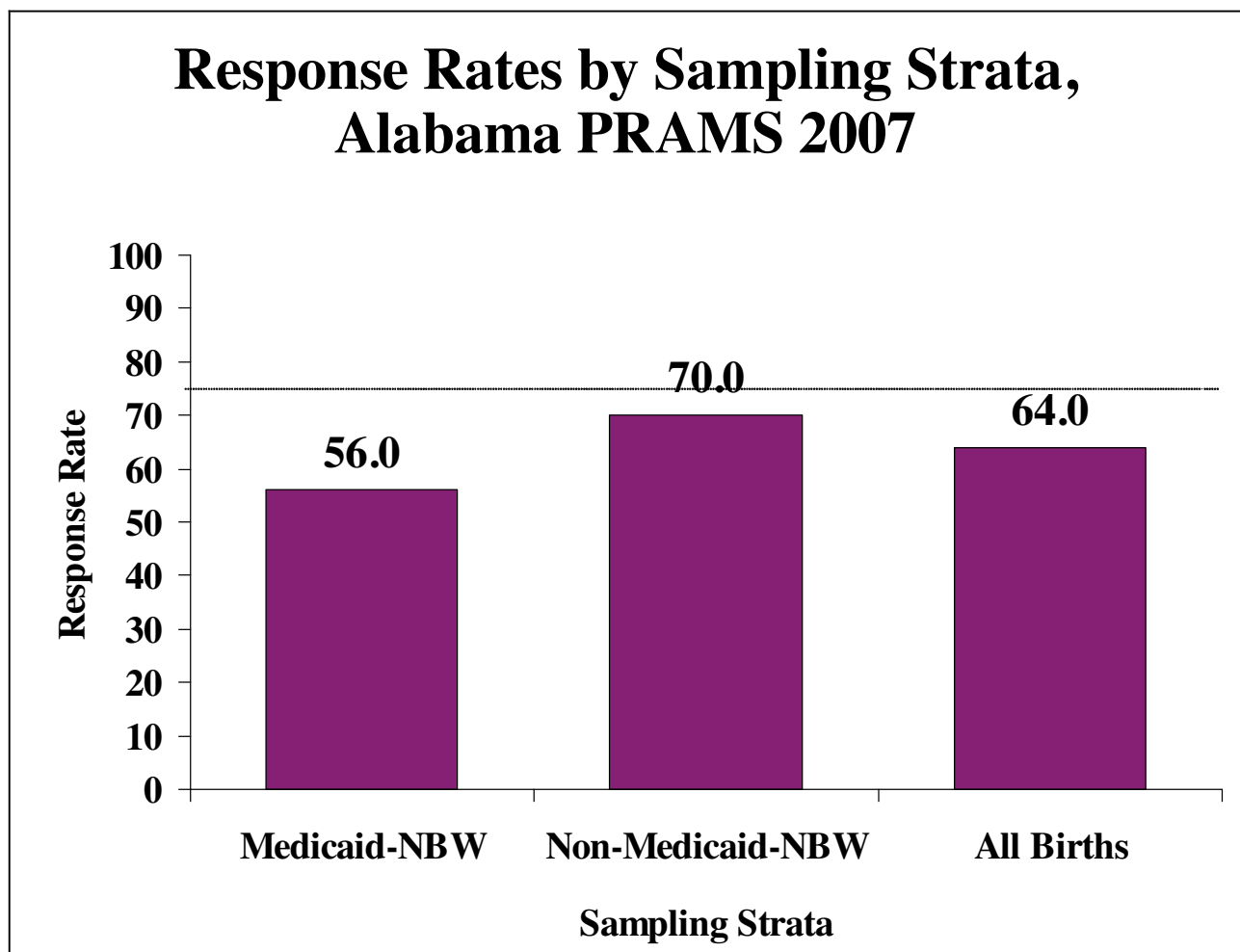
Each month approximately 100 women who have given birth two to four months before the sampling date are selected for the sample. The survey is divided into two strata: Medicaid and non-Medicaid normal birth weight. Women in each of these strata have a different probability of being chosen. Samples are selected so that roughly equal numbers of women are chosen from each strata. The odds of being selected in 2007 were approximately as follows:

Medicaid	1:46
Non-Medicaid	1:51

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

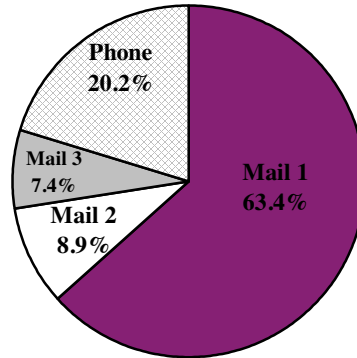
Strata were chosen to allow for oversampling of mothers who give birth to low birth weight babies and mothers whose birth was paid for by Medicaid. Both low birth weight births and Medicaid births are of special interest to the state of Alabama. Oversampling allows for large enough numbers of births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

