





Maryland PRAMS Report

2001 Births









Maryland Department of Health and Mental Hygiene
Center for Maternal and Child Health Vital Statistics Administration

Robert L. Ehrlich, Jr., Governor; Michael S. Steele, Lieutenant Governor; Nelson J. Sabatini, Secretary









"I just wanted to say that I hope my answers will help mothers and babies in the future be healthier"

PRAMS mother

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March 2004

The Maryland PRAMS Report

is also available at www.fha.state.md.us/mch/html/prams_fs.html

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INTRODUCTION

This report highlights 2001 data collected in Maryland through the Pregnancy Risk Assessment Monitoring System (PRAMS). PRAMS is a surveillance system established by the Centers for Disease Control and Prevention (CDC) in 1987 to obtain information about maternal behaviors and experiences that may be associated with adverse pregnancy outcomes. Data are collected by surveying women who have recently delivered live born infants.

PRAMS projects are conducted through cooperative agreements between the CDC and state health departments. PRAMS projects are currently underway in 31 states and New York City. All surveys include a core set of standardized questions, which allows for multi-state analyses. In addition, each state can add questions tailored to meet its needs. The core section of the survey includes questions relating to prenatal care, obstetric history, smoking, alcohol use, physical abuse, contraception, economic status, maternal stress, and infant health. The Maryland-specific section of the survey includes questions on assisted reproduction, contraceptive use, depression, oral health, bedrest during pregnancy, social services, and seatbelt use.

The PRAMS project in Maryland is a collaborative effort of the Center for Maternal and Child Health (CMCH), the Vital Statistics Administration (VSA) of the Maryland Department of Health and Mental Hygiene, and the CDC. Maryland began collecting PRAMS data from mothers who delivered in 2000.

METHODOLOGY

Sampling and Data Collection

Women eligible to participate in PRAMS are selected from Maryland's live birth certificate files. Each month, a stratified, random sample of approximately 200 live births is selected. The sample is stratified by maternal age (<20 years, 20-34 years, ≥35 years) and infant birth weight (<2500 grams, ≥2500 grams). This sampling frame over-samples mothers who have delivered a low birth weight infant (<2500 grams) as well as mothers who are under 20 years of age or 35 years of age or older.

PRAMS combines two modes of data collection, a survey conducted by mailed questionnaire with multiple follow-up attempts, and if mail is not successful, a survey conducted by telephone interview. Survey questionnaires and other materials are available in both English and Spanish.

The first mailing, which is done two to four months after delivery, is a letter that introduces PRAMS to the mother and informs her that a questionnaire will soon arrive. Within seven days of this letter, the questionnaire packet is mailed. This packet includes the 86-item survey, PRAMS brochure, calendar and resource brochure. In addition, a telephone card is sent as an incentive for completing the survey. Seven to 10 days after the initial packet is mailed, a tickler that serves as a thank you and reminder note is sent. Mothers who do not respond to the tickler within seven to 14 days are mailed a second questionnaire packet. A third questionnaire packet is mailed to all remaining nonrespondents seven to 14 days later. Telephone follow-up is initiated for all nonrespondents.

Weighting Procedures

Data collected through PRAMS are linked to birth certificate data, which allows for the survey data to be weighted to reflect the total birth population. Sampling, nonresponse and noncoverage adjustment factors are applied to the data in order to make the results generalizable to the state's population of women delivering live born infants during the study period. Further information on PRAMS methodology, including weighting procedures, may be found on the CDC website at http://www.cdc.gov/reproductivehealth/methodology.htm.

Data Analysis

CDC recommends that states obtain a response rate of at least 70% for analysis of PRAMS data. The response rate among women delivering in Maryland between January 30, 2001 and December 31, 2001 met this criterion, but the response rate in for women delivering before January 30 did not. Therefore, the data presented in this report are based on the last 11 months of 2001, not the entire year. During this period, 1,447 mothers completed the PRAMS questionnaire with a weighted response reflecting 58,982 mothers. The weighted figure included 38,834 births to white women and 16,333 births to black women.

All data in this report were prepared using weighted PRAMS data and SUDAAN software. Percentages shown for each survey item are based on the number of mothers who responded to that item, with missing observations excluded. With the exception of questions relating to smoking (Questions 39-41), alcohol binges before pregnancy (Question 43b) and duration of breastfeeding (Question 61), the percentage of missing observations was less than 5% for each survey item. Percentages for subcategories of survey items based on fewer than five respondents are not reported since estimates based on small numbers may be unreliable.

ACKNOWLEDGMENTS

The Maryland PRAMS Project would like to acknowledge the CDC PRAMS Team for their technical assistance and support, especially Nedra Whitehead, Ph.D. and Denise D'Angelo, M.P.H. our former and present project managers, who have expertly guided and assisted our program.

Additionally, our thanks go to the Maryland PRAMS Steering Committee for their invaluable input to many aspects of our project.

Most importantly, we very much appreciate all the 1,447 mothers who took the time to complete the questionnaires that are represented in this report. Their answers will contribute greatly towards our continuing efforts to improve the health of Maryland mothers and babies.

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MARYLAND PRAMS HIGHLIGHTS - 2001

Preconception factors

- Forty-two percent of all pregnancies were unintended. The most frequently cited reason given by mothers with unintended pregnancies for not using contraception was that they didn't mind becoming pregnant.
- Seventy-six percent of women reported having health insurance just before pregnancy, and 9% reported they were covered by Medicaid or Health Choice.
- Approximately 31% of women reported taking a daily multivitamin in the month before conception.
- Of mothers trying to get pregnant, 8% reported using **fertility drugs** and 4% used **assisted reproductive technology**.

Prenatal factors

- Seventy-eight percent of mothers began prenatal care during the first trimester of pregnancy, and fewer than 1% received no care. The primary reasons given for not receiving early prenatal care were difficulty in obtaining an appointment, and lack of awareness of the pregnancy.
- Seventy-three percent of women reported that health insurance or an HMO paid for their prenatal care; 23% reported that Medicaid or HealthChoice paid for their care.
- Thirty-three percent of women participated in the **WIC program** during pregnancy.
- Sixty-four percent of mothers reported one or more medical complications during pregnancy, and 20% of these women were hospitalized for one or more days.
- Nine percent of women **smoked** during the last three months of pregnancy, and 8% reported using **alcohol**. Fewer than 1% of women reported a binge-drinking episode during the last three months of pregnancy.

- Four percent of mothers reported being **physically abused** by a husband or partner during pregnancy, and 2% reported being abused by someone else.
- Forty-six percent of mothers had a routine dental visit during pregnancy, and 26% needed to be seen for a dental problem.
- Fifteen percent of mothers did not always use a **seatbelt** during pregnancy.

Infant health and related factors

- Thirteen percent of newborns were admitted to a **neonatal intensive care** unit.
- Fifty-nine percent of newborns were discharged from the hospital within two days of delivery, and 8% remained in the hospital for 6 or more days.
- Seventy-six percent of infants were breastfed after delivery, and 64% were breastfed four weeks or longer.
- In terms of **sleeping position**, 61% of infants were usually placed on their backs to sleep, and 17% on their stomachs.
- Eighty-four percent of infants were seen by a health care provider within a week of being discharged from the hospital.

Maternal postpartum factors

- Seventeen percent of mothers reported they were not using postpartum contraception.
 The most frequently cited reason for not using contra-ception was that they were not having sex.
- Twenty percent of women reported being at least moderately depressed in the postpartum period.

MARYLAND PRAMS 2001 SURVEILLANCE AND SELECTED HEALTHY PEOPLE 2010 OBJECTIVES

| Healthy People 2010 Objective | Healthy People 2010 Target | Maryland PRAMS 2001 Births |
|---|-------------------------------|----------------------------------|
| Preconception Factors | | 2001 Bittis |
| Increase the proportion of pregnancies that are intended. | 70% | 57.9%* |
| Increase the proportion of pregnancies begun with the consumption of at least 400 <i>ug</i> of folic acid each day from fortified foods or dietary supplements by nonpregnant women aged 15-44 years. | 80% | 31.2% |
| Prenatal Health | | |
| Increase the proportion of all pregnant women who receive prenatal care in the first trimester of pregnancy. | 90% | 78.1%** |
| Reduce cigarette smoking among pregnant women. | 2% | 9.4% |
| Increase abstinence from alcohol by pregnant women. | 94% | 91.9% |
| Increase abstinence from binge drinking by pregnant women. | 100% | 99.1% |
| Postpartum Maternal and Infant Health | | |
| Increase the percentage of healthy full-term infants who are put down to sleep on their backs. | 70% | 61% |
| Increase the proportion of mothers who breastfeed their babies in the early postpartum period. | 75% | 76.5% |

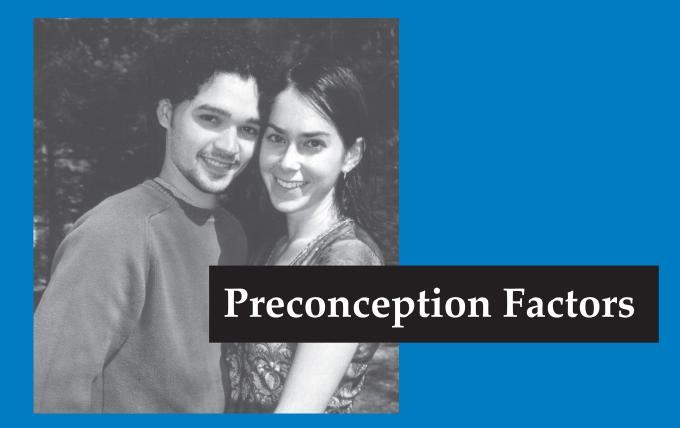
^{*} PRAMS data includes only information on pregnancies that end in live birth

^{**} First trimester defined by PRAMS as < 13 weeks

















"I think talking with the doctor before getting pregnant helped a lot."

"An important focus on pregnancy should not only be the health of the mother before deciding to get pregnant, but also the father."

"... I wish I had been in better shape before becoming pregnant."

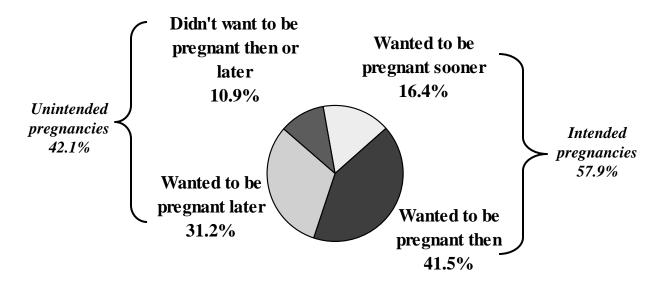
PRAMS mothers

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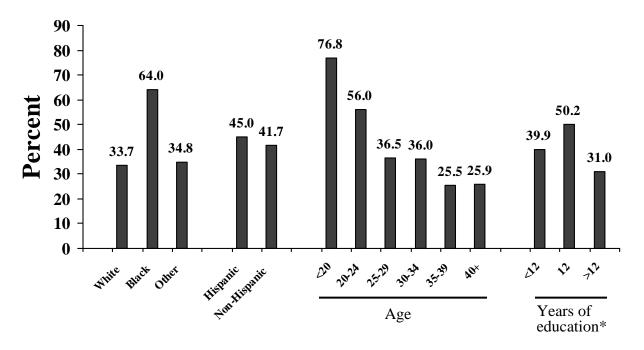
INTENDEDNESS OF PREGNANCY

Question 12: Thinking back to *just before* you got pregnant, how did you feel about becoming pregnant?

Distribution of Mothers by Intendedness of Pregnancy



Percentage of Mothers With Unintended Pregnancies

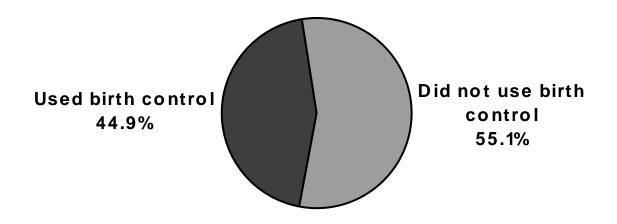


^{*}Includes only mothers ages 20 and above.

