

New Mexico Department  
of Health

Pregnancy

Risk

Assessment

Monitoring

System



Published October, 2012  
**Surveillance Report**  
**Birth Years 2009-2010**

# STATE of NEW MEXICO

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## About New Mexico PRAMS

The New Mexico Pregnancy Risk Assessment Monitoring System ( NM PRAMS) is a public health surveillance system of women giving live birth in New Mexico. Its purpose is to measure maternal attitudes, behaviors and experiences occurring before, during and after pregnancy. The resulting data are used to assess the health of mothers and infants in New Mexico.

PRAMS is sponsored by the New Mexico Department of Health and the U.S. Centers for Disease Control and Prevention (CDC). PRAMS is conducted to improve the health of mothers, infants, and families, by providing the state's only population-based maternal and infant information. Each month PRAMS surveys are mailed to a sample of women with a recent live birth, 2-6 months after delivery. After data collection ends for a birth year, a complete birth file is submitted to the CDC for statistical weighting of the survey data to represent the NM birth population.

This report is based on survey responses from NM resident mothers with a live birth in 2009-2010. Two years of data have been combined to increase the sample size of subgroups. Trend data is provided for certain indicators for the years 2000-2010.

### What this report contains

This report covers selected topics from many of the 76 survey questions. Each section contains bullet points highlighting NM PRAMS findings, referencing tables and graphs. Multiyear line charts are included for selected topics to illustrate change over an 11 year period. Where possible, each topic also includes a Healthy People 2020 goal for comparing NM PRAMS estimates to national targets. The appendix includes the survey, methodology and details for the sample, survey response, data weighting, and definitions or coding for reported variables.

### Population and sample

The study “population” is all New Mexican resident mothers with a registered live birth in New Mexico for the years 2009-2010. Excluded are birth mothers whose infants were relinquished for adoption prior to birth registration. In the years 2009-2010, the birth population was estimated at 53,358 women. About 1 in 12 mothers are selected for the survey sample; thus each responding mother speaks for about 12 others with similar demographic characteristics. Because PRAMS sample data are statistically weighted, information is estimated for the entire NM maternal /live birth population.

To address uncertainty about each estimate, we calculate a 95% confidence interval (CI) or margin of error. This interval is shown as lower and upper bounds for each of the estimates in the detailed graph/data tables. In general, the precision of estimates depends upon the number of survey respondents, and on the specific item response for each question. The CI (margin of error) is larger if the number of respondents is small, or if the percentage answering “yes” (or “no”) is close to 50%.

## How to read the charts and tables

Data tables show estimates by maternal characteristics such as age, race/ethnicity, education, income level, geographic residence, WIC participation and source of insurance. The line at the end of each bar shows the margin of error (CI). A strikethrough over an estimate cautions the reader about a wide confidence interval, indicating the data may be unstable for that subgroup. Multiyear line chart figures contain rounded estimates to give a general overview of trend.

The sun symbol displayed on the axis indicates the Healthy People 2020 target goal. ☀

<http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=26>



### Legend

- Metropolitan Counties
- Micropolitan Counties
- Rural Counties

Metropolitan and micropolitan statistical areas (metro and micro areas) are geographic entities defined by the Office of Management and Budget for use by Federal statistical agencies in collecting, tabulating, and publishing Federal statistics. A metro area contains a core urban area of 50,000 or more population, and a micro area contains an urban core of at least 10,000 (but less than 50,000) population, and a rural area contains no urban core of 10,000 or more. Each metro or micro area consists of one or more counties and includes the counties containing the core urban area, as well as any adjacent counties that have a high degree of social and economic integration (as measured by commuting to work) with the urban core.

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## Acknowledgments

The NM PRAMS team wishes to thank the New Mexico mothers who answered our survey. Because of their generosity, this report is possible.

We also thank the PRAMS Steering Committee members for their input on survey design and PRAMS data uses for the improvement of maternal and infant health in New Mexico. (**Abbreviations:** **NMDOH= New Mexico Department of Health, ERD= Epidemiology and Response Division, PHD= Public Health Division, CYFD= Children Youth and Families Department, HSD= Human Services Department, UNM= University of New Mexico, NMSU =New Mexico State University**)

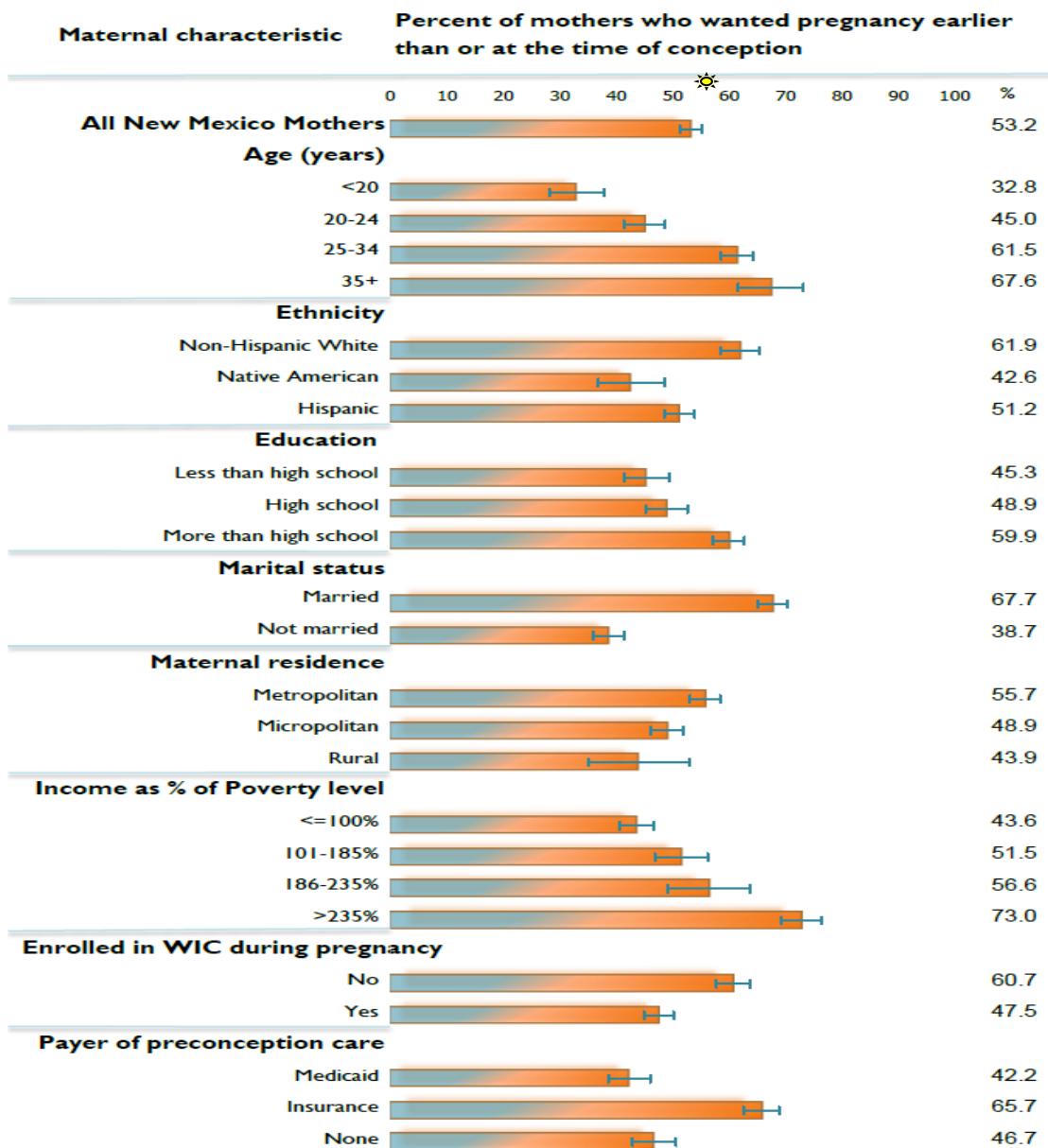
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Report citation: New Mexico Department of Health. NM Pregnancy Risk Assessment Monitoring System surveillance report 2009-2010 births. Santa Fe, NM; 2012.

