

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

Martin O'Malley, Governor; Anthony G. Brown, Lieutenant Governor; John M. Colmers, Secretary

"What an important topic your research is evaluating! I hope your study helps to discover and document issues that can go on to help mothers and babies."

PRAMS mother

Maryland PRAMS Report

2005 Births

Family Health Administration

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May 2007

The Maryland PRAMS Report is also available at www.marylandprams.org

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INTRODUCTION

This report highlights 2005 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 37 states, New York City and South Dakota (Yankton Sioux Tribe). 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, chronic disease, physical activity, and infections.

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 (<35 years, \geq 35 years) and infant birth weight (<2500 grams, \geq 2500 grams). This sampling frame over-samples mothers who have delivered a low birth weight infant (<2500 grams) as well as mothers who are 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, informed consent page, 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.

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*.

Survey Response and Data Analysis

CDC recommends that states obtain a response rate of at least 70% for analysis of PRAMS. The weighted response rate among women delivering in Maryland between January 1, 2005 and November 29, 2004 met this criterion, but the response rate for women delivering after November 29 did not. Therefore, the data presented in this report are based on the first 11 months of 2005, not the entire year. During this period, 1,359 mothers completed the PRAMS questionnaire with a weighted response reflecting 55,609 mothers. The weighted figure included 28,267 births to white, non-Hispanic women and 17,242 births to black non-Hispanic women. Survey findings in this report are shown by race/Hispanic origin (White Non-Hispanic, Black Non-Hispanic, Asian and Hispanic) maternal age and maternal years of education.

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 HIV testing during pregnancy (Question 25), hospitalizations during pregnancy (Question 29), smoking (Questions 31-33) and duration of breastfeeding (Question 54), the percentage of missing observations was less than 5% for each of the survey items presented in this report. 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 Denise D'Angelo, M.P.H. our project manager who has 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 1,359 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.

Maryland PRAMS Steering Committee

(April 2007)

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Maryland PRAMS Highlights--2005

Preconception factors

- Forty-three percent of all pregnancies were **unintended**.
- Twelve percent of mothers reported a **pregnancy loss** in the twelve months preceding the current pregnancy.
- Sixty-seven percent of women reported having health insurance just before pregnancy, and 7% reported they were covered by Medicaid or Health Choice.
- Twenty-nine percent of women reported taking a **multivitamin daily** in the month before conception.
- Nine percent of mothers who were attempting to become pregnant used **fertility treatments**; 42% reported using fertility drugs, 16% used artificial insemination, and 26% used assisted reproductive technology.

Prenatal factors

- Seventy-six percent of mothers began prenatal care during the first trimester of pregnancy, and 1% received no care.
- Sixty-five percent of women reported that health insurance or an HMO paid for their prenatal care; 29% reported that Medicaid or Health Choice paid for their care.
- Forty percent of women participated in the **WIC** program during pregnancy.
- Fifty-five percent of mothers reported one or more medical complications during pregnancy; severe nausea, preterm labor, and kidney or bladder infections were the most common complications.
- Eighty-four percent of mothers reported that HIV testing was discussed during prenatal care visits; 78% reported getting an HIV test.
- Ten percent of women smoked during the last three months of pregnancy, and 7% 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 an ex-husband or expartner during pregnancy, and 3% reported being abused by a husband or partner.
- Forty-five percent of mothers had a routine **dental visit** during pregnancy, and 29% needed to be seen for a dental problem.

Infant health and related factors

- Twelve percent of newborns were admitted to a **neonatal intensive care** unit.
- Fifty-five percent of newborns were discharged from the hospital within two days of delivery, and 7% remained in the hospital for 6 or more days.
- Seventy-five percent of infants were **breastfed** after delivery, and 67% were breastfed four weeks or longer.
- In terms of sleeping position, 65% of infants were usually placed on their backs to sleep, and 15% on their stomachs.
- Ninety-nine percent of infants had a well-baby checkup.

Maternal postpartum factors

- Nineteen percent of mothers reported they were not using **postpartum contraception.**
- Fourteen percent of mothers **smoked postpartum**.
- Thirty-six percent of mothers reported that they had not discussed **postpartum depression** with their health care providers during prenatal or postpartum visits.

MARYLAND PRAMS 2001-2005 SURVEILLANCE AND SELECTED HEALTHY PEOPLE 2010 OBJECTIVES

Healthy People 2010 Objective	Healthy People 2010 Target	Maryland PRAMS 2001 Births	Maryland PRAMS 2002 Births	Maryland PRAMS 2003 Births	Maryland PRAMS 2004 Births	Maryland PRAMS 2005 Births
Preconception Factors	0					
Increase the proportion of pregnancies that are intended.	70%	57.9%*	56.1%*	58.8%*	62.1%*	57.0%*
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%	28.4%	31.0%	33.4%	29.1%
Prenatal Health						
Increase the proportion of all pregnant women who receive prenatal care in the first trimester of pregnancy.	90%	78.1%**	75.8%**	78.2%**	78.8%**	75.8%**
Reduce cigarette smoking among pregnant women.	2%	9.4%	8.3%	11.1%	10.3%	10.0%
Increase abstinence from alcohol by pregnant women.	94%	91.9%	93.4%	90.1%	92.8%	93.5%
Increase abstinence from binge drinking by pregnant women.	100%	99.1%	99.4%	99.5%	99.7%	99.5%
Postpartum Maternal and Infant Health						
Increase the percentage of healthy full-term infants who are put down to sleep on their backs.	70%	61%	63.2%	64.0%	64.2%	65.0%
Increase the proportion of mothers who breastfeed their babies in the early postpartum period.	75%	76.5%	72.4%	77.5%	76.2%	75.4%

*PRAMS data includes only information on pregnancies that end in live birth **First trimester defined by PRAMS as <13weeks





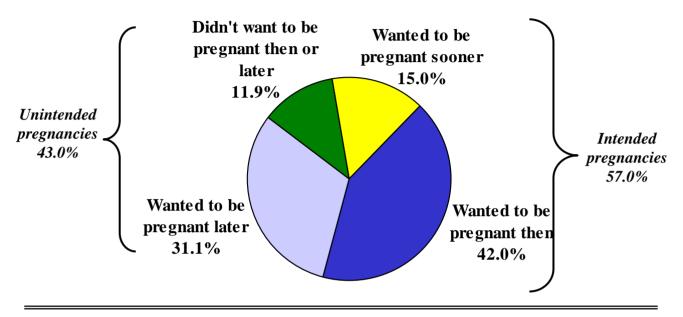
"I was truly upset to learn that BC/BS PPO health insurance would pay for IVF only if I was married even though I had a diagnosed infertility issue. My infertility treatment would have been 100% paid by insurance if I married the baby's father."

PRAMS mother

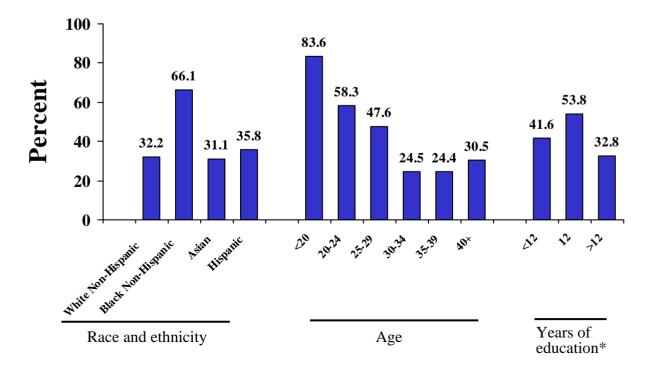
INTENDEDNESS OF PREGNANCY

Question 13: "Thinking back to *just before* you got pregnant with your *new* baby, how did you feel about becoming pregnant?"

Distribution of Mothers by Intendedness of Pregnancy



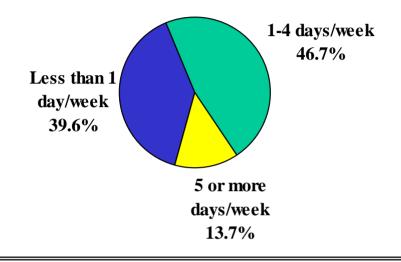
Percentage of Mothers With Unintended Pregnancies



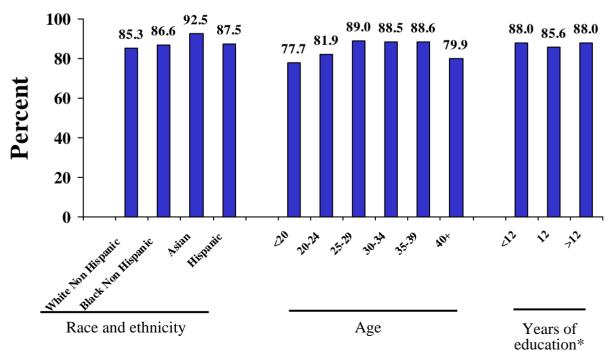
PHYSICAL ACTIVITY BEFORE PREGNANCY

Question 67: "During the *3 months before* you got pregnant with your new baby, how often did you participate in any physical activities or exercise for 30 minutes or more?"

Distribution of Mothers by Physical Activity During the Three Month Period Before Pregnancy Began



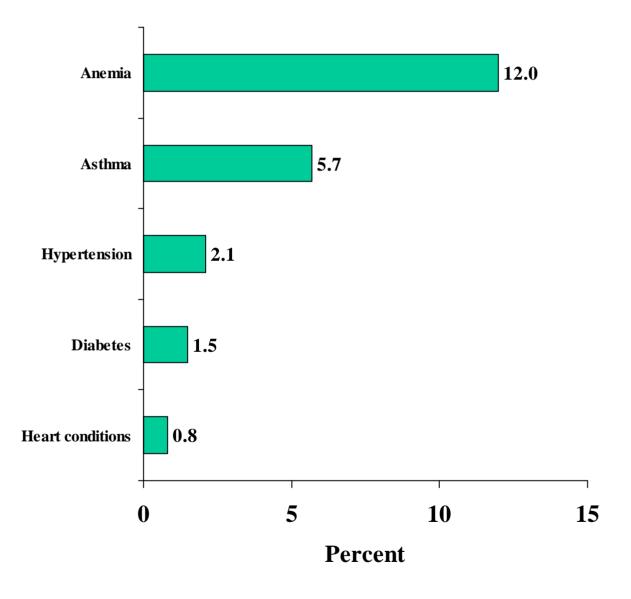
Percentage of Mothers Who Reported They Participated in Physical Activity Less Than Five Times Per Week



PRECONCEPTION HEALTH PROBLEMS

Question 7. "During the *3 months before* you got pregnant with your new baby, did you have any of the following health problems?"

