Maryland PRAMS Report

2012 Births

Pregnancy Risk Assessment Monitoring System

Maryland Department of Health and Mental Hygiene

Maternal and Child Health Bureau
Vital Statistics Administration

MARYLAND PRAMS
Pregnancy Risk Assessment Monitoring System
www.marylandprams.org

Larry Hogan, Governor -Boyd Rutherford, Lt. Governor -Van Mitchell, Secretary

"I really enjoyed answering these questions."

"I miss my son. I hope me answering these questions can help another mother have a safe pregnancy with a healthy baby."

PRAMS mothers

Maryland PRAMS Report

2012 Births

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MARYLAND PRAMS
Pregnancy Risk Assessment Monitoring System

May 2015

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

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TABLE OF CONTENTS

Introduction……...*v*

Methodology……...….. *v*
Sampling and Data Collection *v*
Survey Response and Data Analysis *vi*

Acknowledgments……*vi*

Maryland PRAMS Steering Committee……1

Maryland PRAMS Highlights 2012……...….2

Maryland PRAMS 2008, 2009, 2010, 2011, and 2012 Surveillance and Selected Healthy People 2020 Objectives……...3

Preconception Factors……..5
Comments from PRAMS Mothers 6
Intendedness of Pregnancy 7
Pregnancy Intent and Birth Control use 8
Multivitamin Use, One Month Pre-Pregnancy 9
Body Mass Index (BMI), Just Before Pregnancy 10
Health Problems, Three Months Pre-Pregnancy 11
Health Activities, Twelve Months Pre-Pregnancy 12
Stressors, Twelve Months Pre-Delivery 13
Teeth Cleaning, Twelve Months Pre-Pregnancy 14

Prenatal Factors……...15
Comments from PRAMS Mothers 16
Trimester Prenatal Care Began 17
Topics Discussed during Prenatal Care Visits 18
HIV Testing during Pregnancy 19
Flu Vaccination, Twelve Month Pre-Delivery 20
Reasons for Labor Induction 21
Teeth Cleaning, During Pregnancy 22
Oral Health Problems During Pregnancy 23

Health Care Coverage, WIC, Home Visiting, and Employment ……....……..……25
Comments from PRAMS Mothers 26
Health Insurance Just Before Pregnancy 27
Source of Payment for Prenatal Care 28

WIC Participation during Pregnancy 29
Source of Current Health Insurance 30
Home Visiting 31
Maternal Employment 32
Workplace Leave 33

Selected Risk Factors……....35
Comments from PRAMS Mothers 36
Smoking during the Three Months before Pregnancy 37
Smoking during the Last Three Months of Pregnancy 38
Smoking After Pregnancy 39
Alcohol Use during the Three Months before Pregnancy 40
Alcohol Binges Before and During Pregnancy 41
Alcohol Use during the Last Three Months of Pregnancy 42
Physical Abuse by Husband or Partner, Twelve Months before Pregnancy 43
Physical Abuse by Husband or Partner during Pregnancy 44

Postpartum Factors: Maternal and Infant Health……45
Comments from PRAMS Mothers 46
Reasons for Not Using Birth Control 47
Breastfeeding 48
Infant Sleep Position 49
Sleep Environment and Co-sleeping 50
Postpartum Depression Symptoms 51
Postpartum Depression Diagnosed 52

Maryland PRAMS Phase 6 Questionnaire …….....53
Comments from PRAMS Mothers 54
Survey 55

INTRODUCTION

This report highlights data from births occurring to Maryland residents in 2012 collected 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 40 states and New York City, representing 78% of all U.S. live births. 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 employment, assisted reproduction, pre-pregnancy health, co-sleeping, contraceptive use, depression, oral health, chronic disease, physical activity, infections, and labor induction.

The PRAMS project in Maryland is a collaborative effort of the Maternal and Child Health Bureau (MCHB), 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 and need to be Maryland residents who have delivered in the state. Each month, a stratified, random sample of approximately 200 live births is selected. The sample is stratified by infant birth weight (<2500 grams, ≥2500 grams). This sampling frame over-samples mothers who have delivered a low birth weight infant (<2500 grams).

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 84-item main survey along with an informed consent page, calendar, and resource brochure. In addition, a manicure file 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

Due to the incorporation of a new data entry and collection system called the "PRAMS Integrated Data Collection System (PIDS)", all states participating in PRAMS were not able to collect any data from women who delivered the four months from January 1, 2012-April 30, 2012. The CDC recommends that states obtain a response rate of at least 65% for analysis of PRAMS. The weighted response rate among women delivering in Maryland between May 1, 2012 and December 31, 2012 was 65%. During this 8-month period, 945 mothers completed the PRAMS questionnaire with a weighted response reflecting 65,953 mothers. The weighted figure included 29,950 births to white non-Hispanic, 20,811 births to black non-Hispanic, 4,797 births to Asian, 8,929 births to Hispanic women, 88 births to American Indian, and 1,237 Other/Mixed. 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.

ACKNOWLEDGMENTS

The Maryland PRAMS Project would like to acknowledge the CDC PRAMS Team for their technical assistance and support, especially Denise D'Angelo, MPH, 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 945 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--2012

Preconception factors

- Forty-two percent of all live births were **unintended** (includes women who said they were 'not sure' how they felt about the pregnancy).
- Eighteen percent of women reported they were covered by **Medicaid or Health Choice** just before pregnancy and 18% were uninsured.
- According to their body mass index (BMI) just before pregnancy, 23% of mothers were **overweight** and 25% were **obese**.
- Thirty-seven percent of women reported taking a **multivitamin daily** in the month before conception.
- Before pregnancy, 13% of women reported they had **anxiety** and 11% had **depression.**
- During the 3 months just before pregnancy, 18% of women **smoked**, 52% consumed **alcohol**, and 15% had at least one episode of **binge drinking**.
- In the 12 months before pregnancy, 40% of women had not had a **dental cleaning**.
- Twenty-eight percent of mothers reported they had a **preconception health visit**.

Prenatal factors

- Eighty percent of mothers began **prenatal care** during the first trimester of pregnancy, and 2% began in the third trimester or received no care.
- Fifty percent of women participated in the **WIC** program during pregnancy.
- Twenty-one percent of mothers needed to see or went to a **dentist** about a problem during pregnancy and 16% saw a dentist about a problem.
- Seventy-three percent of mothers reported that **HIV testing** was discussed during prenatal care visits; 67% reported getting an HIV test.
- **Physical abuse** by a current husband or partner was reported by 3% of mothers.
- Seven percent of women **smoked** during the last three months of pregnancy. Nine percent of women reported using **alcohol** and <1% of women reported a **binge-drinking** episode during the last three months of pregnancy.
- Forty-eight percent of women were vaccinated for **seasonal flu** during the 12 months before pregnancy.
- **Labor induction** was reported by 42% of mothers.
- Thirty-seven percent of women used **Medicaid or Health Choice** for their prenatal care and 5% were **uninsured**.

Infant health and related factors

- Eighty-six percent of infants were **breastfed** after delivery, and 64% were breastfed eight weeks or longer.
- In terms of **sleeping environment**, 77% of infants were usually placed on their backs to sleep and 28% slept with another person.

Maternal postpartum factors

- Twenty-one percent of mothers reported they were not using **postpartum contraception.**
- Ten percent of mothers **smoked postpartum**.
- Twelve percent of mothers reported symptoms of **postpartum depression**.

MARYLAND PRAMS 2008-2012 SURVEILLANCE AND SELECTED HEALTHY PEOPLE 2020 OBJECTIVES

Healthy People 2020 Objective	Maryland PRAMS 2008 Births	Maryland PRAMS 2009 Births	Maryland PRAMS 2010 Births	Maryland PRAMS 2011 Births	Maryland PRAMS 2012 Births*	Healthy People 2020 Target
Preconception						
Increase the proportion of pregnancies that are intended.**	58%	55%	56%	54%	58%	**56.0%**
Increase the proportion of women who took multivitamins/folic acid daily prior to pregnancy.	30%	32%	33%	30%	37%	**33.1%**
Increase the proportion of women who did not smoke during the three months prior to pregnancy.	81%	83%	81%	80%	82%	**85.4%**
Increase the proportion of women who did not drink alcohol during the three months prior to pregnancy.	47%	45%	46 %	43%	48%	**56.4%**
Increase the proportion of women who had a healthy weight (BMI 18.5-24.9) prior to pregnancy.	52%	53%	51%	52%	49%	**53.4%**
Prenatal						
Increase the proportion of pregnant women who receive prenatal care beginning in the first trimester of pregnancy.***	78%	79%	78%	82%	80%	**77.9%**
Increase abstinence from cigarette smoking among pregnant women.	89%	91%	91%	93%	93%	**98.6%**
Increase abstinence from alcohol among pregnant women.	91%	90%	91%	91%	91%	**98.3%**
Increase abstinence from binge drinking**** among pregnant women.	99%	98%	99%	99%	<100%	**100.0%**
Postpartum						
Increase the proportion of infants who are put to sleep on their backs.	69%	74%	72%	77%	77%	**75.9%**
Increase the proportion of infants who were breastfed (ever).	81%	84%	81%	85%	86%	**81.9%**

**Includes data from May 1, 2012 – December 31, 2012 (8 months)*
***PRAMS data includes only information on pregnancies that end in live birth;*
In 2012, option "I wasn't sure what I wanted" was not considered intended;
****First trimester defined by PRAMS as <13weeks*
**** *Binge drinking = 4 or more drinks in a two hour sitting, starting 2009 births.*
Prior to 2009, binge drinking = 5 or more drinks in one episode.

Preconception Factors

"With this second baby, we lived with my in-laws to save for a new house. When we found out we were pregnant, my mother-in-law wanted me to have an abortion or leave. We left and were homeless for a month. The pregnancy was unplanned and caused a lot of stress & anxiety."

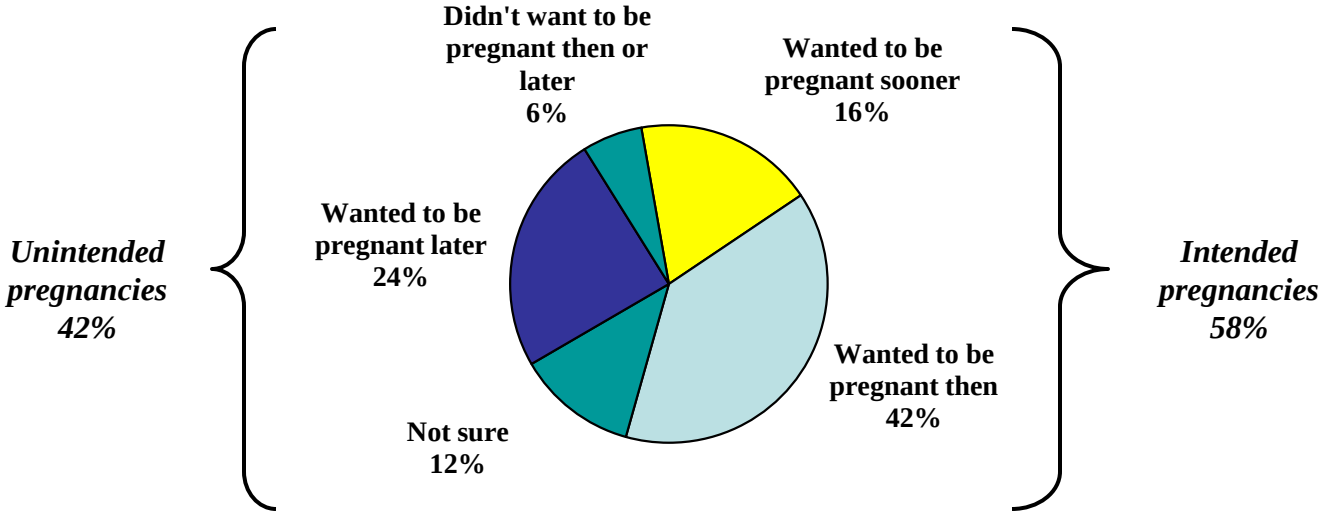
"I had tried to become pregnant for 2 years. This was a surprise to me. It is hard, very hard financially with one parent and no income. I'm just trying to maintain what I have (home and food) and bills still come."

PRAMS mothers

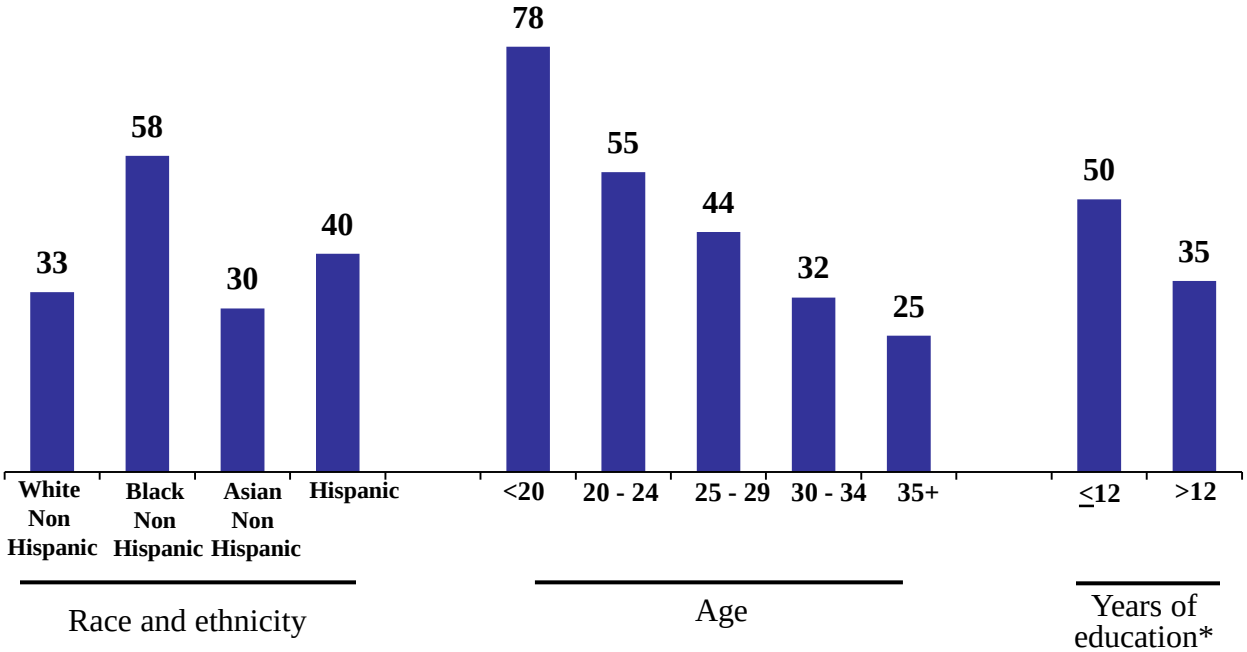
INTENDEDNESS OF PREGNANCY

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

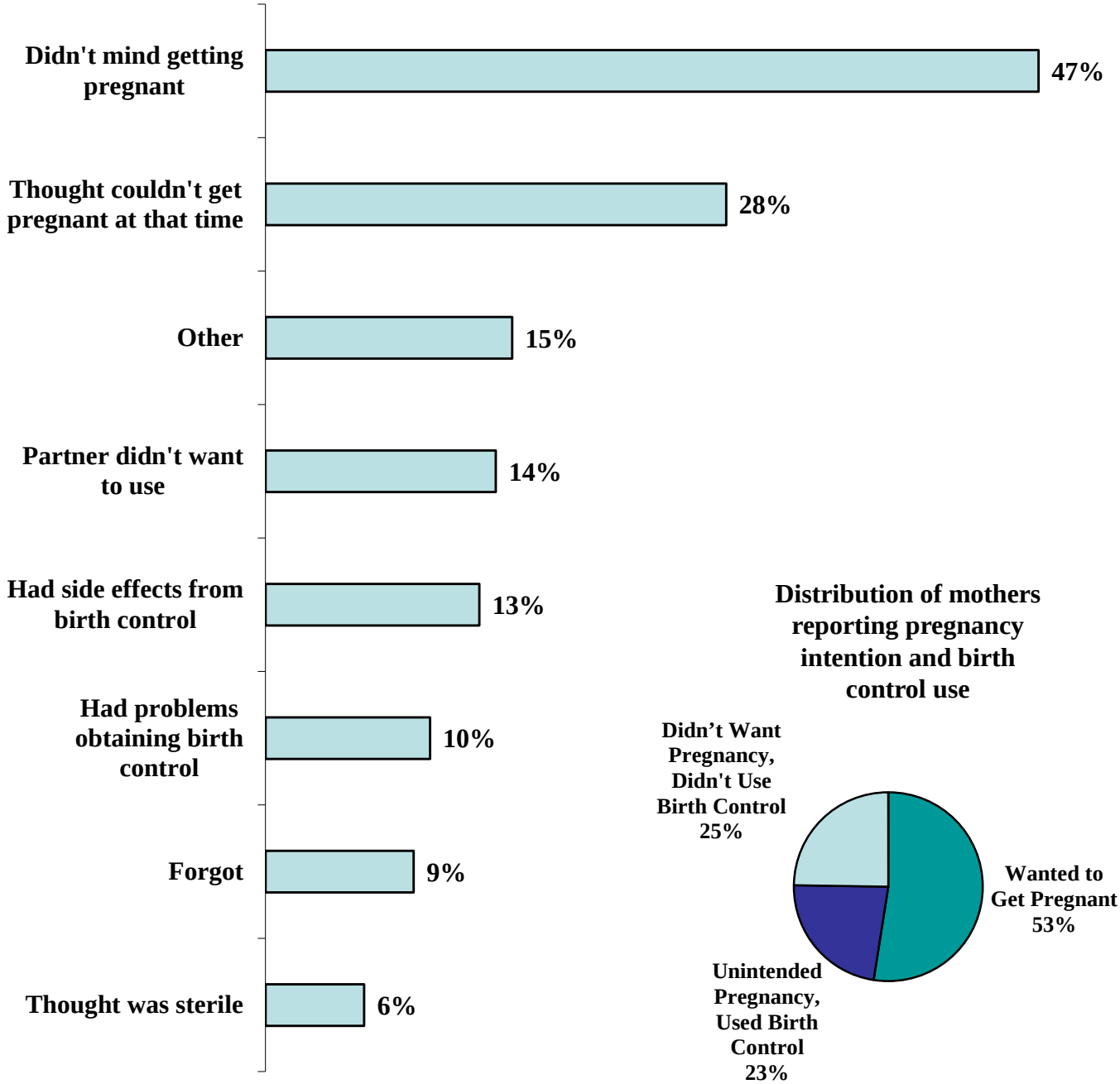


*Includes only mothers ages 20 and above.

PREGNANCY INTENTION AND BIRTH CONTROL USE

Question 15: When you got pregnant with your new baby, were you trying to get pregnant?
Question 16: When you got pregnant with your new baby, were you or your husband or partner doing anything to keep from getting pregnant?
Question 17: What were your reasons or your husband's or partner's reasons for not doing anything to keep from getting pregnant?

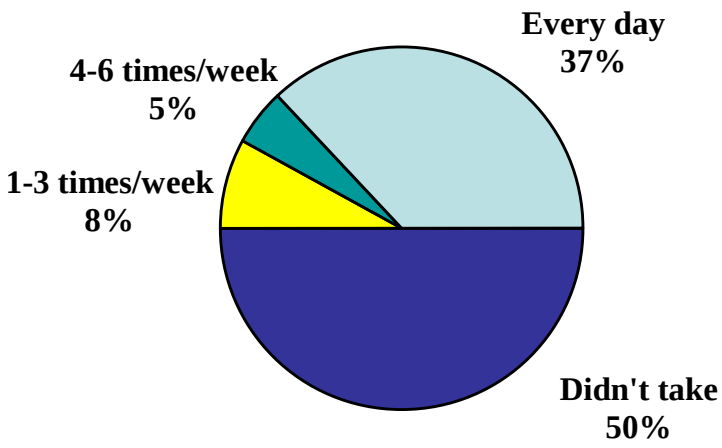
Mothers Reporting Reasons for Not Using Birth Control



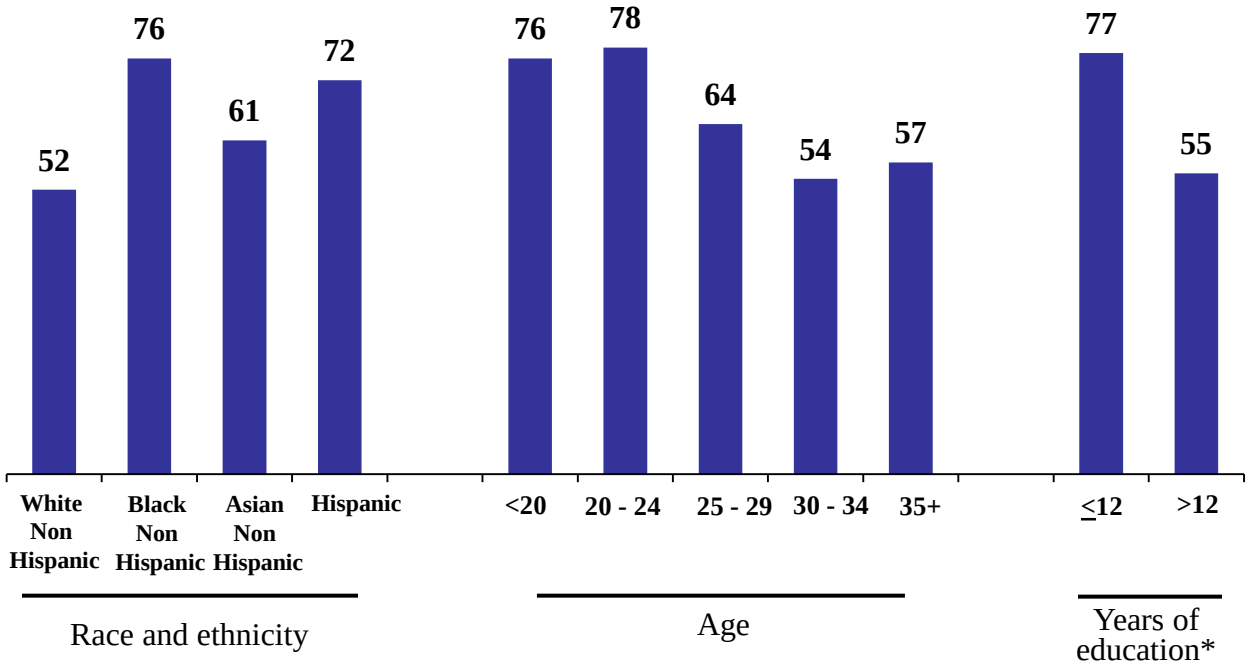
MULTIVITAMIN USE

Question 9: During the *month before* you got pregnant with your new baby, how many times a week did you take a multivitamin, a prenatal vitamin, or a folic acid vitamin?

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

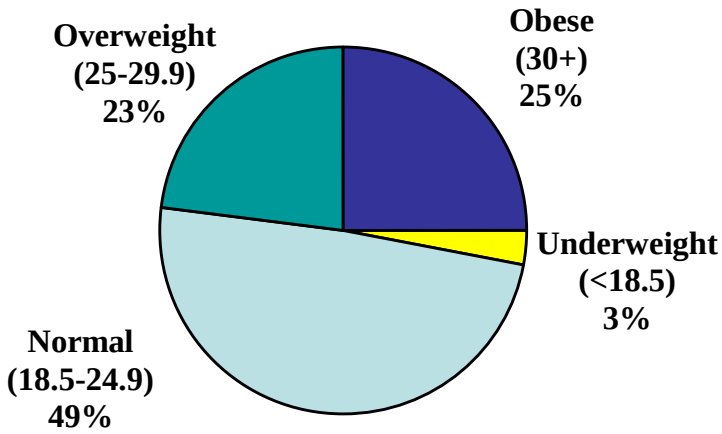


*Includes only mothers ages 20 and above.