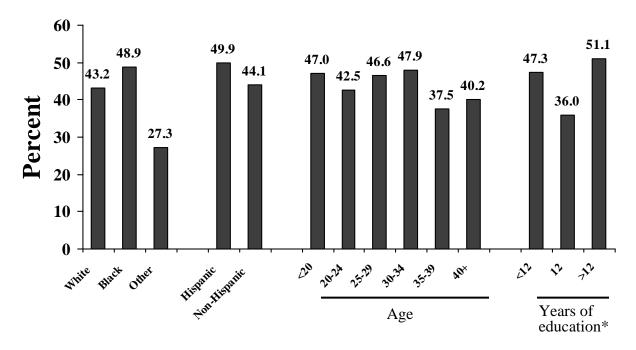
CONTRACEPTIVE USE AMONG MOTHERS WITH AN UNINTENDED PREGNANCY

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

Distribution of Mothers With An Unintended Pregnancy by Use of Birth Control at the Time of Pregnancy



Percentage of Mothers With an Unintended Pregnancy Who Reported Use of Birth Control at Time of Pregnancy

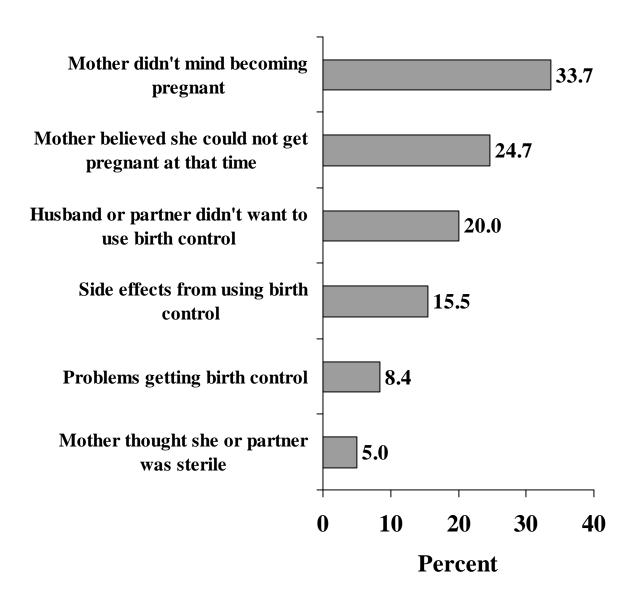


^{*}Includes only mothers ages 20 and above.

REASONS FOR NOT USING BIRTH CONTROL

Question 15: What were your or your husband's or partner's reasons for not doing anything to keep from getting pregnant?

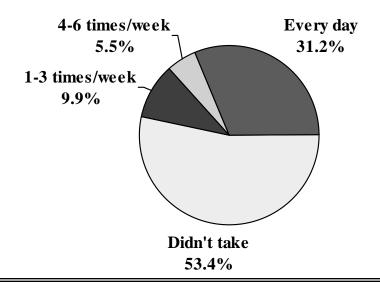
Reasons Given for Not Using Birth Control by Mothers Who Were Not Trying to Become Pregnant



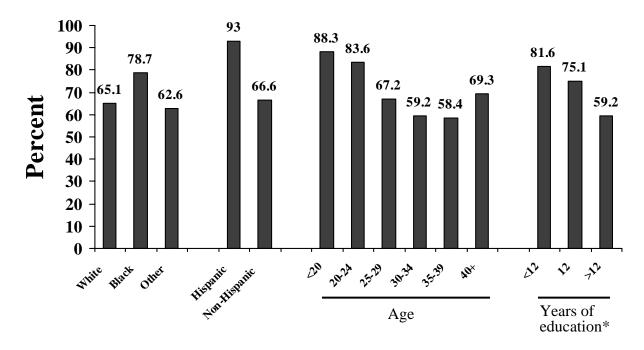
MULTIVITAMIN USE

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

Distribution of Mothers by Frequency of Multivitamin Use in the Month Before Pregnancy



Percentage of Mothers Who Reported Less Than Daily Multivitamin Use in the Month Before Pregnancy

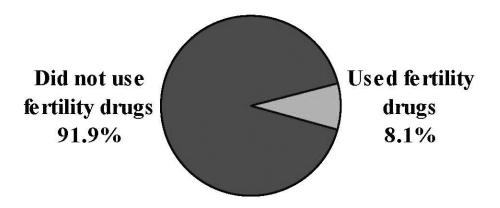


^{*}Includes only mothers ages 20 and above.

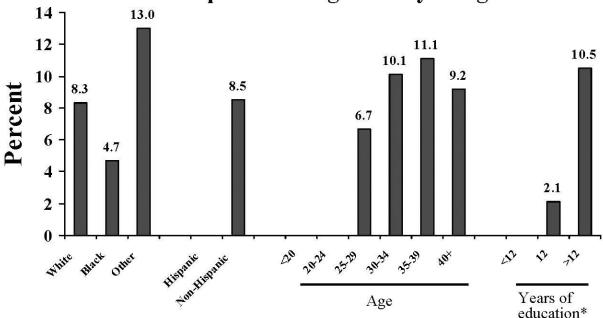
FERTILITY DRUGS

Question 16: Did you take any fertility drugs to help you get pregnant with your new baby? (Fertility drugs include Clomid®, Serophene®, Pergonal®, or any other drugs that you may have taken to help you get pregnant.)

Distribution of Mothers Who Were Attempting to Become Pregnant by Use of Fertility Drugs



Percentage of Mothers Attempting to Become Pregnant Who Reported Using Fertility Drugs

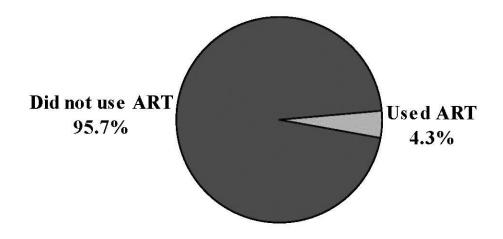


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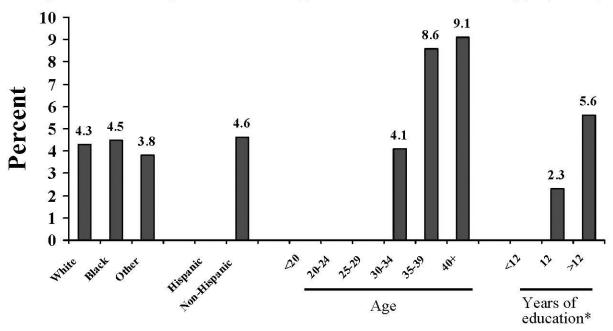
ASSISTED REPRODUCTIVE TECHNOLOGY

Question 17: Did you use any medical procedures (assisted reproductive technology) to help you get pregnant with your new baby? (Assisted reproductive technology procedures include in vitro fertilization [IVF], GIFT, ZIFT, embryo transfer and donor oocytes.)

Distribution of Mothers Attempting to Become Pregnant by Use of Assisted Reproductive Technology (ART)



Percentage of Mothers Attempting to Become Pregnant Who Reported Using Assisted Reproductive Technology (ART)



^{*}Includes only mothers ages 20 and above.















"I think that women need to know that while they are pregnant and seeing a doctor, they need to ask all the questions they want to know, even if they sound silly."

"I went to a private practice and I believe the doctor never asked enough questions or spent enough time with me."

"The midwives talked to me about everything I needed to know, either at the office or by phone call. I needed reassurance on occasion and they gave it convincingly."

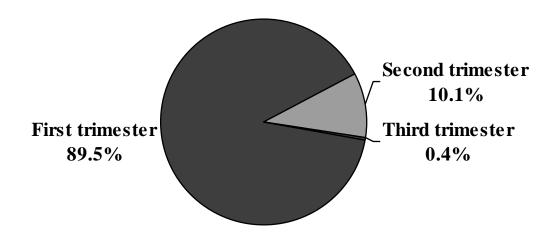
PRAMS mothers

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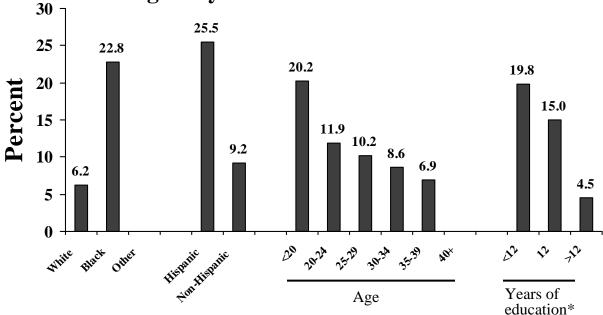
TRIMESTER OF PREGNANCY CONFIRMATION

Question 18. How many weeks or months pregnant were you when you were sure you were pregnant?

Distribution of Mothers by Time at Which Pregnancy Was Confirmed



Percentage of Mothers Who Reported Confirming Pregnancy After the First Trimester

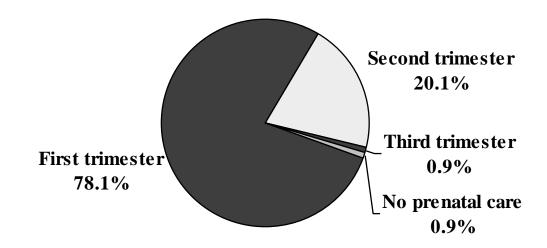


^{*}Includes only mothers ages 20 and above.

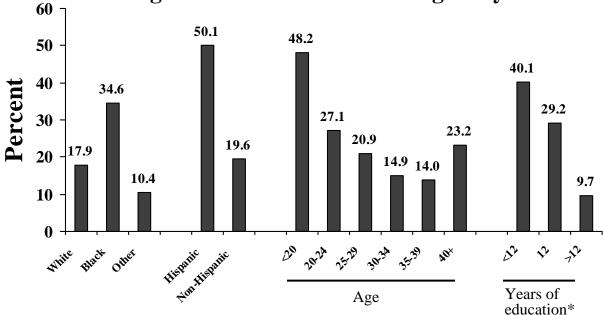
TRIMESTER PRENATAL CARE BEGAN

Question 19. How many weeks or months pregnant were you when you had your first visit for prenatal care?

Distribution of Mothers by Trimester Prenatal Care Began



Percentage of Mothers Who Did Not Begin Prenatal Care During the First Trimester of Pregnancy

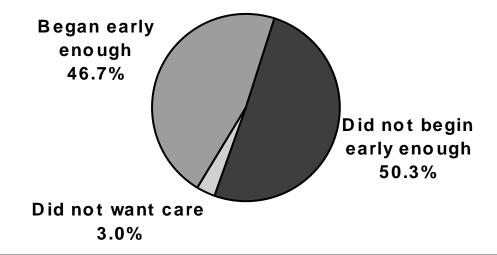


^{*}Includes only mothers ages 20 and above.

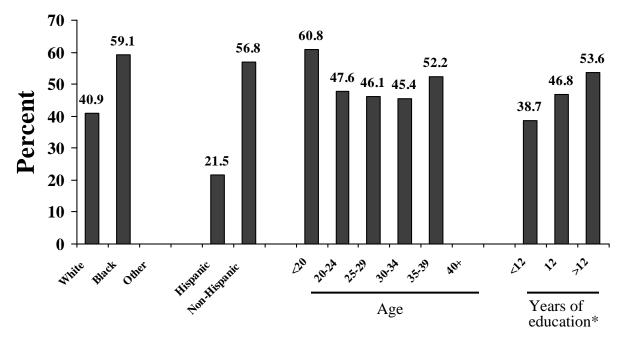
PRENATAL CARE AS EARLY AS DESIRED

Question 20: Did you get prenatal care as early in your pregnancy as you wanted?

Distribution of Mothers Who Did Not Begin Prenatal Care in the First Trimester by Satisfaction With Time During Pregnancy That Prenatal Care Began



Percentage of Mothers Who Did Not Begin Prenatal Care in the First Trimester and Reported that Prenatal Care Did Not Begin Early Enough in Pregnancy

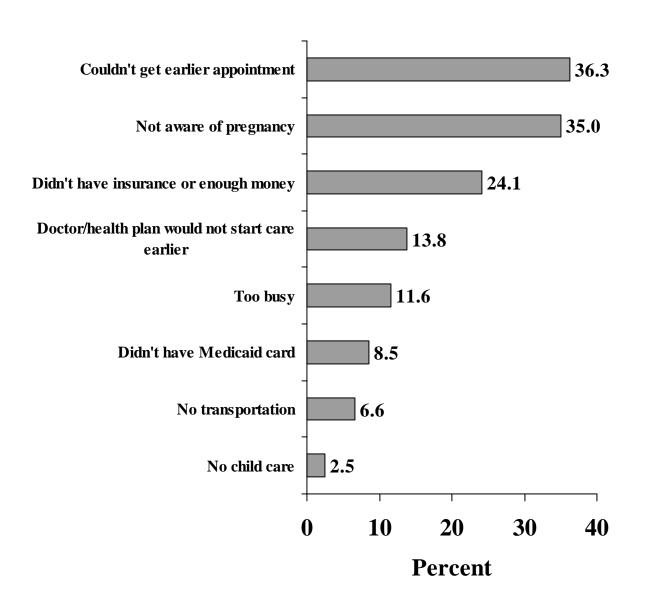


^{*}Includes only mothers ages 20 and above.