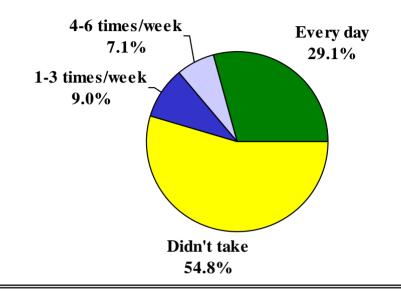
Percentage of Mothers Reporting Health Problems During the Three Months Prior to Conception



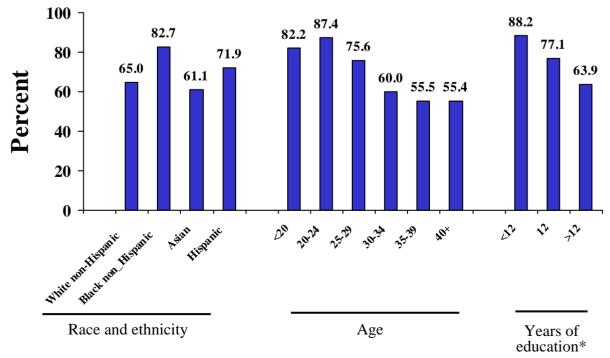
MULTIVITAMIN USE

Question 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."

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



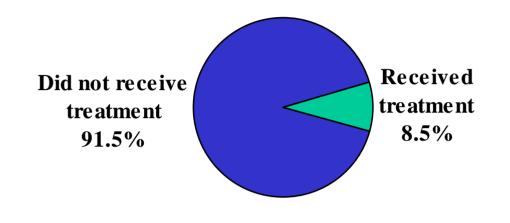
Percentage of Mothers Who Reported Less Than Daily Multivitamin Use in the Month Before Pregnancy



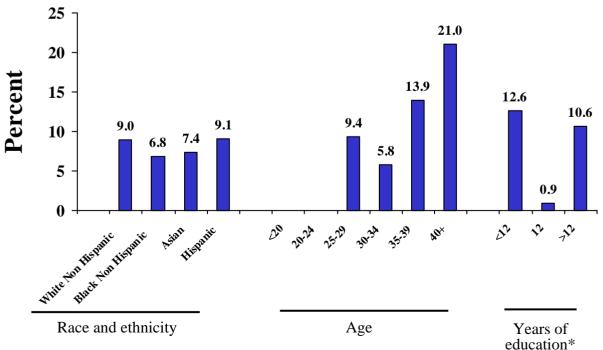
INFERTILITY TREATMENT

Question 17: "Did you receive treatment from a doctor, nurse, or other health care worker to help you get pregnant with your new baby? (This may include infertility treatments such as fertility-enhancing drugs or assisted reproductive technology)."

Distribution of Mothers Who Were Attempting to Become Pregnant by Use of Infertility Treatment



Percentage of Mothers Attempting to Become Pregnant Who Reported Using Infertility Treatment

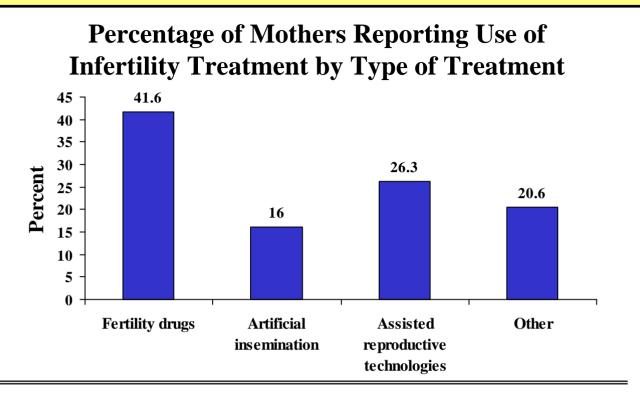


*Includes only mothers ages 20 and above.

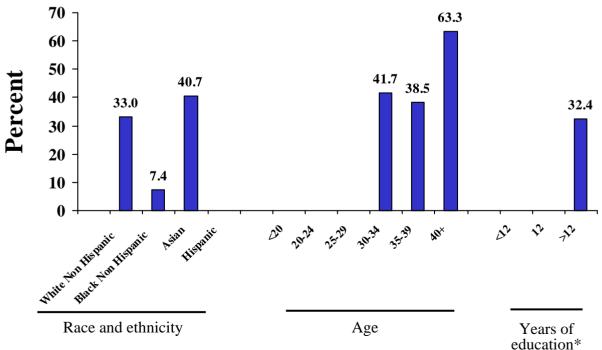
Note: Percentages are not reported if the number of respondents was less than five.

TYPE OF INFERTILITY TREATMENT

Question 18: "Did you use any of the following [infertility] treatments *during the month you got pregnant* with your new baby? Check <u>all</u> that apply."



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



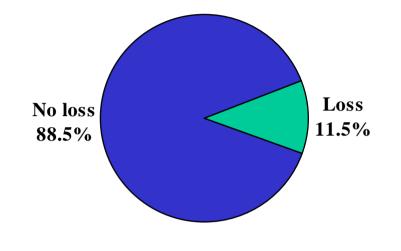
*Includes only mothers ages 20 and above.

Note: Percentages are not reported if the number of respondents was less than five.

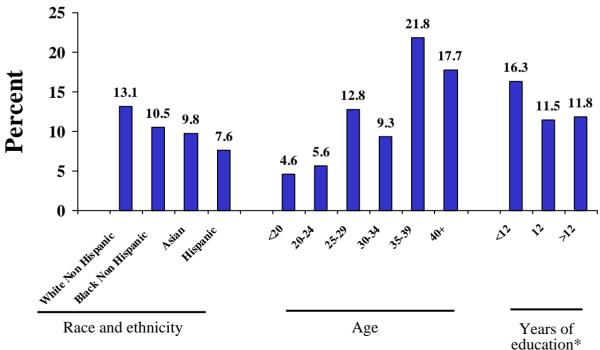
PRIOR PREGNANCY LOSS

Question 65: "During the *12 months before* you got pregnant with your new baby, did you have a miscarriage, fetal death (baby died before being born), or stillbirth?"

Distribution of Mothers by Pregnancy Loss in 12 Months Preceding Current Pregnancy



Percentage of Mothers Reporting a Pregnancy Loss in the 12 Months Preceding the Current Pregnancy



*Includes only mothers ages 20 and above.

Note: Percentages are not reported if the number of respondents was less than five.





"When they take your blood they don't say what it's tested for."

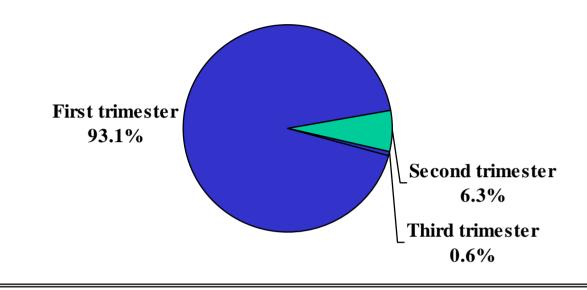
"I feel that women should be educated on the symptoms of preterm labor, the causes, the treatments and the results if any of the symptoms are left untreated. Also I feel that all hospitals should treat all expectant mothers who come in with abdominal, back and vaginal pains as a top priority, especially if you have vaginal bleeding as this was my case."

PRAMS mothers

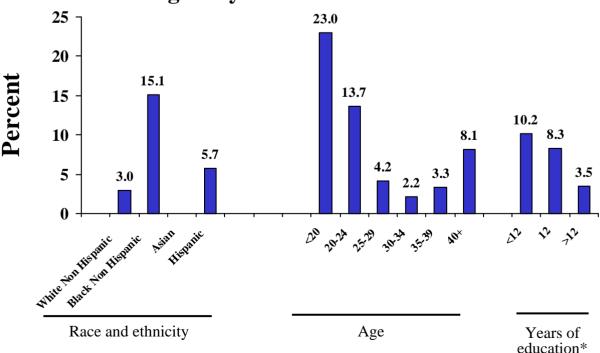
TRIMESTER OF PREGNANCY CONFIRMATION

Question 19. 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



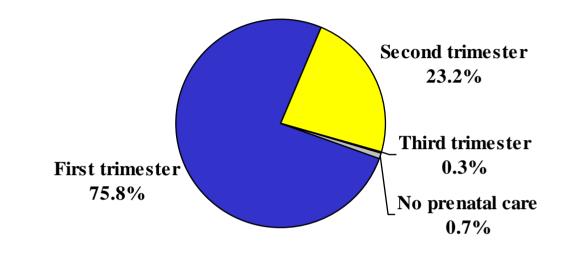
Percentage of Mothers Who Reported Confirming Pregnancy After the First Trimester



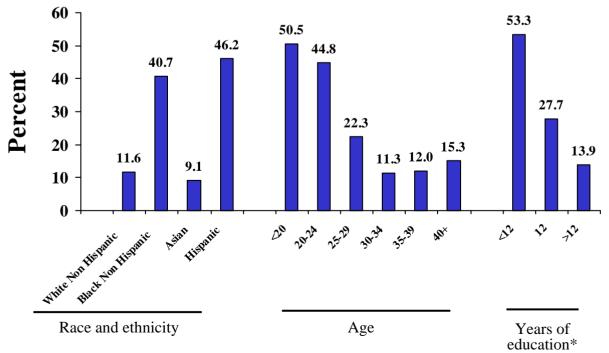
TRIMESTER PRENATAL CARE BEGAN

Question 20. "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



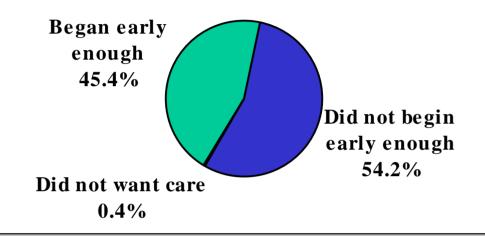
Percentage of Mothers Who Did Not Begin Prenatal Care During the First Trimester of Pregnancy