**Intended Pregnancy  
birth years 2009-2010**

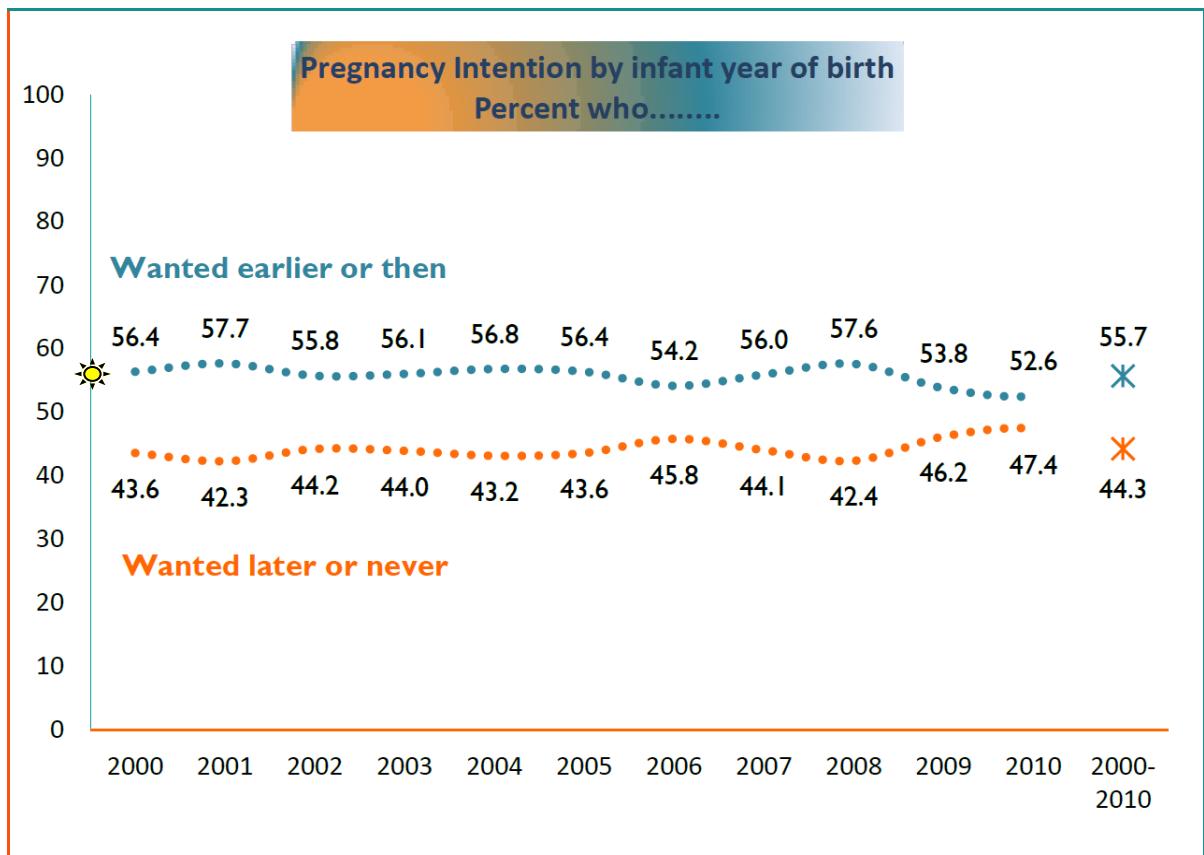


A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

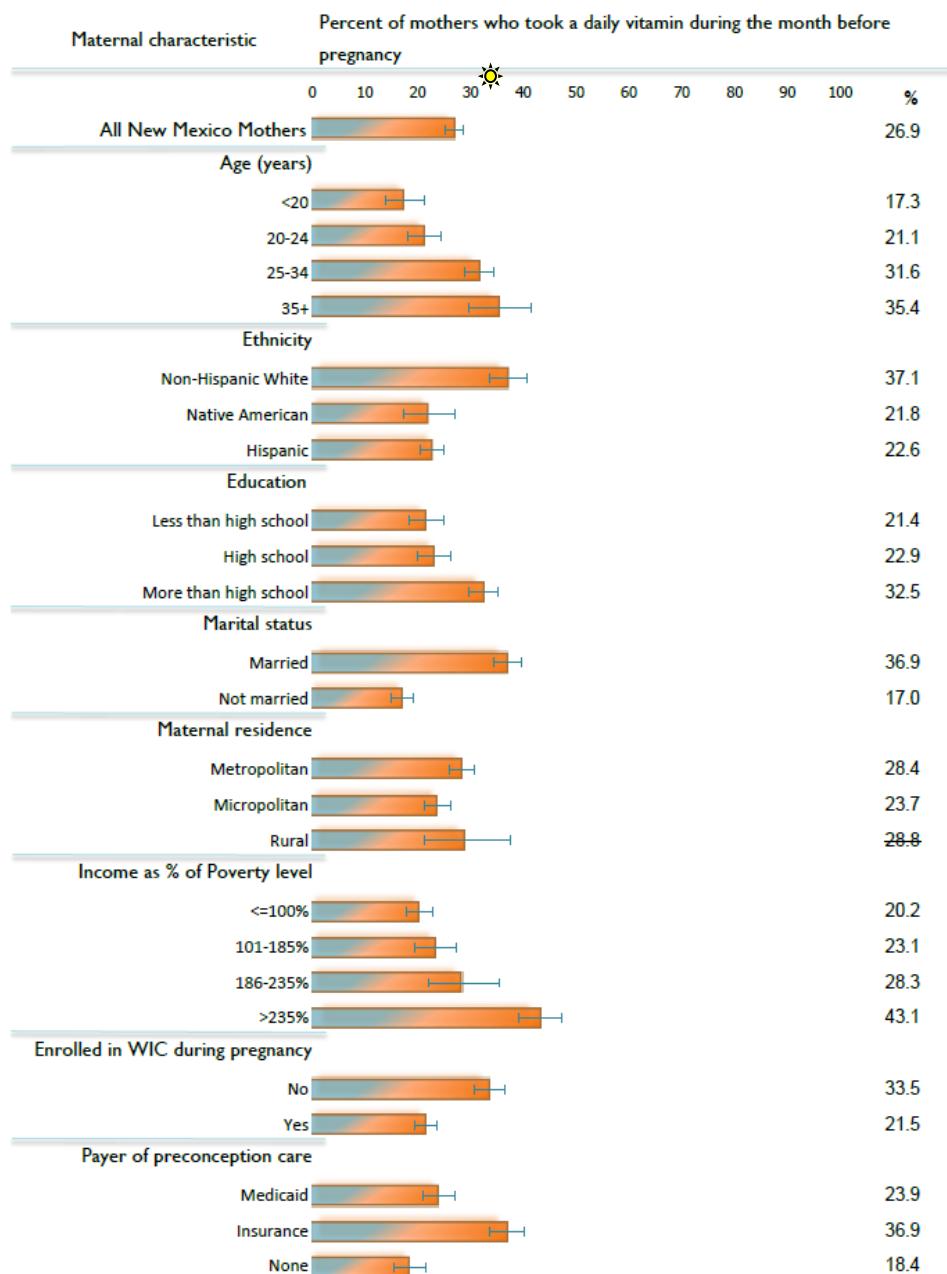
## Pregnancy intention

- ◆ Among NM women with a recent live birth in 2009-2010, just over half (53%) said their pregnancy was intended (wanted at that time or sooner).
- ◆ Pregnancy intention is associated with family income level:  
44% of women with a household income at 100% of the Federal Poverty Level (FPL) said their pregnancy was intended compared to 73% of women at or above 235% FPL.
- ◆ maternal age, marital status, ethnicity and education were also associated with pregnancy intention.