REASONS FOR LATE PRENATAL CARE

Question 21: Did any of these things keep you from getting prenatal care as early as you wanted? (check all that apply)

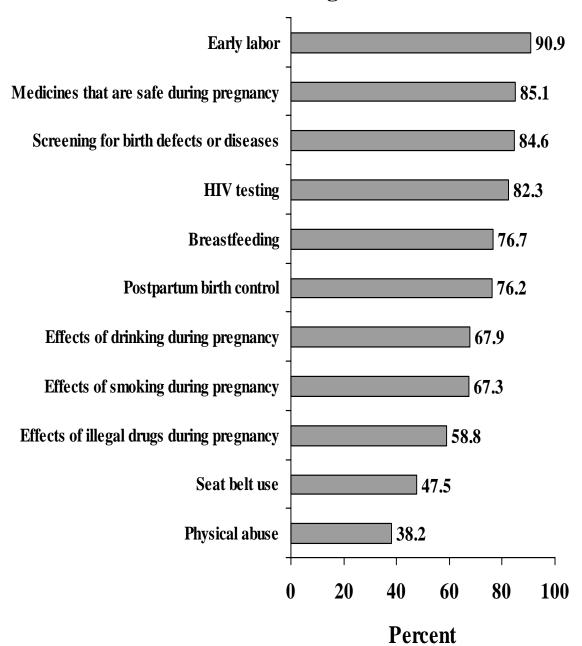
Reasons Given for Not Beginning Prenatal Care As Early in Pregnancy As Desired



TOPICS DISCUSSED DURING PRENATAL CARE VISITS

Question 24: 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.

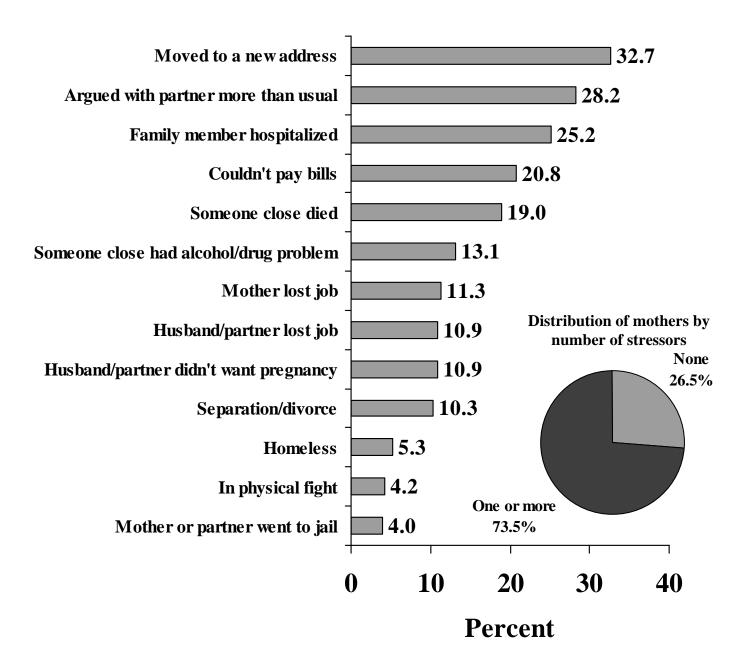
Percentage of Mothers Reporting That Selected Topics Were Discussed During Prenatal Care Visits



STRESS

Question 45: This question is about things that may have happened during the 12 months before your new baby was born. For each item, circle yes if it happened to you or no if it did not.

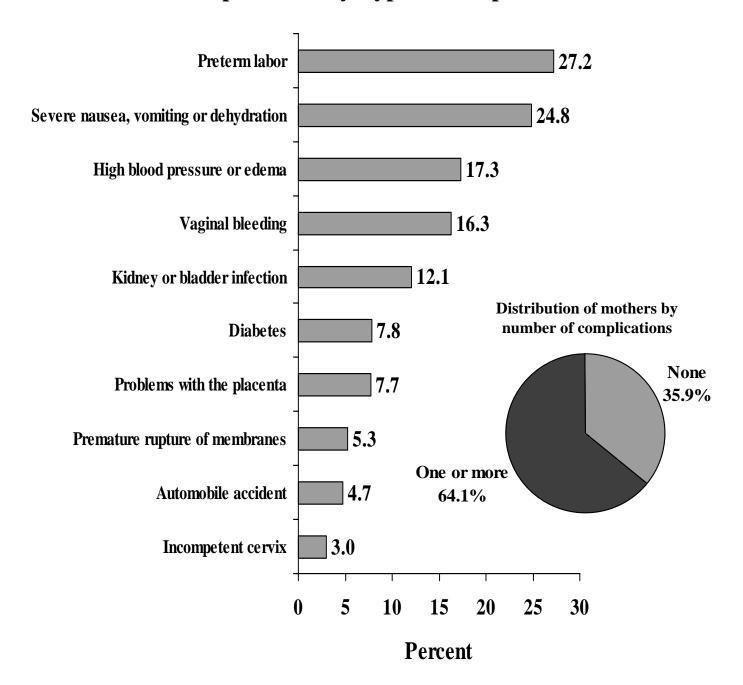
Percentage of Mothers Reporting Stress by Type of Event



COMPLICATIONS DURING PREGNANCY

Question 30: Did you have any of these problems during your pregnancy?

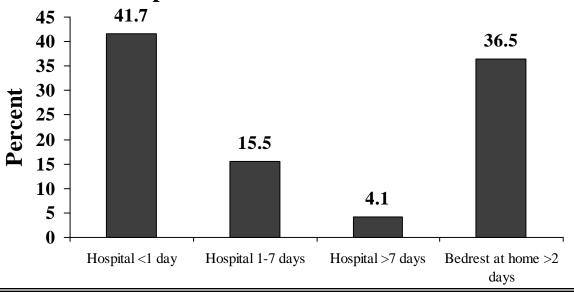
Percentage of Mothers Reporting Pregnancy Complications by Type of Complication



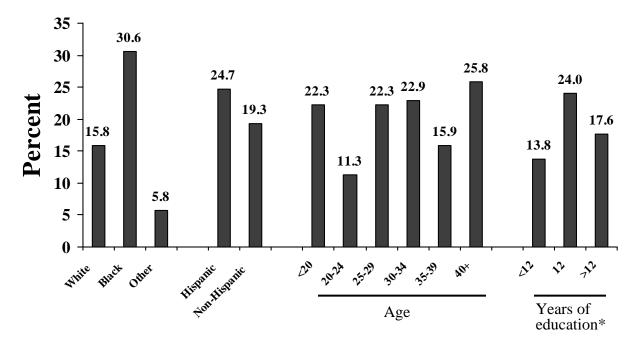
HOSPITAL ADMISSIONS AND BEDREST

Question 31: Did you do any of the following things because of these problem(s)? (Note: Refers to problems listed in Question 30)

Percentage of Mothers With Problems During Pregnancy Who Had Hospital Admissions or Were Advised Bedrest.



Percentage of Mothers With Problems During Pregnancy Who Spent One or More Days in the Hospital

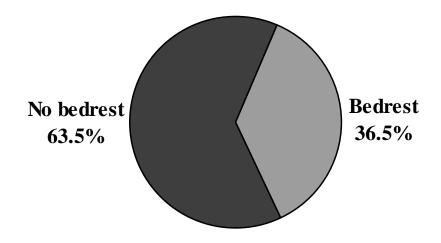


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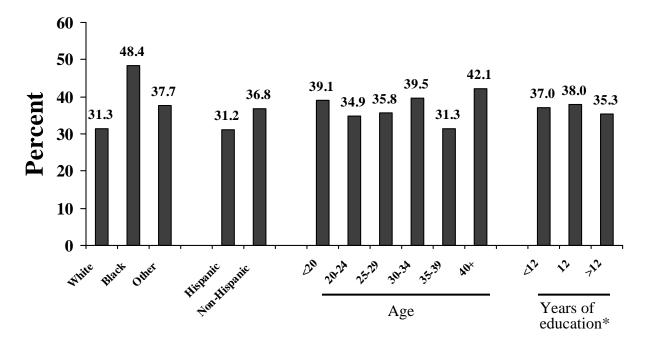
BEDREST DURING PREGNANCY

Question 32: At any time during your most recent pregnancy, were you told to stay in bed for at least one week?

Distribution of Mothers by Report of Having Been Told to Stay in Bed for One or More Weeks During Pregnancy.



Percentage of Mothers Who Reported Having Been Told to Stay in Bed for One or More Weeks During Pregnancy

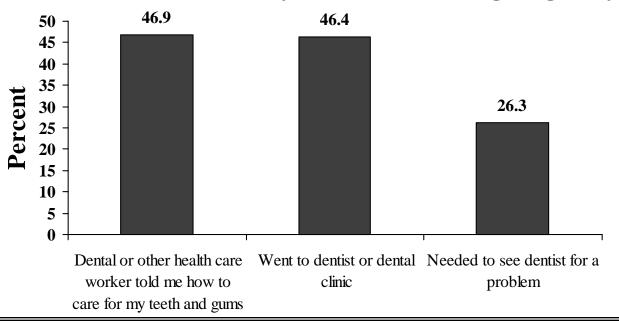


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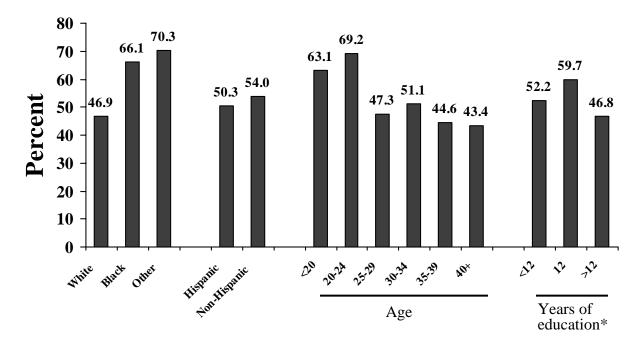
DENTAL CARE DURING PREGNANCY

Question 82: This question is about the care of your teeth during your most recent pregnancy. (Indicate all that apply)

Distribution of Mothers by Dental Care During Pregnancy

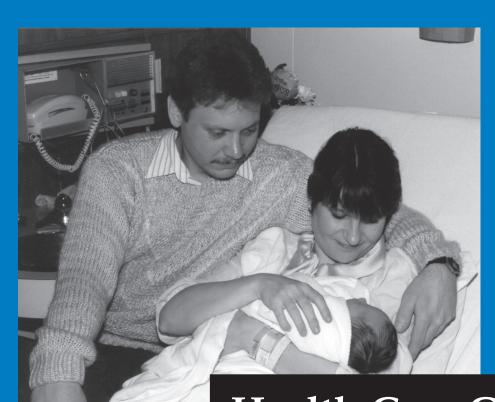


Percentage of Mothers Who Did Not Report Going to a Dentist or Dental Clinic During Pregnancy



^{*}Includes only mothers ages 20 and above.















"WIC was a great help to me throughout my pregnancy and now."

"... I would encourage Maryland to pursue legislation that would extend leave for mothers -- both paid and unpaid leave. . . "

"I want to get my tubes tied but have no insurance."

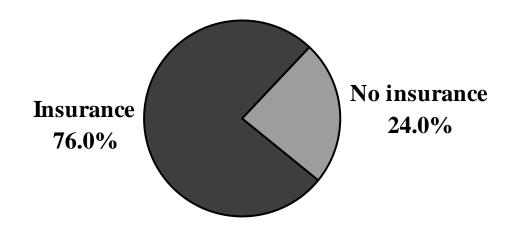
PRAMS mothers

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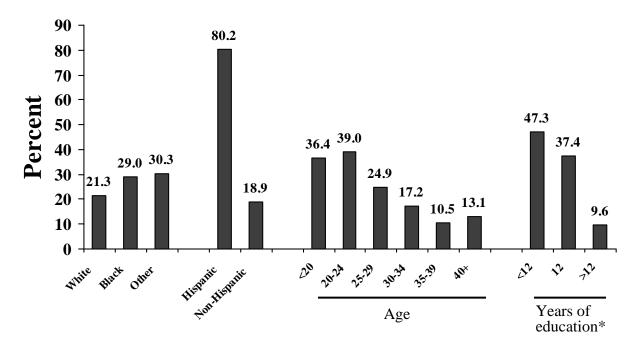
HEALTH INSURANCE BEFORE PREGNANCY

Question 1: *Just before* you got pregnant, did you have health insurance? (Do not count Medicaid [including HealthChoice]).

Distribution of Mothers by Health Insurance Status Just Before Pregnancy



Percentage of Mothers Who Reported Having No Health Insurance Just Before Pregnancy

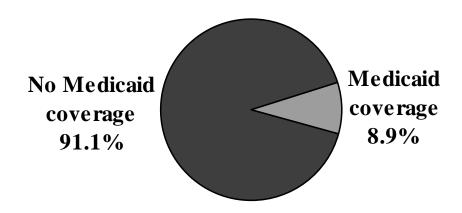


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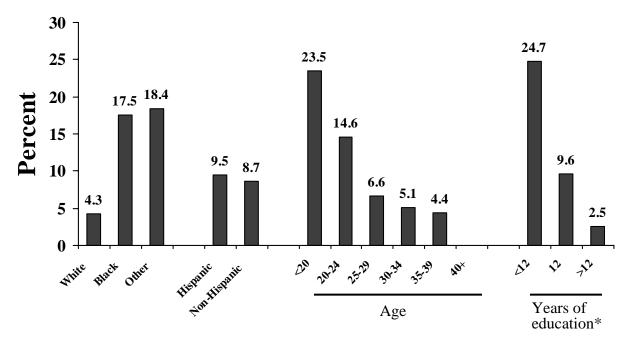
MEDICAID BEFORE PREGNANCY

Question 2: Just before you got pregnant, were you on Medicaid (including HealthChoice)?