Response Rates



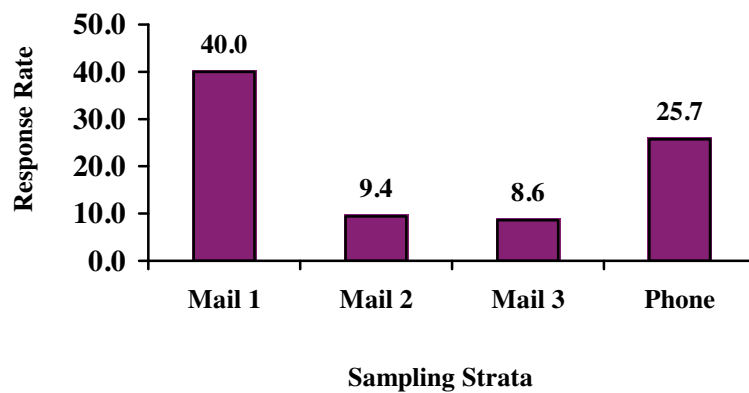
As a rule of thumb, CDC requires at least 400 completed questionnaires and a response rate of 70 percent in each stratum. In 2007, the response rates for two of the strata were below and equal to 70 percent, with the highest rate of 70.0 percent among non-Medicaid NBW births and the lowest rate of 56.0 percent for Medicaid NBW births. The overall response rate for the two strata was 64.0 percent. Because the CDC requires an overall weighted response rate of 70 percent to insure data is of the highest quality, caution should be used in interpreting data reported from 2007.

Percent Distribution of Completed Questionnaires by Survey Phase of Completion, Alabama PRAMS 2007



The majority of completed surveys, 63.4 percent, were received as a result of the initial mailing or mail 1. The mail 2 accounted for 8.9 percent of completed questionnaires, and mail 3 accounted for 7.4 percent. Of the total number of completed surveys, 20.2 percent resulted from phone phase.

Response Rates by Survey Phase, Alabama PRAMS 2007



Of all women who received the first mailing, 40.0 percent responded. The second mailing had a 9.4 percent response rate. The response rate for the third mailing was 8.6 percent in 2007, and the response rate for the phone phase was 25.7 percent. One source of bias in the survey is the possibility that mothers may answer some of the questions differently depending upon whether they respond by mail or telephone.

PRAMS

SURVEY

QUESTIONS

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

These are pills that contain many different vitamins and minerals.

- I didn't take a multivitamin or a prenatal vitamin 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?

____ 19____
Month Day Year

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

____ Pounds OR ____ Kilos

6. How tall are you without shoes?

____ Feet ____ Inches
OR ____ Centimeters

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

- No →
- 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

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

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

Check one answer

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

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

- No
- Yes



Go to Question 15

12. 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] or withdrawal, and using birth control methods such as the pill, condoms, cervical ring, IUD, having their tubes tied, or their partner having a vasectomy.)

- No
- Yes



Go to Question 14

13. 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:**

If you or your husband or partner was not doing anything to keep from getting pregnant, go to Question 15.

14. When you got pregnant with your new baby, what were you or your husband or partner doing to keep from getting pregnant?

Check all that apply

- Tubes tied or closed (female sterilization)
- Vasectomy (male sterilization)
- Pill
- Condoms
- Shot once a month (Lunelle®)
- Shot once every 3 months (Depo-Provera®)
- Contraceptive patch (OrthoEvra®)
- Diaphragm, cervical cap, or sponge
- Cervical ring (NuvaRing® or others)
- IUD (including Mirena®)
- Rhythm method or natural family planning
- Withdrawal (pulling out)
- Not having sex (abstinence)

Other → **Please tell us:**

The next questions are about the prenatal care you received during your most recent pregnancy. Prenatal care includes visits to a doctor, nurse, or other health care worker before your baby was born to get checkups and advice about pregnancy. (It may help to look at the calendar when you answer these questions.)

15. How many weeks or months pregnant were you when you were *sure* you were pregnant? (For example, you had a pregnancy test or a doctor or nurse said you were pregnant.)

_____ Weeks OR _____ Months

- I don't remember

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

_____ Weeks OR _____ Months

- I didn't go for prenatal care

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

- No
- Yes

I didn't want prenatal care



Go to Question 19

18. Here is a list of problems some women can have getting prenatal care. For each item, circle **Y** (Yes) if it was a problem for you during your most recent pregnancy or circle **N** (No) if it was not a problem or did not apply to you.