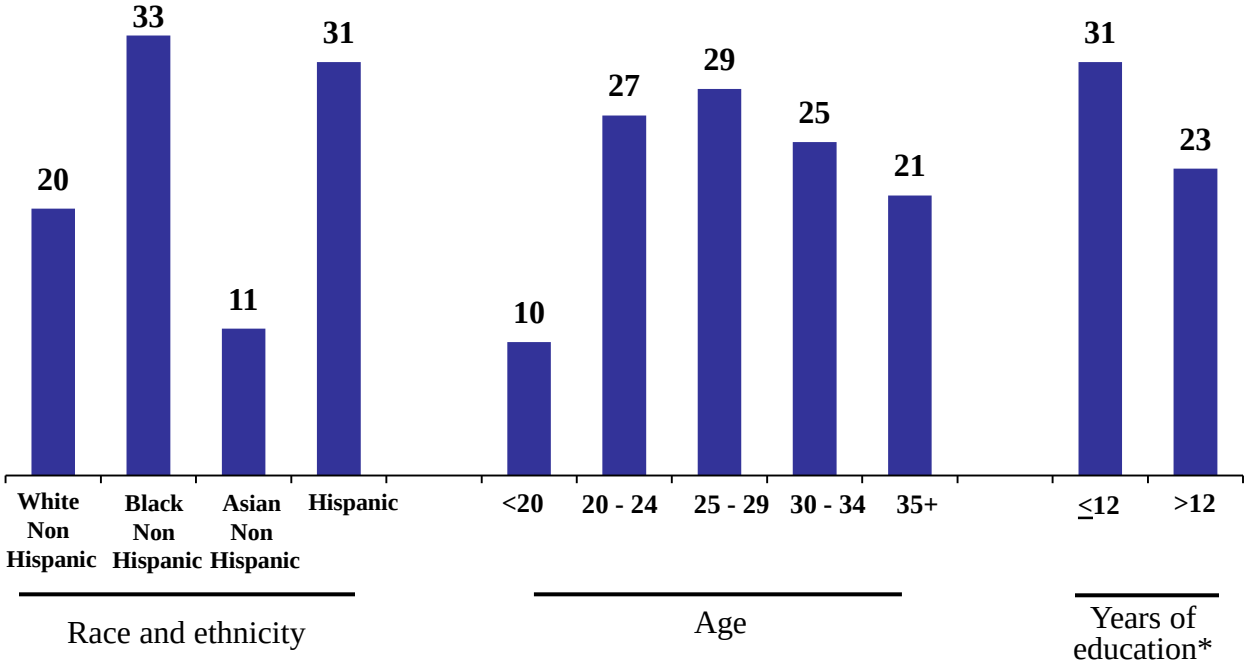
PRE-PREGNANCY BMI

Question 2: *Just before* you got pregnant with your new baby, how much did you weigh?
Question 1: How tall are you without shoes?

Distribution of Mothers by BMI Status Before Pregnancy



Percentage of Mothers Who Were Classified as Obese Before Pregnancy



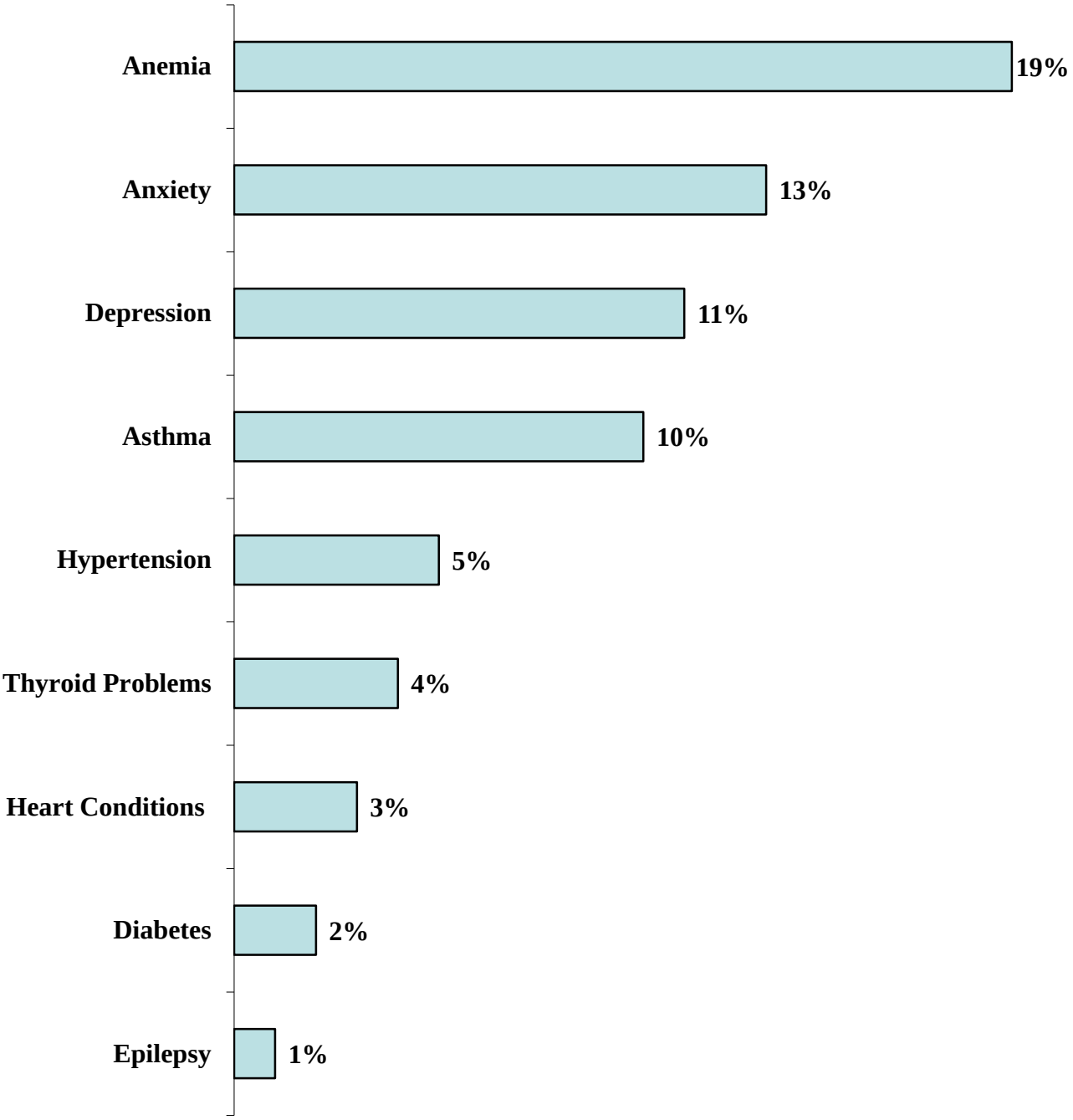
* Mothers <20 years of age had BMI >30 (and were not classified as obese via childhood growth charts)
**Includes only mothers ages 20 and above.
Note: Percentages are not reported if the number of respondents was less than five.

PRE-PREGNANCY HEALTH PROBLEMS

Question 11: *Before* you got pregnant with your new baby, did a doctor, nurse, or other health care worker tell you that you had any of the following health conditions?

Question 12: During the *3 months before* you got pregnant with your new baby, did you have any of the following health conditions?

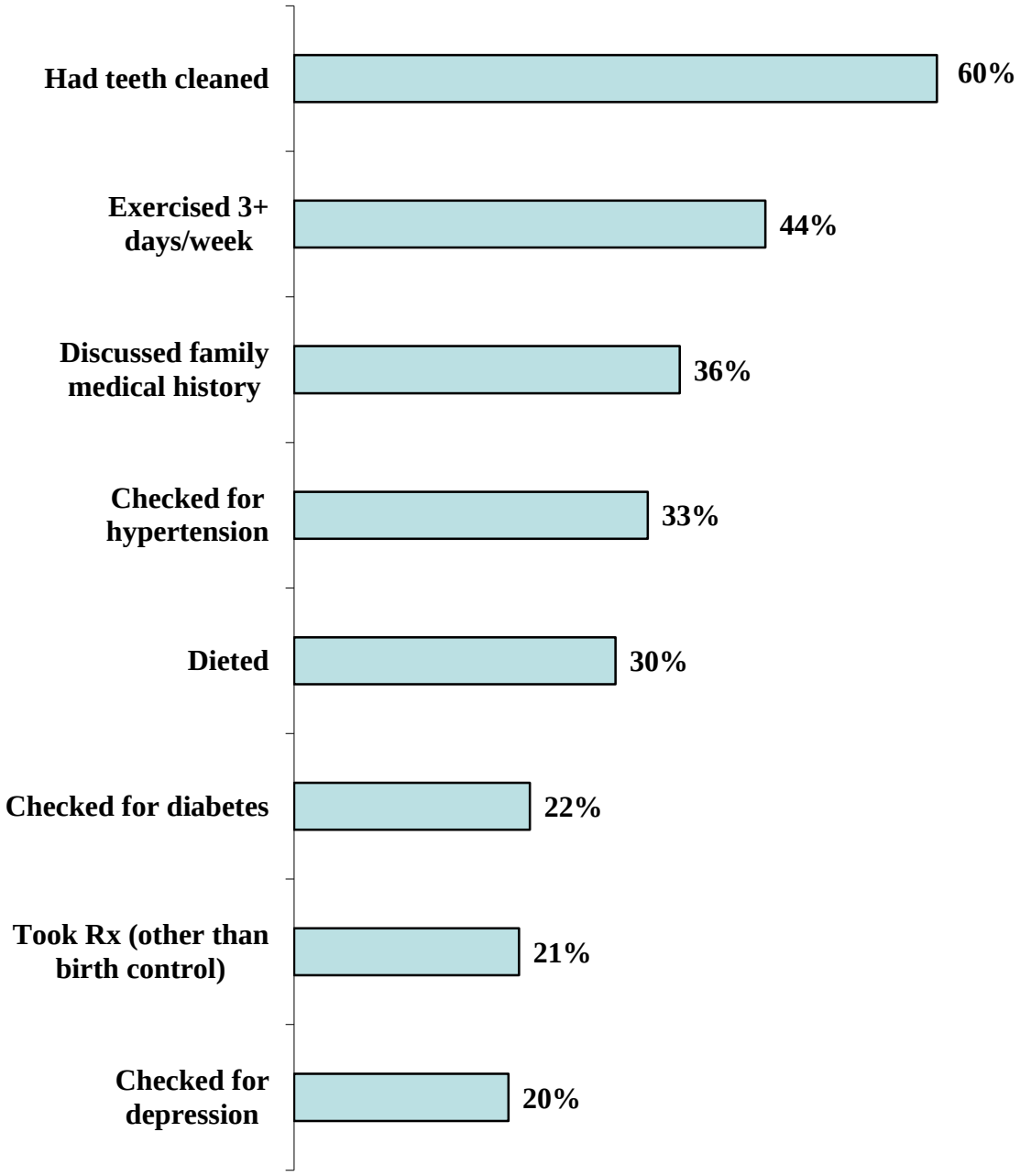
Mothers Reporting Health Problems Before Pregnancy



PRE-PREGNANCY ACTIVITIES

Question 7: At any time during the *12 months before* you got pregnant with your new baby, did you do any of the following things?

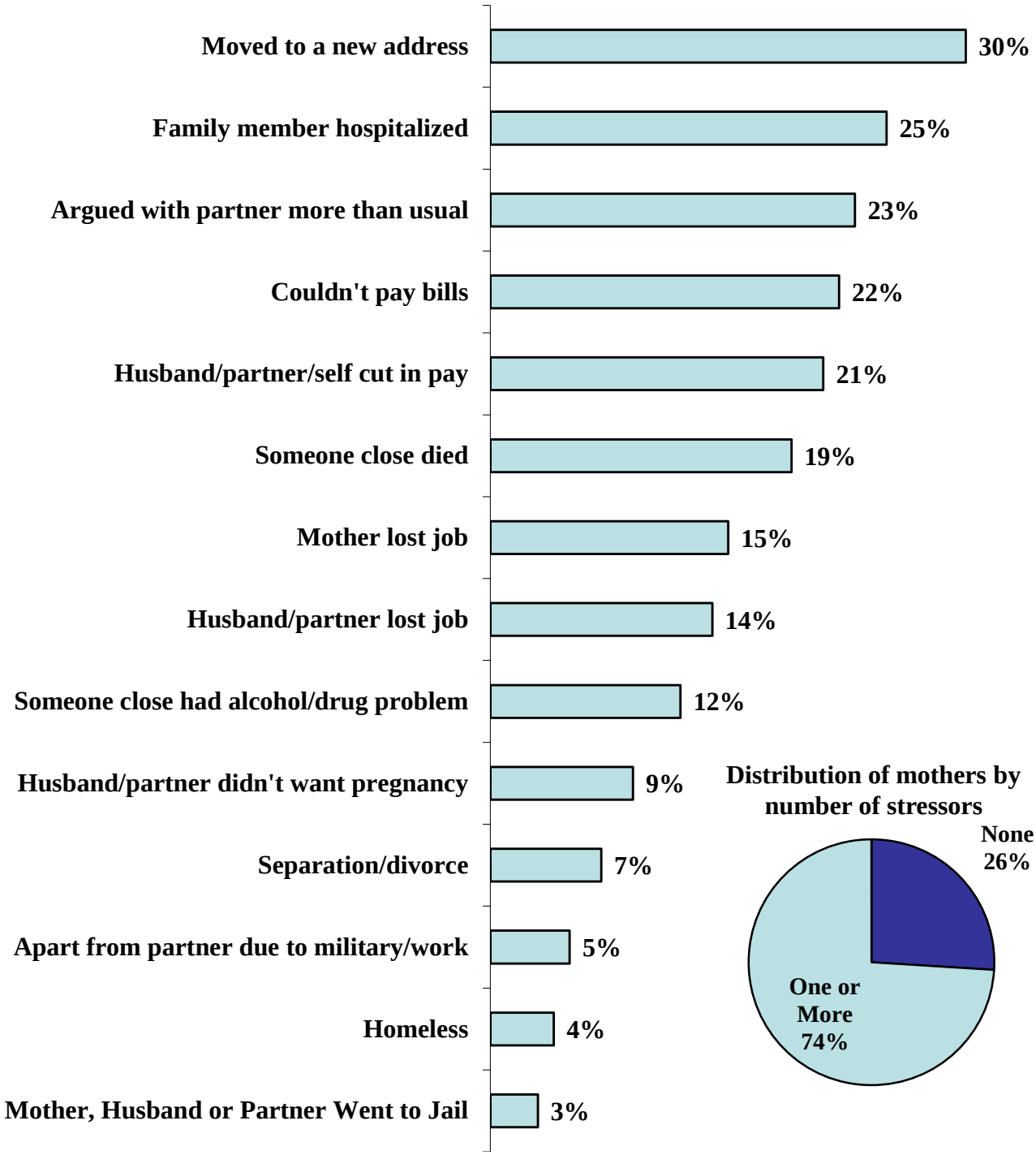
Mothers Reporting Activities During the Twelve Months Prior to Pregnancy



STRESS

Question 44: 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.

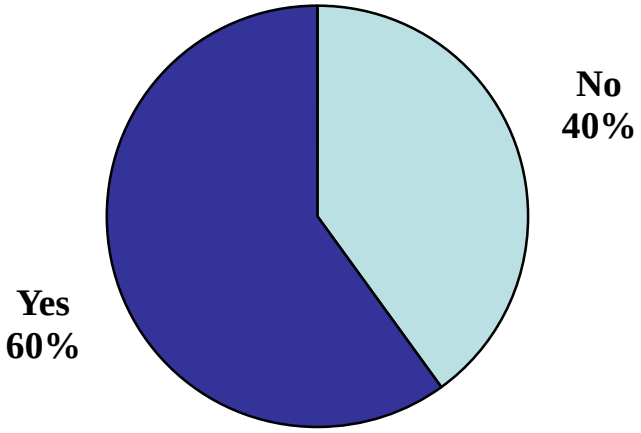
Mothers Reporting Stress by Type of Event



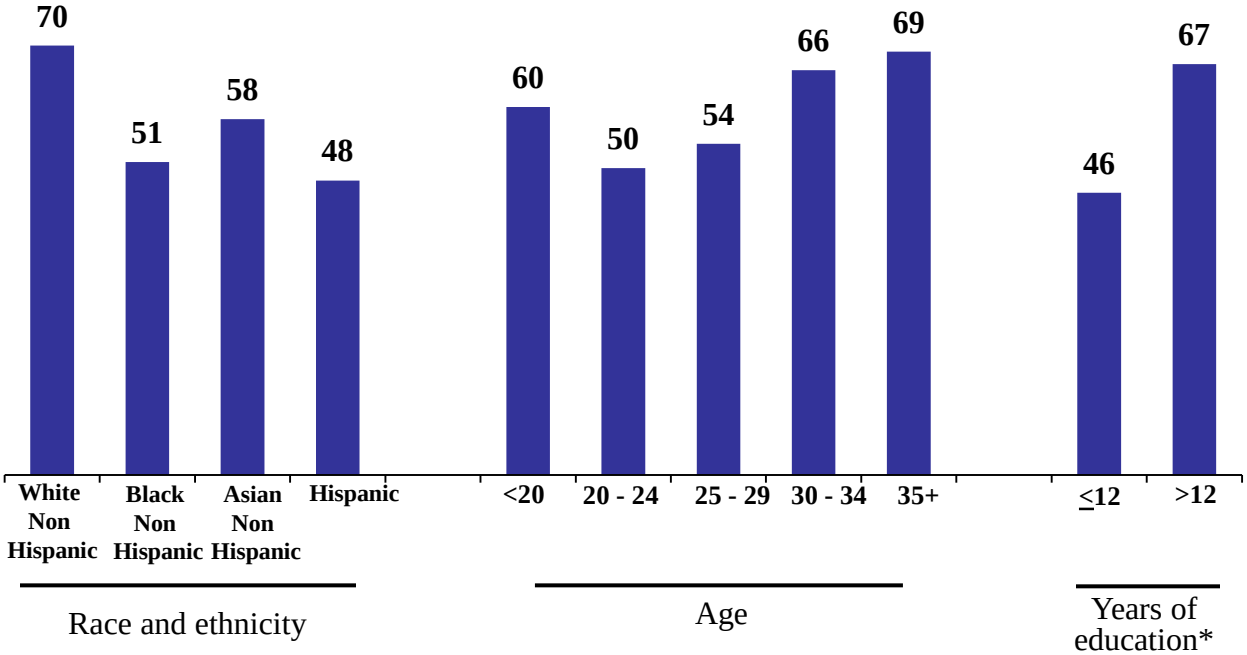
ORAL HEALTH

Question 7: At any time during the *12 months before* you got pregnant with your new baby, did you have your teeth cleaned by a dentist or dental hygienist?

Mothers Reporting on Teeth Cleaning 12 Months Before Pregnancy



Percentage of Mothers Who Reported Having Had their Teeth Cleaned 12 Months Before Pregnancy



*Includes only mothers ages 20 and above.

Prenatal Factors

"Would have preferred vaginal delivery of breech baby, but option not provided by clinicians."

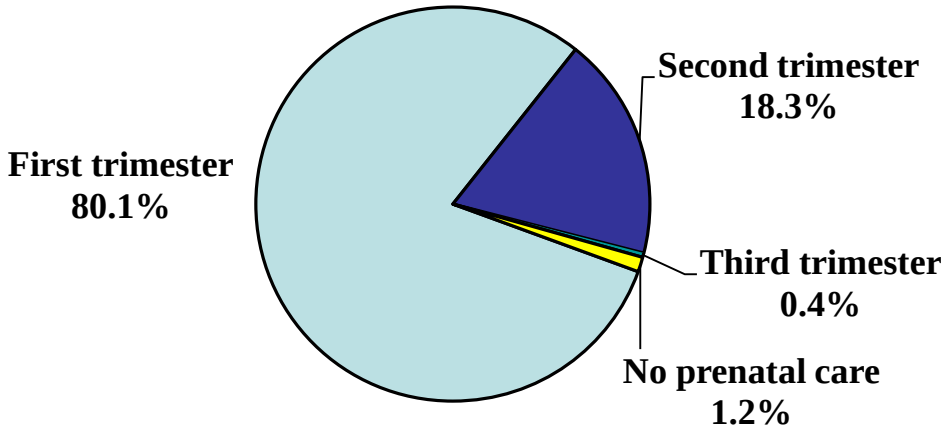
"During my pregnancy I was incarcerated all the way up till a month before my baby was born. I did go to all my doctor's appointments and had a very helpful lady from the health department who helped me all through my pregnancy and still visits me after my baby was born."

PRAMS mothers

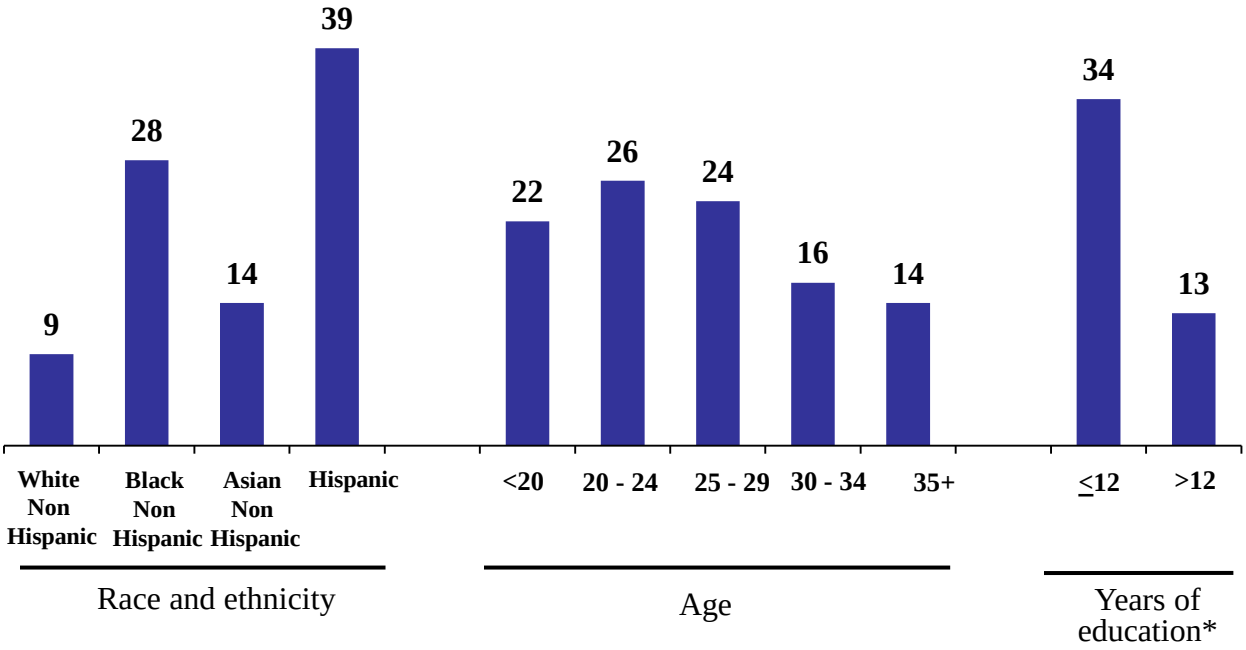
TRIMESTER PRENATAL CARE BEGAN

Question 21: 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

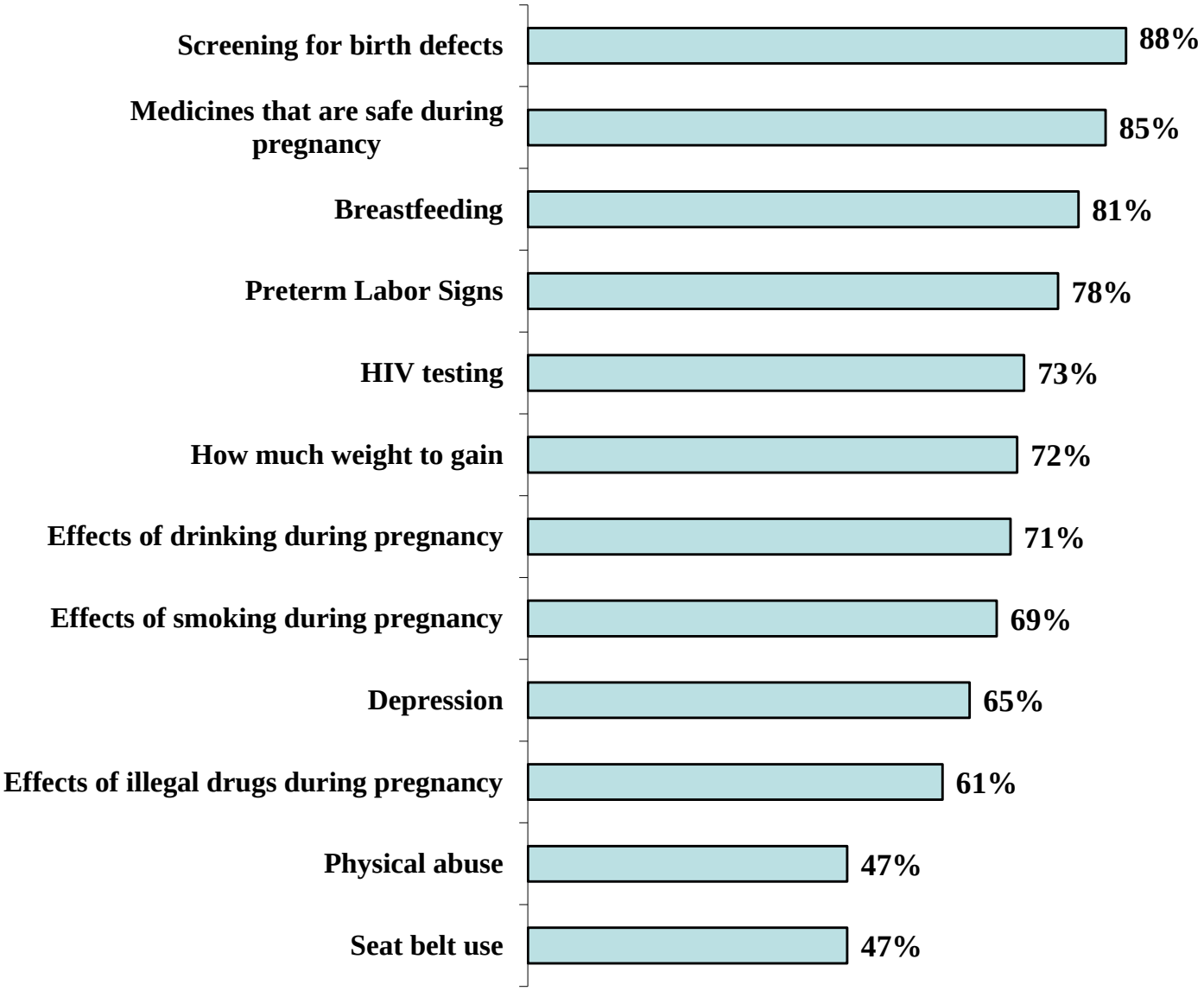


*Includes only mothers ages 20 and above.