Distribution of Mothers by Medicaid Coverage Just Before Pregnancy



Percentage of Mothers Who Reported Having Medicaid Coverage Just Before Pregnancy

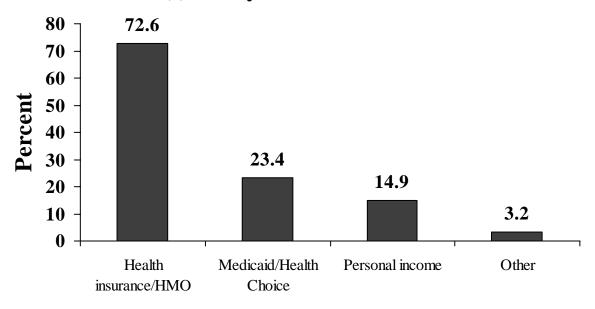


^{*}Includes only mothers ages 20 and above.

SOURCE OF PAYMENT FOR PRENATAL CARE

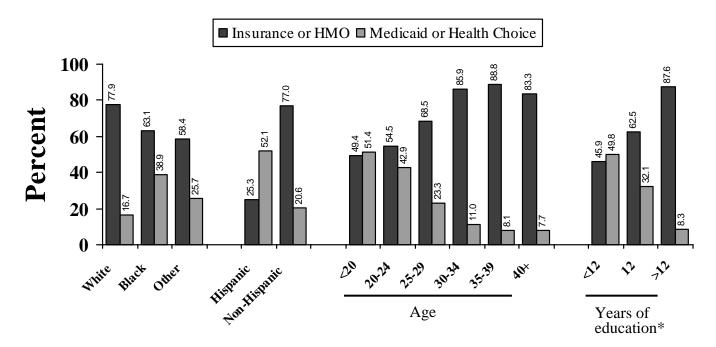
Question 23: How was your prenatal care paid for? Check all that apply.

Source(s) of Payment for Prenatal Care*



^{*}Respondents were instructed to identify all sources of payment, therefore percentages do not sum to 100.

Percentage of Mothers Who Identified Insurance/HMO or Medicaid/Health Choice as a Source of Payment for Prenatal Care

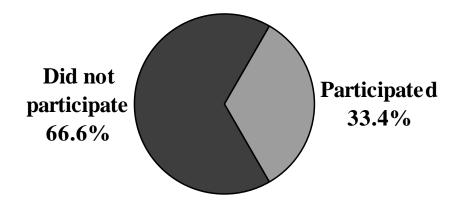


^{*}Includes only mothers ages 20 and above.

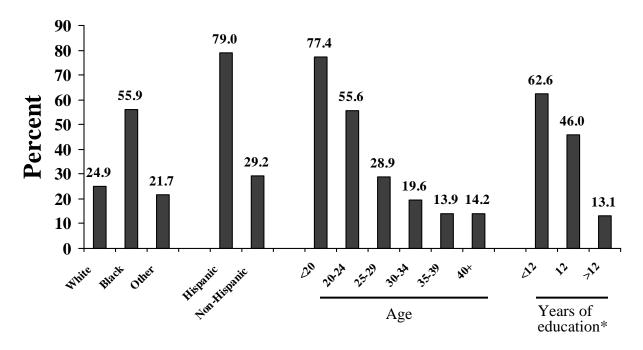
WIC PARTICIPATION

Question 29: During your pregnancy, were you on WIC (the Special Supplemental Nutrition Program for Women, Infants and Children)?

Distribution of Mothers by Participation in the WIC Program During Pregnancy



Percentage of Mothers Who Participated in the WIC Program During Pregnancy

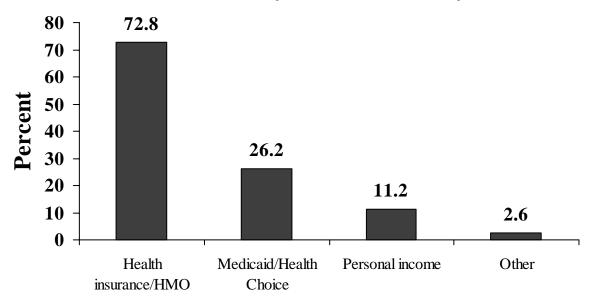


^{*}Includes only mothers ages 20 and above.

SOURCE OF PAYMENT FOR DELIVERY

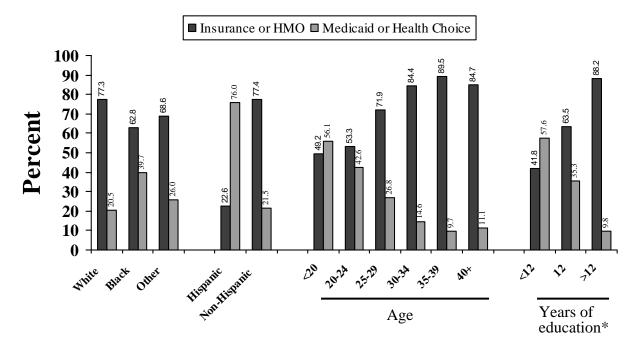
Question 54: How was your delivery paid for? Check all that apply.

Source(s) of Payment for Delivery*



^{*}Respondents were instructed to identify all sources of payment, therefore percentages do not sum to 100.

Percentage of Mothers Who Identified Insurance/HMO or Medicaid/Health Choice as a Source of Payment for Delivery



^{*}Includes only mothers ages 20 and above.

















"Keep stressing the importance of seat belts and properly used infant car seats for children. I see too many parents driving without using them and I worry for those helpless children."

"Creo que toda mujer antes, durante y despues del embarazo debe cuidar mucho su salud. No fumar, no usar bebidas alcohólicas, ni ningun tipo de drogas porque asi se puede prevenir problemas durante el embarazo."

(I think all women before, during, and after pregnancy should really take care of their health. Don't smoke, don't drink, don't do any type of drugs because that is how you can prevent problems during the pregnancy.)

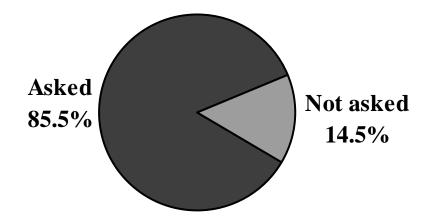
"I was smoking but once I found out (I was pregnant)
"I stopped."

PRAMS mothers

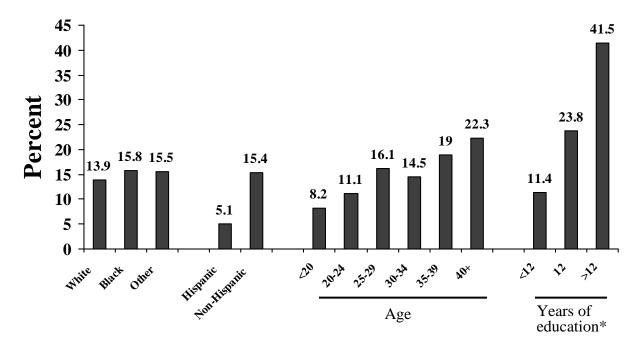
SMOKING AND PRENATAL CARE

Question 26: At any time during your prenatal care, did a doctor, nurse, or other health care worker ask if you were smoking cigarettes?

Distribution of Mothers By Report of Having Been Asked About Smoking During Prenatal Care



Percentage of Mothers Who Reported They Were Not Asked About Smoking During Prenatal Care

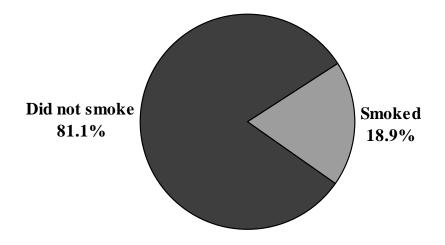


^{*}Includes only mothers ages 20 and above.

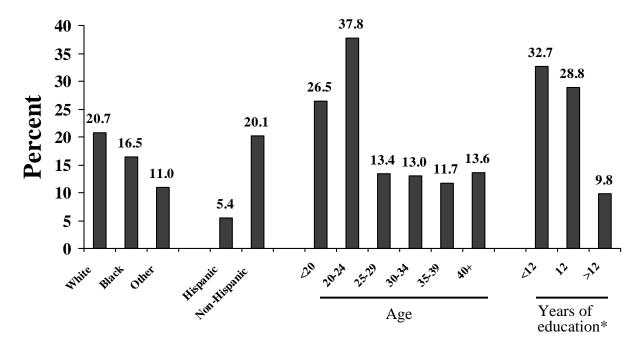
SMOKING BEFORE PREGNANCY

Question 39: In the *three months before* you got pregnant, how many cigarettes or packs of cigarettes did you smoke on an average day?

Distribution of Mothers by Smoking Status During the Three Month Period Before Pregnancy Began



Percentage of Mothers Who Reported They Smoked During the Three Month Period Before Pregnancy Began

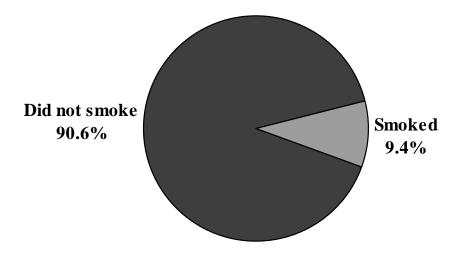


^{*}Includes only mothers ages 20 and above.

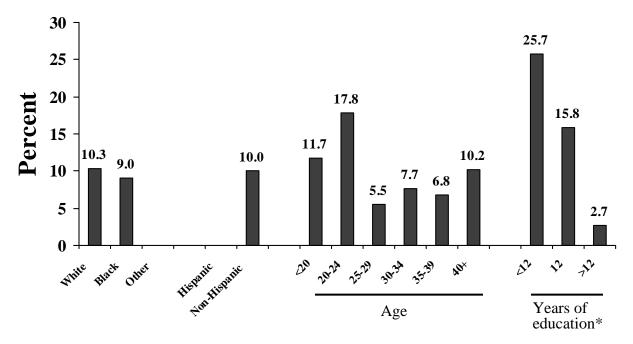
SMOKING DURING PREGNANCY

Question 40: In the *last three months* of your pregnancy, how many cigarettes or packs of cigarettes did you smoke on an average day?

Distribution of Mothers by Smoking Status During the Last Three Months of Pregnancy



Percentage of Mothers Who Reported They Smoked During the Last Three Months of Pregnancy

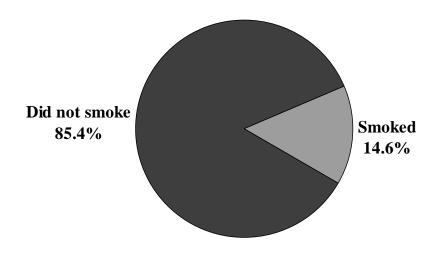


^{*}Includes only mothers ages 20 and above.

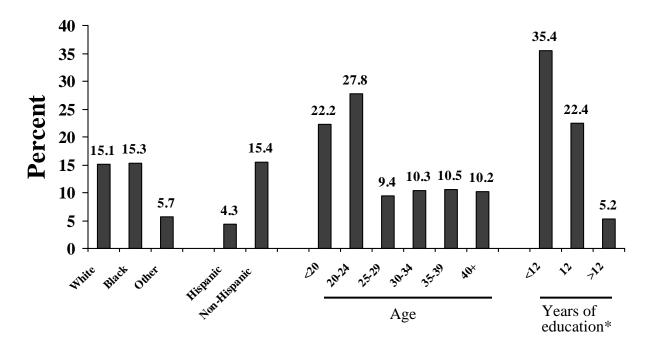
SMOKING AFTER PREGNANCY

Question 41: How many cigarettes or packs of cigarettes do you smoke on an average day now?

Distribution of Mothers by Smoking Status in the Postpartum Period



Percentage of Mothers Who Reported They Smoked in the Postpartum Period

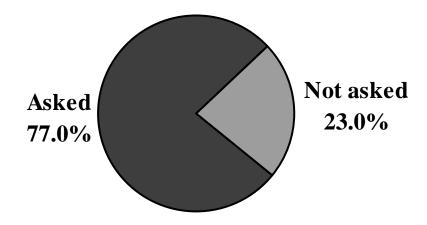


^{*}Includes only mothers ages 20 and above.

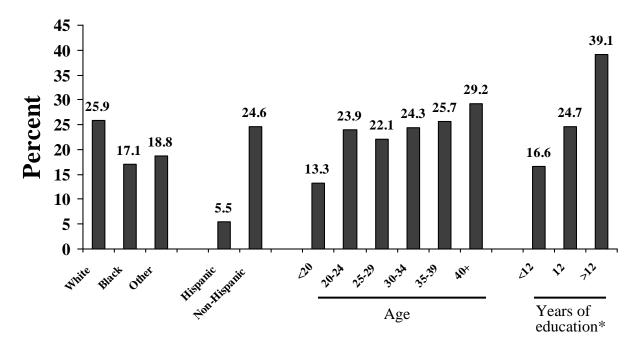
ALCOHOL USE AND PRENATAL CARE

Question 27: At any time during your prenatal care, did a doctor, nurse, or other health care worker ask if you were drinking alcoholic beverages (beer, wine, wine cooler or liquor)?