**Multi-vitamin use every day of week  
birth years 2009-2010**

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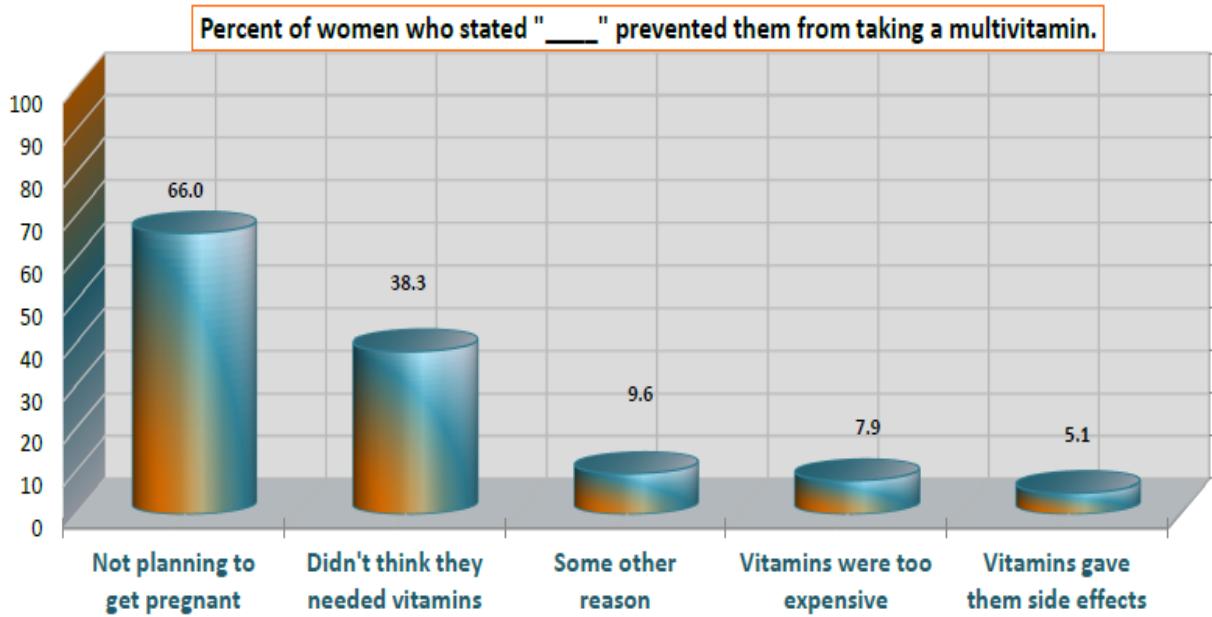


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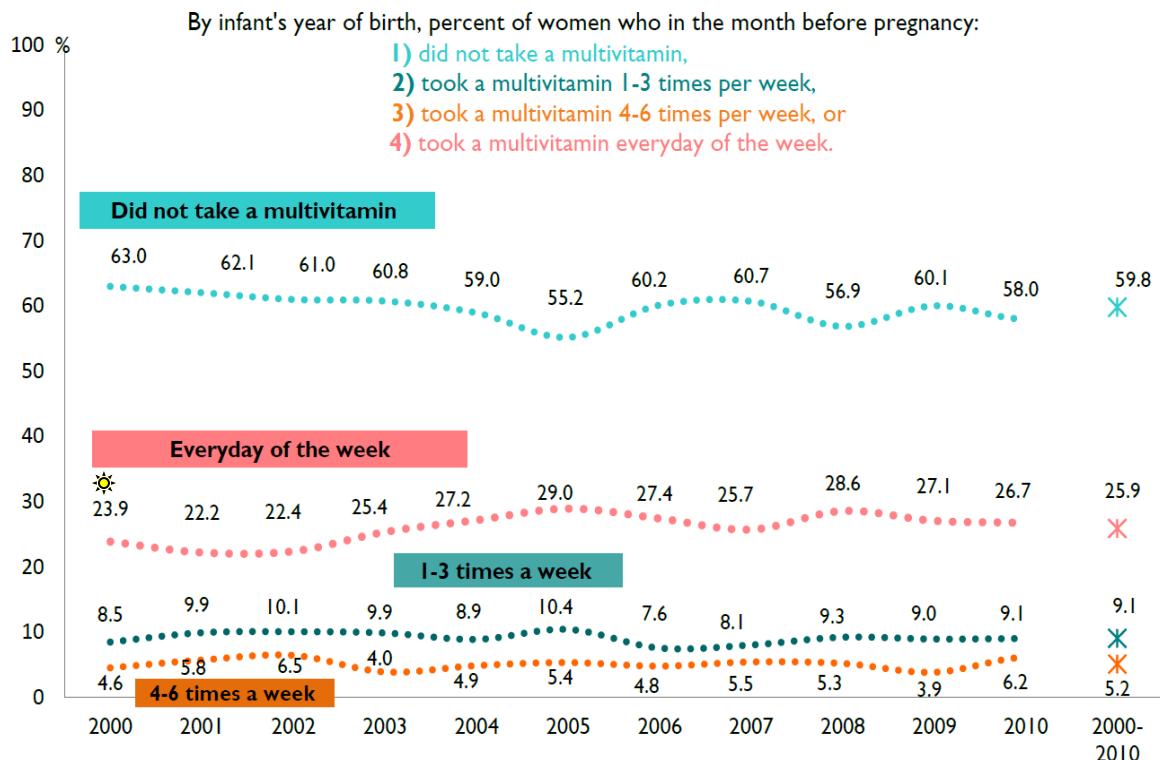
## **Reasons for not taking a preconception vitamin**

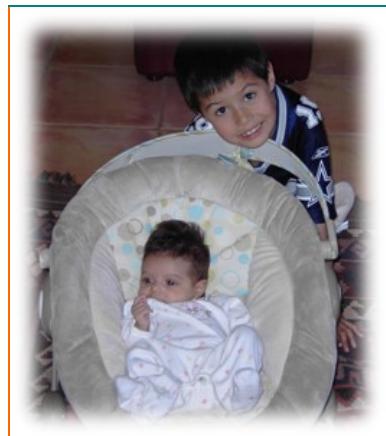
(Among those who said they did not take vitamins during the month before pregnancy)