TOPICS DISCUSSED DURING PRENATAL CARE VISITS

Question 23: *During any of your prenatal care visits*, did a doctor, nurse, or other healthcare worker talk with you about any of the things listed below?
Please count only discussions, not reading materials or videos.

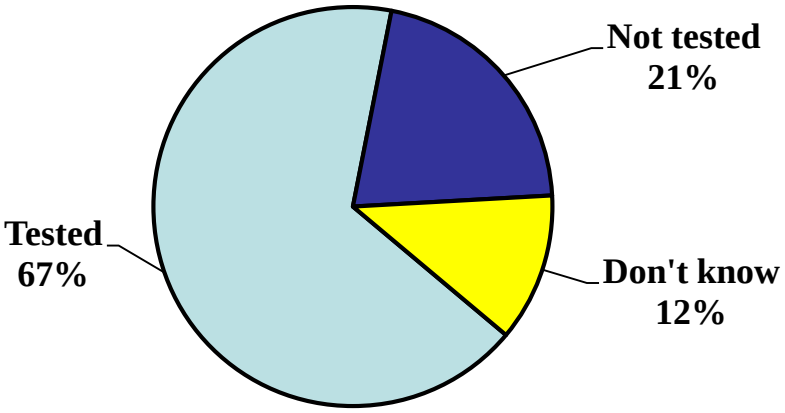
Mothers Reporting That Selected Topics Were Discussed During Prenatal Care Visits



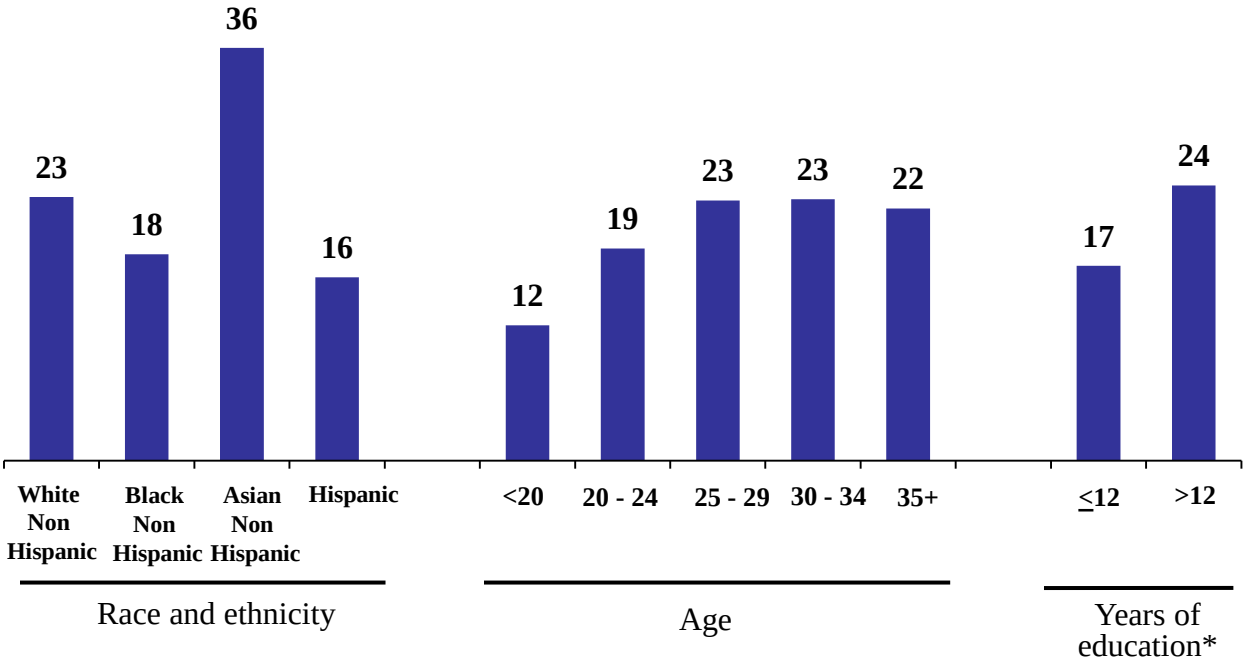
HIV TESTING

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

Distribution of Mothers by HIV Testing Status



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

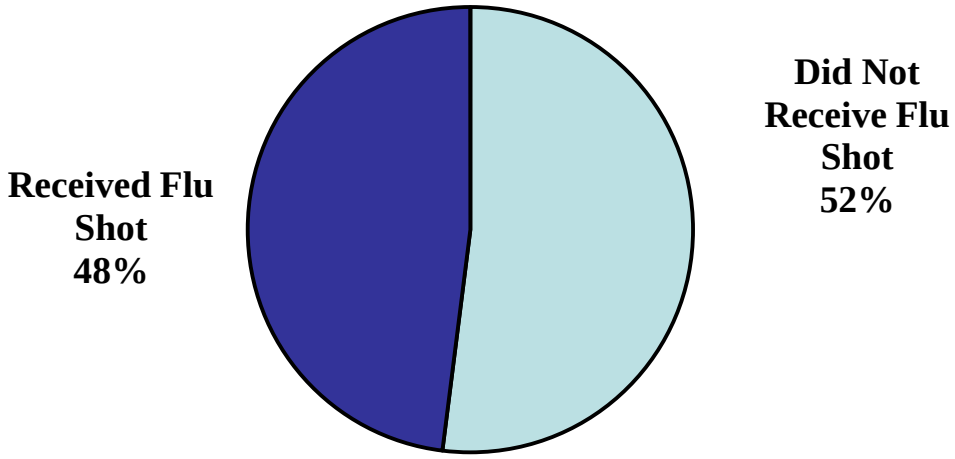


*Includes only mothers ages 20 and above.

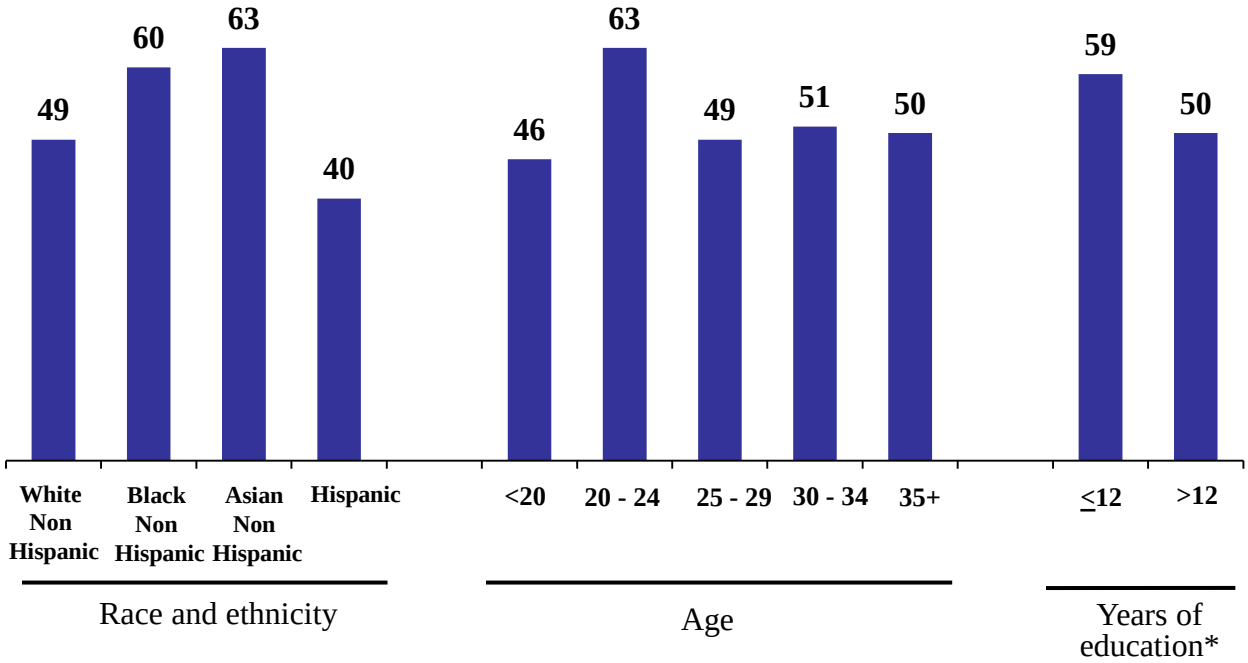
INFLUENZA IMMUNIZATIONS

Question 27: During the 12 months *before the delivery* of your new baby, did you *get* a flu shot?

Distribution of Mothers by Flu Immunization Status Year Before Delivery



Percentage of Mothers Who Reported They Did Not Get a Flu Shot Year Before Delivery

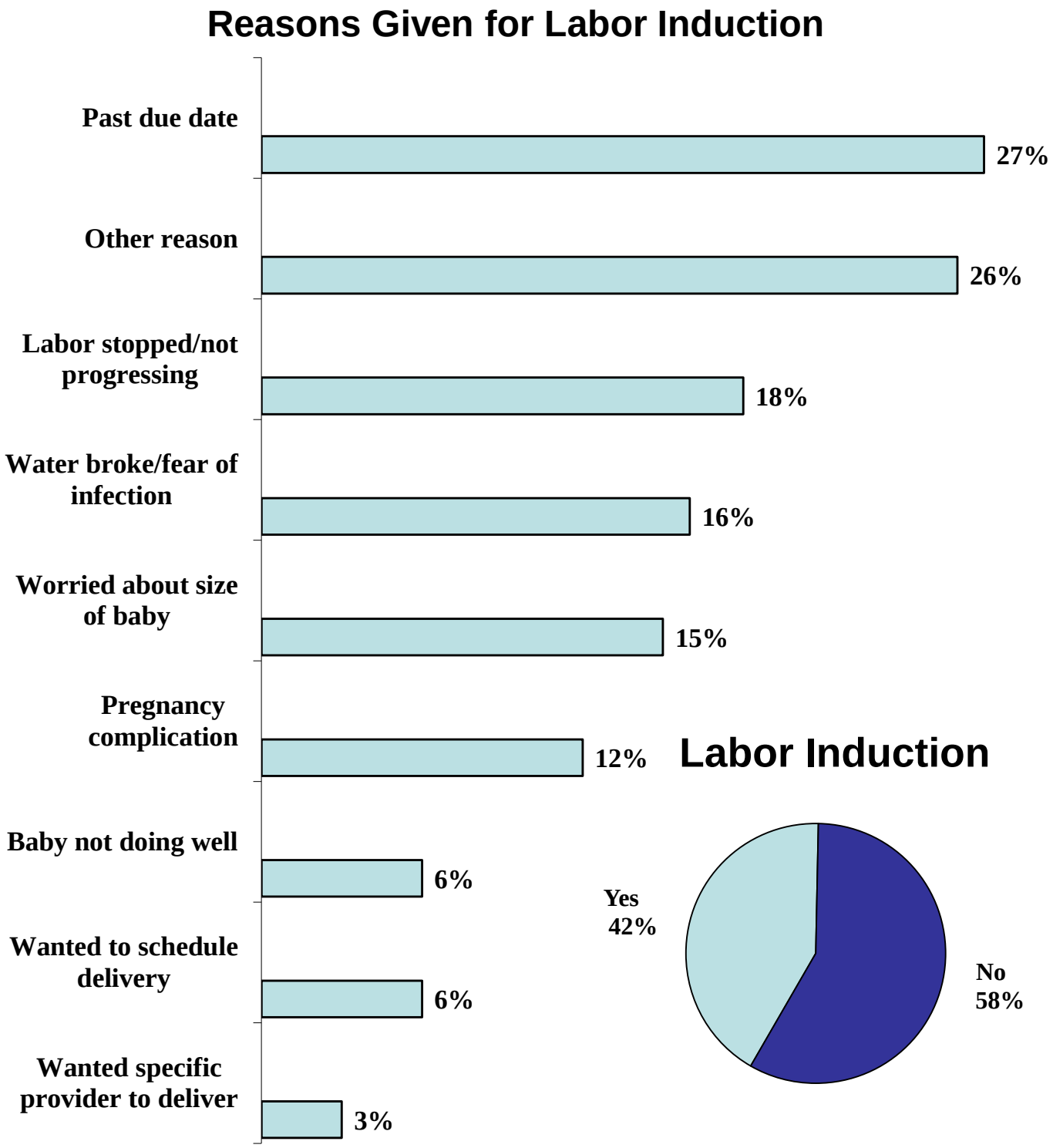


*Includes only mothers ages 20 and above.

REASONS FOR LABOR INDUCTION

Question 48: Did your doctor, nurse, or other health care worker try to induce your labor (start your contractions using medicine)?

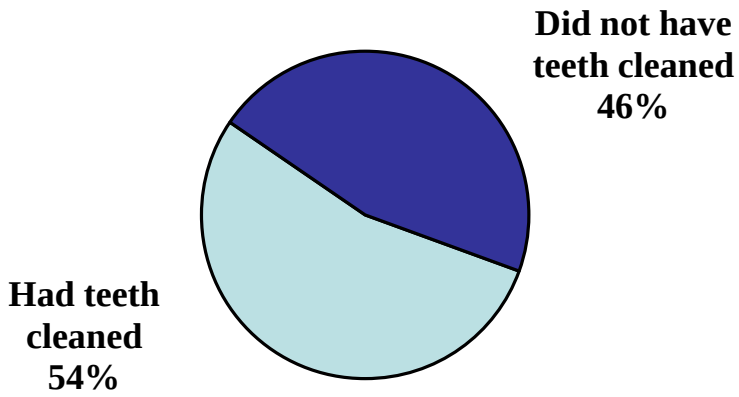
Questions 49: Why did your doctor, nurse, or other health care worker try to induce your labor (start your contractions using medicine)?



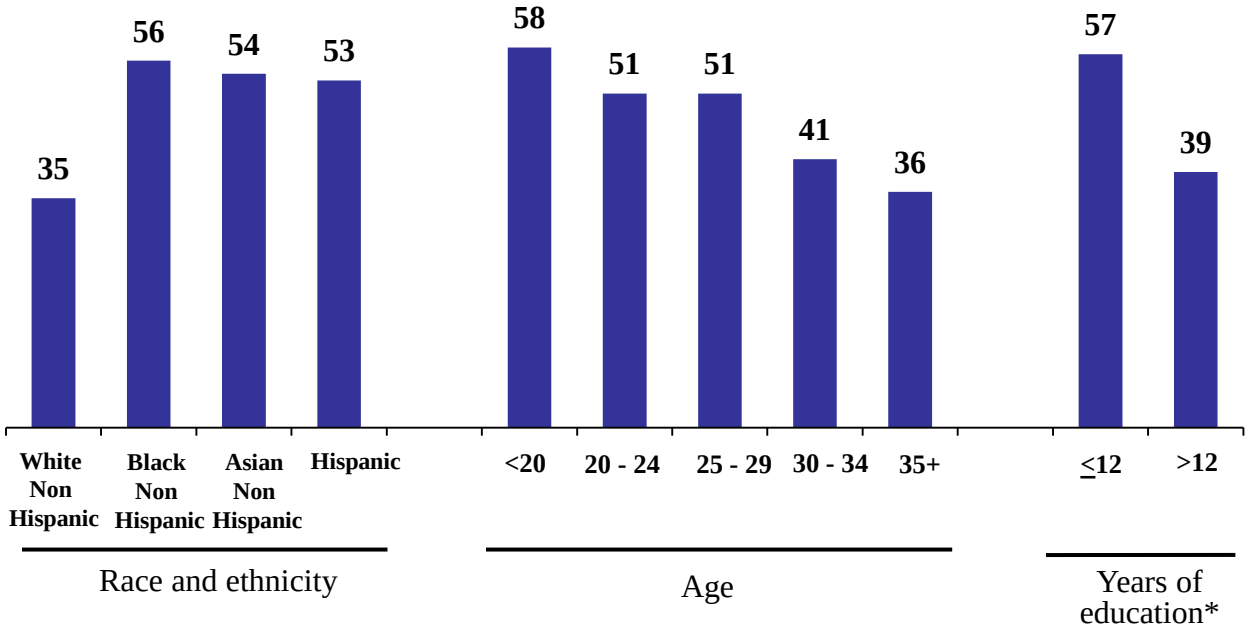
TEETH CLEANING

Question 29: This question is about the care of your teeth *during your most recent pregnancy.*
Question 29c: I had my teeth cleaned by a dentist or dental hygienist.
For each item, check **No** if it is not true or does not apply to you or **Yes** if it is true.

Distribution of Mothers by Teeth Cleaning During Pregnancy



Percentage of Mothers Who Did Not Have Their Teeth Cleaned During Pregnancy

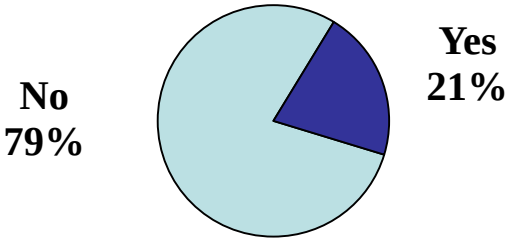


*Includes only mothers ages 20 and above.

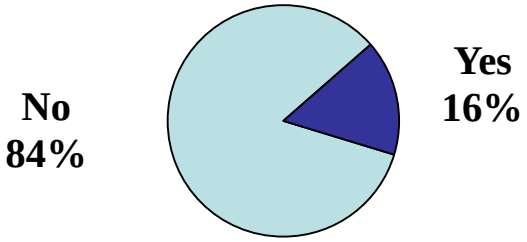
ORAL HEALTH PROBLEMS

Question 29e: I needed to see a dentist for a problem (during pregnancy).
Question 29f: I went to a dentist or dental clinic about a problem (during pregnancy).
Question 30: Did any of the following things make it hard for you to go to a dentist or dental clinic about the problem you had during your most recent pregnancy?

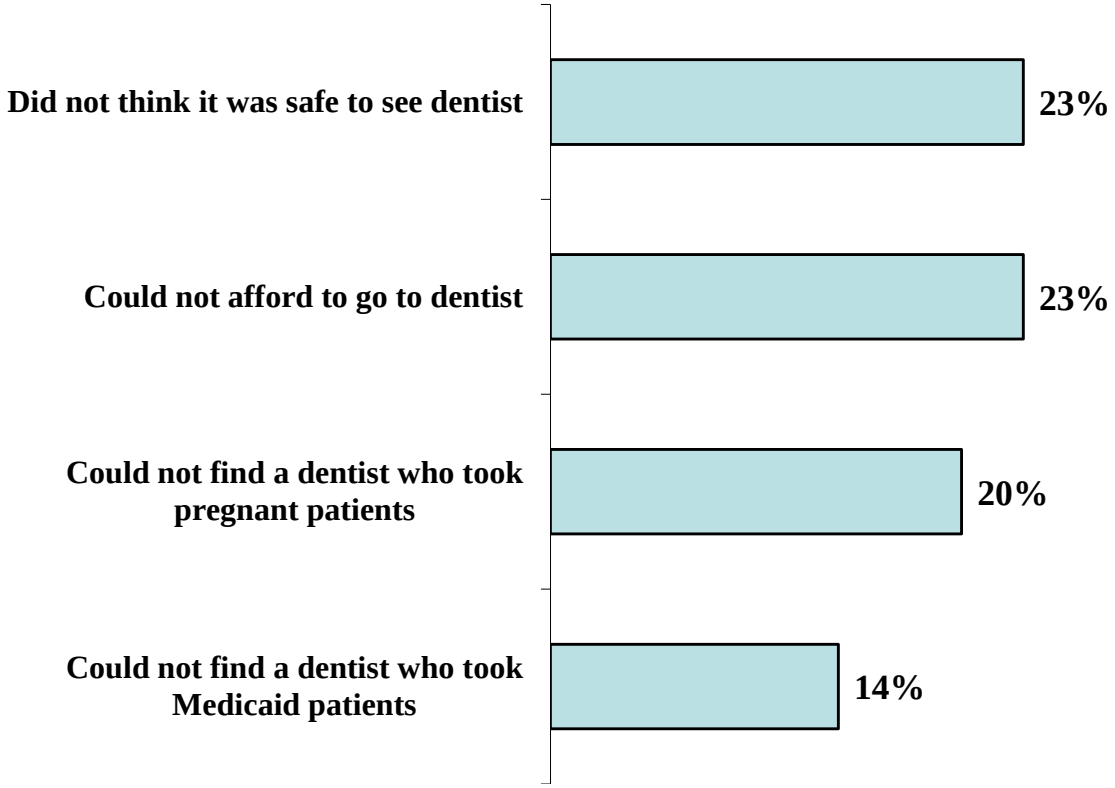
Distribution of Mothers Who *Needed* to See a Dentist about a Problem During Pregnancy



Distribution of Mothers Who *Went* to See a Dentist about a Problem During Pregnancy



Factors Making it Difficult to See a Dentist About a Problem During Pregnancy



Health Care Coverage, WIC, Home Visiting, and Employment

"The insurance really helps because you are not worried about bills and you can take the baby to his/her visits and you can also take care of yourself a lot more. The WIC also helps a lot so please, please don't take away those programs."