Distribution of Mothers by Report of Having Been Asked About Alcohol Use During Prenatal Care



Percentage of Mothers Who Reported They Were Not Asked About Alcohol Use During Prenatal Care

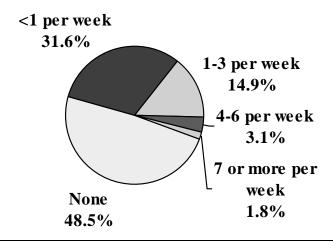


^{*}Includes only mothers ages 20 and above.

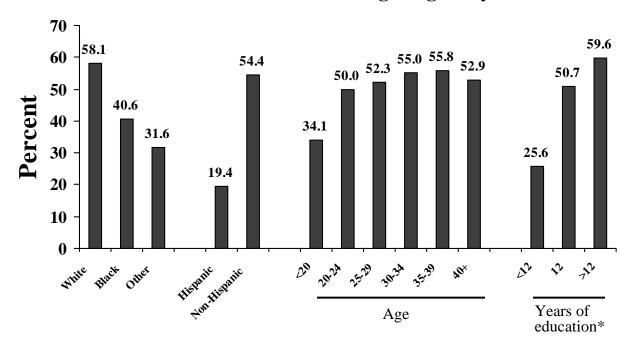
ALCOHOL USE BEFORE PREGNANCY

Question 43a: During the *3 months before* you got pregnant, how many alcoholic drinks did you have in an average week?

Distribution of Mothers by the Number of Alcoholic Drinks During the Three Month Period Preceding Pregnancy



Percentage of Mothers Who Reported Any Alcohol Use in the Three Months Preceding Pregnancy

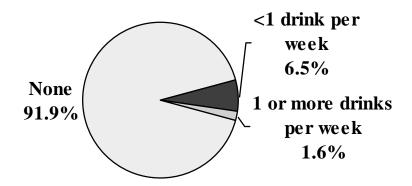


^{*}Includes only mothers ages 20 and above.

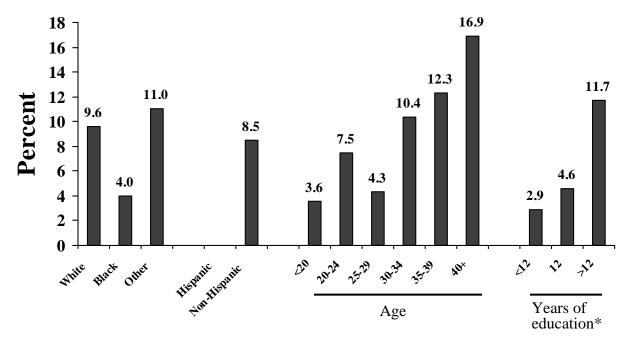
ALCOHOL USE DURING PREGNANCY

Question 44a: During the *last 3 months* of your pregnancy, how many alcoholic drinks did you have in an average week?

Distribution of Mothers by the Number of Alcoholic Drinks During the Last Three Months of Pregnancy



Percentage of Mothers Who Reported Any Alcohol Use in the Last Three Months of Pregnancy

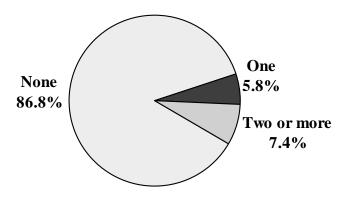


^{*}Includes only mothers ages 20 and above.

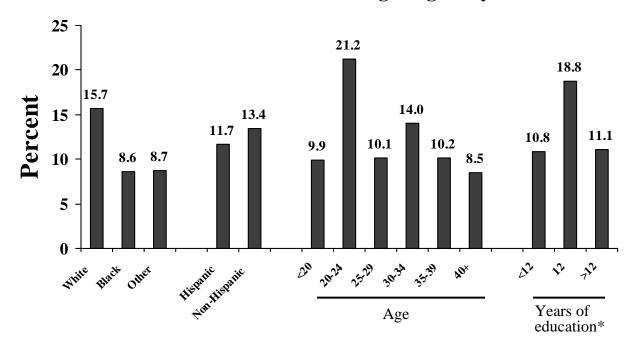
ALCOHOL BINGES BEFORE PREGNANCY

Question 43b: During the *3 months before* your got pregnant, how many times did you drink 5 alcoholic drinks or more in one sitting?

Distribution of Mothers by the Number of Alcohol Binges (5+ Drinks in One Sitting) During the Three Month Period Preceding Pregnancy



Percentage of Mothers Who Reported Any Binge Drinking in the Three Months Preceding Pregnancy

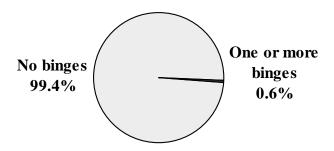


^{*}Includes only mothers ages 20 and above.

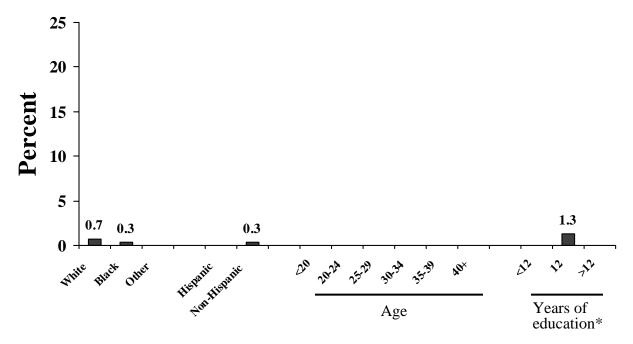
ALCOHOL BINGES DURING PREGNANCY

Question 44b: During the *last 3 months of* your pregnancy, how many times did you drink 5 alcoholic drinks or more in one sitting?

Distribution of Mothers by the Number of Alcohol Binges (5+ Drinks in One Sitting) During the Last Three Months of Pregnancy



Percentage of Mothers Who Reported Any Binge Drinking During the Last Three Months of Pregnancy

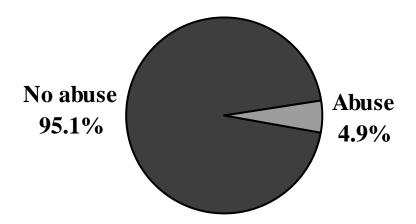


^{*}Includes only mothers ages 20 and above.

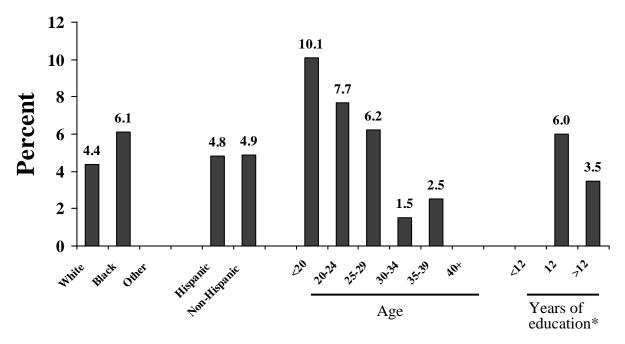
PHYSICAL ABUSE BEFORE PREGNANCY

Question 46a: *During the 12 months before you got pregnant*, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?

Distribution of Mothers by Abuse Before Pregnancy by Husband or Partner



Percentage of Mothers Who Reported Having Been Physically Abused Before Pregnancy by Their Husband or Partner

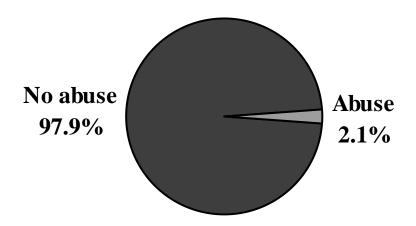


^{*}Includes only mothers ages 20 and above.

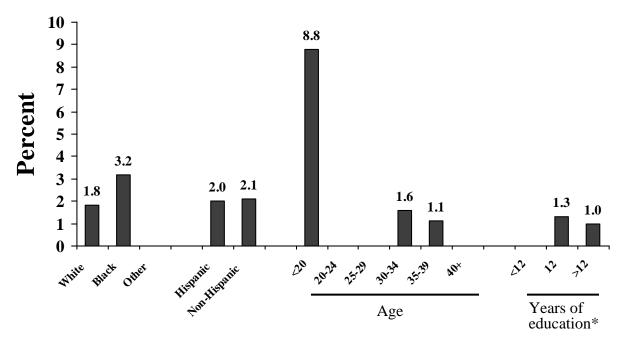
PHYSICAL ABUSE BEFORE PREGNANCY

Question 46b: *During the 12 months before you got pregnant*, did anyone else push, hit, slap, kick, choke, or physically hurt you in any other way?

Distribution of Mothers by Abuse Before Pregnancy by Non-Partner



Percentage of Mothers Who Reported Having Been Physically Abused Before Pregnancy by Non-Partner

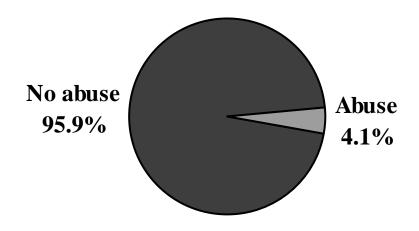


^{*}Includes only mothers ages 20 and above.

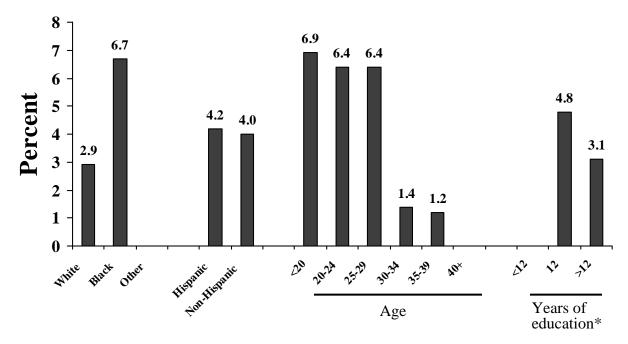
PHYSICAL ABUSE DURING PREGNANCY

Question 47a: *During your most recent pregnancy*, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?

Distribution of Mothers by Abuse During Pregnancy by Husband or Partner



Percentage of Mothers Who Reported Having Been Physically Abused During Pregnancy by Their Husband or Partner

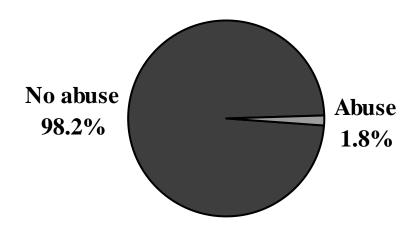


^{*}Includes only mothers ages 20 and above.

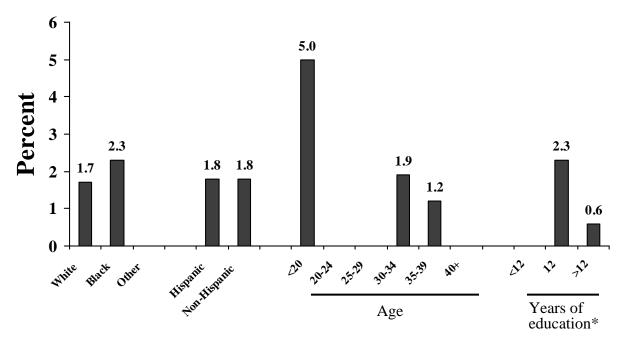
PHYSICAL ABUSE DURING PREGNANCY

Question 47b: *During your most recent pregnancy*, did anyone else push, hit, slap, kick, choke, or physically hurt you in any other way?

Distribution of Mothers by Abuse by Non-Partner During Pregnancy



Percentage of Mothers Who Reported Having Been Physically Abused Before Pregnancy by Non-Partner

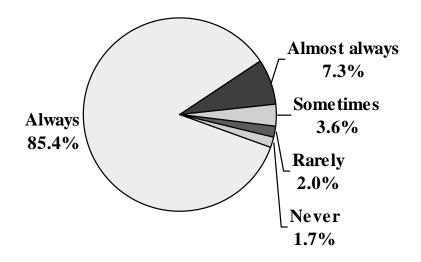


^{*}Includes only mothers ages 20 and above.

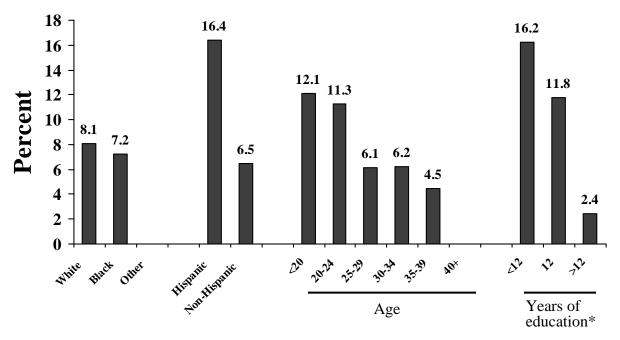
SEAT BELT USE DURING PREGNANCY

Question 83: During the last three months of your most recent pregnancy, how often did you wear a seat belt when you drove or rode in a car?