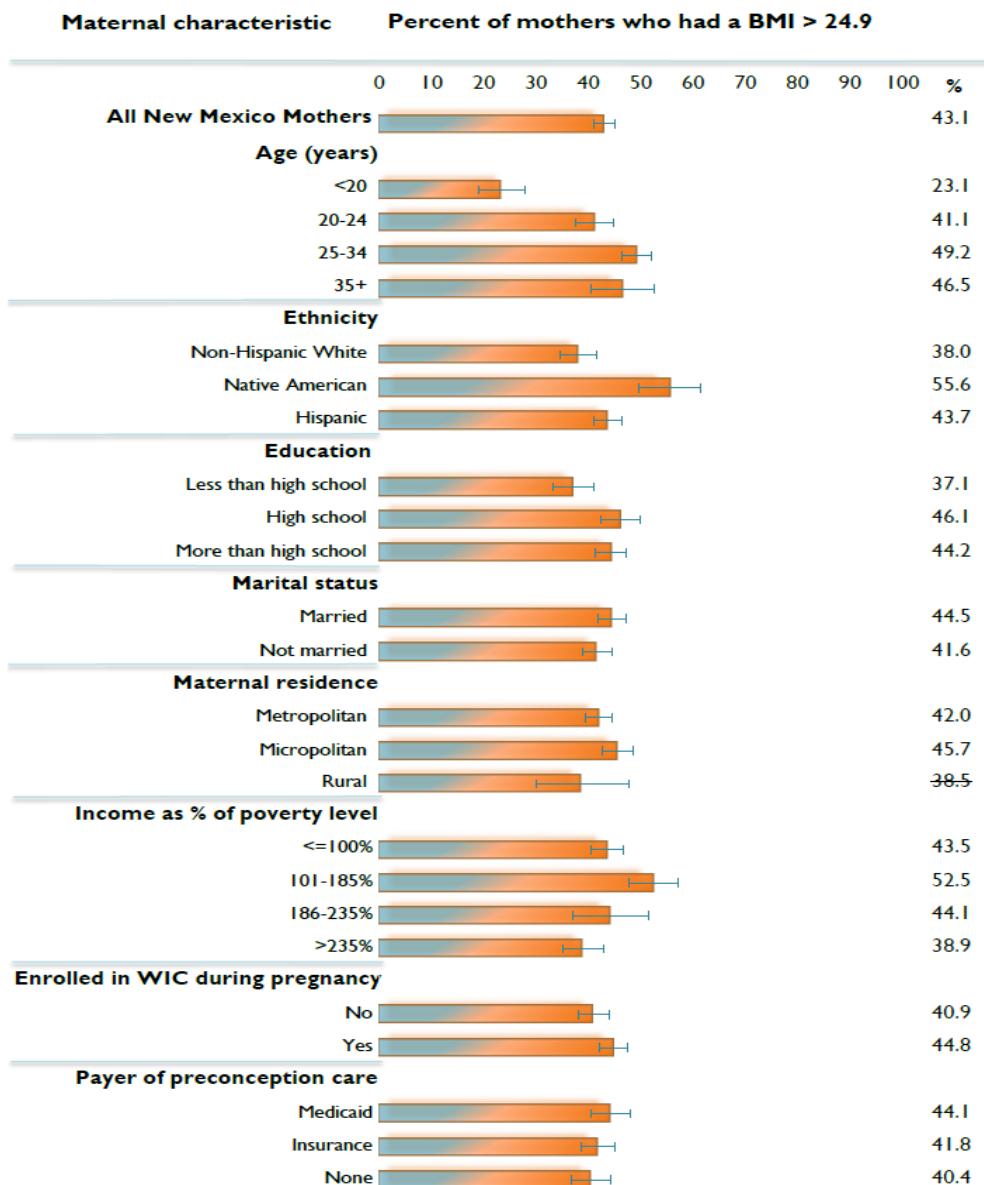
## Preconception Multivitamin Use

- ◆ Fewer than 30% of women giving live birth in 2009-2010 took a multi/prenatal/folic acid vitamin every day in the month before pregnancy.
- ◆ Thirty-seven percent of women with private insurance took a multivitamin or folic acid vitamin every day; 43% of women with a household income at or above 235% Federal Poverty Level did so.
- ◆ Only 17% of women under the age of 20 took a daily vitamin before pregnancy.
- ◆ The HP2020 target is 33.1% for folic acid (via vitamin) in the preconception period.





## Pre-pregnancy weight problem birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

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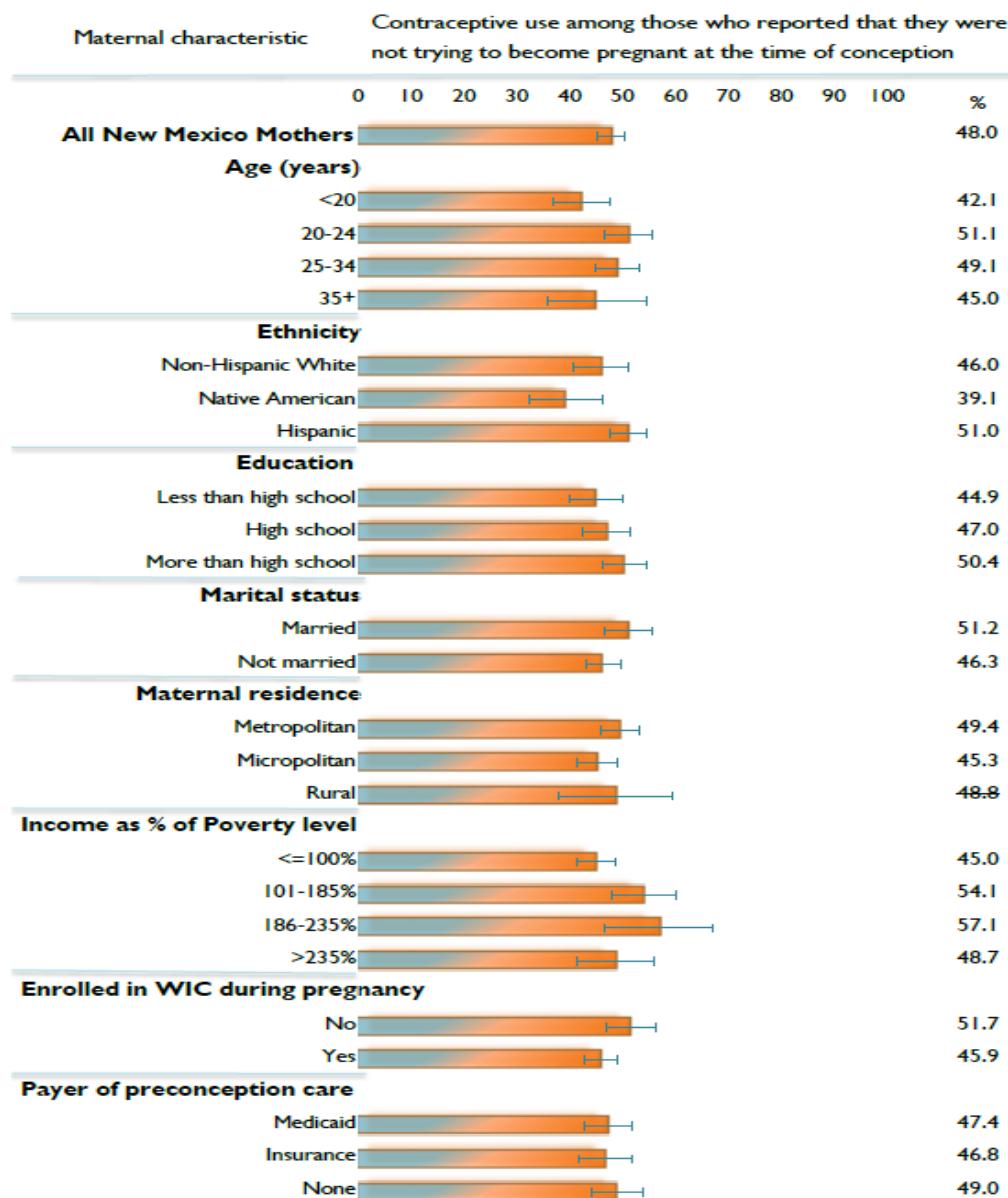
## Preconception Weight Problem

- ♦ Forty-three percent (43%) of women giving live birth in 2009-2010 were overweight before they got pregnant. This rate increased from 38% in 2000 to 43% in 2010.
- ♦ Native American women were more likely to have a preconception over-weight problem compared to women of other ethnicity or race background.
- ♦ There was a higher prevalence of overweight among women participating in WIC and among Medicaid recipients (due to lower income and lower educational level) compared to those with private insurance or no insurance before pregnancy.

By infant's year of birth percent of women whose BMI was **Normal**, **Under**, or **Overweight**:



**Contraception at conception  
birth years 2009-2010**



A strikethrough indicates a large margin of error and the need to use the data with caution.

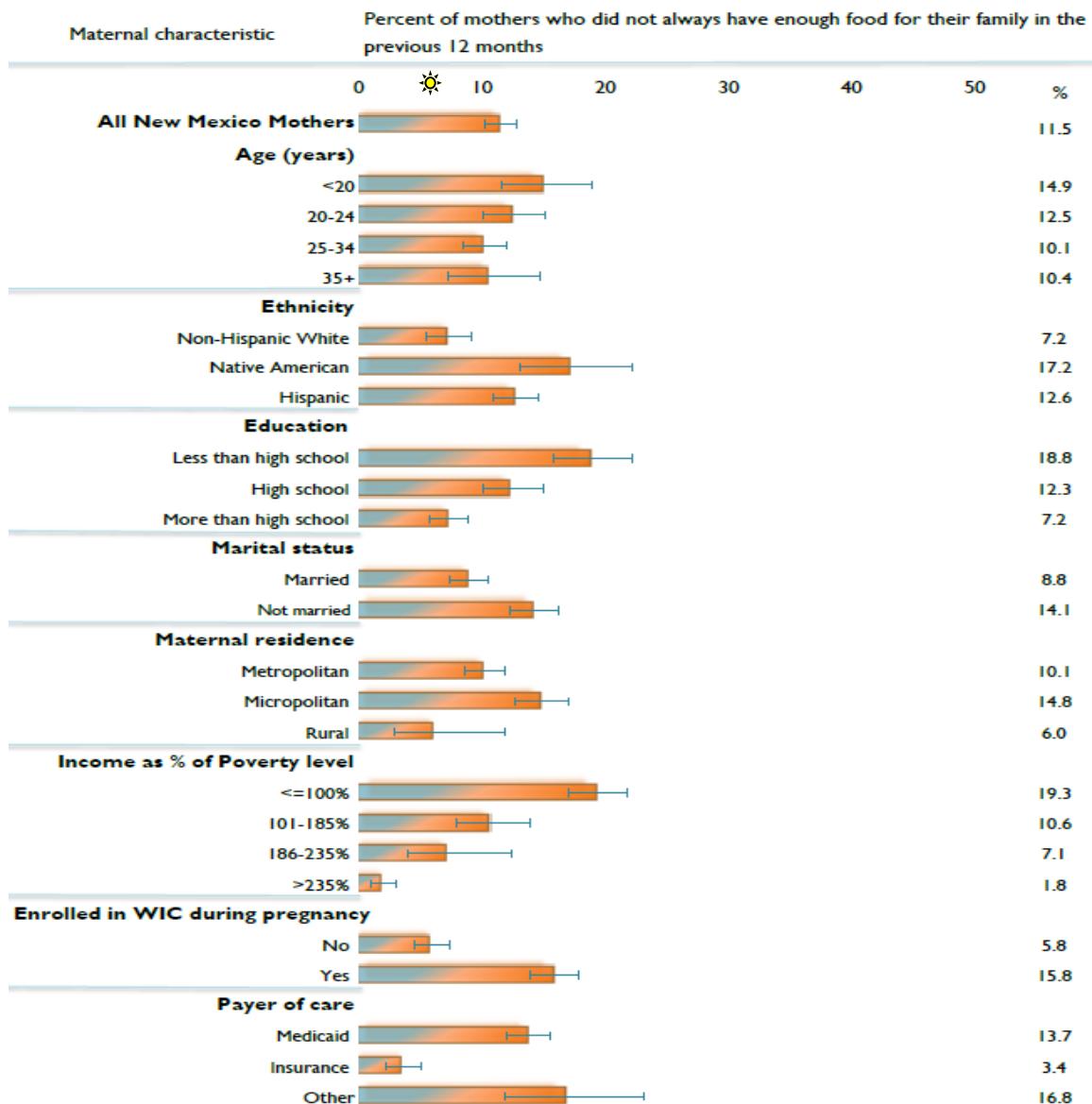
Number of respondents = 2,757, population= 53,358.