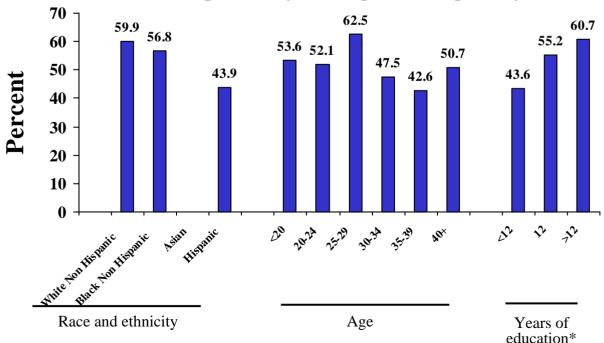
PRENATAL CARE AS EARLY AS DESIRED

Question 21: "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



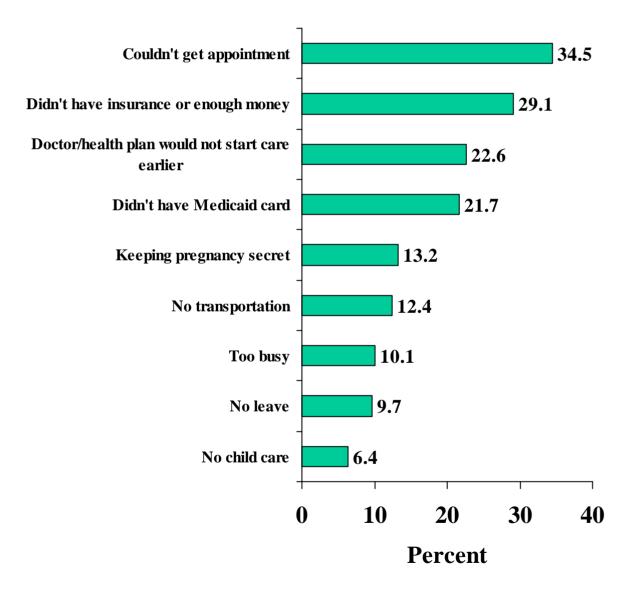
Percentage of Mothers Who Did Not Begin Prenatal Care in the First Trimester and Reported that Prenatal Care Did Not Begin Early Enough in Pregnancy



REASONS FOR LATE PRENATAL CARE

Question 22: "Here is a list of problems some women can have getting prenatal care...circle 'yes' if it was a problem for you during your most recent pregnancy."

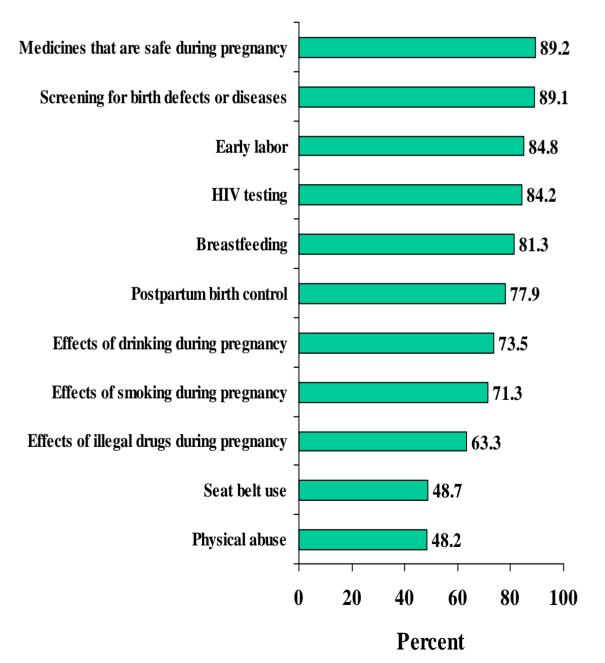
Reasons Given for Not Beginning Prenatal Care As Early in Pregnancy As Desired Among Women Who Did Not Receive Prenatal Care as Early as Wanted



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."

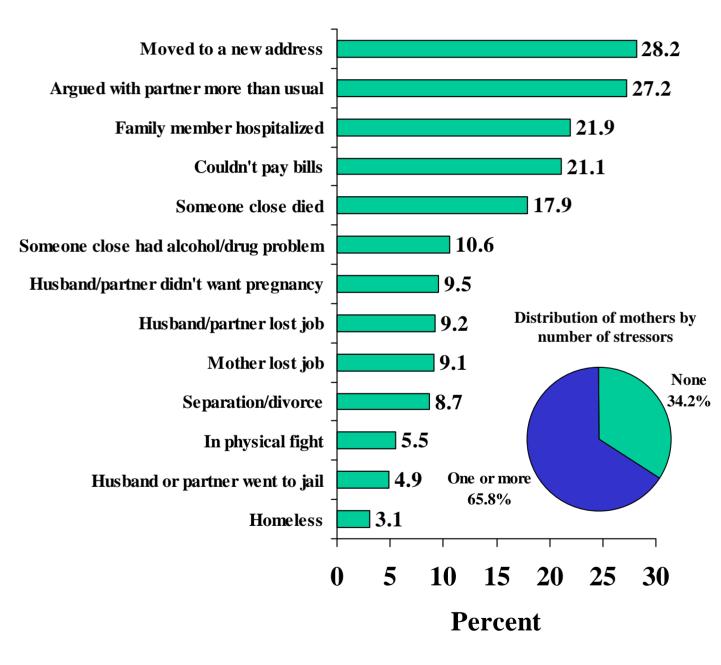
Percentage of Mothers Reporting That Selected Topics Were Discussed During Prenatal Care Visits



STRESS

Question 37: "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."

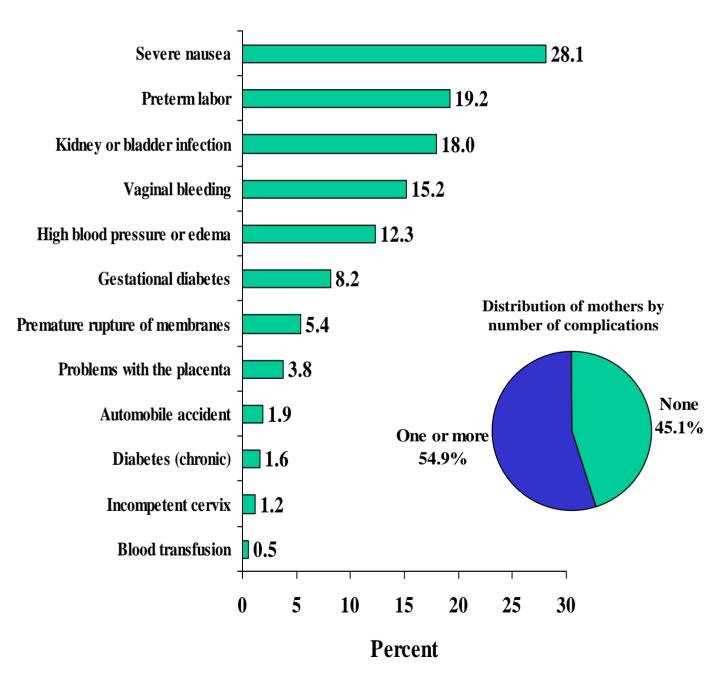
Percentage of Mothers Reporting Stress by Type of Event



COMPLICATIONS DURING PREGNANCY

Question 28: "Did you have any of these problems during your most recent pregnancy?"

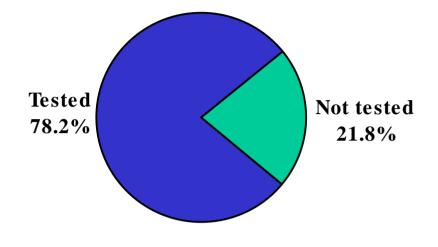
Percentage of Mothers Reporting Pregnancy Complications by Type of Complication



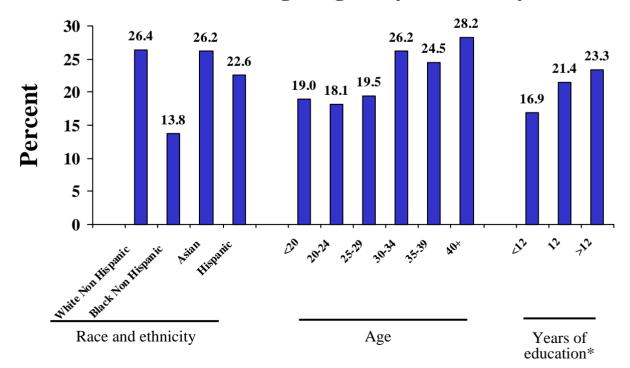
HIV TESTING

Question 25: "At any time during your most recent pregnancy or delivery, did you have a test for HIV?"