Distribution of Mothers by Seat Belt Use During the Last Three Months of Pregnancy



Percentage of Mothers Who Reported They Did Not Always or Almost Always Wear a Seat Belt During the Last Three Months of Pregnancy

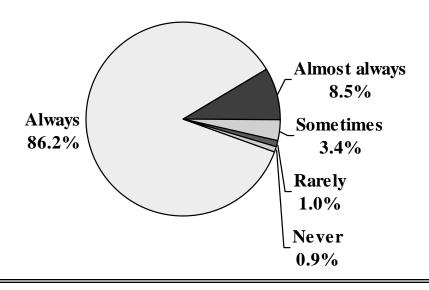


^{*}Includes only mothers ages 20 and above.

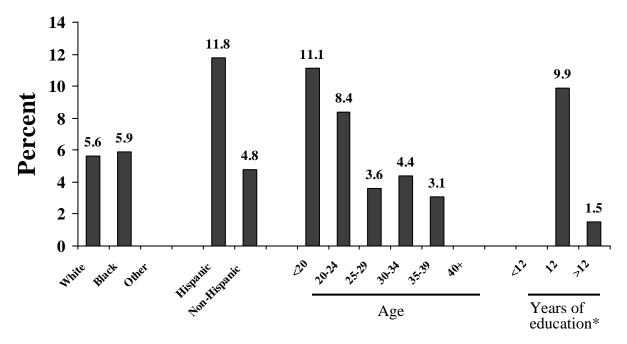
POSTPARTUM SEAT BELT USE

Question 84: Since you delivered your new baby, how often do you wear a seat belt when you drive or ride in a car?

Distribution of Mothers by Postpartum Seat Belt Use



Percentage of Mothers Who Reported They Did Not Always or Almost Always Wear a Seat Belt in the Postpartum Period

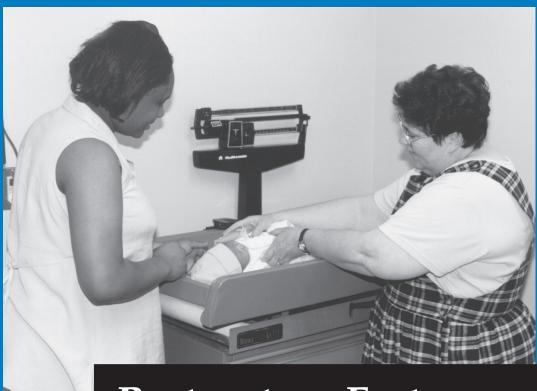


^{*}Includes only mothers ages 20 and above.









Postpartum Factors: Maternal and Infant Health









"I know many new parents who are stressed out about a baby's crying, etc., and don't know where to turn for help. I think there should be a new parent support group"

"After my baby was born, the full weight of the depression set in."

"Having a baby was the greatest thing that ever happened to me."

"I think more mothers would breastfeed if better informed."

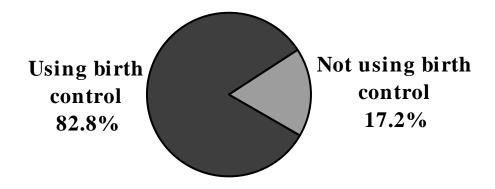
"I was fortunate to have had my first child in Europe. . . and was visited daily for 10 days after being released from the hospital and weekly for the first six months. Because of these visits, I stuck with breastfeeding and my postnatal depression was diagnosed and treated quickly."

PRAMS mothers

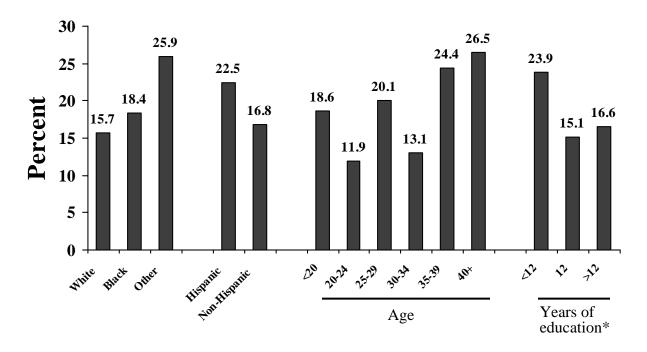
POSTPARTUM BIRTH CONTROL

Question 72: Are you or your husband or partner doing anything now to keep from getting pregnant?

Distribution of Mothers by Use of Postpartum Birth Control



Percentage of Mothers Who Reported No Use of Postpartum Birth Control

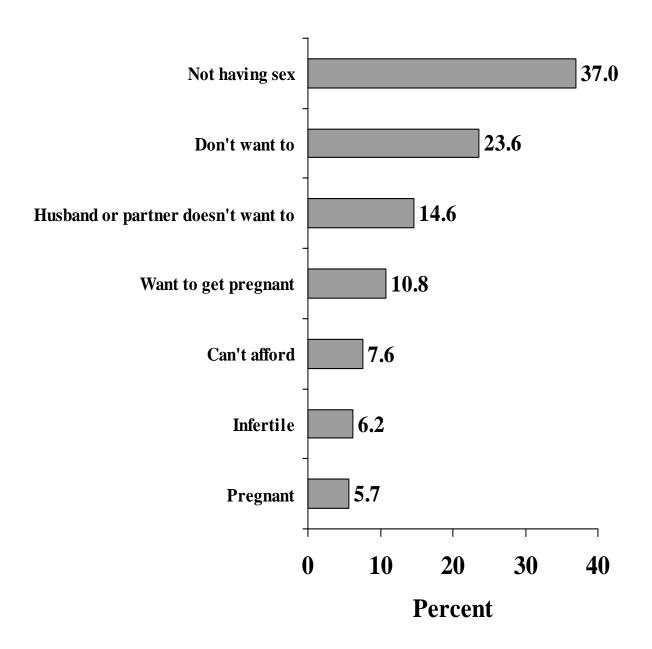


^{*}Includes only mothers ages 20 and above.

REASONS FOR NO POSTPARTUM BIRTH CONTROL

Question 73: What are your or your husband's or partner's reasons for not doing anything to keep from getting pregnant *now*?

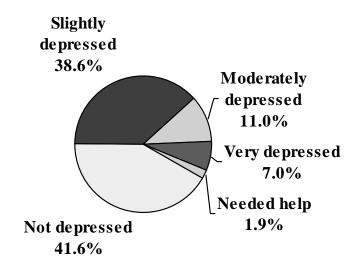
Reasons Reported for Not Using Postpartum Birth Control



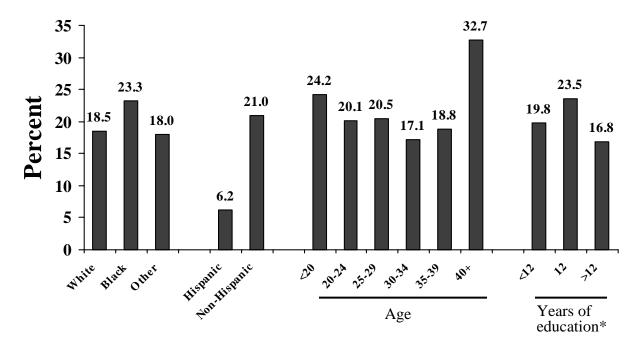
POSTPARTUM DEPRESSION

Question 75: In the months after your delivery, would you say that you were not depressed at all, a little depressed, moderately depressed, very depressed, or very depressed and had to get help?

Distribution of Mothers by Level of Postpartum Depression



Percentage of Mothers Who Reported Being at Least Moderately Depressed

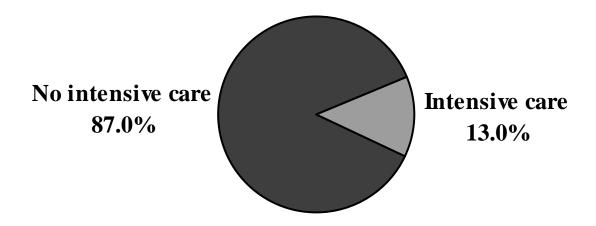


^{*}Includes only mothers ages 20 and above.

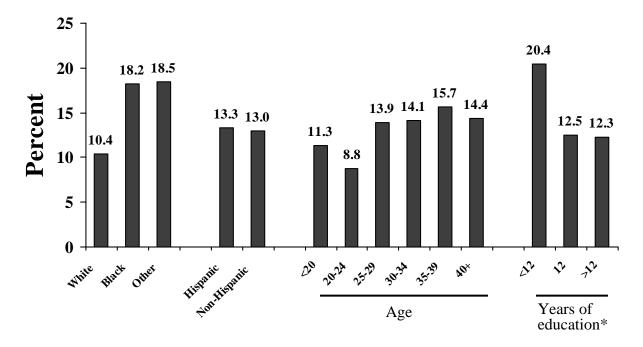
NEONATAL INTENSIVE CARE

Question 52: After your baby was born, was he or she put in an intensive care unit?

Distribution of Infants by Admission to a Neonatal Intensive Care Unit



Percentage of Mothers Who Reported Their Newborn was Admitted to the Neonatal Intensive Care Unit

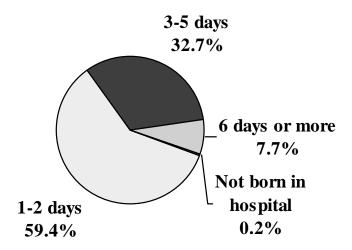


^{*}Includes only mothers ages 20 and above.

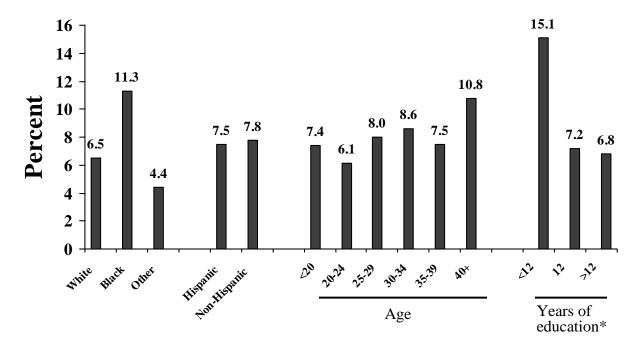
LENGTH OF HOSPITAL STAY--NEWBORN

Question 53: After your baby was born, how long did he or she stay in the hospital?

Distribution of Infants by Length of Hospital Stay



Percentage of Mothers Who Reported that Newborn Stayed in the Hospital for Six or More Days

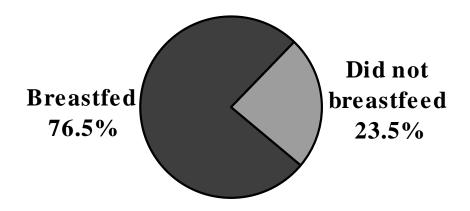


^{*}Includes only mothers ages 20 and above.

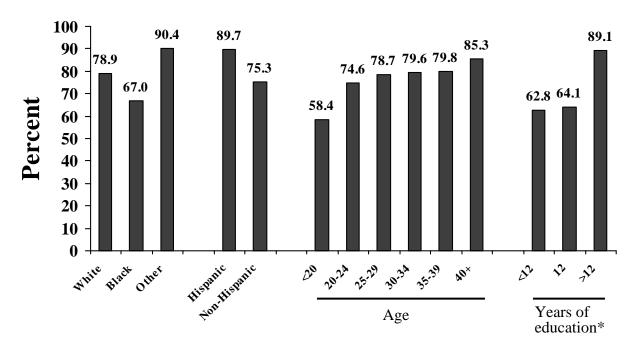
BREASTFEEDING INITIATION

Question 59: Did you ever breastfeed or pump breast milk to feed your new baby after delivery?

Distribution of Mothers by Breastfeeding Status



Percentage of Mothers Who Reported Ever Breastfeeding Their Infant

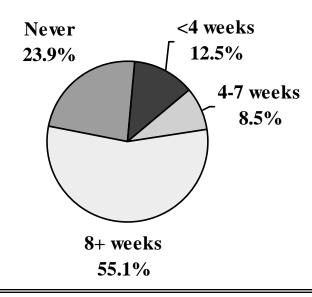


^{*}Includes only mothers ages 20 and above.

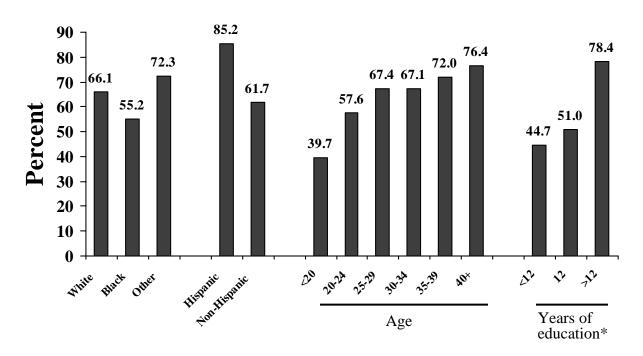
BREASTFEEDING

Question 61: How many weeks or months did you breastfeed or pump milk to feed your baby?