"I had two bad teeth pulled during the 7th & 8th month of pregnancy I was putting it off prior to pregnancy because I didn't have any dental insurance."

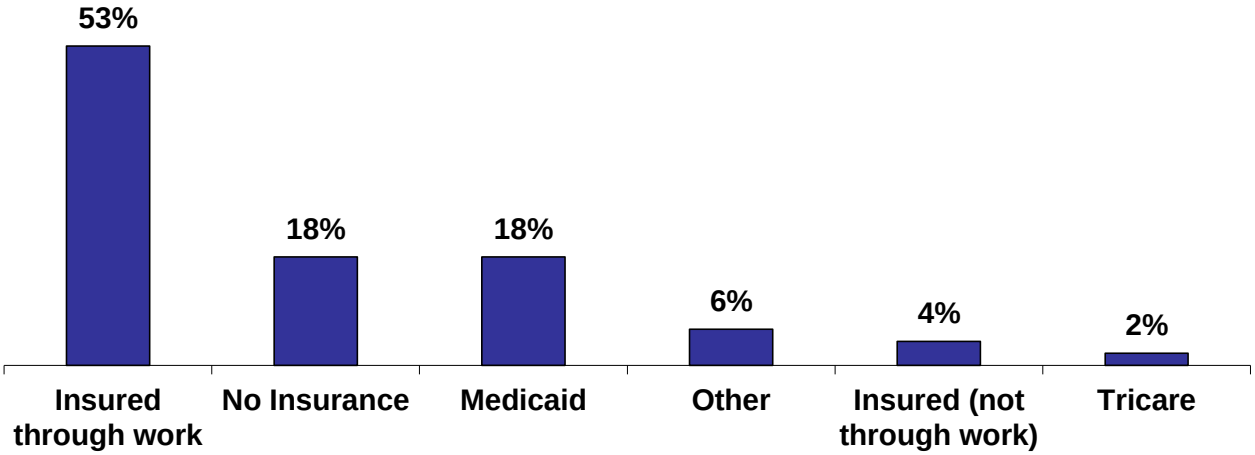
"Having employers make decisions about offering maternity leave may not be the best approach. Due to Maryland's proximity to DC, I wish MD lawmakers would more strongly advocate for a stronger PAID maternity leave policy for federal employees. I felt I needed to balance financial security with the ability to adequately care for my newborn baby."

PRAMS mothers

HEALTH INSURANCE BEFORE PREGNANCY

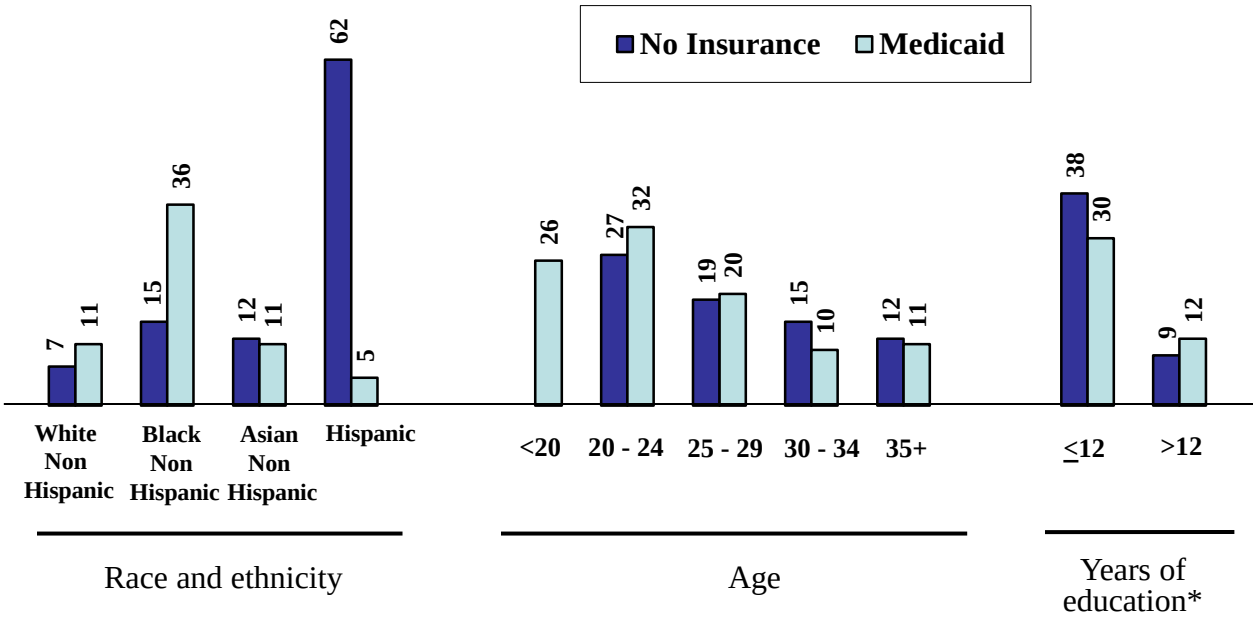
Question 8: During the *month before* you got pregnant with your new baby, what kind of *health insurance* did you have?

Health Insurance Status Just Before Pregnancy**



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

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

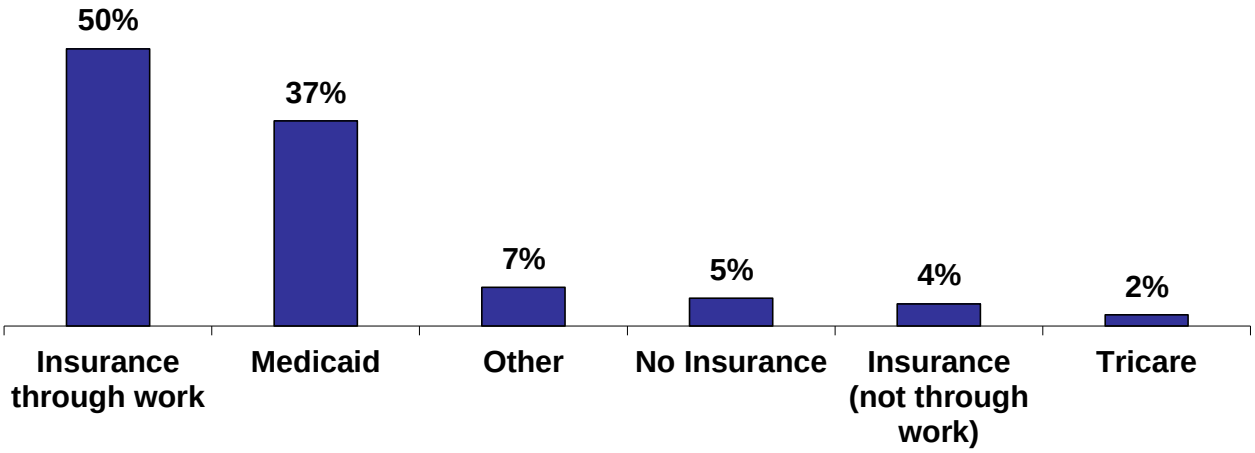


*Includes only mothers ages 20 and above.

SOURCE OF PAYMENT FOR PRENATAL CARE

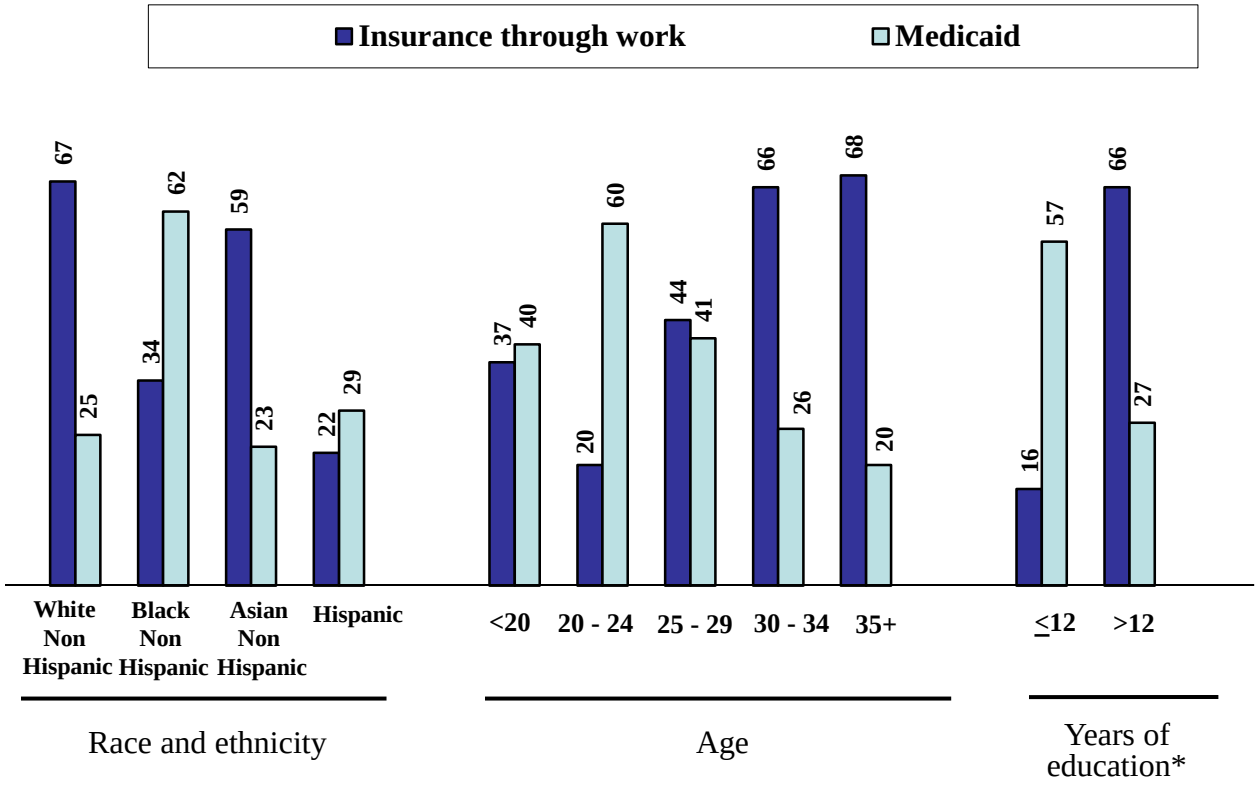
Question 22: During *your most recent* pregnancy, what kind of *health insurance* did you have to pay for your *prenatal care*?

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 or Medicaid as a Source of Payment for Prenatal Care

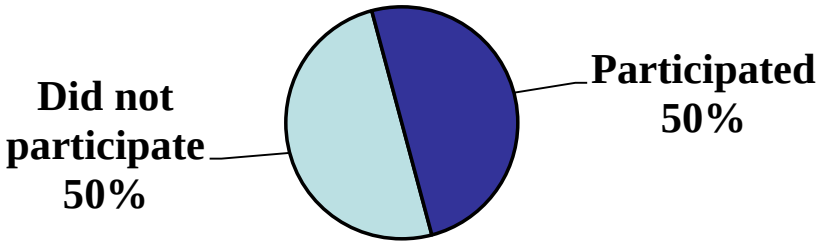


*Includes only mothers ages 20 and above.

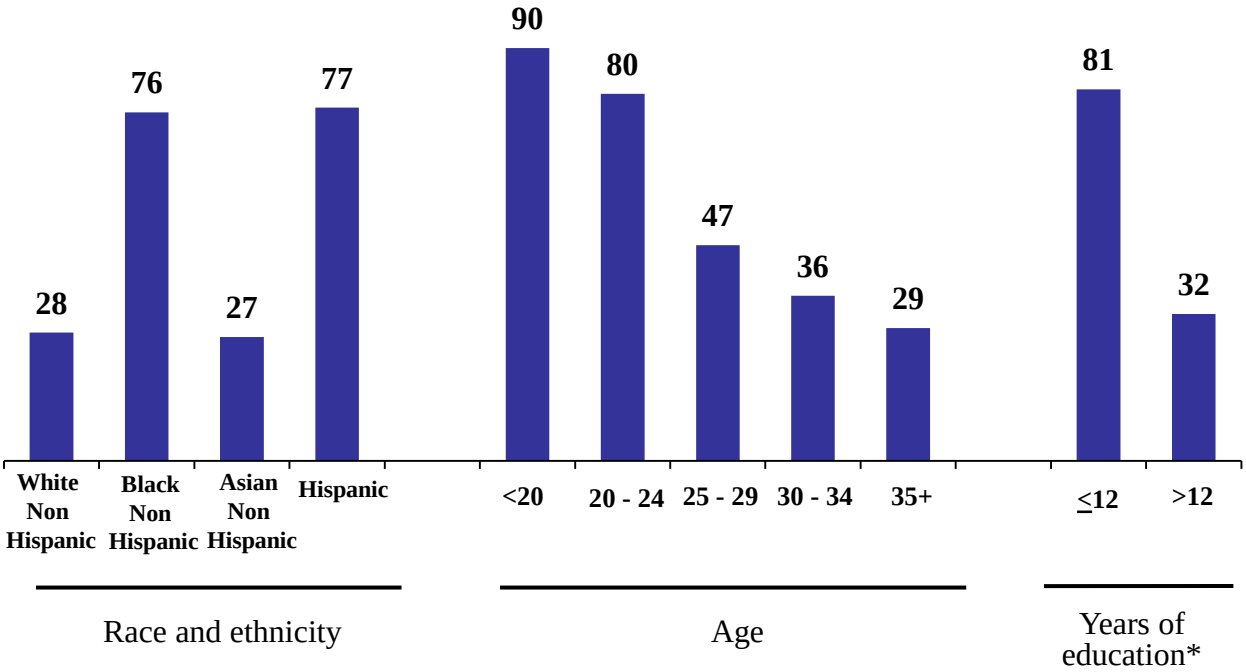
WIC PARTICIPATION

Question 33: 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

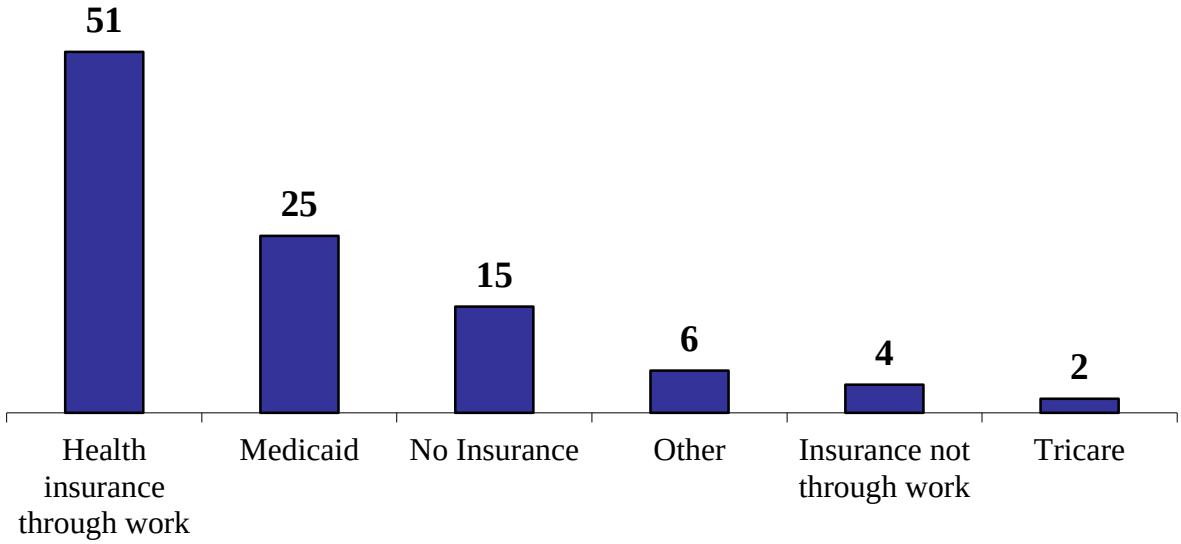


*Includes only mothers ages 20 and above.

CURRENT HEALTH INSURANCE

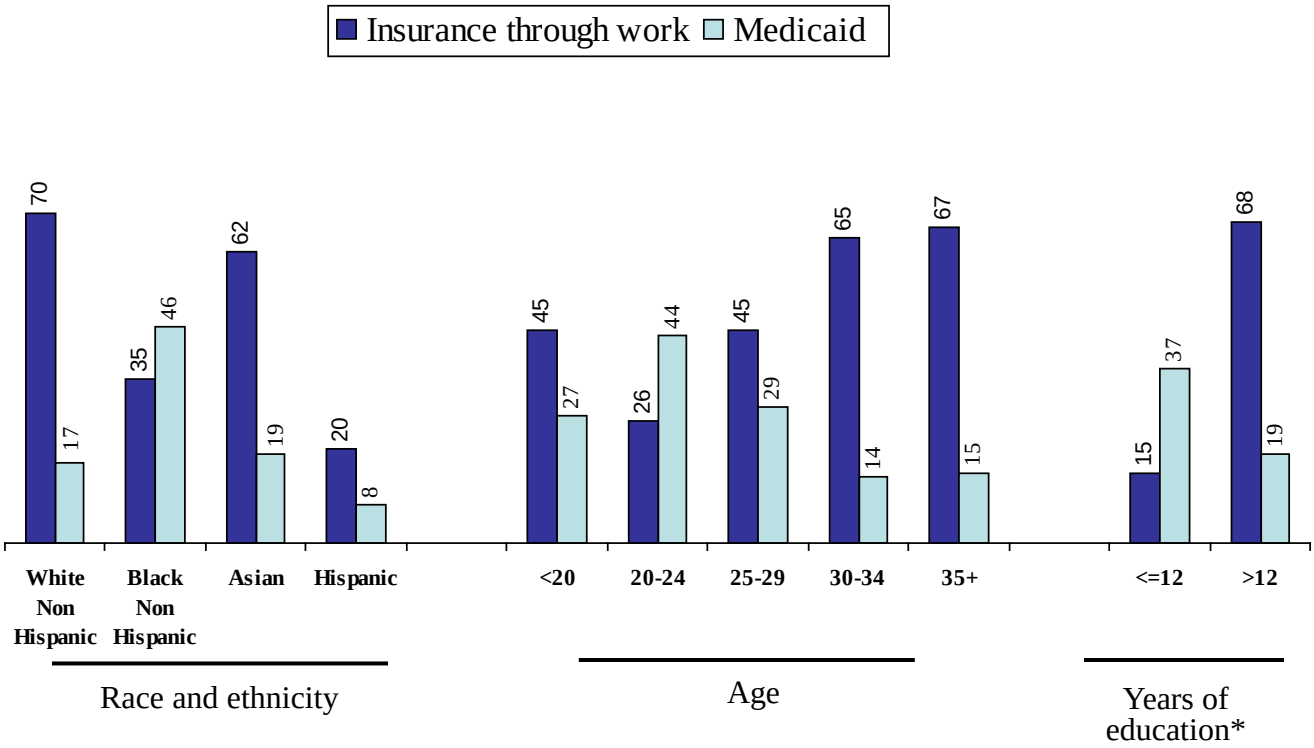
Question 68: What kind of *health insurance* do you have *now*? Check all that apply.

Source(s) of Current Health Insurance**



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

Percentage of Mothers Who Identified Currently Having Insurance or Medicaid



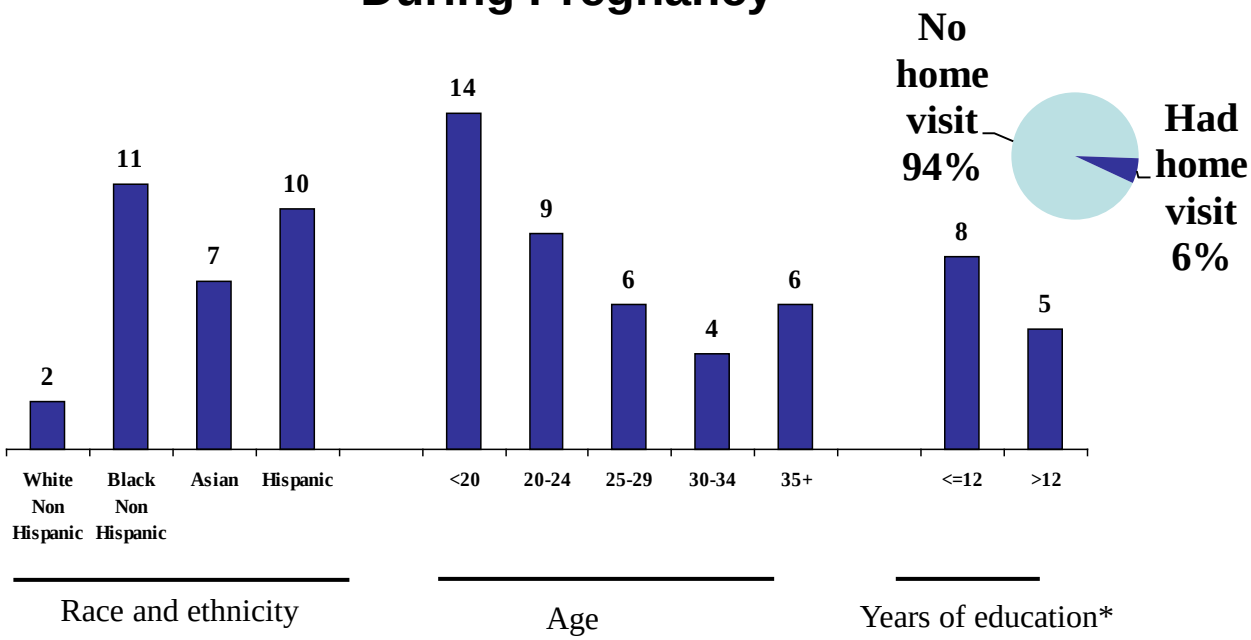
*Includes only mothers ages 20 and above.

HOME VISITING

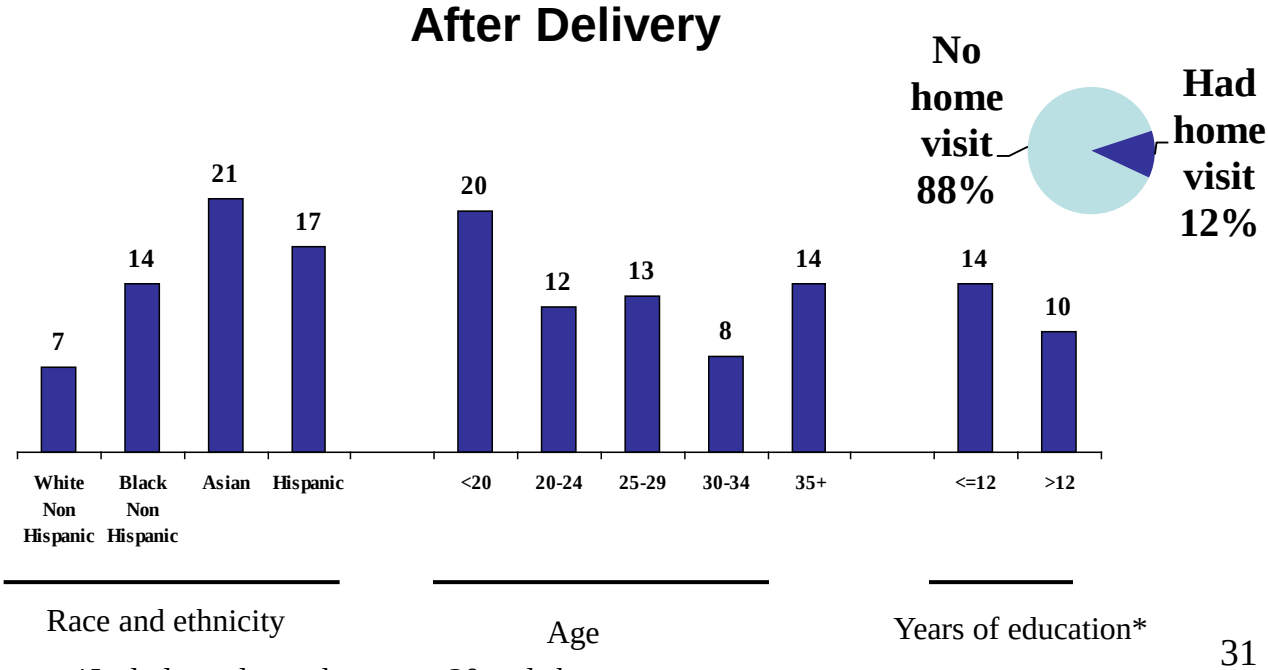
Question 32: During *your most recent* pregnancy, did a home visitor come to your home to help you prepare for your new baby?