Distribution of Mothers by HIV Testing Status



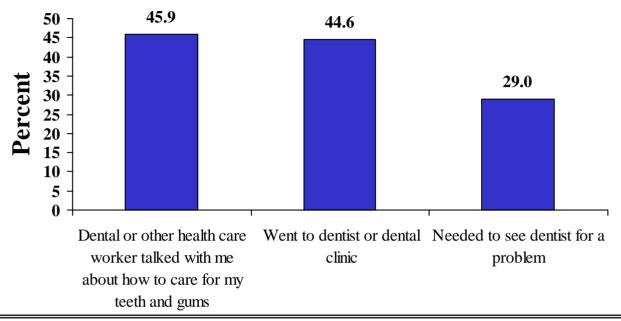
Percentage of Mothers Who Reported They Did Not Have an HIV Test During Pregnancy or Delivery



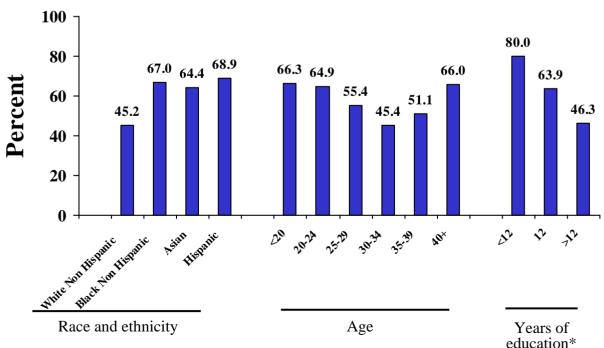
DENTAL CARE DURING PREGNANCY

Question 74: "This question is about the care of your teeth during your most recent pregnancy. For each item, circle 'yes' if it is true."

Distribution of Mothers by Dental Care During Pregnancy



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







"I had a hard time finding a OB doctor who would take Medicaid and one who deals with high risk. This caused me a lot of stress."

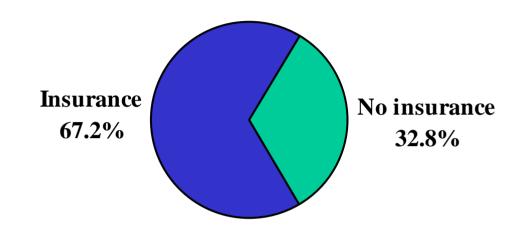
"I was very bothered by the WIC food choices. The options are very restrictive and do not allow for healthier choices (i.e., you can purchase instant oatmeal but cannot purchase whole oats or low sugar/sodium items such as no sugar added peanut butter)."

PRAMS mothers

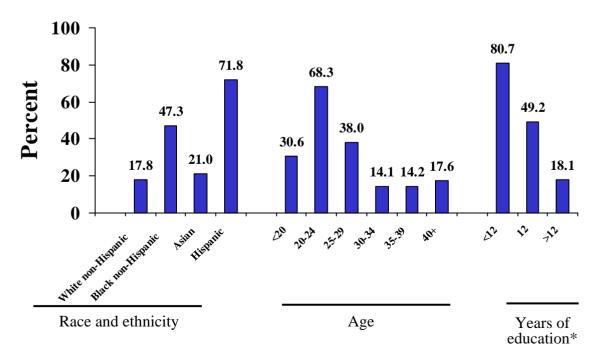
HEALTH INSURANCE BEFORE PREGNANCY

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



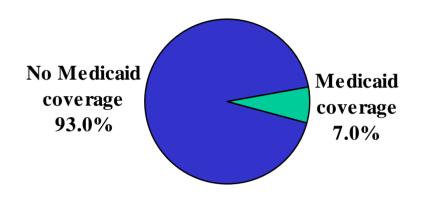
Percentage of Mothers Who Reported Having No Health Insurance Just Before Pregnancy



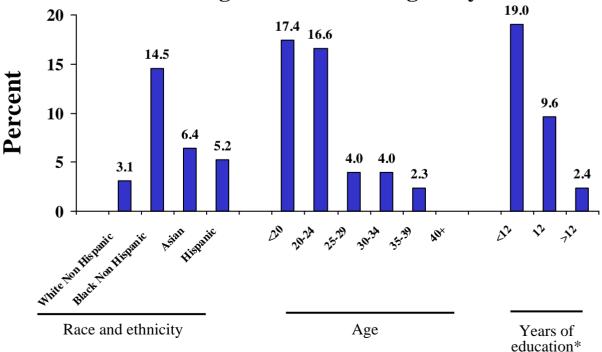
MEDICAID BEFORE PREGNANCY

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

Distribution of Mothers by Medicaid Coverage Just Before Pregnancy

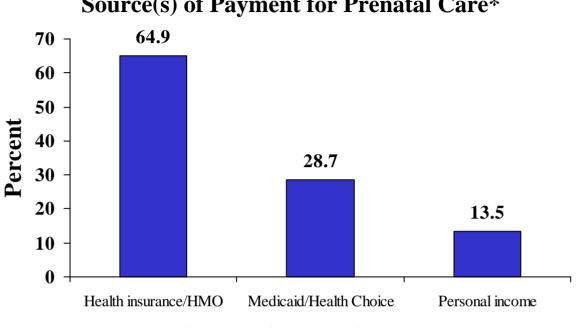


Percentage of Mothers Who Reported Having Medicaid Coverage Just Before Pregnancy



SOURCE OF PAYMENT FOR PRENATAL CARE

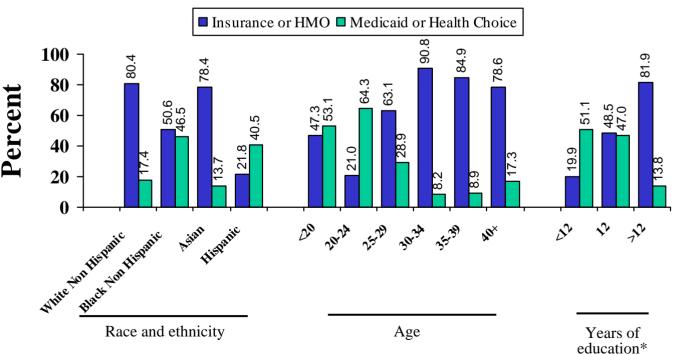
Question 23: "How was your prenatal care paid for? Check all that apply."



Source(s) of Payment for Prenatal Care*

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

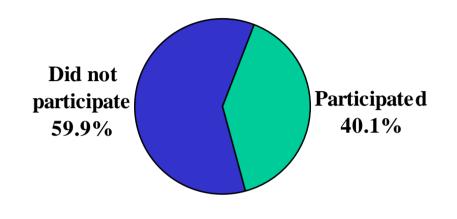
Percentage of Mothers Who Identified Insurance/HMO or Medicaid/Health Choice as a Source of Payment for Prenatal Care



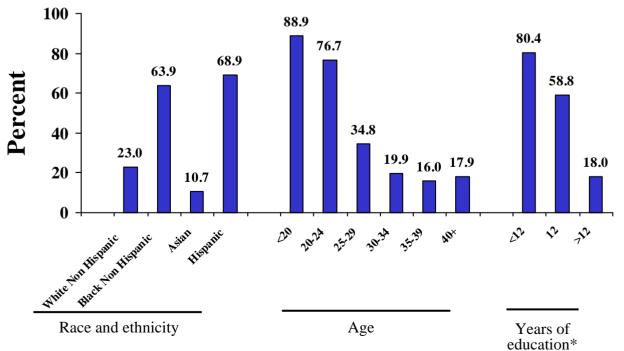
WIC PARTICIPATION

Question 27: "During your most recent 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



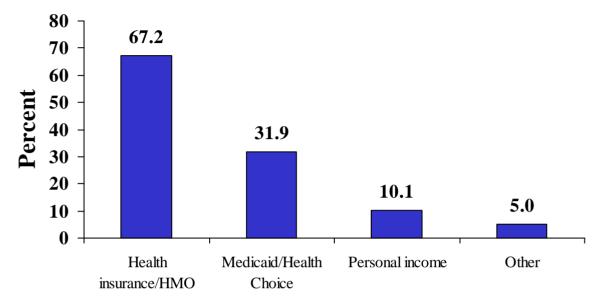
Percentage of Mothers Who Participated in the WIC Program During Pregnancy



SOURCE OF PAYMENT FOR DELIVERY

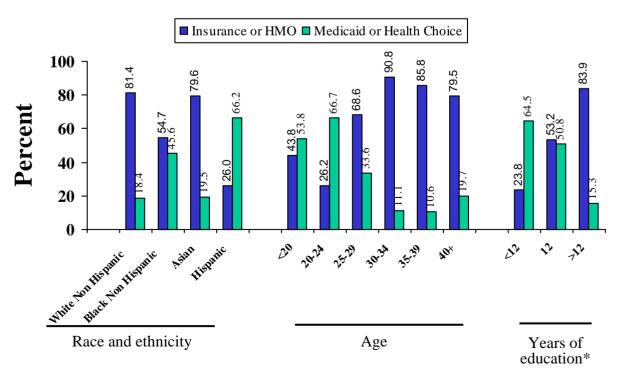
Question 47: "How was your delivery paid for? Check all that apply."

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







"Before my first child I was ... drinking but when I found out I was pregnancy, I stopped."

"(I had) 12 drinks (glasses of wine) during entire pregnancy."

"I didn't take as good of care of myself as I should have. I didn't eat right all the time, I smoked and I worked right up to her birth. Luckily, she is perfect and healthy."

"I quit smoking once I found out I was pregnant."

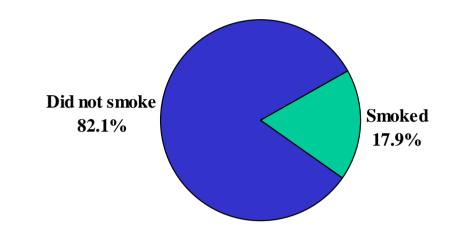
"CAP (Center for Addictions in Pregnancy) gave me a clean and sober life which is wonderful. I live differently now. Thanks to God and CAP. More women with addictions need this opportunity. I am making it part of my recovery to help others."