## Contraception

- ◆ Among women who were not trying to get pregnant and giving live birth in 2009 -2010, almost one-half (48%) said they were using a form of contraception at the time of conception.
- ◆ Native American women were less likely to report contraception at conception compared to Hispanic and non-Hispanic White women.
- ◆ Married women were more likely to use contraception at conception compared to unmarried women (51% v. 46%).



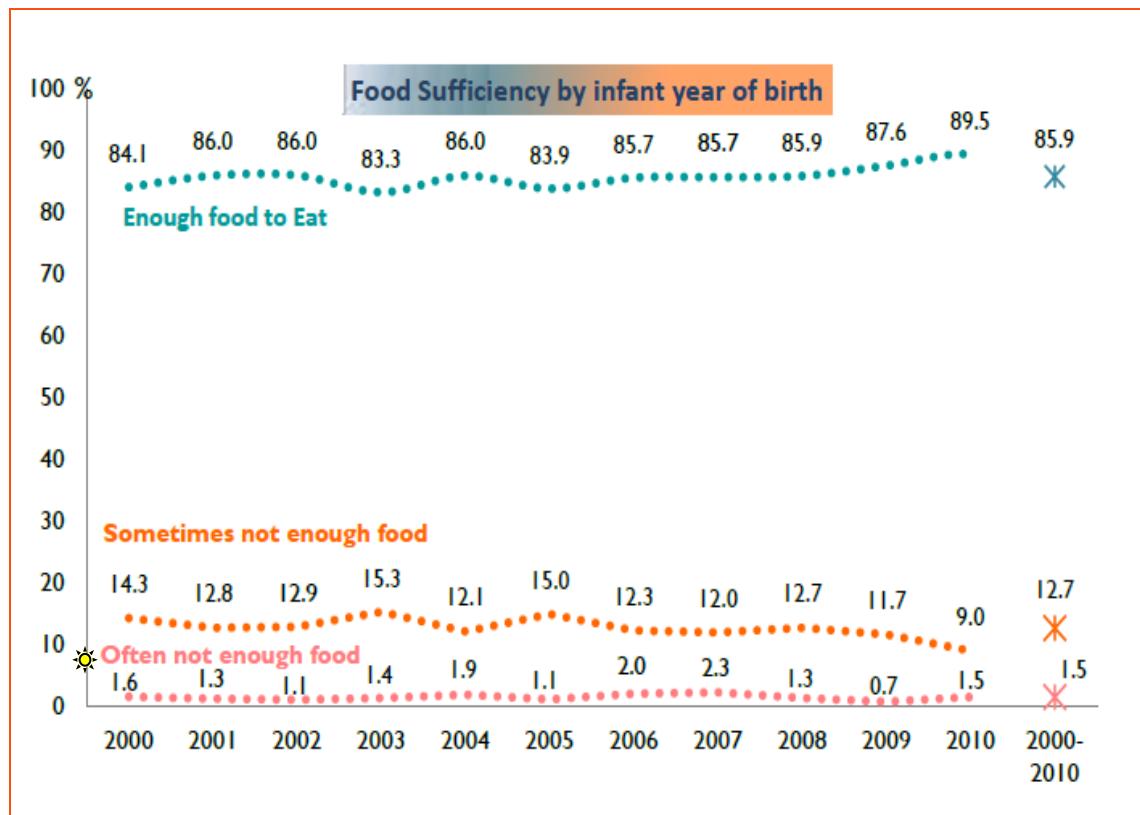
### Food Sufficiency birth years 2009-2010



Number of respondents = 2,757, population= 53,358.

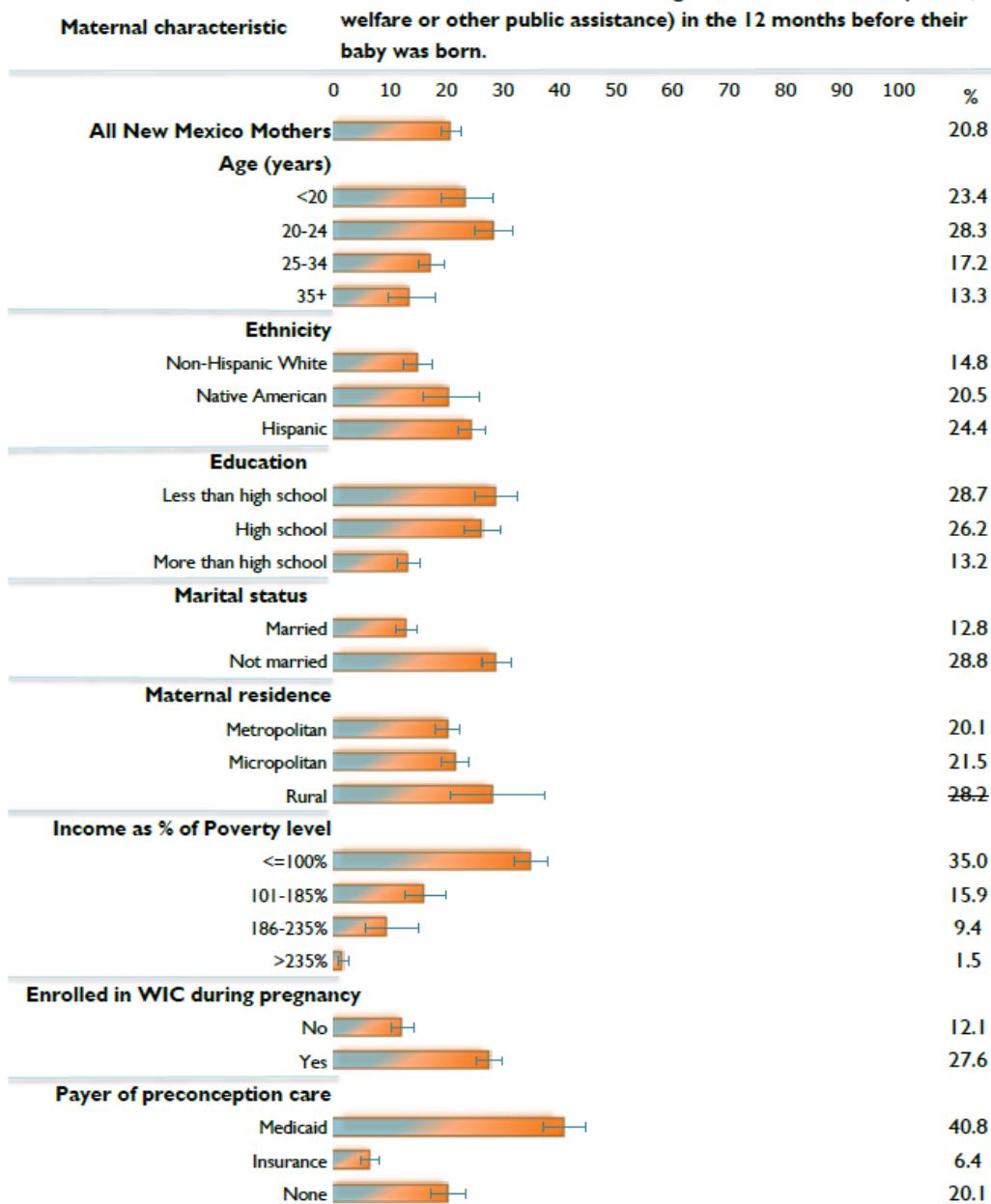
## Food sufficiency

- From 2000-2010, 14% of NM women giving live birth said they did not always have enough food to eat for their family.
- For the 2009-2010 birth period, 12% reported food insufficiency.
- Over 17% of Native American women reported not having enough food to eat, and 19% of women at 100% FPL did not have enough to eat.
- Sixteen percent of women with WIC did not have enough food.