Question 61: *Since your new baby was born*, has a home visitor come to your home to help you learn how to take care of yourself or your new baby?

Distribution of Mothers who had a Home Visit During Pregnancy



Distribution of Mothers who had a Home Visit After Delivery

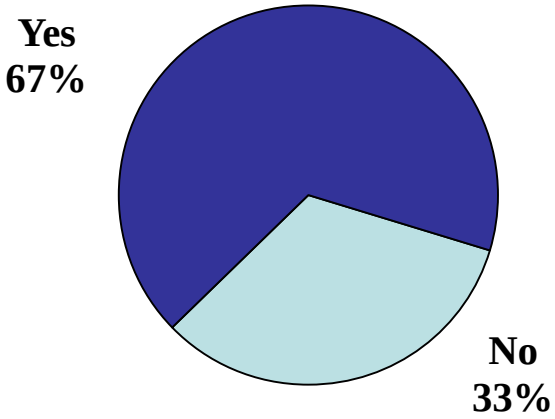


*Includes only mothers ages 20 and above.

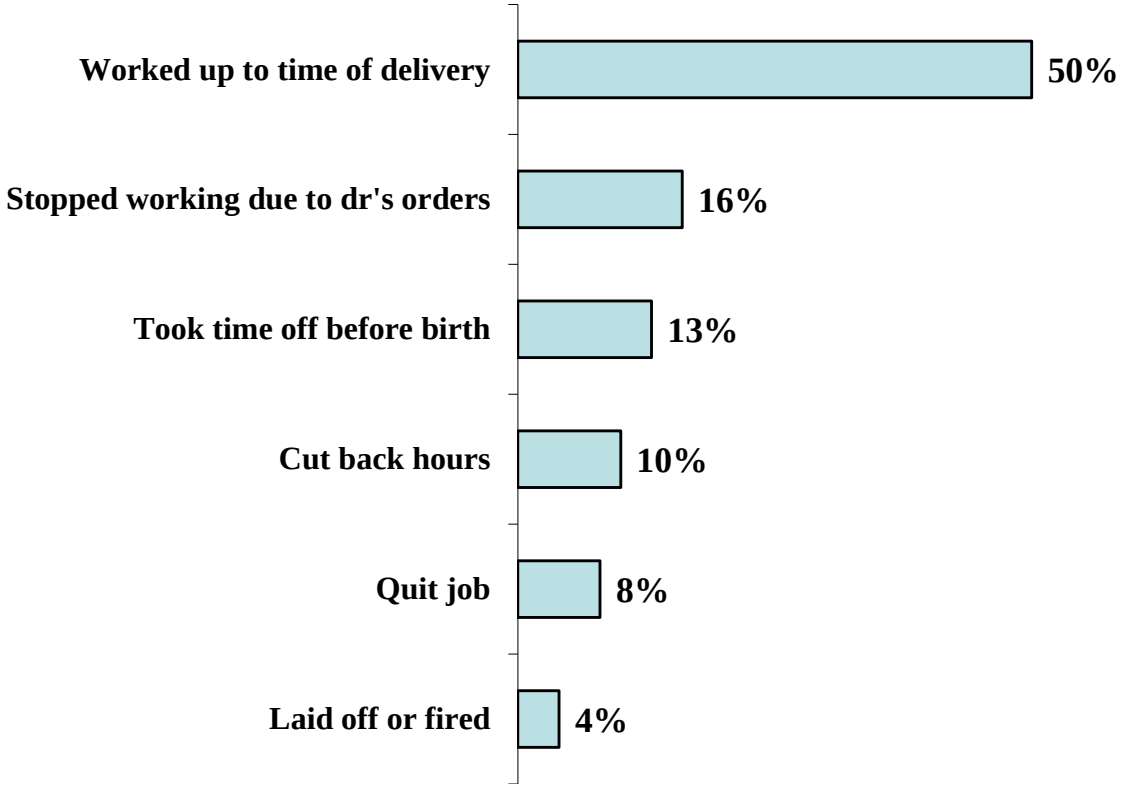
MATERNAL EMPLOYMENT

Question 76: At any time during *your most recent* pregnancy, did you work at a job for pay?
Question 77: Which of the following best describes your work schedule during the *last month* of your most recent pregnancy?

Distribution of Mothers Who Worked At a Job For Pay During Pregnancy



Work Schedule During Last Month of Pregnancy

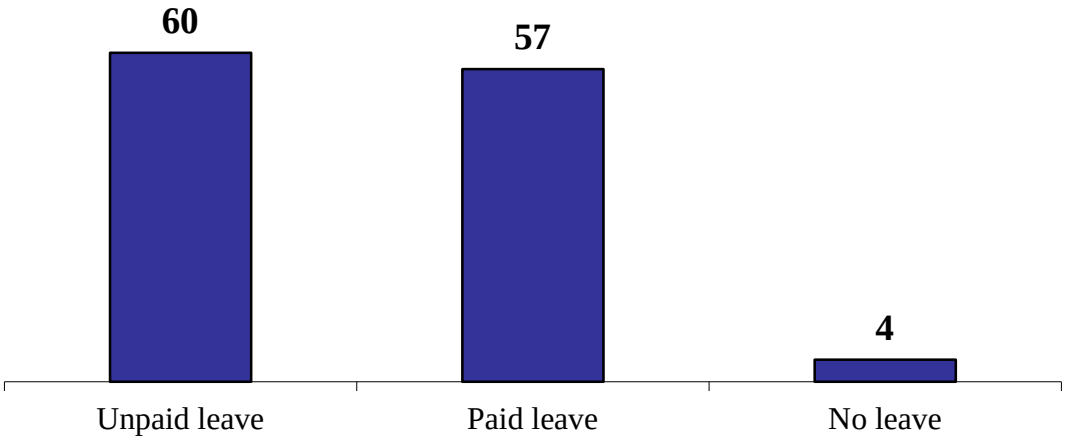


WORKPLACE LEAVE

Question 79: Which of the following describes the leave or time you took off from work *after* your new baby was born?

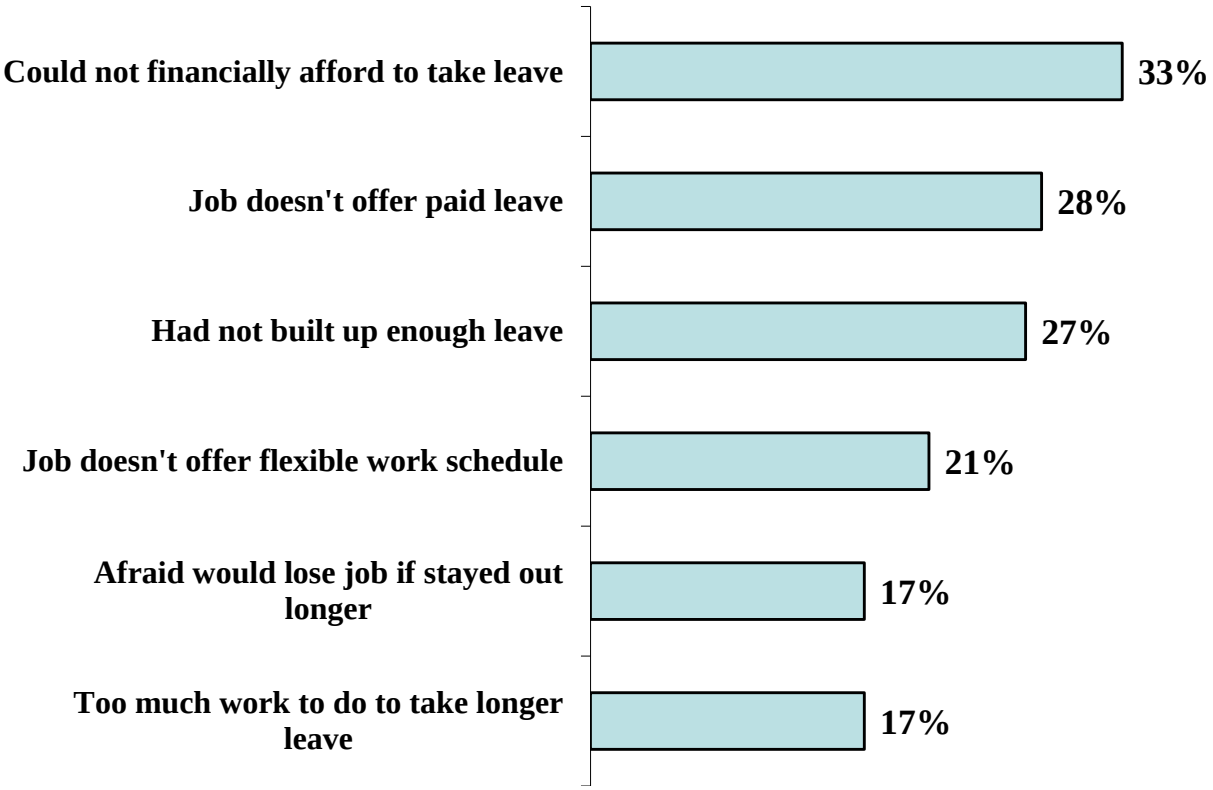
Question 80: Did any of the things listed below affect your decision about taking leave from work *after* your new baby was born?

Distribution of Leave That Mothers Took After Delivery*

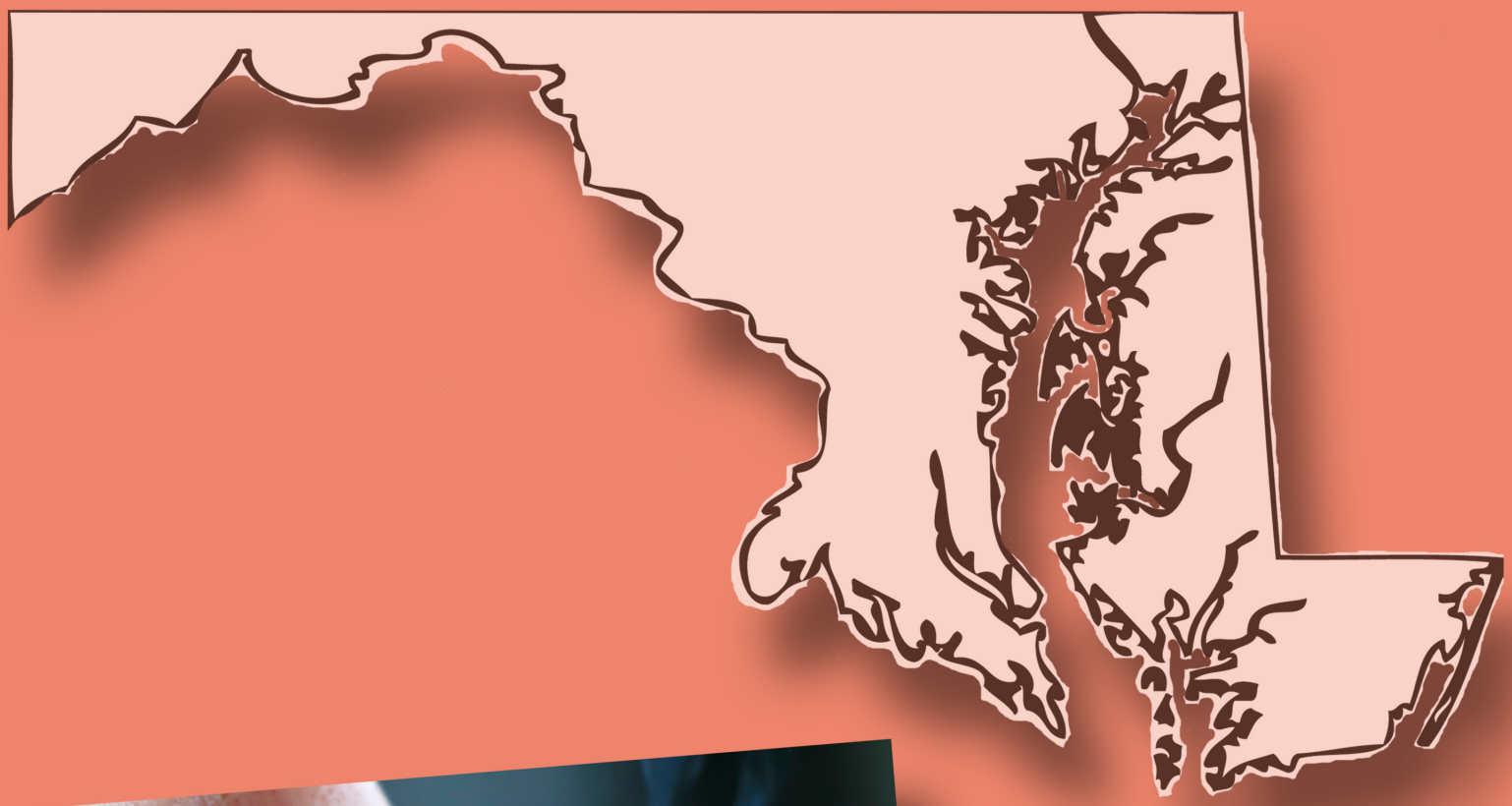


*Respondents were instructed to check all that apply, therefore percentages do not sum to 100.

Factors Affecting Decision to Take Leave



Selected Risk Factors



"Before I got pregnant up until I found out I was pregnant at 3 weeks I did smoke marijuana on a regular daily basis. Since then I haven't smoked so often or even as heavily."

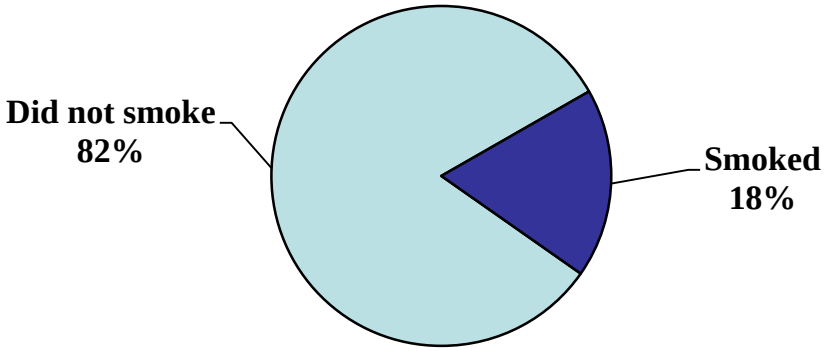
"My issues were an abusive husband and an unhappy home. It takes such a toll not only on your pregnancy, but even after that bundle of joy comes home."

PRAMS mothers

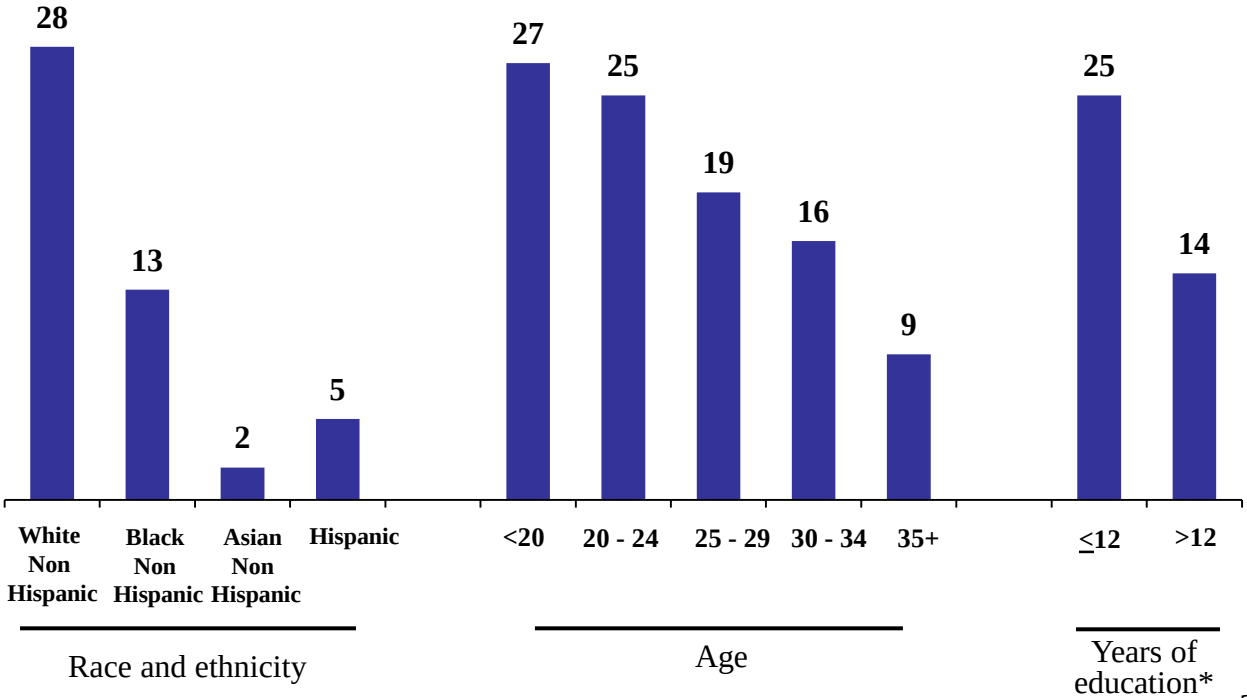
SMOKING BEFORE PREGNANCY

Question 36: In the *three months* <u>*before*</u> you got pregnant, how many 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

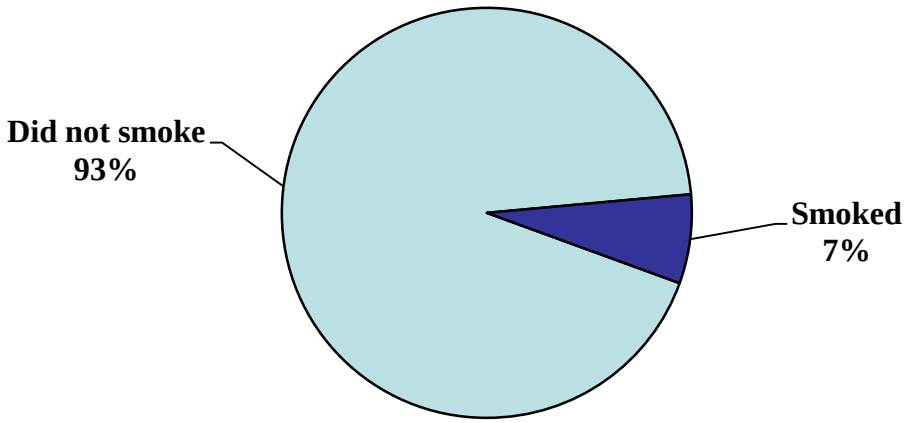


*Includes only mothers ages 20 and above.

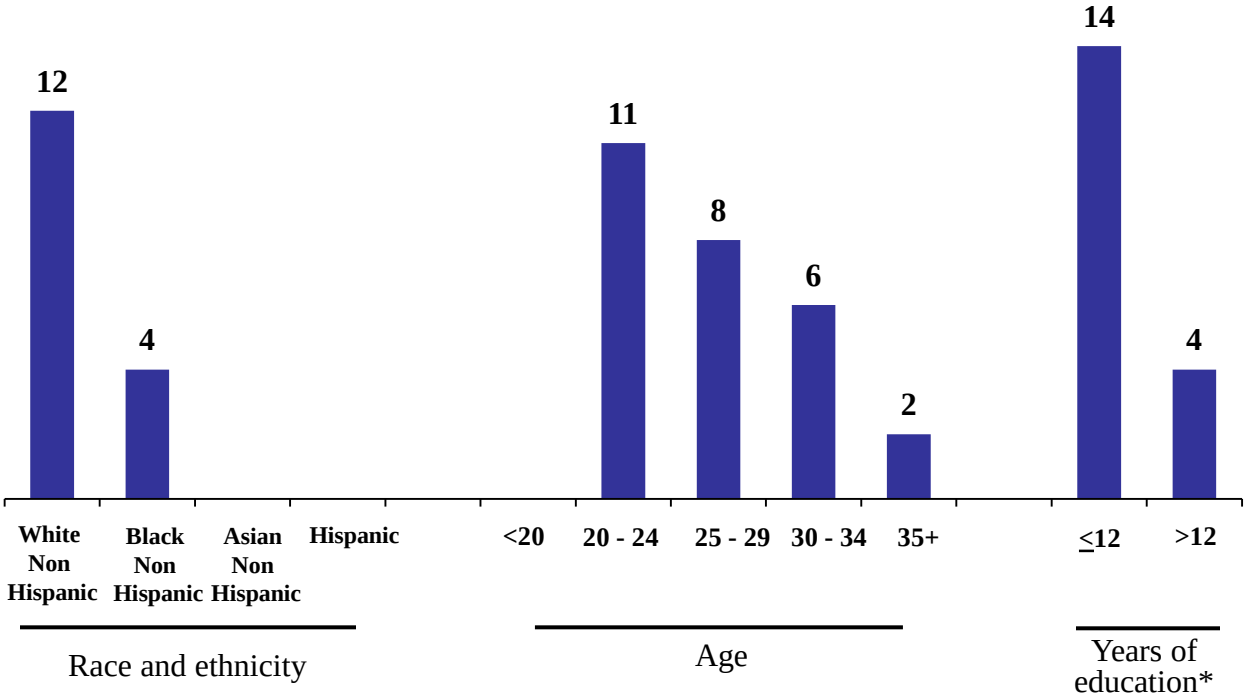
SMOKING DURING PREGNANCY

Question 37: In the *last 3 months* of your pregnancy, how many 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



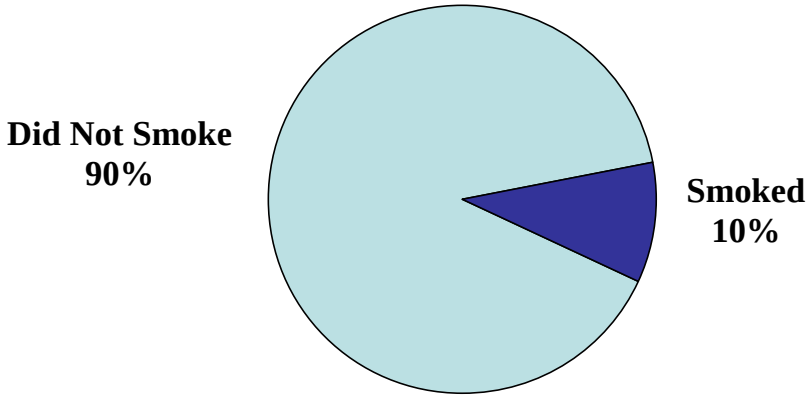
*Includes only mothers ages 20 and above.