PRAMS mothers

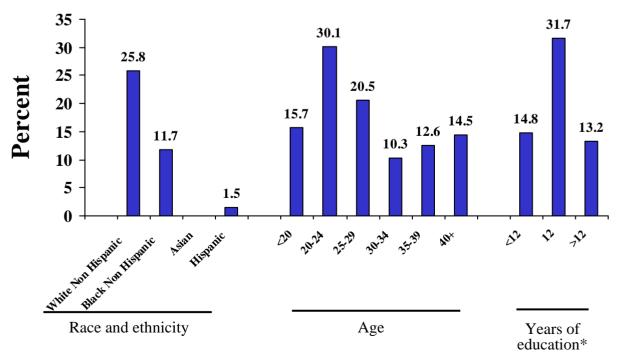
SMOKING BEFORE PREGNANCY

Question 31: "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



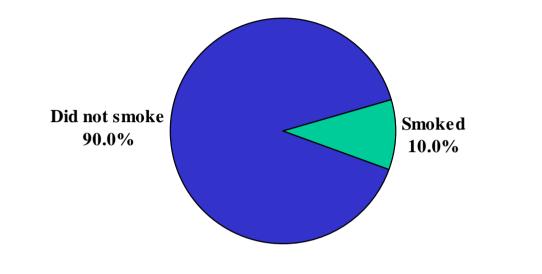
Percentage of Mothers Who Reported They Smoked During the Three Month Period Before Pregnancy Began



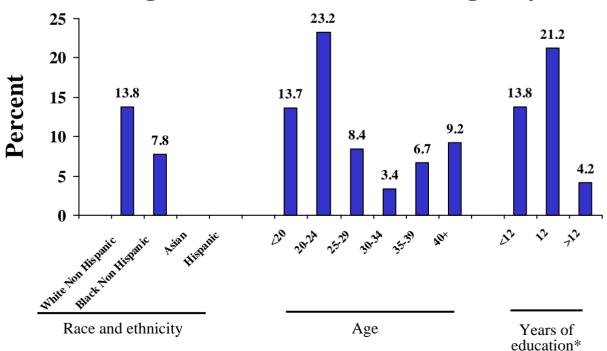
SMOKING DURING PREGNANCY

Question 32: "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



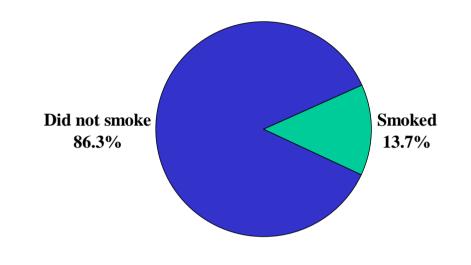
Percentage of Mothers Who Reported They Smoked During the Last Three Months of Pregnancy



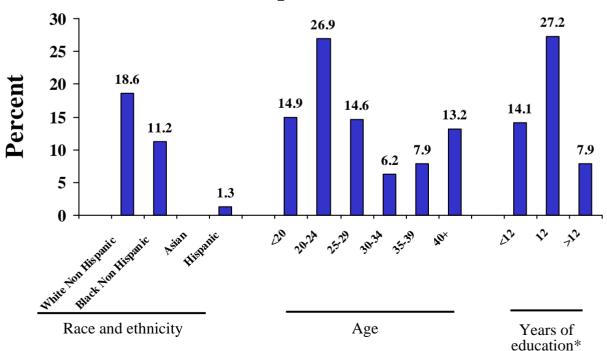
SMOKING AFTER PREGNANCY

Question 33: "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



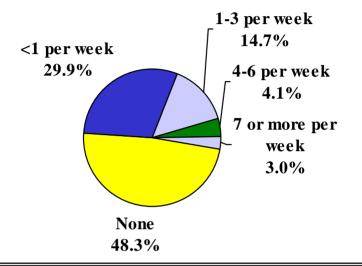
Percentage of Mothers Who Reported They Smoked in the Postpartum Period



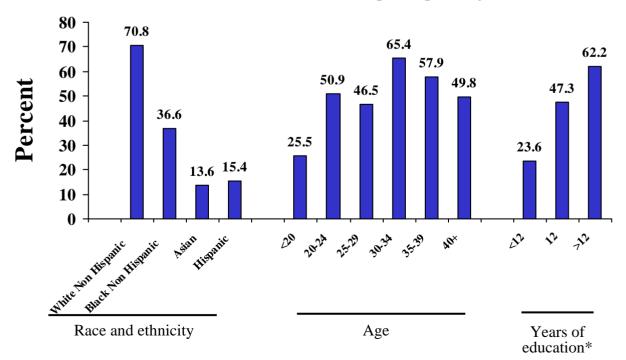
ALCOHOL USE BEFORE PREGNANCY

Question 35a: "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



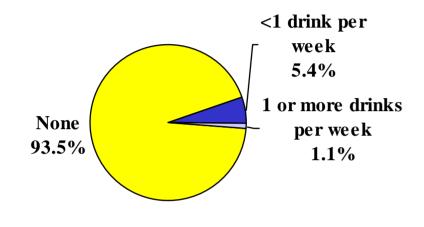
Percentage of Mothers Who Reported Any Alcohol Use in the Three Months Preceding Pregnancy



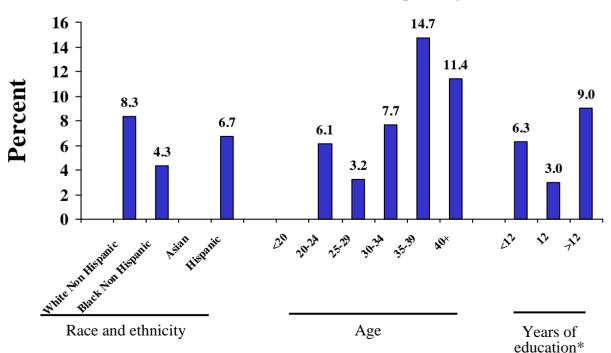
ALCOHOL USE DURING PREGNANCY

Question 36a: "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



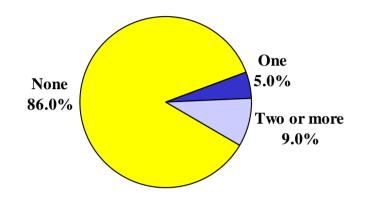
*Includes only mothers ages 20 and above.

Note: Percentages are not reported if the number of respondents was less than five.

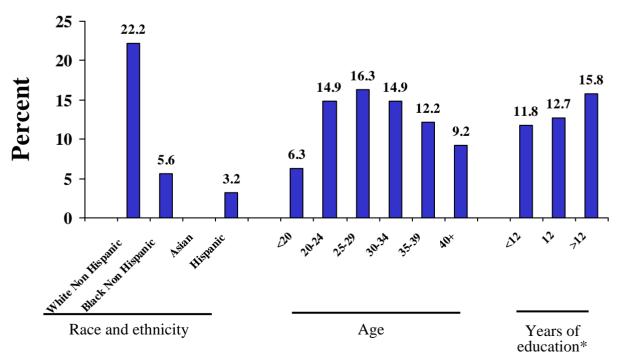
ALCOHOL BINGES BEFORE PREGNANCY

Question 35b: "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



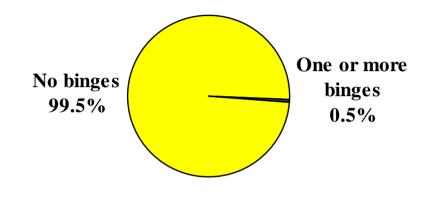
Percentage of Mothers Who Reported Any Binge Drinking in the Three Months Preceding Pregnancy



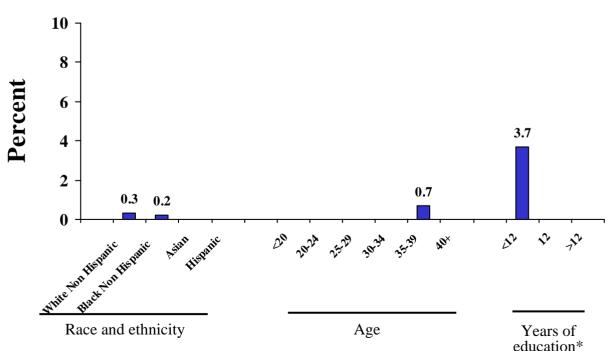
ALCOHOL BINGES DURING PREGNANCY

Question 36b: "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 in the Last Three Months of Pregnancy



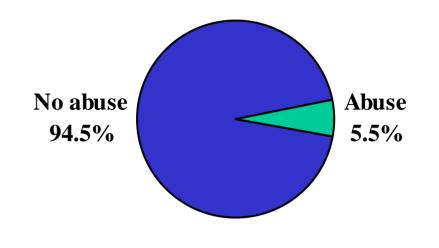
*Includes only mothers ages 20 and above.

Note: Percentages are not reported if the number of respondents was less than five.

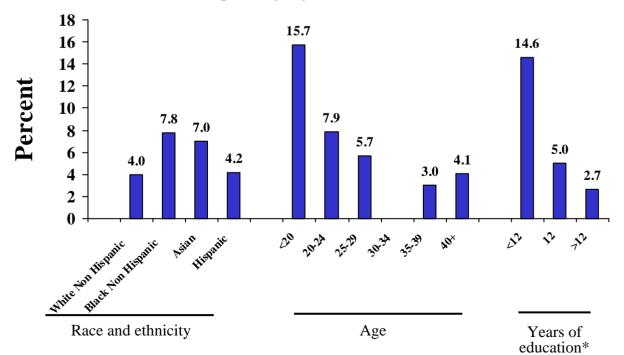
PHYSICAL ABUSE BEFORE PREGNANCY

Question 40b: "During the *12 months* before you got pregnant, were you physically hurt in any way by your husband or partner?"

Distribution of Mothers by Abuse Before Pregnancy by Husband or Partner



Percentage of Mothers Who Reported Being Physically Abused Before Pregnancy by a Husband or Partner



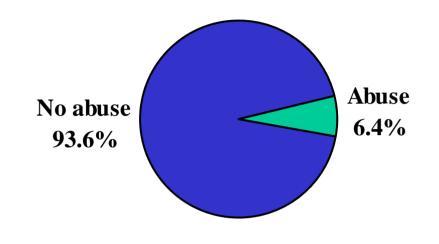
*Includes only mothers ages 20 and above.

Note: Percentages are not reported if the number of respondents was less than five.