## Government Assistance birth years 2009-2010

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A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Homelessness birth years 2009-2010



Number of respondents = 2,757, population= 53,358.

## Government Assistance

- ◆ Over twenty percent (20.8%) of women giving live birth in 2009-2010 had some form of government assistance (TANF, public assistance, or welfare) in the twelve months before their baby was born.
- ◆ Over 40% of women with Medicaid received some other form of government assistance.
- ◆ One-quarter of Hispanic women giving live birth received government assistance.

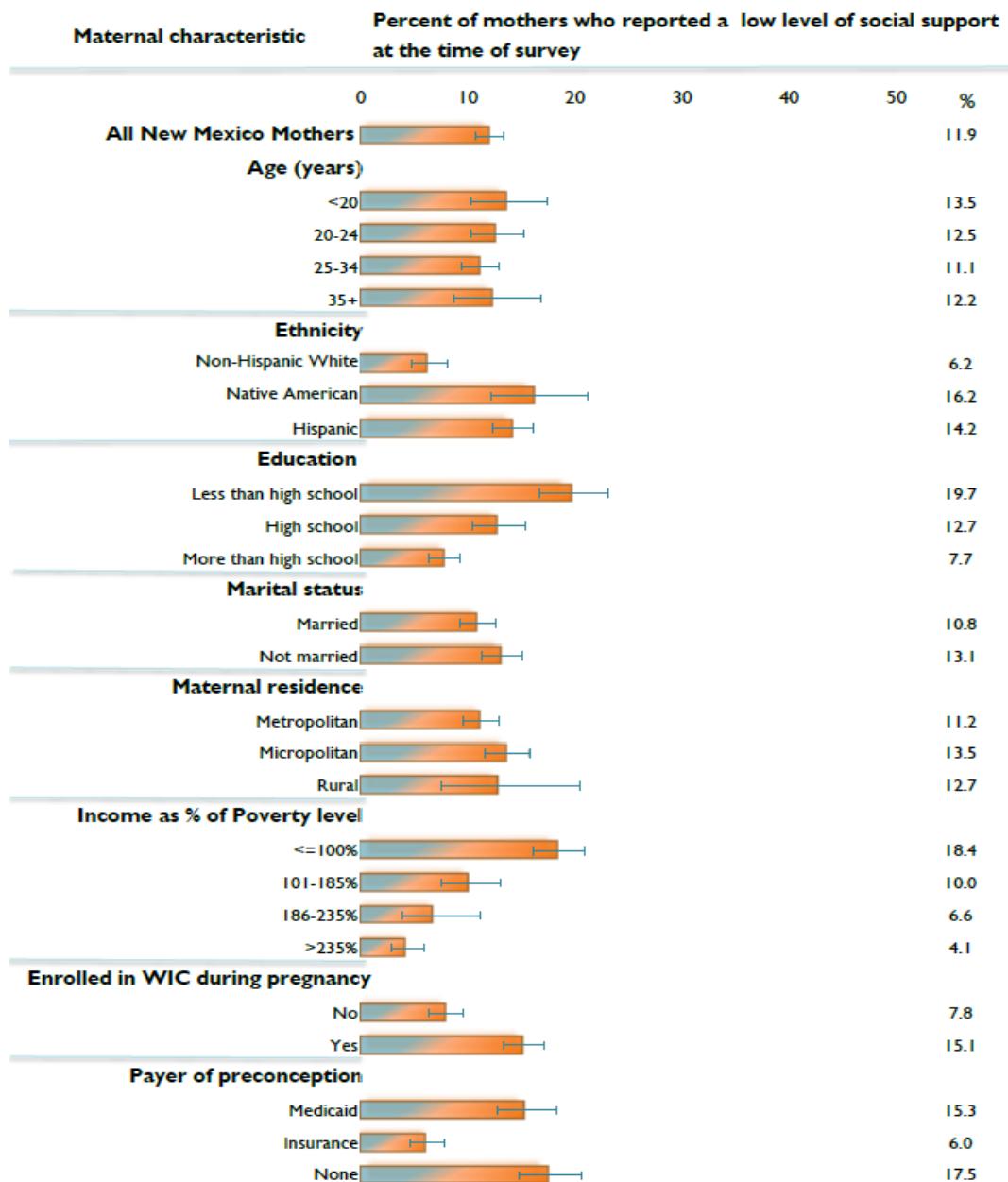
## Homelessness

- ◆ Nearly 4% of NM women with live birth were homeless in the 12 months before their baby was born.
- ◆ About 6% of moms under 20, without high-school education, or without insurance had no place to live in the year before delivery.



Photograph courtesy of Susan Gramm

## Social Support birth years 2009-2010



Number of respondents = 2,757, population= 53,358.

## Low social support

- ◆ About 12% of newly-delivered women reported a low level of support from friends or family at the time of survey. This meant they did not have three out of the five types of support reported here: someone to loan her \$50, someone to help her if she were sick, someone to talk to about problems, someone to help take care of her baby, someone to help her if she were tired and frustrated with her baby.
- ◆ Those with the most precarious financial situation also reported the lowest prevalence of social support.



- ◆ Eighteen percent of women with no insurance, and 18% of women with household income at or below 100% FPL reported little social support.

## Mother's comments

Pulled verbatim from PRAMS surveys

  
“I didn't want to get big with birth control and I was trying to get patches but it was too expensive the insurance is different now. I used to use the patches with Medicaid, but I don't have insurance now.”

“The nurses in the hospital fed him formula without my consent. After that he didn't want to nurse and I pumped but lost my milk supply.”

  
“I wasn't aware prenatal vitamins were that beneficial before pregnancy.”

  
“Labor was induced [and there was] too much sedation for me to stay awake to push. I was given something that was just supposed to "take the edge off" the pain, but it knocked me out.”



  
“I have a lot of fear that my baby will be sick and I worry a lot about my mom because we are far away. I am afraid of what life will present or that something will happen to my daughter, the most important part.”



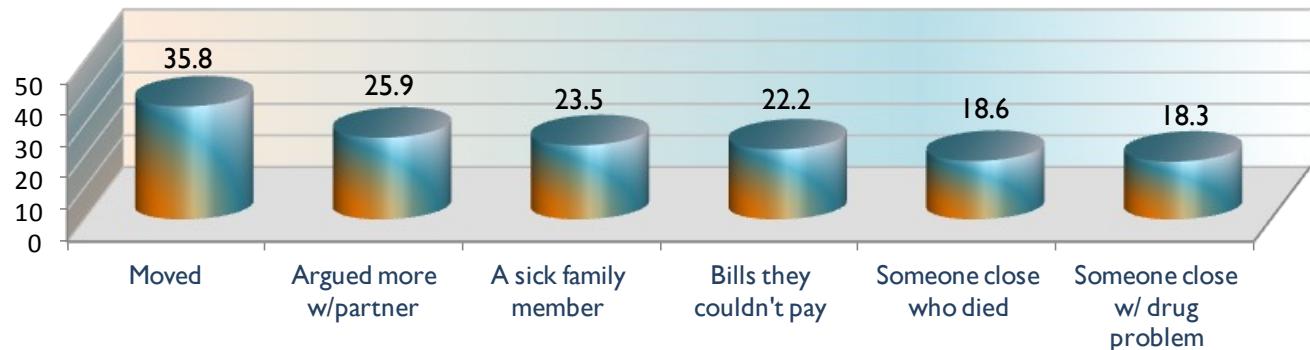
  
“When I did work in the last two years at various jobs if one of the women got pregnant they didn't have a job any more. The bosses would see to that.”