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

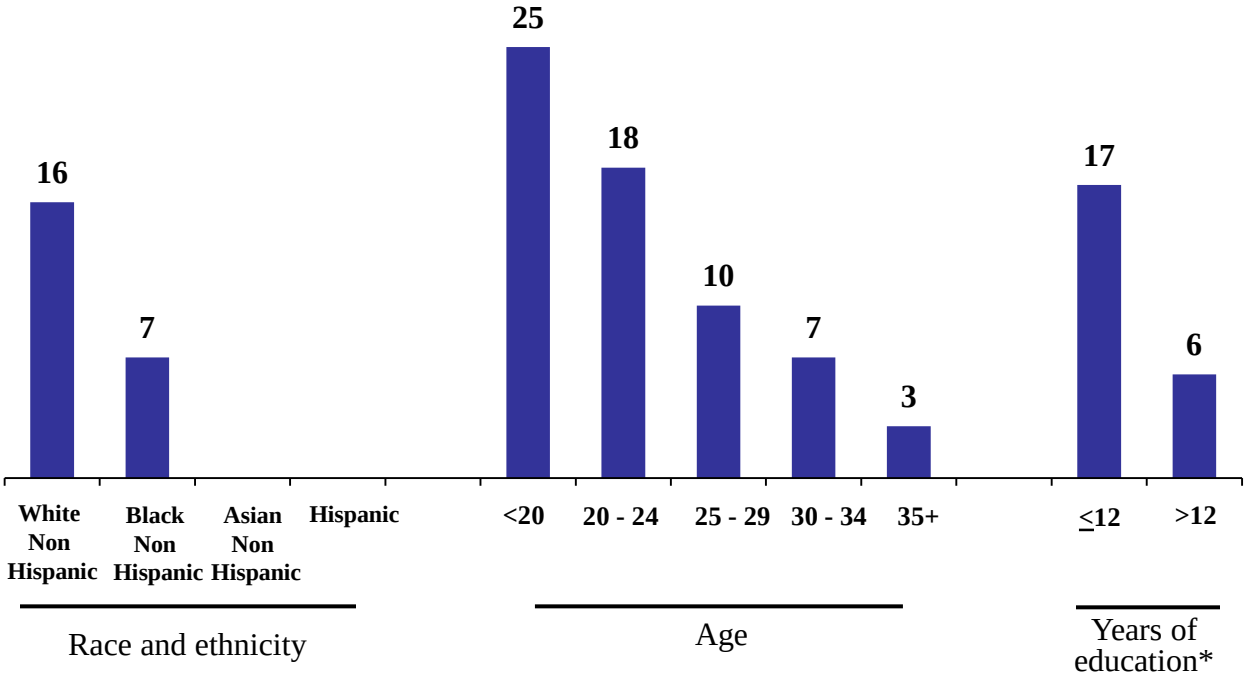
SMOKING AFTER PREGNANCY

Question 38: How many 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



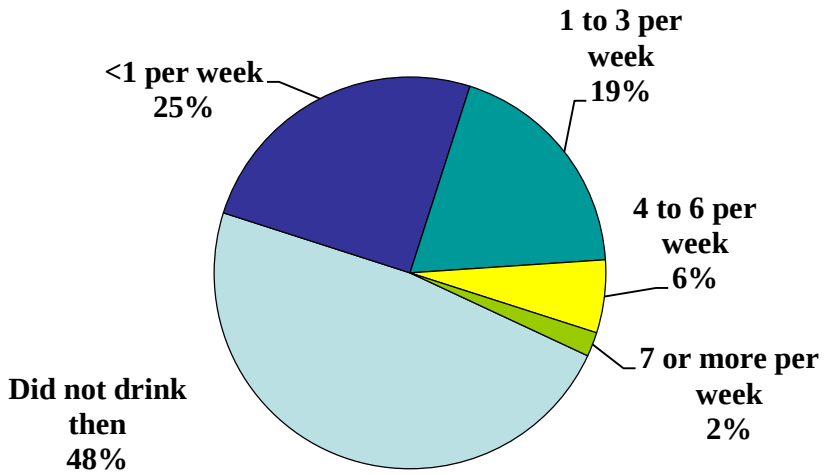
*Includes only mothers ages 20 and above.

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

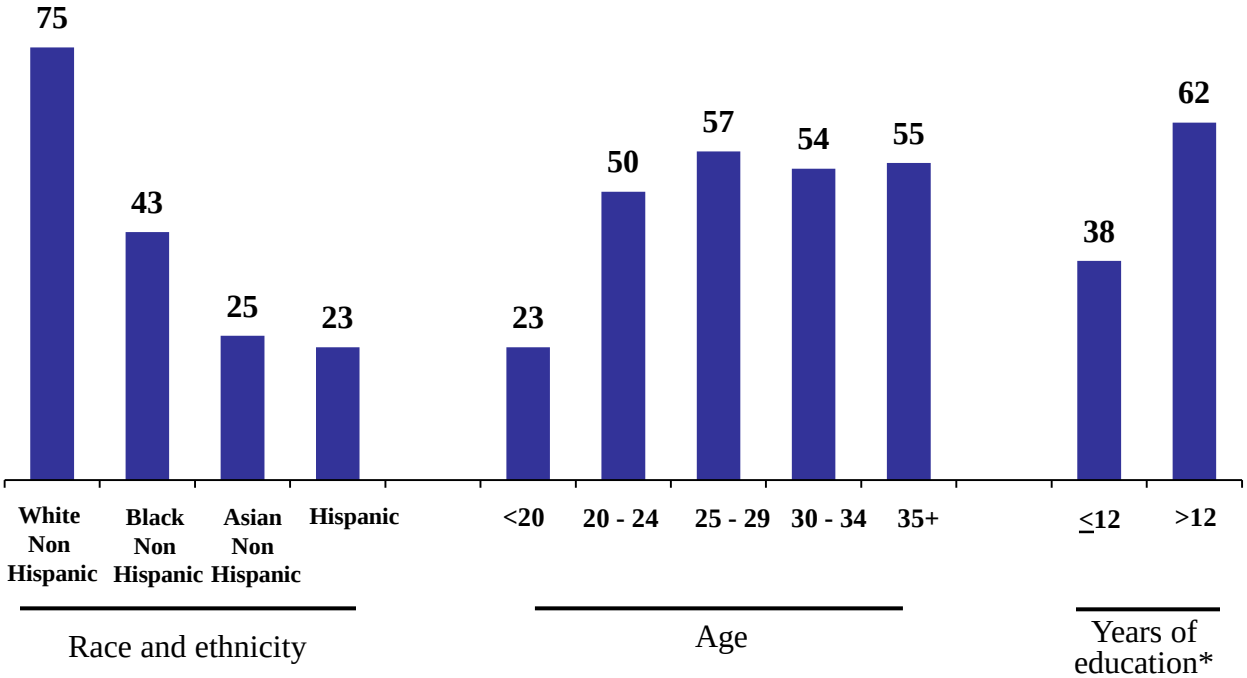
ALCOHOL USE BEFORE PREGNANCY

Question 40: 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.

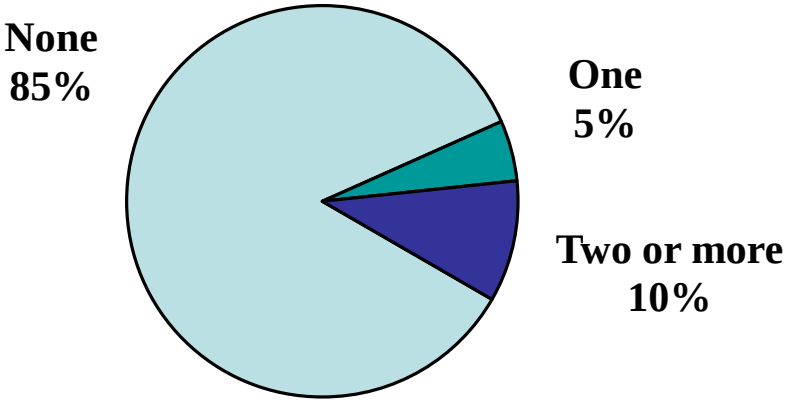
ALCOHOL BINGES BEFORE AND DURING PREGNANCY

Question 41: During the *3 months* *before* you got pregnant, how many times did you drink 4 alcoholic drinks or more in a two hour time span?

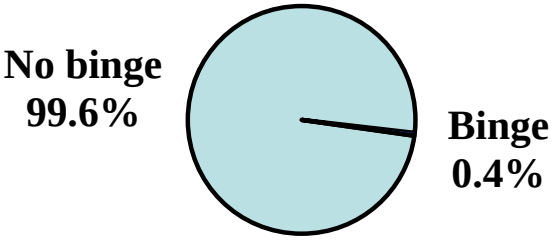
Question 43: During the *last 3 months* of your pregnancy, how many times did you drink 4 alcoholic drinks or more in a 2 hour time span?

Distribution of Mothers by the Number of Alcohol Binges (4+ Drinks in One Sitting) Before and During Pregnancy

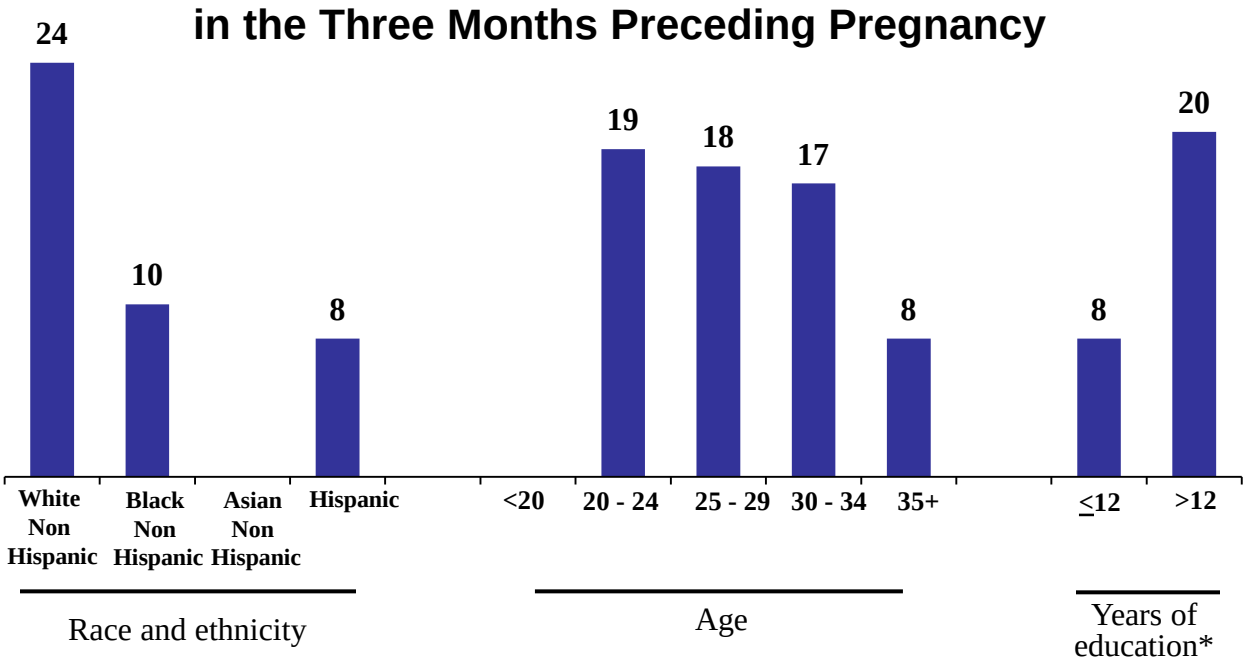
Before Pregnancy



<1% of Mothers Reported Binge Drinking *During* Pregnancy



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

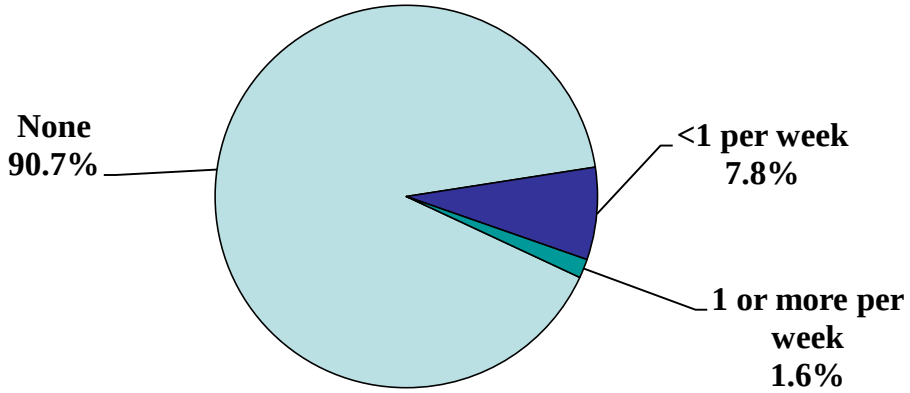


*Includes only mothers ages 20 and above.

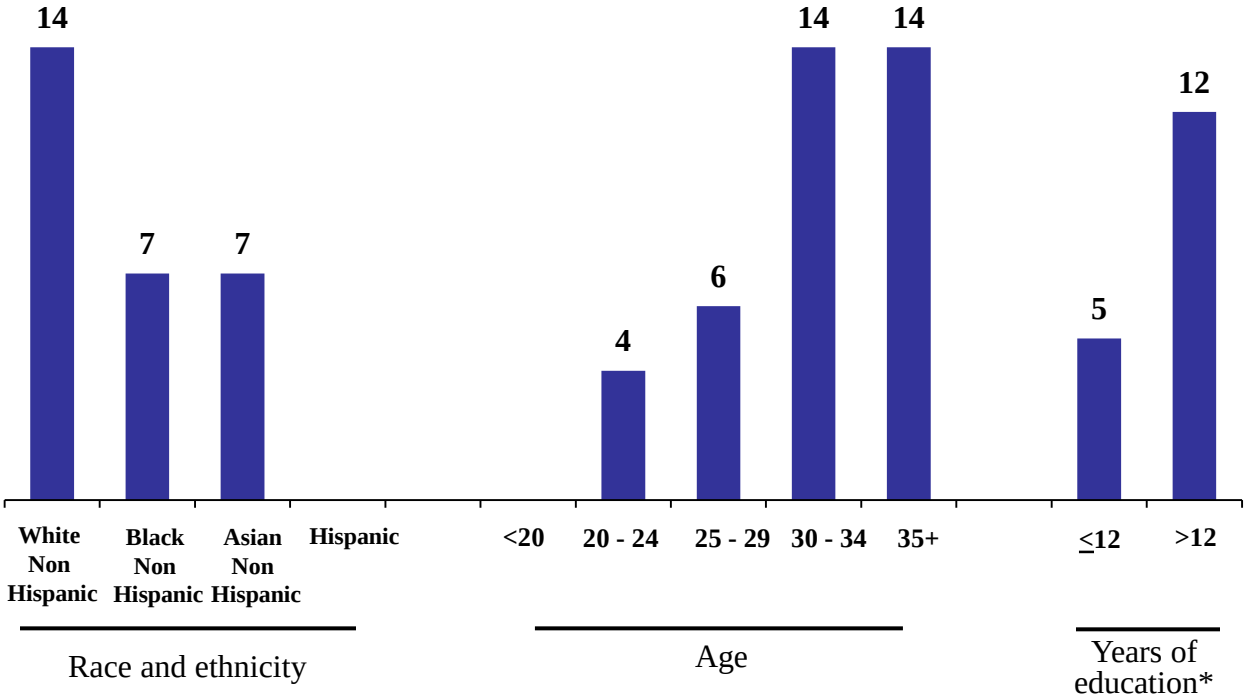
ALCOHOL USE DURING PREGNANCY

Question 42: 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



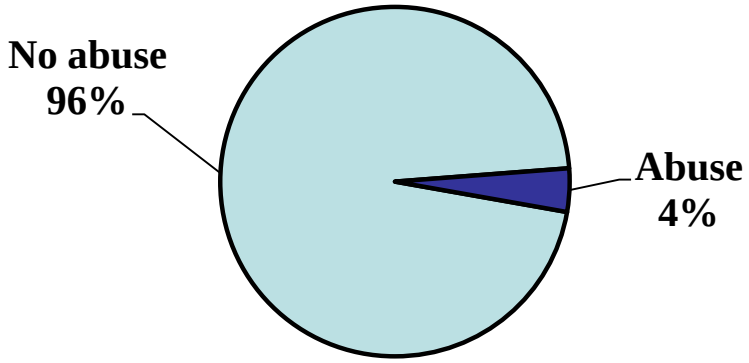
*Includes only mothers ages 20 and above.

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

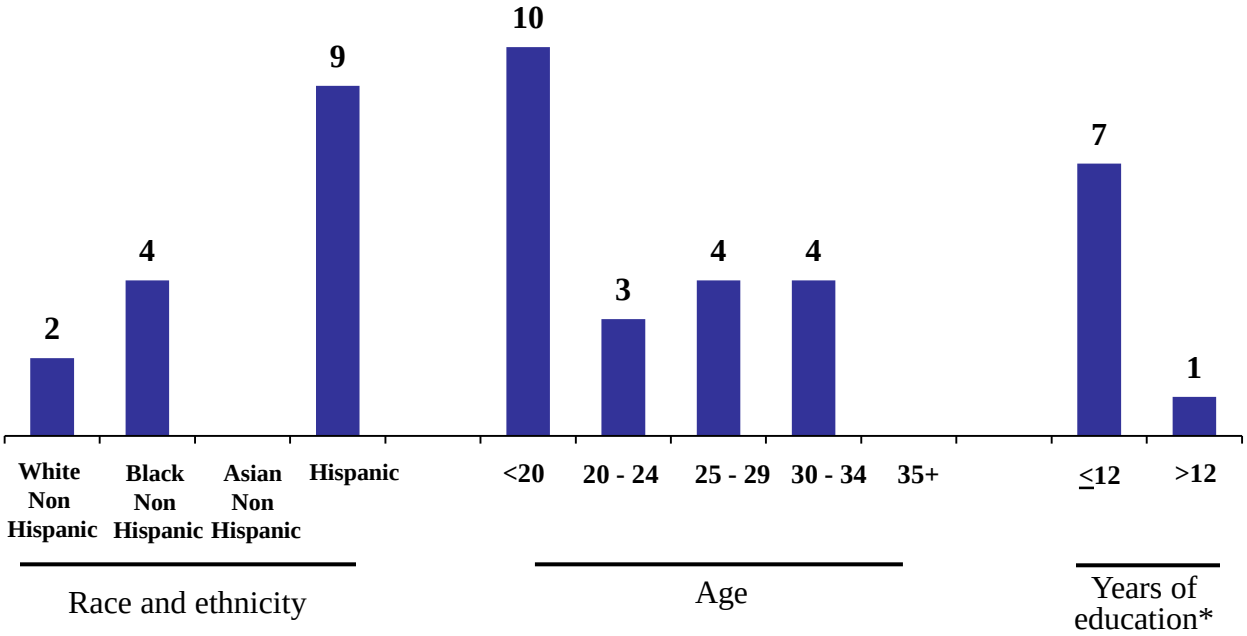
PHYSICAL ABUSE BEFORE PREGNANCY

Question 45: During the *12 months before* you got pregnant with your new baby, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?

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



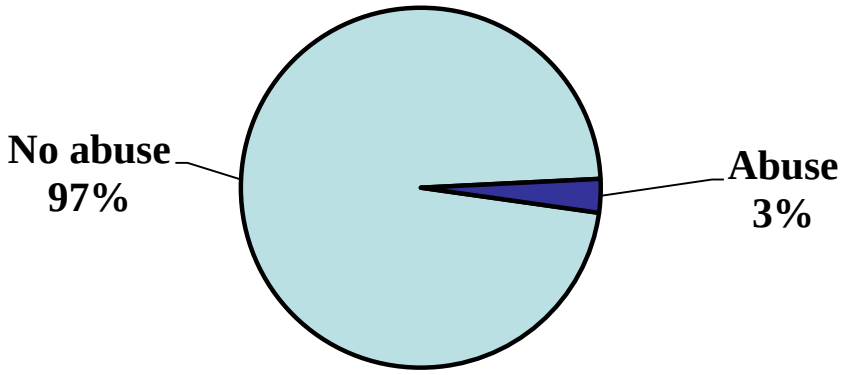
*Includes only mothers ages 20 and above.

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

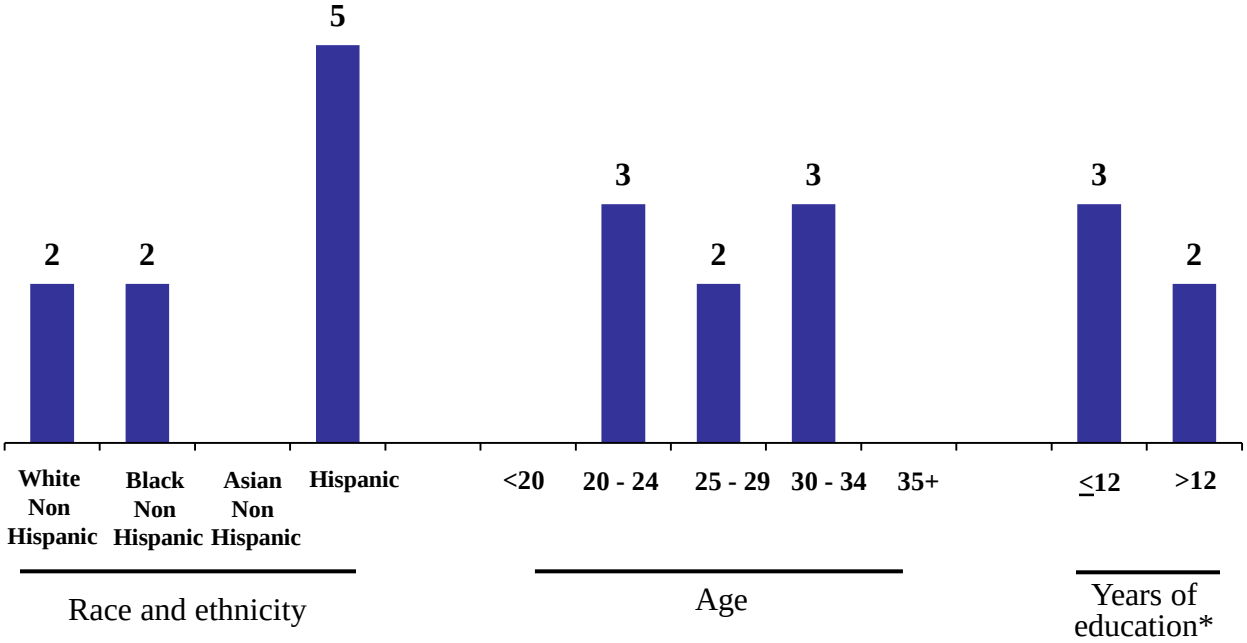
PHYSICAL ABUSE DURING PREGNANCY

Question 46: 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 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.

Postpartum Factors

“Lactation consultants are very important and helpful. They need to push for breastfeeding. A lot of women get discouraged when they get home. Maybe if a lactation nurse can come home to help them they would breastfeed longer”.