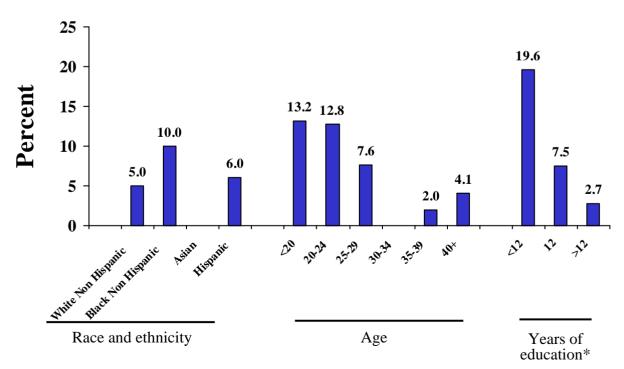
PHYSICAL ABUSE BEFORE PREGNANCY

Question 40a: "During the *12 months before* you got pregnant, did an ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?"

Distribution of Mothers by Abuse Before Pregnancy by Ex-Husband or Ex-Partner



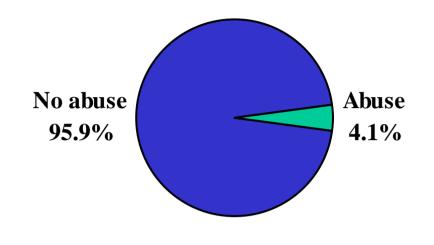
Percentage of Mothers Who Reported Being Physically Abused Before Pregnancy by an Ex-Husband or Ex-Partner



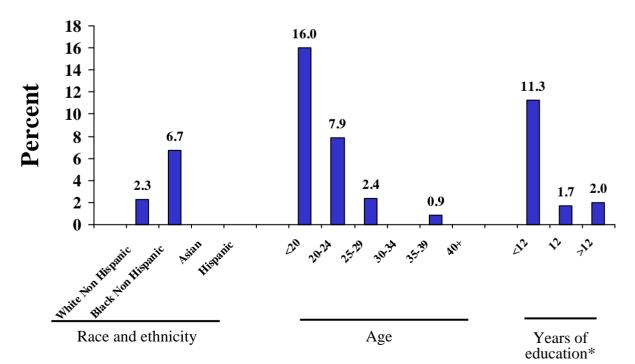
PHYSICAL ABUSE DURING PREGNANCY

Question 41b: "During your most recent pregnancy, were you physically hurt in any way by your husband or partner?"

Distribution of Mothers by Abuse During Pregnancy by Husband or Partner



Percentage of Mothers Who Reported Being Physically Abused During Pregnancy by a Husband or Partner



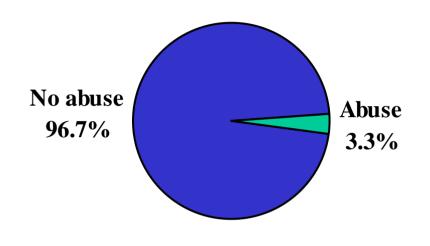
*Includes only mothers ages 20 and above.

Note: Percentages are not reported if the number of respondents was less than five.

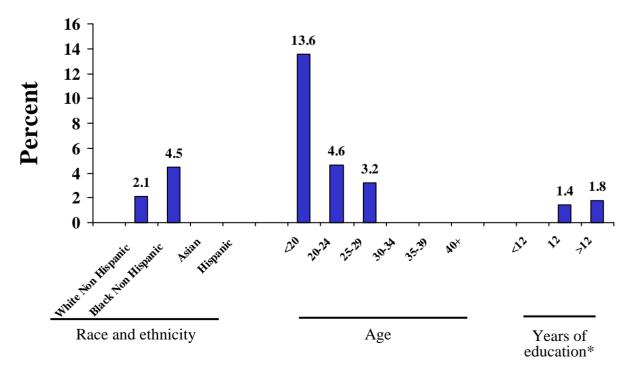
PHYSICAL ABUSE DURING PREGNANCY

Question 41a: "During your most recent pregnancy, did your ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?"

Distribution of Mothers by Abuse During Pregnancy by Ex-Husband or Ex-Partner



Percentage of Mothers Who Reported Being Physically Abused During Pregnancy by an Ex-Husband or Ex-Partner







"(With my previous pregnancy)...I had severe postpartum depression which took approximately 18 months to get under control. In part, this was due to the OB/GYN not taking it (me) seriously, not knowing how to treat it and failing to make a referral to a mental health doctor. I was in the dark. For this pregnancy, I found a doctor much more knowledgeable about postpartum depression and began taking an antidepressant in the third trimester. I've had no symptom this time. Please, please, please educate the health care providers about the seriousness of this debilitating illness and the effectiveness of proactive medical care. Please help to eliminate the stigma and ignorance associated with postpartum depression."

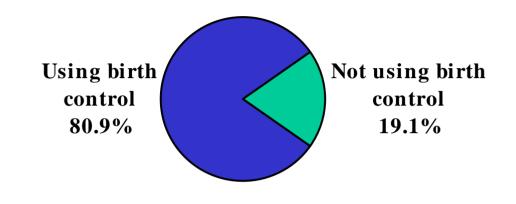
"My lactation consultant helped me through a very tough time feeding my baby. I really think all mothers should have access to their services (we paid out of pocket for this service) and (it should be...) free to those who can't afford it."

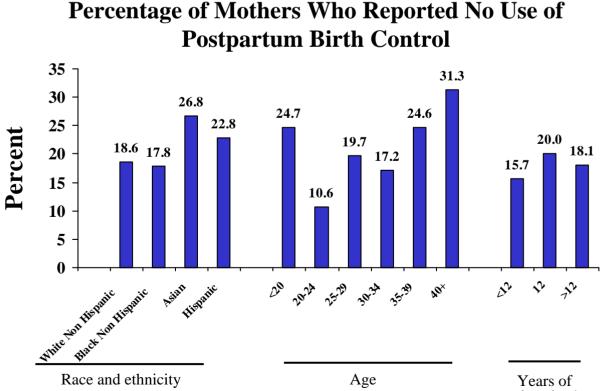
PRAMS mother

POSTPARTUM BIRTH CONTROL

Question 60: "Are you or your husband or partner doing anything now to keep from getting pregnant?"

Distribution of Mothers by Use of Postpartum Birth Control



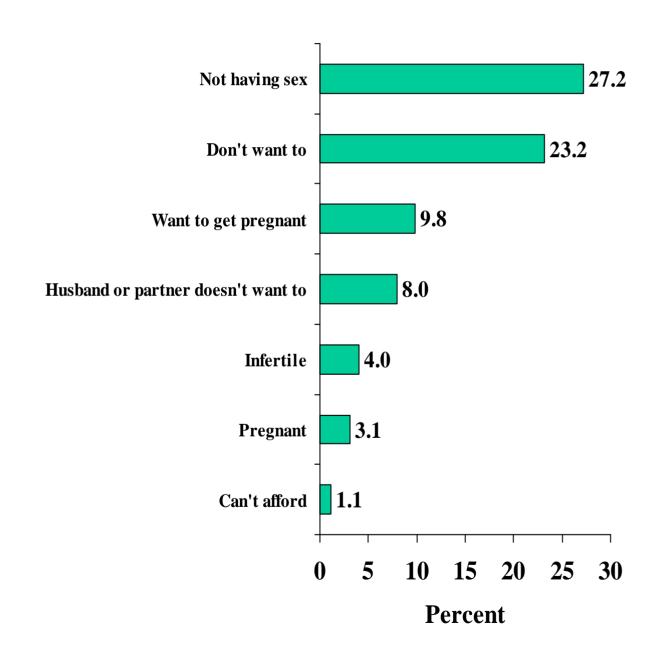


education*

REASONS FOR NO POSTPARTUM BIRTH CONTROL

Question 61: "What are your or your husband's or partner's reasons for not doing anything to keep from getting pregnant *now*? Check all that apply."

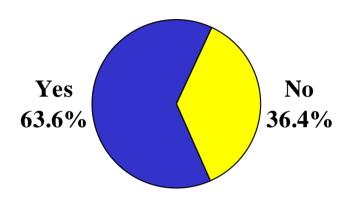
Reasons Reported for Not Using Postpartum Birth Control



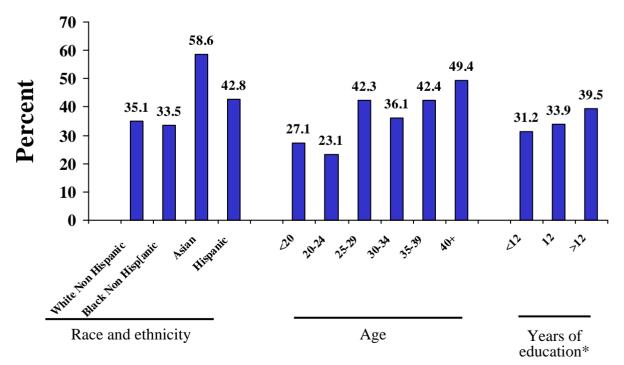
POSTPARTUM DEPRESSION DISCUSSED

Question 70: "At any time during your most recent pregnancy or after delivery, did a doctor, nurse, or other health care worker talk with you about "baby blues" or postpartum depression?"