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

Please tell us:

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

19. How was your prenatal care paid for?

Check all that apply

- Medicaid
- Personal income (cash, check, or credit card)
- Health insurance or HMO (including insurance from your work or your husband's work)
- Military
- Health department

- Other** → **Please tell us:**

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

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

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

- No
- Yes
- I don't know

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

- No
- Yes

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

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

- No
- Yes



Go to Question 25

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

- No
- Yes

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

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

If you did not have any of these problems, go to Question 27

26. Did you do any of the following things because of these problems? For each item, circle **Y** (Yes) if you did that thing or circle **N** (No) if you did not.

	No	Yes
a. I went to the hospital or emergency room and stayed less than 1 day.....	N	Y
b. I went to the hospital and stayed 1 to 7 days.....	N	Y
c. I went to the hospital and stayed more than 7 days.....	N	Y
d. I stayed in bed at home more than 2 days because of my doctor's or nurse's advice....	N	Y

The next questions are about smoking cigarettes and drinking alcohol.

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

No



Go to Question 31

Yes

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

- 41 cigarettes or more
- 21 to 40 cigarettes
- 11 to 20 cigarettes
- 6 to 10 cigarettes
- 1 to 5 cigarettes
- Less than 1 cigarette
- None (0 cigarettes)

29. In the last 3 months of your pregnancy, how many cigarettes did you smoke on an average day?
(A pack has 20 cigarettes.)

- 41 cigarettes or more
- 21 to 40 cigarettes
- 11 to 20 cigarettes
- 6 to 10 cigarettes
- 1 to 5 cigarettes
- Less than 1 cigarette
- None (0 cigarettes)

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

- 41 cigarettes or more
- 21 to 40 cigarettes
- 11 to 20 cigarettes
- 6 to 10 cigarettes
- 1 to 5 cigarettes
- Less than 1 cigarette
- None (0 cigarettes)

31. 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 34](#)

Yes

32a. During the 3 months before you got pregnant, how many alcoholic drinks did you have in an average week?

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

32b. During the 3 months before you got pregnant, how many times did you drink 5 alcoholic drinks or more in one sitting?

- 6 or more times
- 4 to 5 times
- 2 to 3 times
- 1 time
- I didn't have 5 drinks or more in 1 sitting
- I didn't drink then

33a. During the last 3 months of your pregnancy, how many alcoholic drinks did you have in an average week?

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

33b. During the *last 3 months* of your pregnancy, how many times did you drink 5 alcoholic drinks or more in one sitting?

- 6 or more times
- 4 to 5 times
- 2 to 3 times
- 1 time
- I didn't have 5 drinks or more in 1 sitting
- I didn't drink then

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

34. 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. I got separated or divorced from my husband or partner.....	N	Y
c. I moved to a new address.....	N	Y
d. I was homeless.....	N	Y
e. My husband or partner lost his job.....	N	Y
f. I lost my job even though I wanted to go on working.....	N	Y
g. I argued with my husband or partner more than usual.....	N	Y
h. My husband or partner said he didn't want me to be pregnant.....	N	Y
i. I had a lot of bills I couldn't pay.....	N	Y
j. I was in a physical fight.....	N	Y
k. My husband or partner or I went to jail.....	N	Y
l. Someone very close to me had a bad problem with drinking or drugs.....	N	Y
m. Someone very close to me died.....	N	Y

The next questions are about the time during the *12 months before* you got pregnant with your new baby.

35a. During the *12 months before* you got pregnant, did a ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?

- No
- Yes

35b. During the *12 months before* you got pregnant, were you physically hurt in any way by your husband or partner?

- No
- Yes

The next questions are about the time *during* your most recent pregnancy.

36a. During your most recent pregnancy, did an ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?

- No
- Yes

36b. During your most recent pregnancy, were you physically hurt in any way by your husband or partner?

- No
- Yes

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

37. When was your baby due?

Month Day Year

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

Month Day Year

- I didn't have my baby in a hospital

39. When was your baby born?

Month Day Year

40. 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

41. How was your delivery paid for?

Check all that apply

- Medicaid
- Personal income (cash, check, or credit card)
- Health insurance or HMO (including insurance from your work or your husband's work)
- Military
- Health department

- Other** → **Please tell us:**

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

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



Go to Question 46

44. Is your baby alive now?

No



Go to Question 58

Yes

45. Is your baby living with you now?

No



Go to Question 58

Yes

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

No

Yes



Go to Question 48

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

Check all that apply

- My baby was sick and could not breastfeed
- I was sick or on medicine
- I had other children to take care of
- I had too many household duties
- I didn't like breastfeeding
- I didn't want to be tied down
- I was embarrassed to breastfeed
- I went back to work or school
- I wanted my body back to myself

Other → **Please tell us:**

If you did not breastfeed your new baby, go to Question 52.