## Low social support



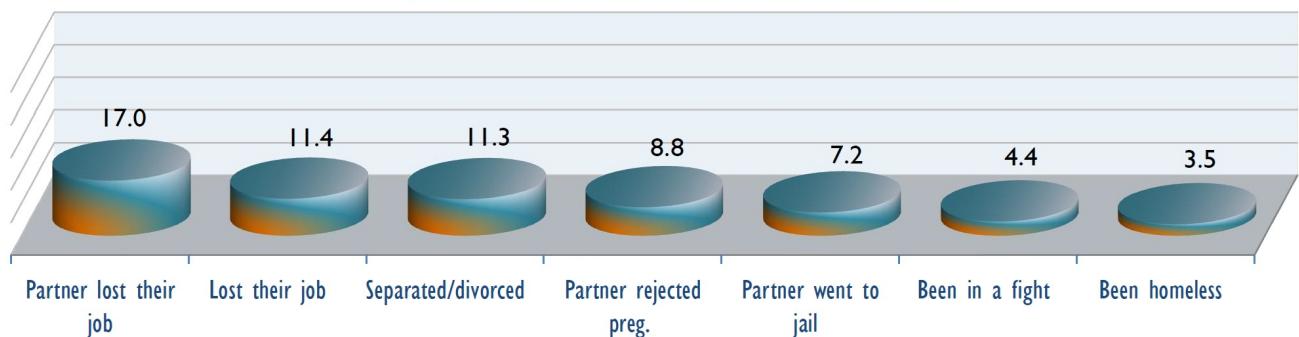
## Stress during pregnancy

Percent of women who said they had

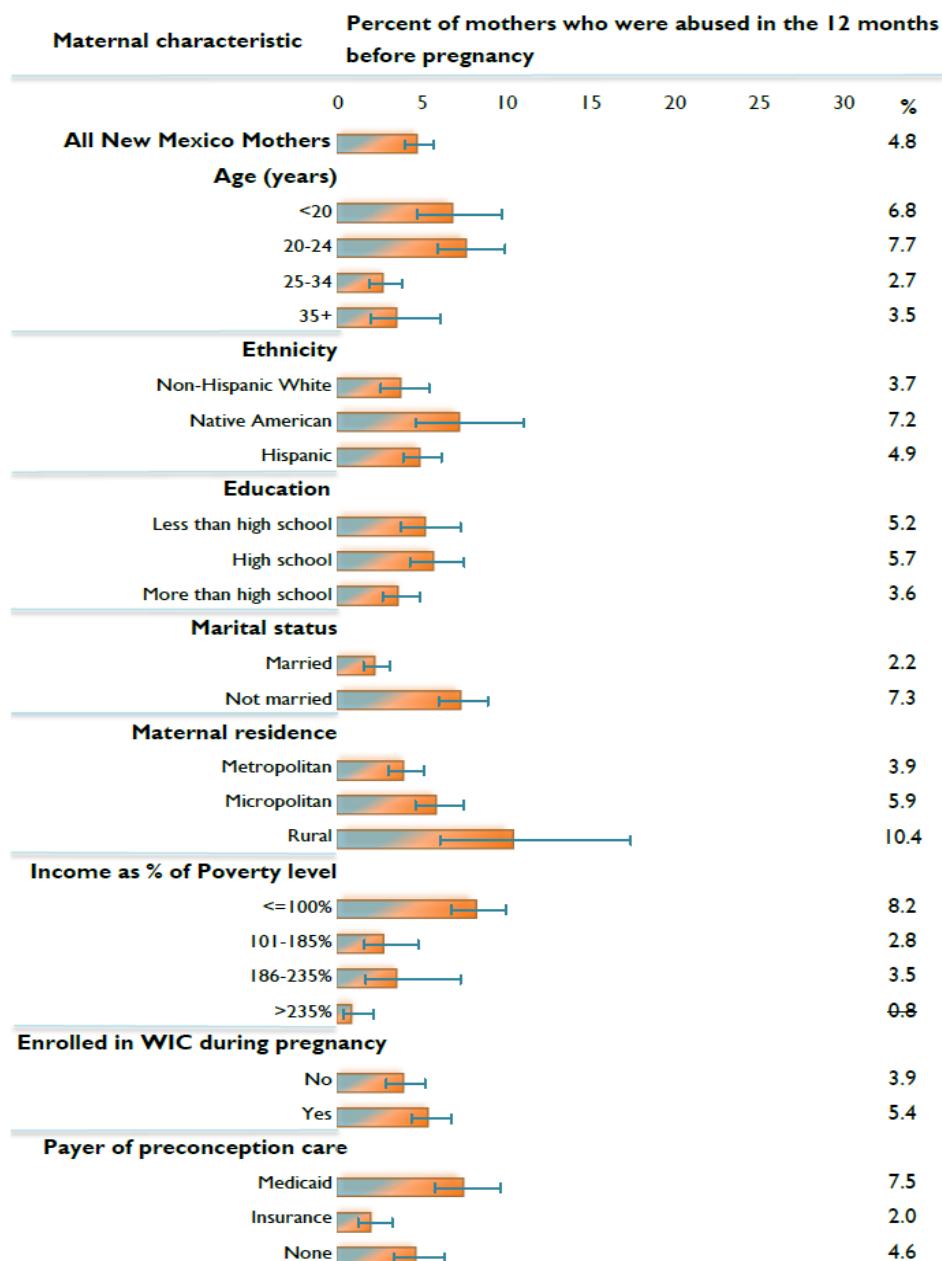


**Stress during pregnancy CONTINUED**

**Percent of women who said they had ...**



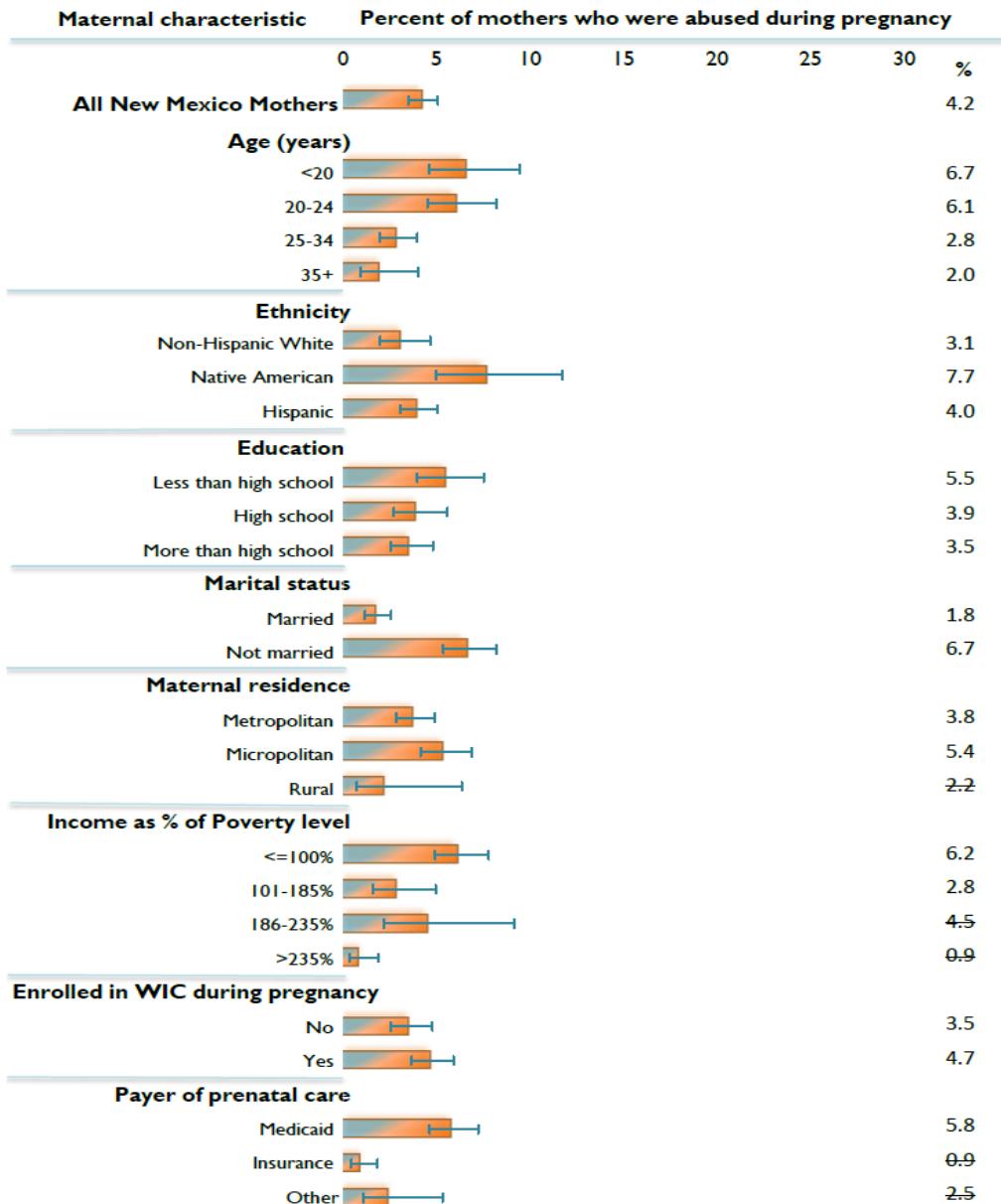
## Physical abuse before pregnancy birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