Distribution of Mothers by Discussion of Postpartum Depression



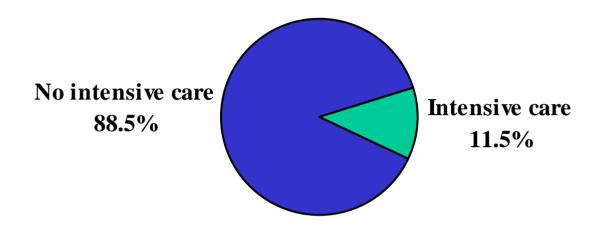
Percentage of Mothers Who Reported that Postpartum Depression was Not Discussed with Health Care Provider



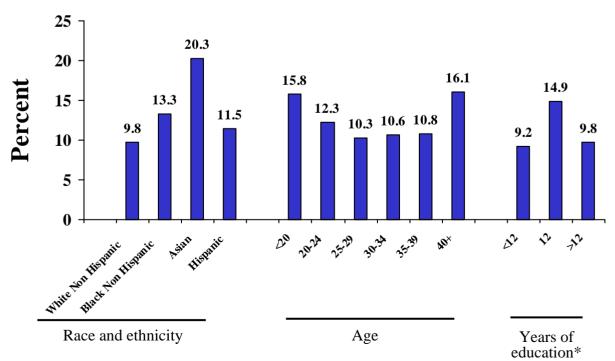
NEONATAL INTENSIVE CARE

Question 48: "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



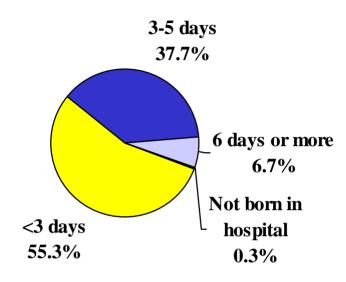
Percentage of Mothers Who Reported Their Newborn was Admitted to the Neonatal Intensive Care Unit



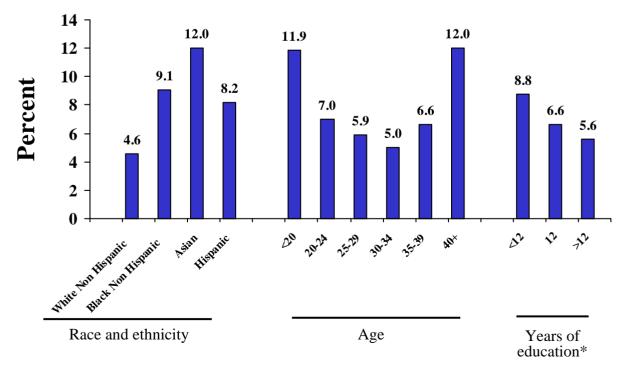
LENGTH OF HOSPITAL STAY--NEWBORN

Question 49: "After your baby was born, how long did he or she stay in the hospital?"

Distribution of Infants by Length of Hospital Stay



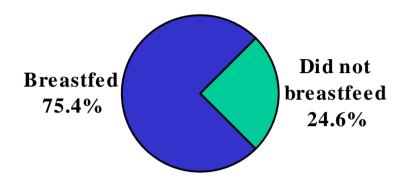
Percentage of Mothers Who Reported that Newborn Stayed in the Hospital for Six or More Days



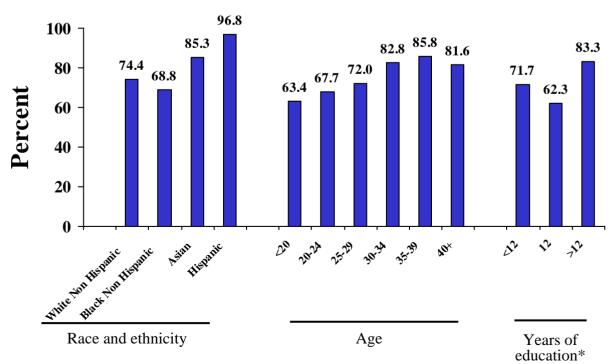
BREASTFEEDING INITIATION

Question 52: "Did you ever breastfeed or pump breast milk to feed your new baby after delivery?"

Distribution of Mothers by Breastfeeding Status



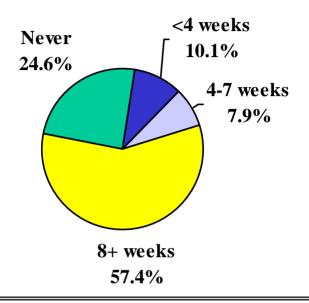
Percentage of Mothers Who Reported Ever Breastfeeding Their Infant



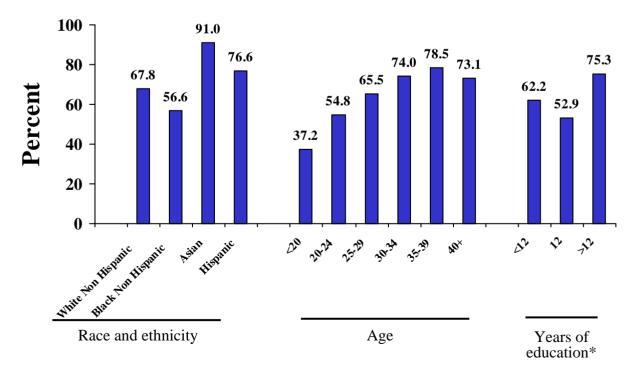
BREASTFEEDING

Question 54: "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



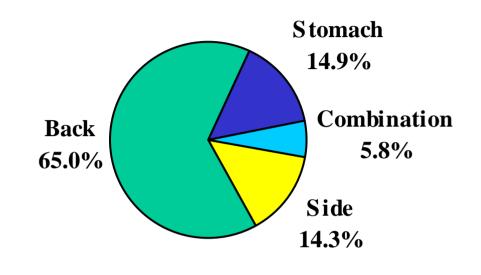
Percentage of Mothers Who Reported Breastfeeding for Four or More Weeks



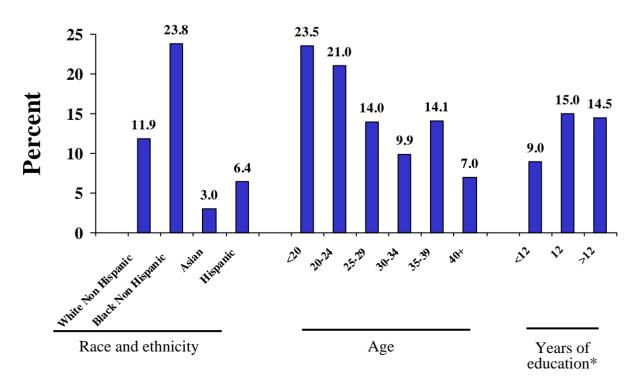
SLEEP POSITION

Question 57: "How do you most often lay your baby down to sleep now?"

Distribution of Infants by Sleep Position

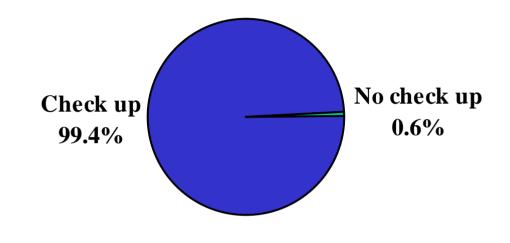


Percentage of Infants Usually Placed on Stomach to Sleep

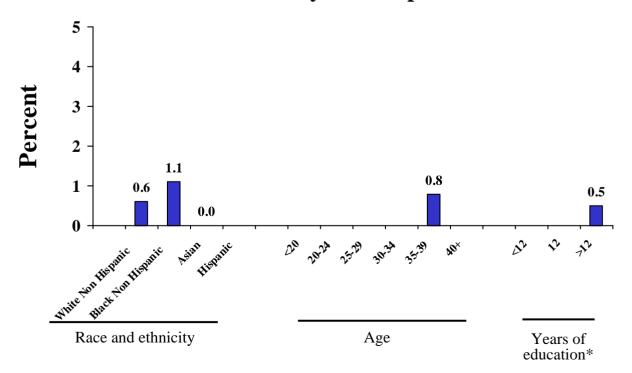


WELL-BABY CHECK UP Question 59: "Has your baby had a well-baby check up?"

Distribution of Births by Well-Baby Checkup



Percentage of Mothers Who Reported Their Baby Did Not Have a Well-Baby Checkup







"This survey is so important because it can help so many people. There are so many different situations with moms and their babies (that need to be studied). I hope my participation will help someone."

PRAMS mother

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.

- 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
 - \Box 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
 - \Box 1 to 3 times a week
 - \Box 4 to 6 times a week
 - \Box 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. During the *3 months before* you got pregnant with your new baby, did you have any of the following health problems? For each one, circle Y (Yes) if you had the problem or circle N (No) if you did not.

		No	Yes
a.	Asthma	N	Y
b	High blood pressure (hypertension)	N	Y
c.	High blood sugar (diabetes)	N	Y
	Anemia (poor blood, low iron)		Y
e.	Heart problems	N	Y

- 8. *Before* you got pregnant with your new baby, did you ever have any other babies who were born alive?
 - $\Box \text{ No} \longrightarrow \text{ Go to Question 11}$ $\Box \text{ Yes}$
- 9. Did the baby born just before your new one weigh 5 pounds, 8 ounces (2.5 kilos) or less at birth?
 - □ No
 - □ Yes

- 10. Was the baby *just before* your new one born *more* than 3 weeks before its due date?
 - □ No
 - □ Yes
- 11. How old were you when you had your first menstrual period?
 - [] Years old
- 12. How old were you when you got pregnant with your first baby?
 - [] Years old

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

13. Thinking back to *just before* you got pregnant with your *new* baby, how did you feel about becoming pregnant? Check <u>one</u> answer

- \Box I wanted to be pregnant sooner
- □ I wanted to be pregnant later
- \Box I wanted to be pregnant then
- □ I didn't want to be pregnant then or at any time in the future
- 14. When you got pregnant with your new baby, were you trying to get pregnant?
 - □ No
 - \Box Yes \longrightarrow Go to Question 17
- 15. When you got pregnant with your new baby, were you or your husband or partner doing anything to keep from getting pregnant? (Some things people do to keep from getting pregnant include 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 19
- 16. What were your or your husband's or partner's reasons for not doing anything to keep from getting pregnant? Check <u>all</u> that apply, then go to Question 19.
 - □ 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
 - \Box Other = Please tell us:
- 17. Did you receive treatment from a doctor, nurse, or other health care worker to help you get pregnant with your new baby? (This may include infertility treatments such as fertility-enhancing drugs or assisted reproductive technology.)
 - □ No → Go to Question 19
 - □ Yes

18. Did you use any of the following treatments *during the month you got pregnant* with your new baby? Check <u>all</u> that apply

- □ Fertility-enhancing drugs prescribed by a doctor (fertility drugs include Clomid[®], Serophene[®], Pergonal[®], or other drugs that stimulate ovulation)
- □ Artificial insemination or intrauterine insemination (treatments in which sperm, but NOT eggs, were collected and medically placed into a woman's body)
- □ Assisted reproductive technology (treatments in which BOTH a woman's eggs and a man's sperm were handled in the laboratory, such as in vitro fertilization [IVF], gamete intrafallopian transfer [GIFT], zygote intrafallopian transfer [ZIFT], intracytoplasmic sperm injection [ICSI], frozen embryo transfer, or donor embryo transfer)
- \Box Other medical treatment = 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.)