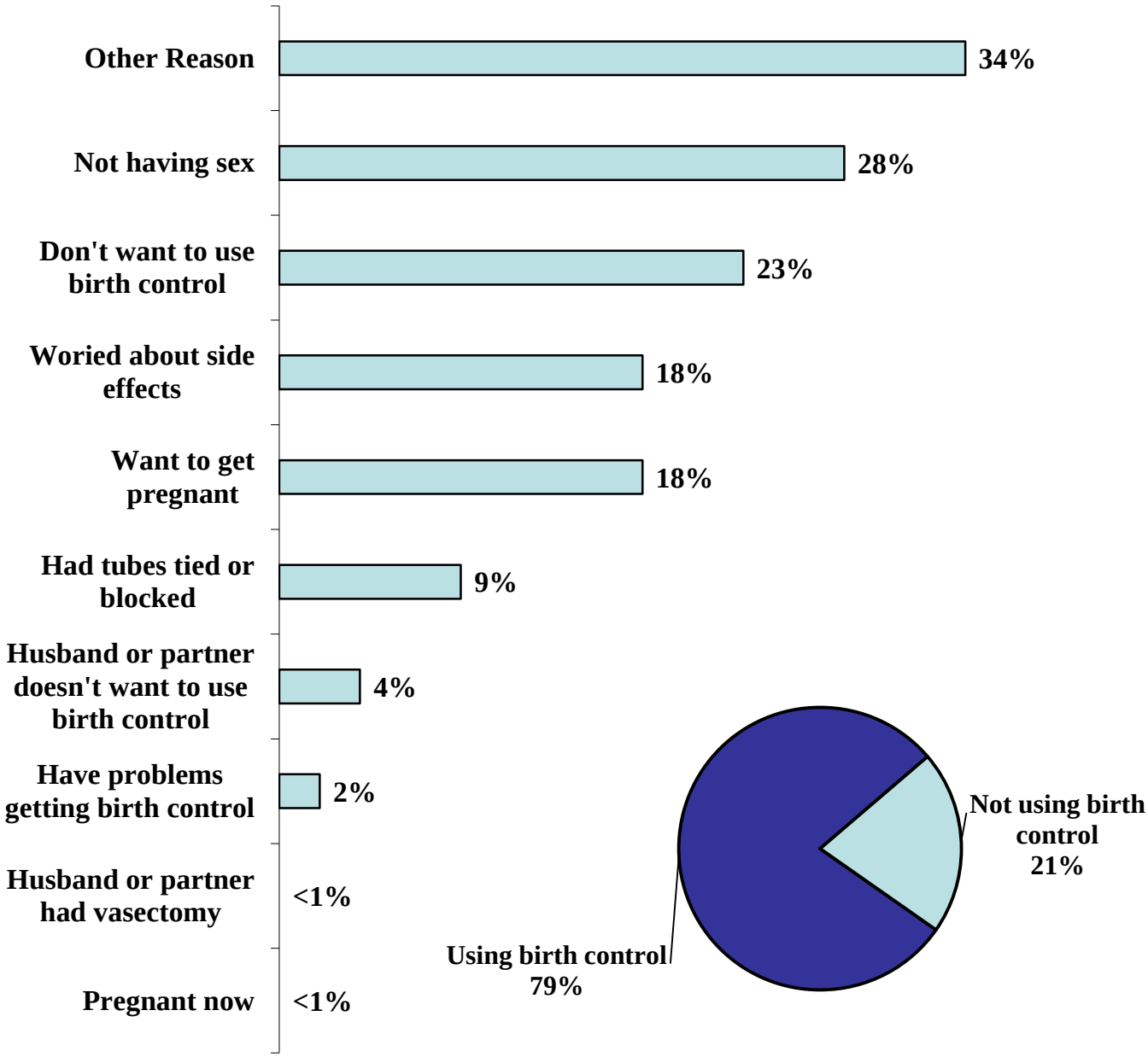
“The only thing is that I didn't realize how much depression affected you physically. Stay positive and clear headed because whatever you feel your baby feels.”

PRAMS mothers

REASONS FOR NO POSTPARTUM BIRTH CONTROL

Question 63: What are your reasons or your husband's or partner's reasons for not doing anything to keep from getting pregnant *now*? Check all that apply.

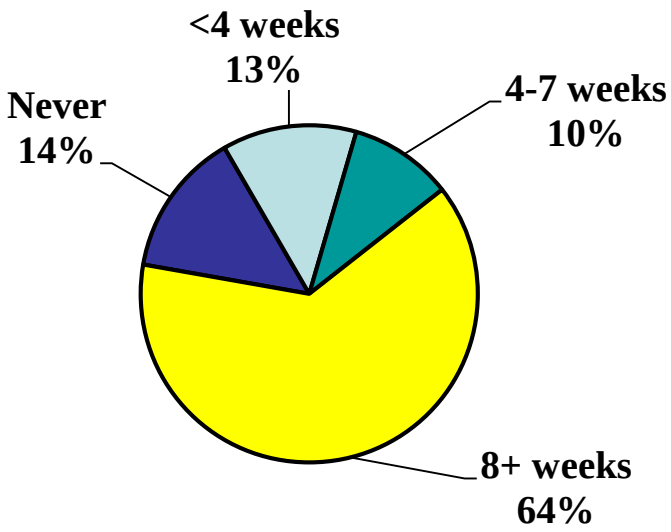
Reasons Reported for Not Using Postpartum Birth Control



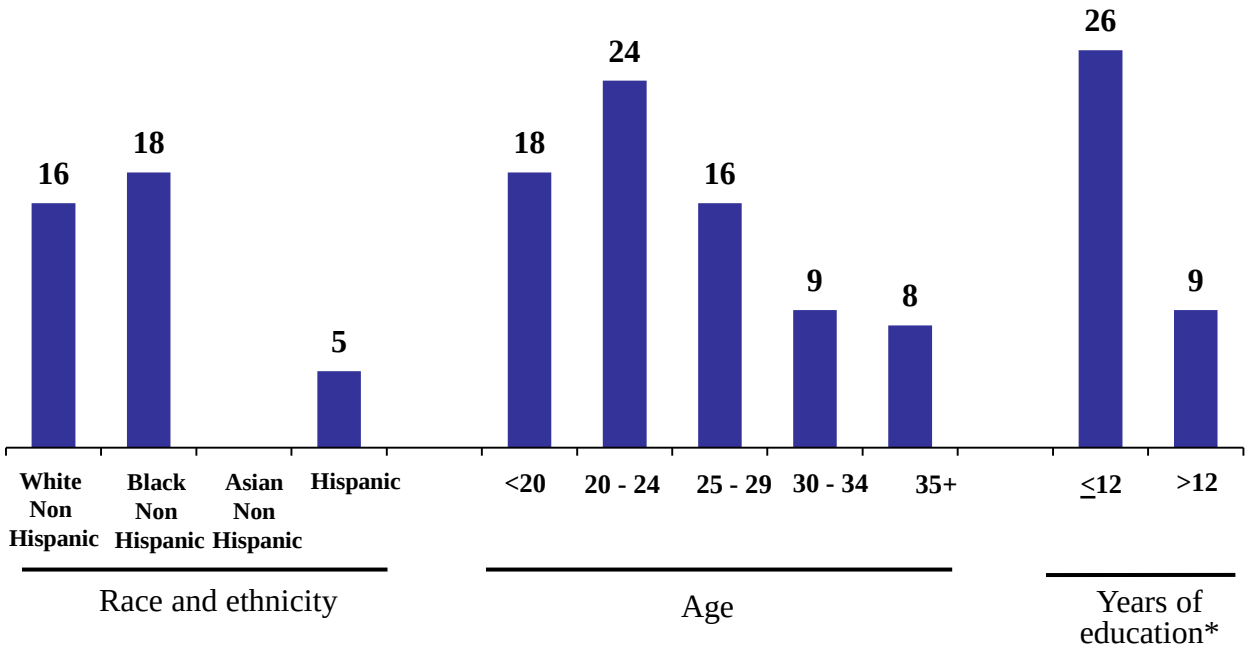
BREASTFEEDING

Question 58: 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 Never Breastfeeding



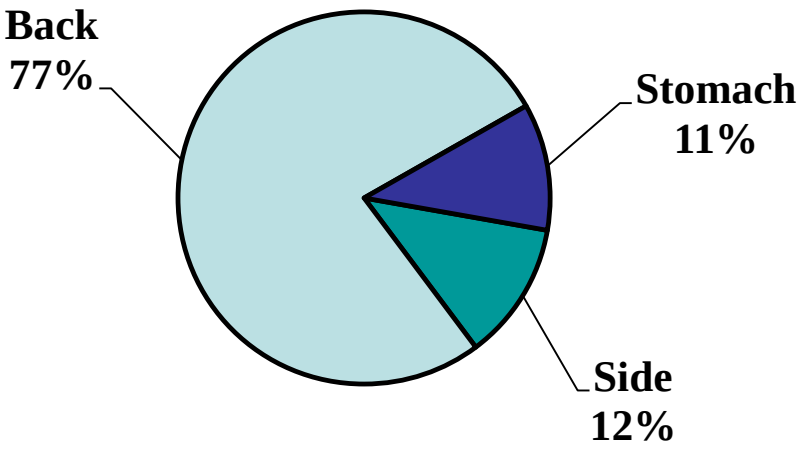
*Includes only mothers ages 20 and above.

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

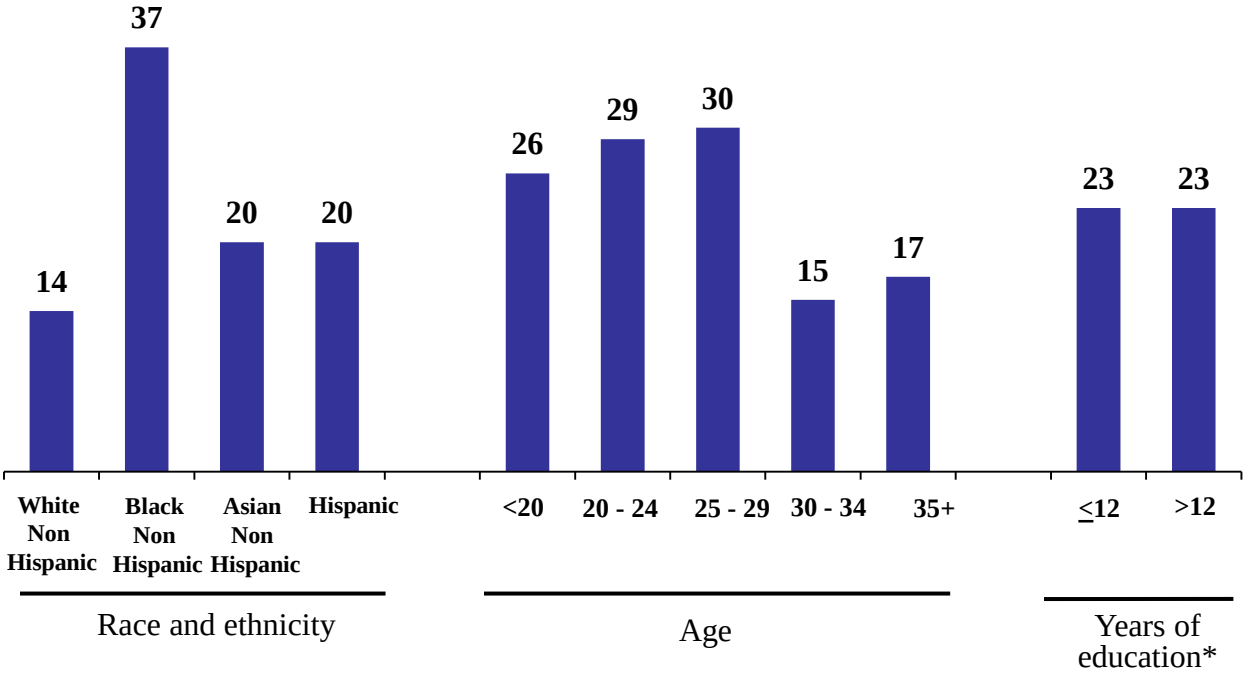
SLEEP POSITION

Question 59: In which *one* position do you *most often* lay your baby down to sleep now?

Distribution of Infants by Sleep Position



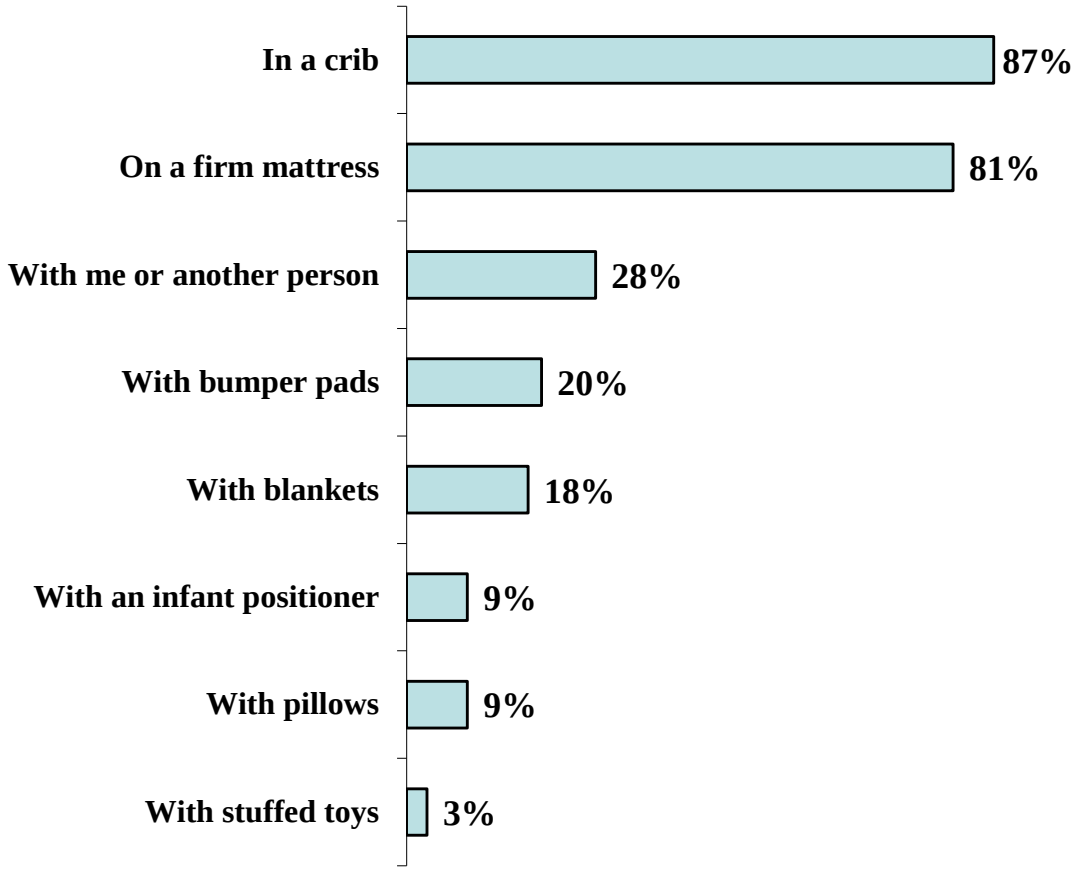
Percentage of Infants Not Placed on Back to Sleep



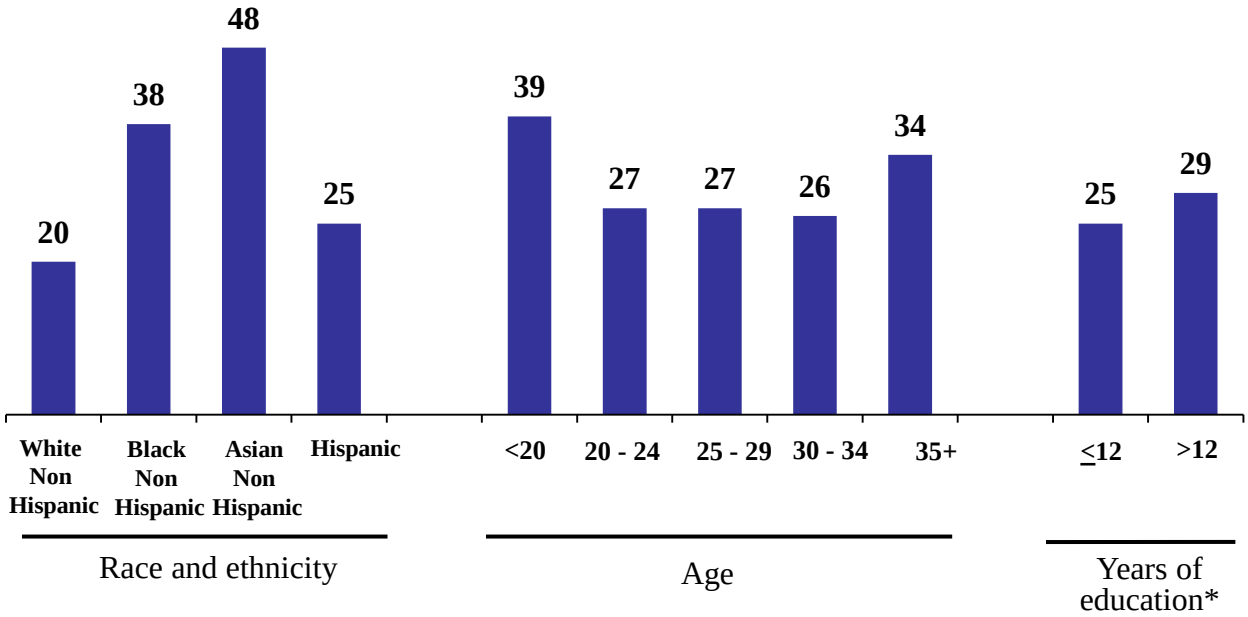
*Includes only mothers ages 20 and above.

SLEEP ENVIRONMENT

Question 60: Listed below are some things that describe how your new baby usually sleeps. Check **No** if it doesn't usually apply to your baby or **Yes** if it usually applies to your baby.



Percentage of Infants Co-Sleeping

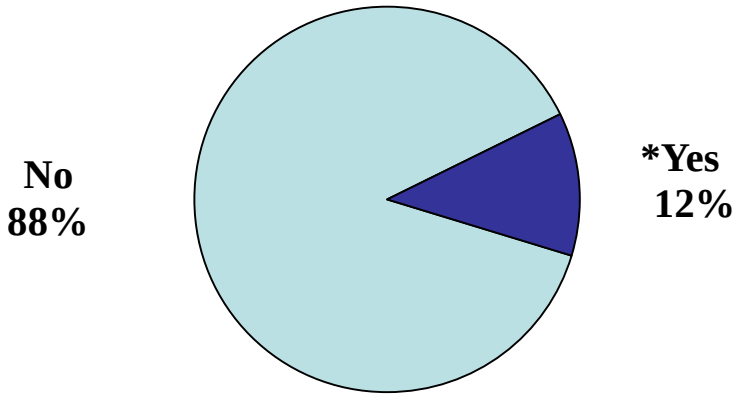


*Includes only mothers ages 20 and above.

SYMPTOMS OF POSTPARTUM DEPRESSION

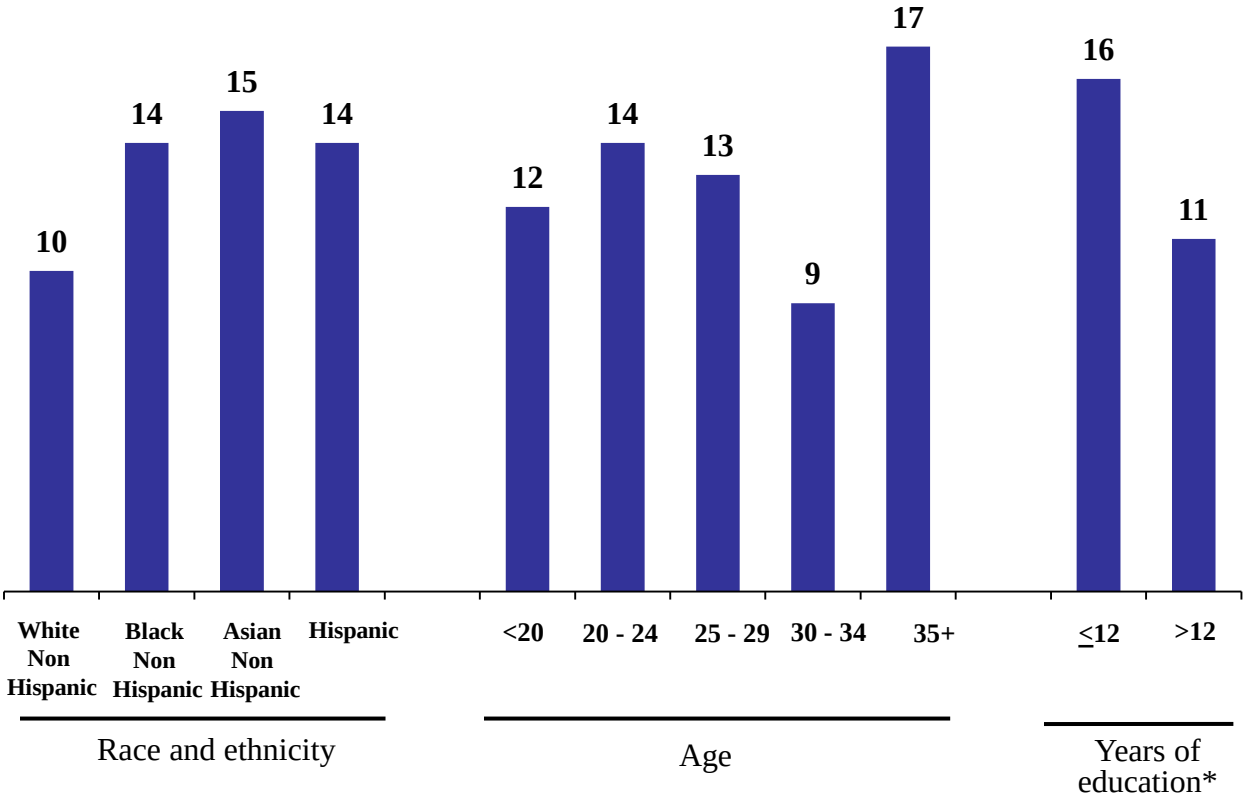
Question 66: *Since your new baby was born*, how often have you felt down, depressed, or hopeless?
Question 67: *Since your new baby was born*, how often have you had little interest or little pleasure in doing things?

Distribution of Mothers by Postpartum Depression



*Includes mothers who reported having symptoms "Always" or "Often" to Questions 66 or 67

Percentage of Mothers Who Reported Postpartum Depression



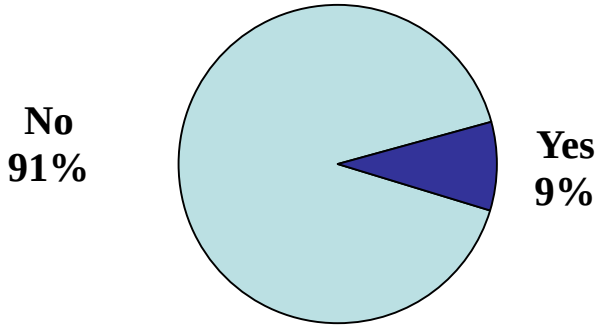
**Includes only mothers ages 20 and above.