Distribution of Mothers by Length of Time Infant Was Breastfed



Percentage of Mothers Who Reported Breastfeeding for Four or More Weeks

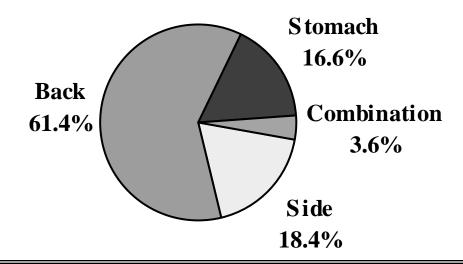


^{*}Includes only mothers ages 20 and above.

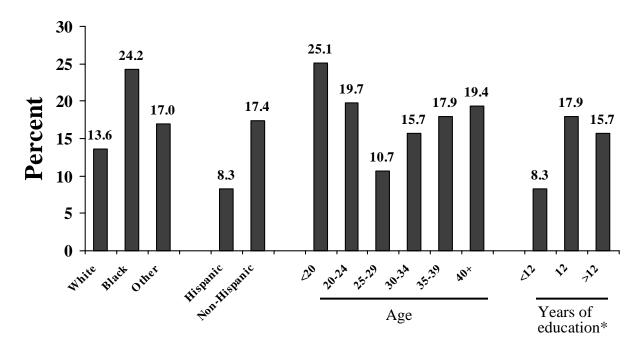
SLEEP POSITION

Question 64: How do you most often lay your baby down to sleep now?

Distribution of Infants by Sleep Position



Percentage of Infants Usually Placed on Stomach to Sleep

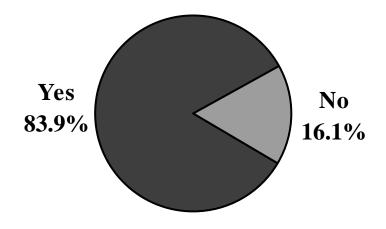


^{*}Includes only mothers ages 20 and above.

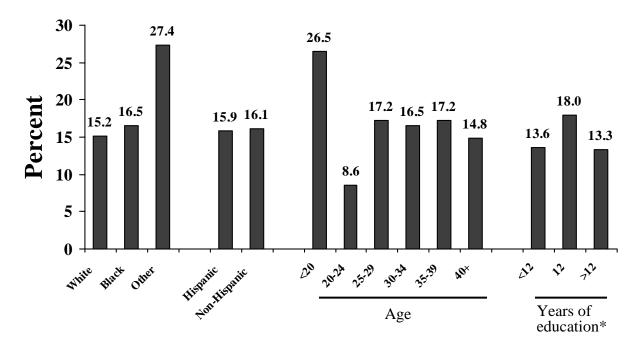
INFANT HEALTH CARE VISIT

Question 67: Was your baby seen by a doctor, nurse, or other health care provider in the first week after he or she left the hospital?

Distribution of Births by Health Care Visit in the First Week After Leaving the Hospital



Percentage of Mothers Who Reported Their Baby Did Not Have a Health Care Visit in the First Week After Leaving the Hospital



^{*}Includes only mothers ages 20 and above.







Pregnancy Risk Assessment Monitoring System

A Survey of the Health of Mothers and Babies in Maryland

Your help is greatly appreciated.

For further information, please call:

PRAMS Coordinator 1-877-363-0480

Maryland PRAMS Phase 4 Questionnaire

Center for Maternal and Child Health

Maryland Department of Health and Mental Hygiene 201 West Preston Street, 3rd Floor Baltimore, MD 21201



Sistema de Evaluación del Riesgo en el Embarazo

Una Encuesta Sobre la Salud de las Madres y de los Bebés en Maryland

Agradecemos su participación en esta encuesta.

Para información adicional, llame a:

Coordinador del Proyecto PRAMS 1-877-363-0480

Centro de Salud Materno Infantil Departmento de Salud e Higiene Mental de Maryland 201 W. Preston Street, 3rd Floor Baltimore, MD 21201









"Doctors and nurses should ask the questions you guys ask on the survey."

"The questionnaire was very insightful for mothers like me. Thanx for including me in the survey."

"Thank you for taking an interest in health care of mothers and babies."

PRAMS mothers

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Just before you got pregnant, did you have health insurance? (Do not count Medicaid [including Healthchoice].) No Yes *Just before* you got pregnant, were you on Medicaid (including HealthChoice)? No Yes In the month before you got pregnant with your new baby, how many times a week did you take a multivitamin (a pill that contains many different vitamins and minerals)? I did not take a multivitamin at all 1 to 3 times a week 4 to 6 times a week Every day of the week What is your date of birth? Month Day Year *Just before* you got pregnant, how much did you weigh? Pounds OR **Kilos** How tall are you without shoes? Feet Inches OR Centimeters *Before* your new baby, did you ever have any other babies who were born alive? No \rightarrow Go to Question 11 Yes

First, we would like to ask a few questions about you and the time before you got pregnant with your

new baby. Please check the box next to your answer.

| 8 | Did the baby born just before your new one weigh 5 pounds, 8 ounces (2.5 kilos) <i>or less</i> at birth? No Yes |
|----|--|
| 9 | Was the baby just before your new one born <i>more</i> than 3 weeks before its due date? No Yes |
| 10 | How old were you when you got pregnant with your first baby? Years old |
| | How old were you when you had your first menstrual period? Years old |
| Th | e next questions are about just before you became pregnant with your new baby. |
| 12 | Thinking back to <i>just before</i> you got pregnant, how did you feel about becoming pregnant? <i>Check one answer</i> . 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 |
| 13 | When you got pregnant with your new baby were you trying to become pregnant? □ No □ Yes → Go to Question 16 |
| 14 | When you got pregnant with your new baby, were you or your husband or partner doing anything to keep from getting pregnant? (Some things people do to keep from getting pregnant include not having sex at certain times [rhythm], and using birth control methods such as the pill, Norplant®, shots [Depo-Provera®], condoms, diaphragm, foam, IUD, having their tubes tied, or their partner having a vasectomy.) □ No □ Yes → Go to Question 18 |

| 15 | What were you or your husband or partner's reasons for not doing anything to keep from getting pregnant? Check all that apply, then go to Question 18. |
|-----------|---|
| | ☐ 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 partner or I was sterile (could not get pregnant at all) ☐ My husband or partner did not want to use anything ☐ Other Please tell us: |
| | |
| | |
| 16 | Did you take any fertility drugs to help you get pregnant with your new baby? (Fertility drugs include Clomid®, Serophene®, Pergonal® or any other drugs which you may have taken to help you get pregnant.) |
| | □ No □ Yes |
| 17 | Did you use any medical procedures (assisted reproductive technology) to help you get pregnant with your new baby? (Assisted reproductive technology procedures include in vitro fertilization [IVF], GIFT, ZIFT, embryo transfer, and donor oocytes.) |
| | □ No □ Yes |
| Pro to | ne next questions are about the prenatal care you received during your most recent pregnancy. enatal care includes visits to a doctor, nurse, or other health care worker before your baby was born get checkups and advice about pregnancy. (It may help to look at a calendar when you answer these estions.) |
| 18 | How many weeks or months pregnant were you when you were <i>sure</i> 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 |
| 19 | How many weeks or months pregnant were you when you had your first visit for prenatal care? (Don't count a visit that was only for a pregnancy test or only for WIC [the Special Supplemental Nutrition Program for Women, Infants, and Children].) |
| | Weeks OR Months I didn't go for prenatal care |
| | |

| 20 | Did you get prenatal care as early in your pregnancy as you wanted? |
|------|---|
| | □ No |
| | |
| | \Box I did not want prenatal care \rightarrow Go to Question 22 |
| | I that not want prenatal care / Go to Question 22 |
| 21 | Did any of these things keep you from getting prenatal care as early as you wanted? Check all that apply. |
| | I couldn't get an appointment earlier in my pregnancy I didn't have enough money or insurance to pay for my visits I didn't know that I was pregnant I had no way to get to the clinic or doctor's office The doctor or my health plan would not start care earlier |
| | I didn't have my Medicaid card |
| | I had no one to take care of my children |
| | I had too many other things going on |
| | Other Please tell us: |
| | Other I teuse ten us. |
| | |
| | |
| | |
| | |
| If y | you did not go for prenatal care, go to Question 28. |
| 22 | Where did you go <i>most of the time</i> for your prenatal visits? (Do not include visits for WIC.) Check one |
| | answer. |
| | |
| | Hospital clinic |
| | Health department clinic |
| | Private doctor's office or HMO clinic |
| | Other Please tell us: |
| | |
| | |
| | |
| | |
| 23 | How was your prenatal care paid for? Check all that apply. |
| | ☐ Medicaid (including HealthChoice) |
| | Personal income (cash, check, or credit card) |
| | Health insurance or HMO |
| | Other Please tell us: |
| | |
| | |
| | |
| | |
| | |
| | |

| 24 | During any of your prenatal care visits, did a doctor, nurse, or other habout any of the things listed below? (Please count only discussions, eos.) For each item, circle Y (Yes) if someone talked with you about it or cirabout it. | not rea cle N (N | ding materials or vid- No) if no one talked with yo | |
|------------|--|---------------------|--|-------|
| | | No | Yes | |
| | a. How smoking during pregnancy could affect your baby | N | Y | |
| | b. Breastfeeding your baby | N | Y | |
| | c. How drinking alcohol during pregnancy could affect your baby | N | Y | |
| | d. Using a seat belt during your pregnancy | N | Y | |
| | e. Birth control methods to use after your pregnancy | N | Y | |
| | f. Medicines that are safe to take during your pregnancy | N | Y | |
| | g. How using illegal drugs could affect your baby | N | Y | |
| | h. Doing tests to screen for birth defects or diseases that run | | | |
| | in your family | N | Y | |
| | i. What to do if your labor starts early | N | Y | |
| | j. Getting your blood tested for HIV(the virus that causes AIDS) | N | Y | |
| | k. Physical abuse to women by their husbands or partners | N | Y | |
| 4 0 | We would like to know how you felt about the prenatal care you got nancy. If you went to more than one place for prenatal care, answer f your care. For each item, circle Y (Yes) if you were satisfied or N (No) if you were you satisfied with | or the j | place where you got mos not satisfied. | st of |
| | | | No Yes | |
| | a. The amount of time you had to wait after you arrived for your vis | | N Y | |
| | b. The amount of time the doctor or nurse spent with you during you | ur visit | | |
| | c. The advice you got on how to take care of yourself | | N Y | |
| | d. The understanding and respect that the staff showed toward you | as a | | |
| | person | | N Y | |
| 26 | At any time during your prenatal care, did a doctor, nurse, or other h smoking cigarettes? No Yes | ealth ca | are worker ask if you wo | ere |
| 27 | At any time during your prenatal care, did a doctor, nurse, or other hadrinking alcoholic beverages (beer, wine, wine cooler, or liquor)? No Yes | ealth ca | are worker ask if you we | ere |
| 28 | Have you ever heard or read that taking the vitamin folic acid can hell No Yes | lp prev | ent some birth defects? | |
| Th | e next questions are about your most recent pregnancy and things th | nat mig | tht have happened duri | ng |

| your pregnancy. | | | |
|-----------------|---|-------------|-------------------------------|
| 2 9 | During your pregnancy, were you on WIC (the Special Supplement Infants and Children)? | ıtal Nutrit | ion Program for Women, |
| | □ No □ Yes | | |
| 30 | Did you have any of these problems during your pregnancy? <i>For problem and N (No) if you did not.</i> | each item, | circle Y (yes) if you had the |
| | | No | Yes |
| | a. Labor pains more than 3 weeks before your baby was due | | |
| | (preterm or early labor) | N | Y |
| | b. High blood pressure (including pre-eclampsia or toxemia) or retained water (edema) | N | Y |
| | c. Vaginal bleeding | N | Y |
| | d. Problems with the placenta (such as abruptio placental, | 1 N | 1 |
| | placenta previa) | N | Y |
| | e. Severe nausea, vomiting or dehydration | N | Y |
| | f. High blood sugar (diabetes) | N | Y |
| | g. Kidney or bladder (urinary tract) infection | N | Y |
| | h. Water broke more than 3 weeks before your baby was due | | |
| | (premature rupture of membranes, PROM) | N | Y |
| | i. Cervix had to be sewn shut (incompetent cervix, cerclage) | N | Y |
| | j. You were injured in a car accident | N | Y |
| If : | you did not have any of these problems, go to Question 36. | | |
| 31 | Did you do any of the following things because of these problem(s | s)? Check a | ll that apply. |
| | I went to the hospital or emergency room and stayed less than I went to the hospital and stayed 1-7 days | 1 day | |
| | ☐ I went to the hospital and stayed more than 7 days | | |
| | I stayed in bed at home more than 2 days because of my docto | r or nurse | 's advice |
| 32 | At any time during your most recent pregnancy, were you told to | stay in be | d for at least one week? |
| | \square No \rightarrow Go to Question 36 \square Yes | | |
| 33 | How many weeks or months pregnant were you when you were to | old to stay | in bed? |
| | Weeks OR Months | | |
| | | | |