- **19. 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
 - \Box I don't remember
- **20.** 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
- 21. Did you get prenatal care as early in your pregnancy as you wanted?
 - □ No
 - □ Yes
 - □ I didn't want prenatal care → Go to Question 23
- 22. 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 25.

23. How was your prenatal care paid for? Check <u>all</u> that apply

- □ Medicaid
- □ Personal income (cash, check, or credit card)
- □ Health insurance or HMO (including insurance from your work or your husband's work)
- □ Other Please tell us: ____
- 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. 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		Y
f. Medicines that are safe to take during my pregnancy	N	Y
g. How using illegal drugs could affect my baby		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

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

- □ No
- \Box Yes \longrightarrow Go to Question 27
- □ I don't know

26. Had you been tested for HIV *before* this pregnancy?

- □ No
- □ Yes
- □ I don't know

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

- 27. During your most recent pregnancy, were you on WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children)?
 - \square No
 - □ Yes

28. 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 before 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		Y
e.			Y
f.	Cervix had to be sewn shut (incompetent cervix)		Y
g.			
U	hypertension [PIH], preeclampsia, or toxemia)	N	Y
h.	Problems with the placenta (such as abruptio placentae or placenta previa)		Y
i.	Labor pains more than 3 weeks before my baby was due (preterm		Y
i.	Water broke more than 3 weeks before my baby was due (premature		
5	rupture of membranes [PROM])	N	Y
k.	I had to have a blood transfusion		Y
1.	I was hurt in a car accident		Y

If you did not have any of these problems, go to Question 30.

29. 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	N	Y
	or nurse's advice		

The next questions are about smoking cigarettes and drinking alcohol.

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

- □ No → Go to Question 34
- □ Yes
- **31.** In the *3 months before* you got pregnant, how many cigarettes did you smoke on an average day? (A pack has 20 cigarettes.)
 - \Box 41 cigarettes or more
 - \Box 21 to 40 cigarettes
 - \Box 11 to 20 cigarettes
 - \Box 6 to 10 cigarettes
 - \Box 1 to 5 cigarettes
 - □ Less than 1 cigarette
 - \Box None (0 cigarettes)

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

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

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

- \Box 41 cigarettes or more
- \Box 21 to 40 cigarettes
- \Box 11 to 20 cigarettes
- \Box 6 to 10 cigarettes
- \Box 1 to 5 cigarettes
- □ Less than 1 cigarette
- \Box None (0 cigarettes)
- 34. 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 37

□ Yes

35a. During the 3 months before you got pregnant, how many alcoholic drinks did you have in an average week?

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

35b. During the *3 months before* you got pregnant, how many times did you drink 5 alcoholic drinks or more in one sitting?

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

36a. During the *last 3 months* of your pregnancy, how many alcoholic drinks did you have in an average week?

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

36b. During the *last 3 months* of your pregnancy, how many times did you drink 5 alcoholic drinks or more in one sitting?

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

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

^{37.} 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. I or my husband or partner went to jail	N	Y
1. Someone very close to me had a bad problem with drinking or drugs	N	Y
m. Someone very close to me died	N	Y

38. During the *12 months before* your new baby was born, how often did you feel unsafe in the neighborhood where you lived?

- □ Always
- □ Often
- □ Sometimes
- □ Rarely ____ Go to Question 40a
- \Box Never \longrightarrow Go to Ouestion 40a
- **39.** During the *12 months before* your new baby was born, did you do any of the following things because you felt it was unsafe to leave or return to the neighborhood where you lived? For each item, circle Y (Yes) if you did it or circle N (No) if you did not.

		No	Yes
a.	I missed doctor or other appointments	N	Y
b.	I limited grocery or other shopping	N	Y
c.	I stayed with other family members or friends	N	Y

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

- 40a. During the *12 months before* you got pregnant, did an ex-husband or ex-partner push, hit, slap, kick, choke, or physically hurt you in any other way?
 - □ No
 - □ Yes
- 40b. 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.

- 41a. 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

41b. During your most recent pregnancy, were you physically hurt in any way by your husband or partner?

 $\begin{array}{c|c} \square & No \\ \square & Yes \end{array}$

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

42. When was your baby due?

[] [] [] Month Day Year

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

[] [] [] Month Day Year

 \Box I didn't have my baby in a hospital = Go to Question 45

44. After you were *admitted* to the hospital to deliver your new baby, were you transferred to another hospital *before* your baby was born?

 $\begin{array}{c|c} \square & No \\ \square & Yes \end{array}$

45. When was your baby born?

[] [] [] Month Day Year

46. 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

47. How was your delivery paid for? Check <u>all</u> that apply

- □ Medicaid
- □ Personal income (cash, check, or credit card)
- □ Health insurance or HMO (including insurance from your work or your husband's work)
- \Box Other = Please tell us: ____

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

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

- □ No
- □ Yes
- □ I don't know

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

- \Box Less than 24 hours (less than 1 day)
- \Box 24 to 48 hours (1 to 2 days)
- \Box 3 days
- \Box 4 days
- \Box 5 days
- \Box 6 days or more
- □ My baby was not born in a hospital
- \Box My baby is still in the hospital = Go to Question 52

50. Is your baby alive now?

- □ No → Go to Question 60
- □ Yes

51. Is your baby living with you now?

□ No **→ Go to Question 60** □ Yes

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

- $\Box \text{ No } \longrightarrow \text{ Go to Question 56}$ $\Box \text{ Yes}$
- 53. Are you still breastfeeding or feeding pumped milk to your new baby?
 - □ No
 - □ Yes → Go to Question 55

- 54. How many weeks or months did you breastfeed or pump milk to feed your baby?
 - [] Weeks **OR** [] Months
 - \Box Less than 1 week
- **55. 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
 - \Box My baby was less than 1 week old
 - □ I have not fed my baby anything besides breast milk

If your baby is still in the hospital, go to Question 60.

56. 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
- \Box My baby is never in the same room with someone who is smoking

57. How do you most often lay your baby down to sleep now? Check one answer

- \Box On his or her side
- \Box On his or her back
- \Box On his or her stomach
- 58. Was your new baby seen by a doctor, nurse, or other health care worker during the first week after he or she left the hospital?
 - 🗆 No

□ Yes

- **59. Has your new 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

The next few questions are about the time since your new baby was born and things that may have happened after delivery.

60. 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 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 62

- 61. What are your or your husband's or partner's reasons for not doing anything to keep from getting pregnant *now*? Check <u>all</u> that apply
 - \Box I am not having sex
 - \Box I want to get pregnant
 - \Box 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)
 - \Box I can't pay for birth control
 - \Box I am pregnant now
 - $\Box \quad \text{Other} = \text{Please tell us:}$

62. During the *12 months before* your new baby was born, what were the sources of your household's income? Check <u>all</u> that apply

- \Box 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, WIC, 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:
- 63. 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 <u>one</u> 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
- 64. How many people, including yourself, depended on this income?
 - [] People

65. During the *12 months before* you got pregnant with your new baby, did you have a miscarriage, fetal death (baby died before being born), or stillbirth?

- □ No → Go to Question 67
- □ Yes

If you had more than one miscarriage, fetal death, or stillbirth during the *12 months before* you got pregnant with your new baby, please answer the next question for the most recent one.

66. How long did that pregnancy *last*?

- \Box Less than 20 weeks (less than 4 months)
- \Box 20 to 28 weeks (4 to 6 months)
- \Box More than 28 weeks (more than 6 months)

- 67. During the *3 months before* you got pregnant with your new baby, how often did you participate in any physical activities or exercise for 30 minutes or more? (For example, walking for exercise, swimming, cycling, dancing, or gardening.) Do not count exercise you may have done as part of your regular job.
 - \Box Less than 1 day per week
 - \Box 1 to 4 days per week
 - \Box 5 or more days per week
- 68. During your most recent pregnancy, did a doctor, nurse, or other health care worker tell you that you had a urinary tract infection (UTI), a sexually transmitted disease (STD), or any vaginal infection, including bacterial vaginosis or Group B Strep (Beta Strep)?
 - □ No
 - □ Yes
- 69. At any time during your most recent pregnancy, did you *seek help* for depression from a doctor, nurse, or other health care worker?
 - □ No
 - □ Yes
- 70. At any time during your most recent pregnancy or after delivery, did a doctor, nurse, or other health care worker talk with you about "baby blues" or postpartum depression?
 - □ No
 - □ Yes
 - 71a. Since your new baby was born, how often have you felt down, depressed, or hopeless?
 - □ Always
 - □ Often
 - □ Sometimes
 - □ Rarely
 - □ Never
 - 71b. Since your new baby was born, how often have you had little interest or little pleasure in doing things?
 - □ Always
 - □ Often
 - □ Sometimes
 - □ Rarely
 - □ Never
 - 72. *Since your new baby was born*, did you *seek help* for depression from a doctor, nurse, or other health care worker?
 - □ No
 - □ Yes

73. This question is about things that may have happened during your most recent pregnancy. For each thing, circle **Y** (Yes) if it happened to you or circle **N** (No) if it did not.

		No
a.	Your husband or partner threatened you or made you feel unsafe in some	
	way	. N
b.	You were frightened for the safety of yourself or your family because of the	
	anger or threats of your husband or partner	. N
c.	Your husband or partner tried to control your daily activities, for example,	
	controlling who you could talk to or where you could go	. N
d.	Your husband or partner forced you to take part in any sexual activity when	
	you did not want to (including touch that made you uncomfortable)	. N

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

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

75. When did you have your teeth cleaned by a dentist or 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.

		No	Yes
a.	Before my most recent pregnancy	N	Y
	During my most recent pregnancy		Y
c.	After my most recent pregnancy	N	Y

76. 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 Maryland.

Thanks for answering our questions!

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



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