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

No

Yes



Go to Question 51

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

_____ Weeks OR _____ Months

Less than 1 week

50. What were your reasons for stopping breastfeeding?

Check all that apply

- My baby had difficulty nursing
- Breast milk alone did not satisfy my baby
- I thought my baby was not gaining enough weight
- My baby got sick and could not breastfeed
- My nipples were sore, cracked, or bleeding
- I thought I was not producing enough milk
- I had too many other household duties
- I felt it was the right time to stop breastfeeding
- I got sick and could not breastfeed
- I went back to work or school
- I wanted or needed someone else to feed the baby
- My baby was jaundiced (yellowing of the skin or whites of the eyes)

Other → **Please tell us:**

51. 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 1 week old
- I have not fed my baby anything besides breast milk

If your baby was not born in a hospital, go to Question 53.

52. 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

If your baby is still in the hospital, go to Question 58.

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 1 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?

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

Check one answer

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

- Always
- Often/Almost always
- Sometimes
- Rarely
- Never

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

- No
- Yes

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

- No
- Yes

58. 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 not having sex at certain times [rhythm] or withdrawal, and using birth control methods such as the pill, condoms, cervical ring, IUD, having their tubes tied, or their partner having a vasectomy.)

- No
- Yes →

Go to Question 60

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

- 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

Check all that apply

- Other** → **Please tell us:**

If you or your husband or partner is not doing anything to keep from getting pregnant *now*, go to Question 61.

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

Check all that apply

- Tubes tied or closed (female sterilization)
- Vasectomy (male sterilization)
- Pill
- Condoms
- Shot once a month (Lunelle®)
- Shot once every 3 months (Depo-Provera®)
- Contraceptive patch (OrthoEvra®)
- Diaphragm, cervical cap, or sponge
- Cervical ring (NuvaRing® or others)
- IUD (including Mirena®)
- Rhythm method or natural family planning
- Withdrawal (pulling out)
- Not having sex (abstinence)

- Other** → **Please tell us:**

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

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

Check all that apply

- Paycheck or money from a job
- Money from family or friends
- Money from a business, fees, dividends, or rental income
- 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, disability, veteran benefits, or pensions

- Other** → **Please tell us:**

62. During the 12 months before your new baby was born, what was your total household income before taxes? Include your income, your husband's or partner's income, and any other income you may have used. (All information will be kept private and will not affect any services you are now getting.)

Check one answer

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

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

_____ People

The next few questions are on a variety of topics.

64. During your most recent pregnancy did a doctor, nurse, or other health care worker tell you that you had any of the following diseases or infections? For each one, circle **Y** (Yes) if you were told you had the disease or infection or circle **N** (No) if you were not told you had the disease or infection.

	No	Yes
a. Urinary tract infection (UTI)	N	Y
b. Yeast infections	N	Y
c. Group B Strep (Beta Strep)	N	Y
d. Bacterial vaginosis	N	Y
e. Trichomoniasis (Trich)	N	Y
f. Chlamydia	N	Y
g. Genital warts (HPV)	N	Y
h. Herpes	N	Y
i. Gonorrhea	N	Y
j. Syphilis	N	Y
k. Pelvic Inflammatory Disease (PID)	N	Y
l. Human Immunodeficiency Virus (HIV)	N	Y

65a. Since your new baby was born, how often have you felt down, depressed, or hopeless?

- Always
- Often
- Sometimes
- Rarely
- Never

65b. Since your new baby was born, how often have you had little interest or little pleasure in doing things?

- Always
- Often
- Sometimes
- Rarely
- Never

66. Since your new baby was born, has a doctor, nurse, or other health care worker diagnosed you with depression?

- No
- Yes

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

No



Go to Question 69

Yes

68. When did you have your teeth cleaned by a dentist or a dental hygienist? For each of the three time periods, circle **Y** (Yes) if you had your teeth cleaned then or circle **N** (No) if you did not have your teeth cleaned then.

- a. Before my most recent pregnancy.....N Y
- b. During my most recent pregnancy.....N Y
- c. After my most recent pregnancy.....N Y

69. What is today's date?

Month	Day	Year

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.*

ADPH

Alabama Department of Public Health

The RSA Tower | 201 Monroe Street | Montgomery, AL 36104