POSTPARTUM DEPRESSION DIAGNOSED

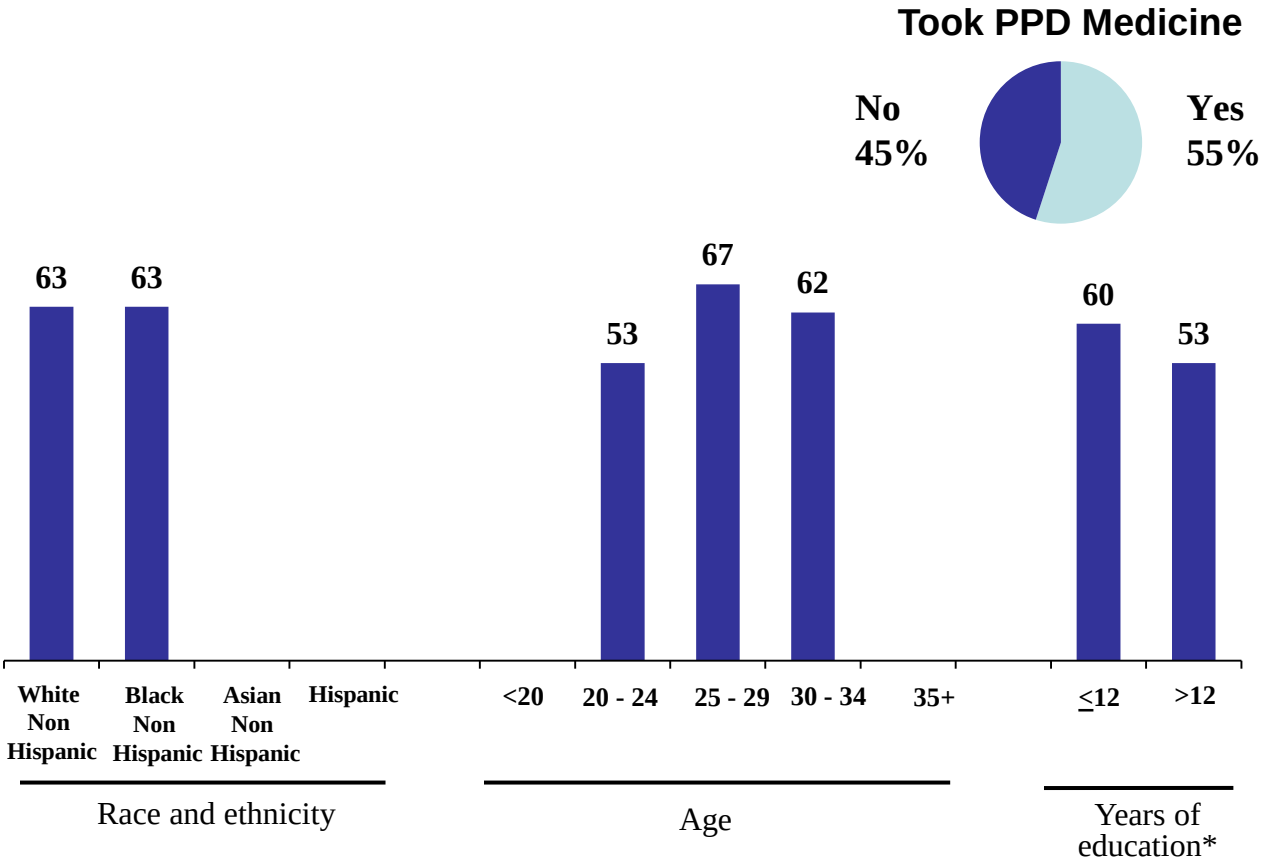
Question 74: *Since your new baby was born*, has a doctor, nurse, or other health care worker *told you that you had* depression?

Question 75: Since your new baby was born, have you taken prescription medicine for your depression?

Distribution of Mothers by Diagnosis of Postpartum Depression (PPD)



Percentage of Mothers Diagnosed With Postpartum Depression Who Took Prescription Medicine



*Includes only mothers ages 20 and above.

Phase 7 Questionnaire

"I think collecting this type of information is great and hope it will improve the health of babies born in the future."

"Good luck on your research. I hope your findings positively impact future mothers and children."

PRAMS mother

Please check the box next to your answer or follow the directions included with the question. You may be asked to skip some questions that do not apply to you.

BEFORE PREGNANCY

The first questions are about *you*.

1. How tall are *you* without shoes?

____ Feet ____ Inches

OR ____ Centimeters

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

____ Pounds **OR** ____ Kilos

3. What is *your* date of birth?

____ / ____ / _____

Month Day Year

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

❑ No → **Go to Question 7**

❑ Yes

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

❑ No

❑ Yes

6. Was the baby *just before* your new one born *earlier* than 3 weeks before his or her due date?

❑ No

❑ Yes

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

7. At any time during the *12 months before* you got pregnant with your new baby, did you do any of the following things? For each item, check **No** if you did not do it or **Yes** if you did it.

	No	Yes
a. I was dieting (changing my eating habits) to lose weight	❑	❑
b. I was exercising 3 or more days of the week	❑	❑
c. I was regularly taking prescription medicines other than birth control	❑	❑
d. I visited a health care worker and was checked for diabetes	❑	❑
e. I visited a health care worker and was checked for high blood pressure	❑	❑
f. I visited a health care worker and was checked for depression or anxiety	❑	❑
g. I talked to a health care worker about my family medical history	❑	❑
h. I had my teeth cleaned by a dentist or dental hygienist	❑	❑

8. During the *month before* you got pregnant with your new baby, what kind of *health insurance* did you have?

Check ALL that apply

- ❑ Private health insurance from my job or the job of my husband, partner, or parents
- ❑ Private health insurance purchased directly from an insurance company
- ❑ Medicaid or HealthChoice
- ❑ TRICARE or other military health care
- ❑ Some other kind of health insurance → Please tell us: _____
- ❑ I did not have any health insurance during the *month before* I got pregnant

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

- ❑ I didn't take a multivitamin, prenatal vitamin, or folic acid vitamin in the *month before* I got pregnant
- ❑ 1 to 3 times a week
- ❑ 4 to 6 times a week
- ❑ Every day of the week

10. *Before* you got pregnant with your new baby, did a doctor, nurse, or other health care worker talk to you about how to improve your health before pregnancy?

- ❑ No
- ❑ Yes

11. *Before* you got pregnant with your new baby, did a doctor, nurse, or other health care worker tell you that you had any of the following health conditions? For each one, check **No** if you did not have the condition or **Yes** if you did.

	No	Yes
a. Type 1 or Type 2 diabetes (NOT the same as gestational diabetes or diabetes that starts during pregnancy)	❑	❑
b. High blood pressure or hypertension	❑	❑
c. Depression	❑	❑

12. During the *3 months before* you got pregnant with your new baby, did you have any of the following health conditions? For each one, check **No** if you did not have the condition or **Yes** if you did.

	No	Yes
a. Asthma	❑	❑
b. Anemia (poor blood, low iron)	❑	❑
c. Heart problems	❑	❑
d. Epilepsy (seizures)	❑	❑
e. Thyroid problems	❑	❑
f. Anxiety	❑	❑

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 ONE answer

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

Go to Question 15

14. How much longer did you want to wait to become pregnant?

- ❑ Less than 1 year
- ❑ 1 year to less than 2 years
- ❑ 2 years to less than 3 years
- ❑ 3 years to 5 years
- ❑ More than 5 years

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

- ❑ No
- ❑ Yes → **Go to Question 18**

16. When you got pregnant with your new baby, were you or your husband or partner doing anything to keep from getting pregnant? Some things people do to keep from getting pregnant include using birth control pills, condoms, withdrawal, or natural family planning.

- ❑ No
- ❑ Yes → **Go to Page 4, Question 20**

Go to Question 17

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

Check ALL that apply

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

_____

If you were <u>not trying</u> to get pregnant when you got pregnant with your new baby, go to Page 4, Question 20.

18. Did you take any fertility drugs or receive any medical procedures 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 Page 4, Question 20**
- ❑ Yes

Go to Page 4, Question 19

19. Did you use any of the following fertility treatments *during the month you got pregnant* with your new baby?

Check ALL 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)
- ❑ Other medical treatment → Please tell us: _____
- ❑ I wasn't using fertility treatments *during the month* that I got pregnant with my new baby

DURING PREGNANCY

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.)

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

____ Weeks **OR** ____ Months

- ❑ I don't remember

21. 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 → **Go to Question 25**

22. During *your most recent* pregnancy, what kind of *health insurance* did you have to pay for your *prenatal care*?

Check ALL that apply

- ❑ Private health insurance from my job or the job of my husband, partner, or parents
- ❑ Private health insurance purchased directly from an insurance company
- ❑ Medicaid or HealthChoice
- ❑ TRICARE or other military health care
- ❑ Some other kind of health insurance → Please tell us: _____
- ❑ I did not have any health insurance to pay for my *prenatal care*

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

	No	Yes
a. How much weight I should gain during my pregnancy	❑	❑
b. How smoking during pregnancy could affect my baby	❑	❑
c. Breastfeeding my baby	❑	❑
d. How drinking alcohol during pregnancy could affect my baby	❑	❑
e. Using a seat belt during my pregnancy	❑	❑
f. Medicines that are safe to take during my pregnancy	❑	❑
g. How using illegal drugs could affect my baby	❑	❑
h. Doing tests to screen for birth defects or diseases that run in my family	❑	❑
i. The signs and symptoms of preterm labor (labor more than 3 weeks before the baby is due)	❑	❑
j. Getting tested for HIV (the virus that causes AIDS)	❑	❑
k. What to do if I feel depressed during my pregnancy or after my baby is born	❑	❑
l. Physical abuse to women by their husbands or partners	❑	❑

24. *During any of your prenatal care visits*, did a doctor, nurse, or other health care worker ask you—

	No	Yes
a. How much alcohol you were drinking	❑	❑
b. If someone was hurting you emotionally or physically	❑	❑
c. If you were using illegal drugs (marijuana or hash, cocaine, crack, etc.)	❑	❑
d. If you wanted to be tested for HIV (the virus that causes AIDS)	❑	❑
e. If you planned to use birth control after your baby was born	❑	❑

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

❑ No
❑ Yes
❑ I don't know

26. During the 12 months *before the delivery* of your new baby, did a doctor, nurse, or other health care worker *offer* you a flu shot or *tell* you to get one?

❑ No
❑ Yes

27. During the 12 months *before the delivery* of your new baby, did you *get* a flu shot?

Check ONE answer

❑ No → **Go to Page 6, Question 29**
❑ Yes, before my pregnancy
❑ Yes, during my pregnancy

Go to Page 6, Question 28

28. During what month and year did you get the flu shot?

____ / 20____

Month Year

❑ I don't remember

29. This question is about the care of your teeth *during your most recent* pregnancy. For each item, check **No** if it is not true or does not apply to you or **Yes** if it is true.

	No	Yes
a. I knew it was important to care for my teeth and gums during my pregnancy	❑	❑
b. A dental or other health care worker talked with me about how to care for my teeth and gums	❑	❑
c. I had my teeth cleaned by a dentist or dental hygienist	❑	❑
d. I had insurance to cover dental care during my pregnancy	❑	❑
e. I needed to see a dentist for a **problem**	❑	❑
f. I went to a dentist or dental clinic about a **problem**	❑	❑

If you did not have any problems with your teeth or gums during your pregnancy, go to Question 31.

30. Did any of the following things make it hard for you to go to a dentist or dental clinic about the problem you had *during your most recent* pregnancy? For each item, check **No** if it was not something that made it hard for you to go to a dentist during pregnancy or **Yes** if it was.

	No	Yes
a. I could not find a dentist or dental clinic that would take pregnant patients	❑	❑
b. I could not find a dentist or dental clinic that would take Medicaid patients	❑	❑
c. I did not think it was safe to go to the dentist during pregnancy	❑	❑
d. I could not afford to go to the dentist or dental clinic	❑	❑

31. During *your most recent* pregnancy, did you take a class or classes to prepare for childbirth and learn what to expect during labor and delivery?

❑ No
❑ Yes

32. During *your most recent* pregnancy, did a home visitor come to your home to help you prepare for your new baby? A home visitor is a nurse, a health care worker, a social worker, or other person who works for a program that helps pregnant women.

❑ No
❑ Yes

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

- ❑ No
- ❑ Yes

34. During *your most recent* pregnancy, were you told by a doctor, nurse, or other health care worker that you had gestational diabetes (diabetes that started during *this* pregnancy)?

- ❑ No
- ❑ Yes

The next questions are about smoking cigarettes around the time of pregnancy (before, during, and after).

35. Have you smoked any cigarettes in the *past 2 years*?

- ❑ No → **Go to Question 39**
- ❑ Yes

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

- ❑ 41 cigarettes or more
- ❑ 21 to 40 cigarettes
- ❑ 11 to 20 cigarettes
- ❑ 6 to 10 cigarettes
- ❑ 1 to 5 cigarettes
- ❑ Less than 1 cigarette
- ❑ I didn't smoke then

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

- ❑ 41 cigarettes or more
- ❑ 21 to 40 cigarettes
- ❑ 11 to 20 cigarettes
- ❑ 6 to 10 cigarettes
- ❑ 1 to 5 cigarettes
- ❑ Less than 1 cigarette
- ❑ I didn't smoke then

38. How many cigarettes do you smoke on an average day *now*? A pack has 20 cigarettes.

- ❑ 41 cigarettes or more
- ❑ 21 to 40 cigarettes
- ❑ 11 to 20 cigarettes
- ❑ 6 to 10 cigarettes
- ❑ 1 to 5 cigarettes
- ❑ Less than 1 cigarette
- ❑ I don't smoke now

The next questions are about drinking alcohol around the time of pregnancy (before and during).

39. 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 Page 8, Question 44**
- ❑ Yes

Go to Page 8, Question 40

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

- ❑ 14 drinks or more a week
- ❑ 7 to 13 drinks a week
- ❑ 4 to 6 drinks a week
- ❑ 1 to 3 drinks a week
- ❑ Less than 1 drink a week
- ❑ I didn't drink then ➔ **Go to Question 42**

41. During the *3 months* *before* you got pregnant, how many times did you drink 4 alcoholic drinks or more in a 2 hour time span?

- ❑ 6 or more times
- ❑ 4 to 5 times
- ❑ 2 to 3 times
- ❑ 1 time
- ❑ I didn't have 4 drinks or more in a 2 hour time span

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

- ❑ 14 drinks or more a week
- ❑ 7 to 13 drinks a week
- ❑ 4 to 6 drinks a week
- ❑ 1 to 3 drinks a week
- ❑ Less than 1 drink a week
- ❑ I didn't drink then ➔ **Go to Question 44**

43. During the *last 3 months* of your pregnancy, how many times did you drink 4 alcoholic drinks or more in a 2 hour time span?

- ❑ 6 or more times
- ❑ 4 to 5 times
- ❑ 2 to 3 times
- ❑ 1 time
- ❑ I didn't have 4 drinks or more in a 2 hour time span

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

44. This question is about things that may have happened during the *12 months before your new baby was born*. For each item, check **No** if it did not happen to you or **Yes** if it did. (It may help to look at the calendar when you answer these questions.)

	No	Yes
a. A close family member was very sick and had to go into the hospital	❑	❑
b. I got separated or divorced from my husband or partner	❑	❑
c. I moved to a new address	❑	❑
d. I was homeless or had to sleep outside, in a car, or in a shelter	❑	❑
e. My husband or partner lost his job	❑	❑
f. I lost my job even though I wanted to go on working	❑	❑
g. My husband, partner, or I had a cut in work hours or pay	❑	❑
h. I was apart from my husband or partner due to military deployment or extended work-related travel	❑	❑
i. I argued with my husband or partner more than usual	❑	❑
j. My husband or partner said he didn't want me to be pregnant	❑	❑
k. I had problems paying the rent, mortgage, or other bills	❑	❑
l. My husband, partner, or I went to jail	❑	❑
m. Someone very close to me had a problem with drinking or drugs	❑	❑
n. Someone very close to me died	❑	❑

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

- ❑ No
- ❑ Yes

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

- ❑ No
- ❑ Yes

The next questions are about your labor and delivery.

47. When was your new baby born?

____ / ____ / 20____

Month Day Year

48. Did your doctor, nurse, or other health care worker try to induce your labor (start your contractions using medicine)?

- ❑ No → **Go to Question 50**
- ❑ Yes
- ❑ I don't know → **Go to Question 50**

Go to Question 49

49. Why did your doctor, nurse, or other health care worker try to induce your labor (start your contractions using medicine)?

Check ALL that apply

- ❑ My water broke and there was a fear of infection
- ❑ I was past my due date
- ❑ My health care provider worried about the size of the baby
- ❑ My baby was not doing well and needed to be born
- ❑ I had a complication in my pregnancy (such as low amniotic fluid or preeclampsia)
- ❑ Labor stopped or was not progressing
- ❑ I wanted to schedule my delivery
- ❑ I wanted to give birth with a specific health care provider
- ❑ Other → Please tell us: _____

50. By the end of *your most recent* pregnancy, how much weight had you gained?

Check ONE answer and fill in blank if needed

- ❑ I gained ____ pounds
- ❑ I didn't gain any weight, but I lost ____ pounds
- ❑ My weight didn't change during my pregnancy
- ❑ I don't know

AFTER PREGNANCY

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

51. After your baby was delivered, was he or she put in an intensive care unit (NICU)?

- ❑ No
- ❑ Yes
- ❑ I don't know

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

- ❑ Less than 24 hours (less than 1 day)
- ❑ 24 to 48 hours (1 to 2 days)
- ❑ 3 to 5 days
- ❑ 6 to 14 days
- ❑ More than 14 days
- ❑ My baby was not born in a hospital
- ❑ My baby is still in the hospital → **Go to Question 55**

53. Is your baby alive now?

- ❑ No → *We are very sorry for your loss.* **Go to Question 62**
- ❑ Yes

54. Is your baby living with you now?

- ❑ No → **Go to Question 61**
- ❑ Yes

55. Did you ever breastfeed or pump breast milk to feed your new baby, even for a short period of time?

- ❑ No
- ❑ Yes → **Go to Question 57**

Go to Question 56

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

Check ALL that apply

- ❑ I was sick or on medicine
- ❑ I had other children to take care of
- ❑ I had too many household duties
- ❑ I didn't like breastfeeding
- ❑ I tried but it was too hard
- ❑ I didn't want to
- ❑ I went back to work or school
- ❑ Other → Please tell us: _____

If you did not breastfeed your new baby, go to Question 59.

57. Are you currently breastfeeding or feeding pumped milk to your new baby?

- ❑ No
- ❑ Yes → **Go to Question 59**

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

____ Weeks **OR** ____ Months

- ❑ Less than 1 week

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

59. In which *one* position 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

60. Listed below are some things that describe how your new baby *usually* sleeps. For each item, check **No** if it doesn't usually apply to your baby or **Yes** if it usually applies to your baby.

	No	Yes
a. My new baby sleeps in a crib or portable crib	❑	❑
b. My new baby sleeps on a firm or hard mattress	❑	❑
c. My new baby sleeps with pillows	❑	❑
d. My new baby sleeps with bumper pads	❑	❑
e. My new baby sleeps with plush or thick blankets	❑	❑
f. My new baby sleeps with stuffed toys	❑	❑
g. My new baby sleeps with an infant positioner	❑	❑
h. My new baby sleeps with me or another person	❑	❑

61. *Since your new baby was born,* has a home visitor come to your home to help you learn how to take care of yourself or your new baby? A home visitor is a nurse, a health care worker, a social worker, or other person who works for a program that helps mothers of newborns.

❑ No
❑ Yes

62. Are you or your husband or partner doing anything *now* to keep from getting pregnant? Some things people do to keep from getting pregnant include using birth control pills, condoms, withdrawal, or natural family planning.

❑ No
❑ Yes → **Go to Page 12, Question 64**

Go to Question 63

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

Check ALL that apply

❑ I am not having sex
❑ I want to get pregnant
❑ I don't want to use birth control
❑ I am worried about side effects from birth control
❑ My husband or partner doesn't want to use anything
❑ I have problems getting birth control when I need it
❑ I had my tubes tied or blocked
❑ My husband or partner had a vasectomy
❑ I am pregnant now
❑ Other → Please tell us:

_____

If you or your husband or partner is not doing anything to keep from getting pregnant *now*, go to Question 65.

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

Check ALL that apply

- ❑ Tubes tied or blocked (female sterilization, Essure®, Adiana®)
- ❑ Vasectomy (male sterilization)
- ❑ Birth control pill
- ❑ Condoms
- ❑ Injection (Depo-Provera®)
- ❑ Contraceptive implant (Implanon®)
- ❑ Contraceptive patch (OrthoEvra®) or vaginal ring (NuvaRing®)
- ❑ IUD (including Mirena® or ParaGard®)
- ❑ Natural family planning (including rhythm method)
- ❑ Withdrawal (pulling out)
- ❑ Not having sex (abstinence)
- ❑ Other ⟶ Please tell us:

_____

65. *Since your new baby was born,* have you had a postpartum checkup for yourself? A postpartum checkup is the regular checkup a woman has about 4-6 weeks after she gives birth.

- ❑ No
- ❑ Yes

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

- ❑ Always
- ❑ Often
- ❑ Sometimes
- ❑ Rarely
- ❑ Never

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

- ❑ Always
- ❑ Often
- ❑ Sometimes
- ❑ Rarely
- ❑ Never

68. What kind of *health insurance* do you have *now*?

Check ALL that apply

- ❑ Private health insurance from my job or the job of my husband, partner, or parents
- ❑ Private health insurance purchased directly from an insurance company
- ❑ Medicaid or HealthChoice
- ❑ TRICARE or other military health care
- ❑ Some other kind of health insurance ⟶ Please tell us:

_____

- ❑ I do not have health insurance *now*

OTHER EXPERIENCES

The next questions are on a variety of topics.

69. How did you feel when you found out you were pregnant with your new baby? Were you—

- ❑ Very unhappy to be pregnant
- ❑ Unhappy to be pregnant
- ❑ Not sure
- ❑ Happy to be pregnant
- ❑ Very happy to be pregnant

70. *Before* you got pregnant with your new baby, did your husband or partner ever try to keep you from using your birth control so that you would get pregnant when you didn't want to? For example, did he hide your birth control, throw it away or do anything else to keep you from using it?

- ❑ No
- ❑ Yes

71. During any of the following time periods, did your husband or partner threaten you, limit your activities against your will, or make you feel unsafe in any other way? For each time period, check **No** if it did not happen then or **Yes** if it did.

	No	Yes
a. During the 12 months before I got pregnant	❑	❑
b. During my most recent pregnancy	❑	❑
c. Since my new baby was born	❑	❑

72. At any time <u>during</u> *your most recent* pregnancy, did a doctor, nurse, or other health care worker *tell you that you had* anxiety?

- ❑ No
- ❑ Yes

73. At any time <u>during</u> *your most recent* pregnancy, did a doctor, nurse, or other health care worker *tell you that you had* depression?

- ❑ No
- ❑ Yes

74. *Since your new baby was born*, has a doctor, nurse, or other health care worker *told you that you had* depression?

- ❑ No → **Go to Question 76**
- ❑ Yes

75. *Since your new baby was born*, have you taken prescription medicine for your depression?

- ❑ No
- ❑ Yes

76. At any time during *your most recent* pregnancy, did you work at a job for pay?

- ❑ No → **Go to Page 14, Question 81**
- ❑ Yes

77. Which of the following best describes your work schedule during the *last month* of your most recent pregnancy?

Check ONE answer

- ❑ I worked up to the time of delivery with no change in schedule
- ❑ I cut back on my work hours
- ❑ I took time off before the birth of my baby
- ❑ I stopped working due to doctor's orders
- ❑ I quit my job → **Go to Page 14, Question 81**
- ❑ I was laid off or fired from my job → **Go to Page 14, Question 81**

78. Have you returned to the job you had during *your most recent* pregnancy?

Check ONE answer

- ❑ No → **Go to Page 14, Question 81**
- ❑ No, but I will be returning
- ❑ Yes

Go to Page 14, Question 79

79. Which of the following describes the leave or time you took off from work *after* your new baby was born?

Check ALL that apply

- ❑ I took *paid* leave from my job
- ❑ I took *unpaid* leave from my job
- ❑ I did not take leave

80. Did any of the things listed below affect your decision about taking leave from work *after* your new baby was born? For each item, check **No** if it does not apply to you or **Yes** if it does.

	No	Yes
a. I could not financially afford to take leave	❑	❑
b. I was afraid I'd lose my job if I took leave or stayed out longer	❑	❑
c. I had too much work to do to take leave or stay out longer	❑	❑
d. My job does not have paid leave	❑	❑
e. My job does not offer a flexible work schedule	❑	❑
f. I had not built up enough leave time to take any or more time off	❑	❑

81. Thinking about when you were growing up, would you say your family was well-off financially, average or poor?

- ❑ Well-off financially
- ❑ Average
- ❑ Poor
- ❑ It varied
- ❑ I don't know

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

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

- ❑ $0 to $15,000
- ❑ $15,001 to $19,000
- ❑ $19,001 to $22,000
- ❑ $22,001 to $26,000
- ❑ $26,001 to $29,000
- ❑ $29,001 to $37,000
- ❑ $37,001 to $44,000
- ❑ $44,001 to $52,000
- ❑ $52,001 to $56,000
- ❑ $56,001 to $67,000
- ❑ $67,001 to $79,000
- ❑ $79,001 or more

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

____ People

84. What is today's date?

____ / ____ / 20____

Month Day Year

Please use this space for any additional comments you would like to make about your experiences around the time of your pregnancy or the health of mothers and babies in Maryland.

Thanks for answering our questions!

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

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