| 34 | How often were you able to follow your provider's instruction to stay in bed? |
|----|--|
| | |
| 35 | What types of support would have helped you to stay in bed for the recommended time? <i>Check all that apply.</i> |
| | Help with child care Help with housework Knowing I wouldn't lose my job Money to make up for not working Other Please tell us: |
| | |
| | |
| 36 | Have you ever had German measles (rubella) or been vaccinated for German measles? No Yes |
| 37 | Have you ever had chickenpox (varicella) or been vaccinated for chickenpox? |
| | □ No □ Yes |
| Th | e next questions are about smoking cigarettes and drinking alcohol. |
| | |
| 38 | Have you smoked at least 100 cigarettes in the past 2 years? (A pack has 20 cigarettes) |
| | \square No \rightarrow Go to Question 42 \square Yes |
| 39 | In the <i>3 months before</i> you got pregnant, how many cigarettes or packs of cigarettes did you smoke on an average day? (A pack has 20 cigarettes) |
| | Cigarettes OR Packs Less than 1 cigarette a day I didn't smoke I don't know |

| average day? | an |
|---|----|
| Cigarettes OR Packs Less than 1 cigarette a day I didn't smoke I don't know | |
| 41 How many cigarettes or packs of cigarettes do you smoke on an average day <i>now</i> ? | |
| Cigarettes OR Packs Less than 1 cigarette a day I don't smoke I don't know | |
| Have you had any alcoholic drinks in the past 2 years? (A drink is 1 glass of wine, wine cooler, can bottle of beer, shot of liquor, or mixed drink.) | or |
| No → Go to Page 73, Question 45Yes | |
| 43a During the 3 months before you got pregnant, how many alcoholic drinks did you have in an average week? | ŝ |
| I didn't drink then Less than 1 drink a week 1 to 3 drinks a week 4 to 6 drinks a week 7 to 13 drinks a week 14 drinks or more a week I don't know | |
| During the 3 months before you got pregnant, how many times did you drink 5 or more alcoholic drinks in one sitting? | |
| Times I didn't drink then I don't know | |
| | |

| 44a During the <i>last 3 months</i> of your pregnancy, how many alcoholic drinks did week? | d you ha | ve in an average | |
|---|--|---|-----|
| ☐ I didn't drink then ☐ Less than 1 drink a week ☐ 1 to 3 drinks a week ☐ 4 to 6 drinks a week ☐ 7 to 13 drinks a week ☐ 14 drinks or more a week ☐ I don't know | | | |
| 44b During the <i>last 3 months</i> of your pregnancy, how many times did you drink in one sitting? Times I didn't drink then | k 5 or m | ore alcoholic drir | ıks |
| Pregnancy can be a difficult time for some women. These next questions are happened before and during your most recent pregnancy. | about t | hings that may h | ave |
| | | | |
| 45 This question is about things that may have happened during the 12 months born. For each item, circle Y (Yes) if it happened to you or N (No) if it did not. (It | , , | • | |
| a. A close family member was very sick and had to go into the hospital b. You got separated or divorced from your husband or partner c. You moved to a new address d. You were homeless e. Your husband or partner lost his job f. You lost your job even though you wanted to go on working g. You argued with your husband or partner more than usual h. Your husband or partner said he did not want you to be pregnant i. You had a lot of bills you could not pay j. You were in a physical fight k. You or your husband or partner went to jail l. Someone very close to you had a bad problem with drinking or drugs m. Someone very close to you died | No N | Yes Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| <i>During the 12 months before you got pregnant,</i> did your husband or partner or physically hurt you in any other way? | r push, ł | nit, slap, kick, cho | ke, |
| □ No □ Yes | | | |

| 461 | No Yes |
|-----|---|
| 47a | During your most recent pregnancy, did your husband or partner physically hurt you in any way? No Yes |
| 47l | During your most recent pregnancy, did anyone else physically hurt you in any way? No Yes |
| | e next questions are about your labor and delivery. (It may help to look at the calendar when you aner these questions.) |
| 48 | When was your baby due? Month Day Year |
| 49 | When did you go to the hospital to have your baby? Month Day Year I did not have my baby in a hospital |
| 50 | When was your baby born? Month Day Year |
| 51 | When were you discharged from the hospital after your baby was born? (It may help to use the calendar.) Month Day Year I did not have my baby in a hospital |
| 52 | After your baby was born, was he or she put in an intensive care unit? No Yes I don't know |

| | After your baby was born, how long did he or she stay in the hospital? |
|----|---|
| | Less than 24 hours (Less than 1day) |
| | 24 - 48 hours (1-2 days) |
| | ☐ 3 days ☐ 4 days |
| | 5 days |
| | 6 or more days |
| | My baby was not born in a hospital |
| | ✓ My baby did not stay overnight in the hospital✓ My baby is still in the hospital |
| | wiy baby is still in the hospital |
| 54 | How was your delivery paid for? Check all that apply. |
| | ☐ Medicaid (including HealthChoice) |
| | Personal income (cash, check or credit card) |
| | Health insurance or HMO |
| | Other Please tell us: |
| | |
| | |
| | |
| | |
| | |
| Th | ne next questions are about the time since your new baby was born. |
| Th | ne next questions are about the time since your new baby was born. |
| | What is today's date? |
| | |
| | What is today's date? |
| | |
| 55 | What is today's date? Month Day Year |
| 55 | What is today's date? Month Day Year Is your baby alive now? |
| 55 | What is today's date? Month Day Year Is your baby alive now? |
| 55 | What is today's date? Month Day Year Is your baby alive now? |
| 55 | What is today's date? Month Day Year Is your baby alive now? No Yes → Go to Question 58 |
| 55 | What is today's date? Month Day Year Is your baby alive now? |
| 55 | What is today's date? Month Day Year Is your baby alive now? No Yes → Go to Question 58 When did your baby die? |
| 55 | What is today's date? Month Day Year Is your baby alive now? No Yes → Go to Question 58 |
| 55 | What is today's date? Month Day Year Is your baby alive now? No Yes → Go to Question 58 When did your baby die? |
| 55 | What is today's date? Month Day Year Is your baby alive now? No Yes → Go to Question 58 When did your baby die? |
| 55 | What is today's date? Month Day Year Is your baby alive now? No Yes → Go to Question 58 When did your baby die? Month Day Year |

| 58 | Is your baby living with you now? |
|------|--|
| | No → Go to Page 78, Question 72Yes |
| 59 | Did you ever breastfeed or pump breast milk to feed your new baby after delivery? |
| | \square No \rightarrow Go to Question 63 \square Yes |
| 60 | Are you still breastfeeding or feeding pumped milk to your new baby? |
| | \square No \square Yes \rightarrow Go to Question 62 |
| 61 | How many weeks or months did you breastfeed or pump milk to feed your new baby? |
| | Weeks OR Months Less than 1 week |
| 62 | How old was your baby the first time you fed him or her anything besides breast milk? Include formula, baby food, juice, cow's milk, water, sugar water, or anything else you fed your baby. |
| | Weeks OR Months |
| | ☐ My baby was less than one week old ☐ I have not fed my baby anything besides breast milk |
| If y | our baby is still in the hospital, go to page 78, Question 72. |
| 63 | About how many hours a day, on average, is your new baby in the same room with someone who is smoking? |
| | Hours |
| | Less than one hour a day My baby is never in the same room with someone who is smoking |
| 64 | How do you most often lay your baby down to sleep now? Check one answer. |
| | ☐ On his or her side ☐ On his or her back |
| | On his or her stomach |

| 65 | is your new baby a boy or a giri? |
|----|--|
| | |
| 66 | Did you have your new baby boy circumcised? |
| | □ No □ Yes |
| 67 | Was your baby seen by a doctor, nurse or other health care provider in the first week after he or she left the hospital? |
| | No → Go to Question 67Yes |
| 68 | Was your baby seen at home or at a health care facility? |
| | At home At a doctor's office, clinic, or other health care facility |
| 69 | Has your baby had a well-baby checkup? |
| | No → Go to Page 78, Question 72Yes |
| 70 | How many times has your baby been to a doctor or nurse for a well-baby checkup? (It may help to use the calendar.) |
| | Times |
| 71 | Where do you usually take your baby for well-baby checkups? <i>Check one answer.</i> |
| | ☐ Hospital clinic ☐ Health department clinic ☐ Private doctor's office or HMO clinic ☐ Other Please tell us: |
| | |

| 72 Are you or your husband or partner doing anything <i>now</i> to keep from getting pregnant? (Some the people do to keep from getting pregnant include having their tubes tied or their partner having a sectomy, using birth control methods like the pill, Norplant®, shots [Depo-Provera®] condoms, or phragm, foam, IUD, and not having sex at certain times [rhythm].) | | | | | |
|---|--|--|--|--|--|
| | NoYes → Go to Question 74 | | | | |
| 73 | What are you or your husband or partner's reasons for not doing anything to keep from getting pregnant <i>now</i> ? Check all that apply. | | | | |
| | ☐ I am not having sex ☐ I want to get pregnant ☐ I don't want to use birth control ☐ My husband or partner doesn't want to use anything ☐ I don't think I can get pregnant (sterile) ☐ I can't pay for birth control ☐ I am pregnant now ☐ Other Please tell us: | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 74 | After your new baby was born, did a doctor, nurse, or other health care worker with you about using birth control? | | | | |
| 74 | | | | | |
| 74 | birth control? | | | | |
| 74 | birth control? | | | | |
| 74 | birth control? | | | | |

| 75 | in the months after your delivery, would you say that you were (Check one answer.) |
|-----|--|
| | ☐ Not depressed at all |
| | A little depressed |
| | Moderately depressed |
| | Very depressed |
| | Very depressed Very depressed and had to get help |
| | very depressed and had to get help |
| | |
| Th | e next questions are about your family and the place where you live. |
| 111 | e next questions are about your family and the place where you live. |
| | |
| 76 | Which rooms are in the house, apartment, or trailer where you live? Check all that apply. |
| | Living room |
| | Separate dining room |
| | Kitchen |
| | ☐ Bathroom(s) |
| | Recreation room, den or family room |
| | Finished basement |
| | Bedrooms How many? |
| | |
| | |
| 77 | Counting yourself, how many people live in your house, apartment, or trailer? |
| | Adulta (people aged 18 years or older) |
| | Adults (people aged 18 years or older) |
| | Babies, children, or teens (people aged 17 years or younger) |
| | |
| 78 | What were the sources of your household's income during the past 12 months? Check all that apply. |
| | |
| | Paycheck or money from a job |
| | ☐ Aid such as Temporary Assistance for Needy Families (TANF) or Temporary Cash Assistance (TCA), welfare, public assistance, general assistance, food stamps or Supplemental Security Income |
| | Unemployment benefits |
| | Child support or alimony |
| | Social Security, worker's compensation, veterans benefits, or pensions |
| | Money from a business, fees, dividends or rental income |
| | Money from family or friends |
| | Other Please tell us: |
| | |
| | |
| | |
| | |
| | |

| 19 | Assistance)? | | | | | |
|----|---|-------------------------|--|---|--|--|
| | \square No \rightarrow Go to Question 82 \square Yes | | | | | |
| 80 | Did you get TCA? | | | | | |
| | | | | | | |
| 81 | Why didn't you get TCA? Check all that apply. | | | | | |
| | You were ineligible because of your income You had reached your time limit You had to fulfill work or other requirements You had to return on another day to apply You had previously lost TCA for another reason (admir You are not a U.S. citizen Other Please tell us: | | | | | |
| | | | | _ | | |
| 82 | This question is about the care of your teeth during your me (Yes) if it is true or N (No) if it is not true. | ost recent <i>No</i> | pregnancy. For each thing, circle Y Yes | | | |
| | a. I needed to see a dentist for a problem | N | Y | | | |
| | b. I went to a dentist or dental clinic c. A dental or other health care worker talked with me | N | Y | | | |
| | about how to care for my teeth and gums | N | Y | | | |
| 83 | During the last three months of your most recent pregnance you drove or rode in a car? Check one answer. Always Almost always Sometimes Rarely Never | y, how of | ten did you wear a seat belt when | | | |
| | | | | | | |

| 84 Since you delivered your new baby, how often do you wear a seat belt when you drive or ride in a car? <i>Check one answer.</i> |
|--|
| Always |
| Almost always |
| Sometimes |
| Rarely |
| Never |
| |
| 85 In the twelve months <i>before</i> your delivery, what was your total household income? (Include income |
| from all sources, before taxes.) |
| |
| Under \$8,000 |
| |
| \$12,000 - \$13,999 \$16,000 - \$19,999 |
| \$10,000 - \$19,999 \$20,000 - \$24,999 |
| \$20,000 - \$24,999 \$25,000 - \$29,999 |
| \$23,000 - \$29,999 \$30,000 - \$39,999 |
| \$30,000 - \$39,999 \$40,000 or more |
| □ \$40,000 of more |
| Please use this space for any additional comments you would like to make about the health of mother and babies in Maryland. |
| |
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Funding for this publication was provided by the Maryland Department of Health and Mental Hygiene and by grant #U50/CCU317134-04 from the Centers for Disease Control and Prevention, Pregnancy Risk Assessment Monitoring System (PRAMS)