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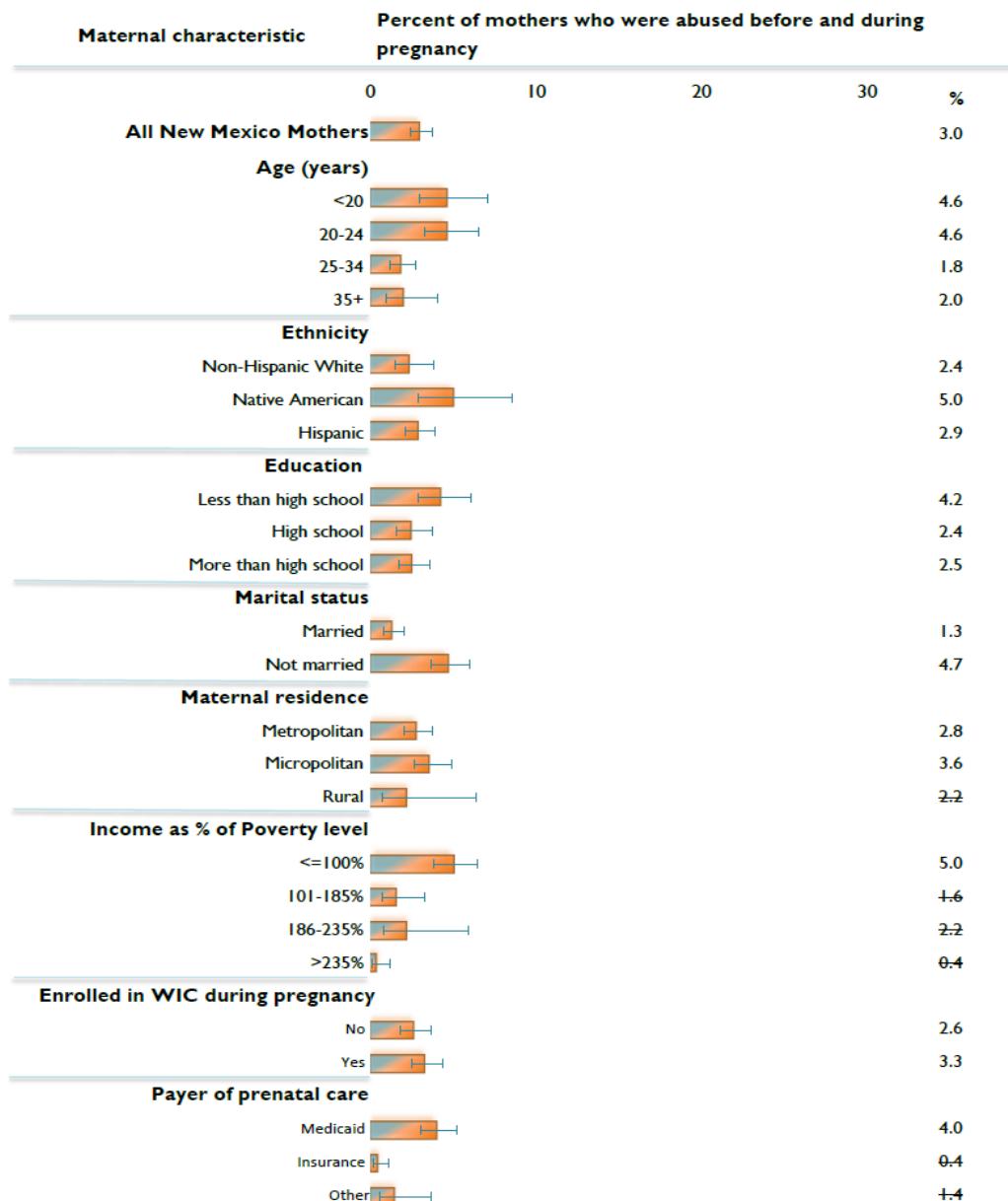
## Physical abuse during pregnancy birth years 2009-2010



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**Physical abuse before and during pregnancy  
birth years 2009-2010**

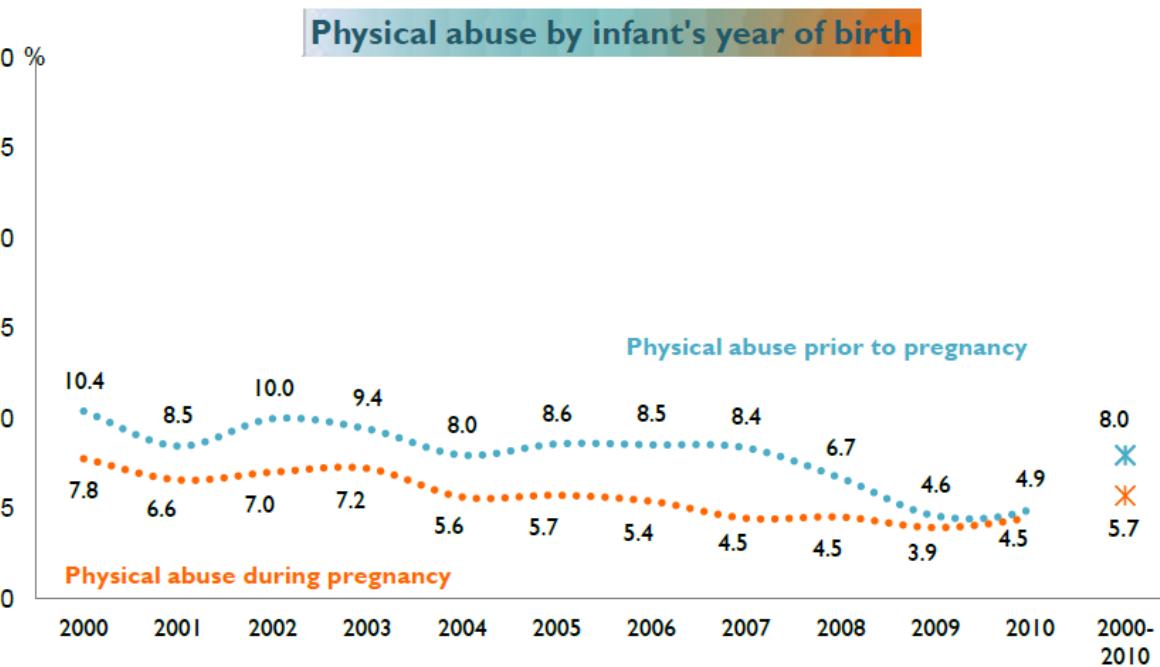


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Number of respondents = 2,757, population= 53,358.

## Physical abuse

- ♦ For the 2009-2010 birth period, five percent (5%) of NM women were physically abused in the 12 months before pregnancy, and 4% were abused during pregnancy. While the rates have decreased for both periods (before pregnancy rates decreased from 10% in 2000 to 5% in 2010 and from 8% to 6% during pregnancy), disparities persist.
  - ♦ In 2009-2010, 7% of Native American women were abused before and 8% were abused during pregnancy.
  - ♦ Ten percent (10%) of rural residents reported abuse during pregnancy, and young women under 25 were more likely to be abused both before and during pregnancy.

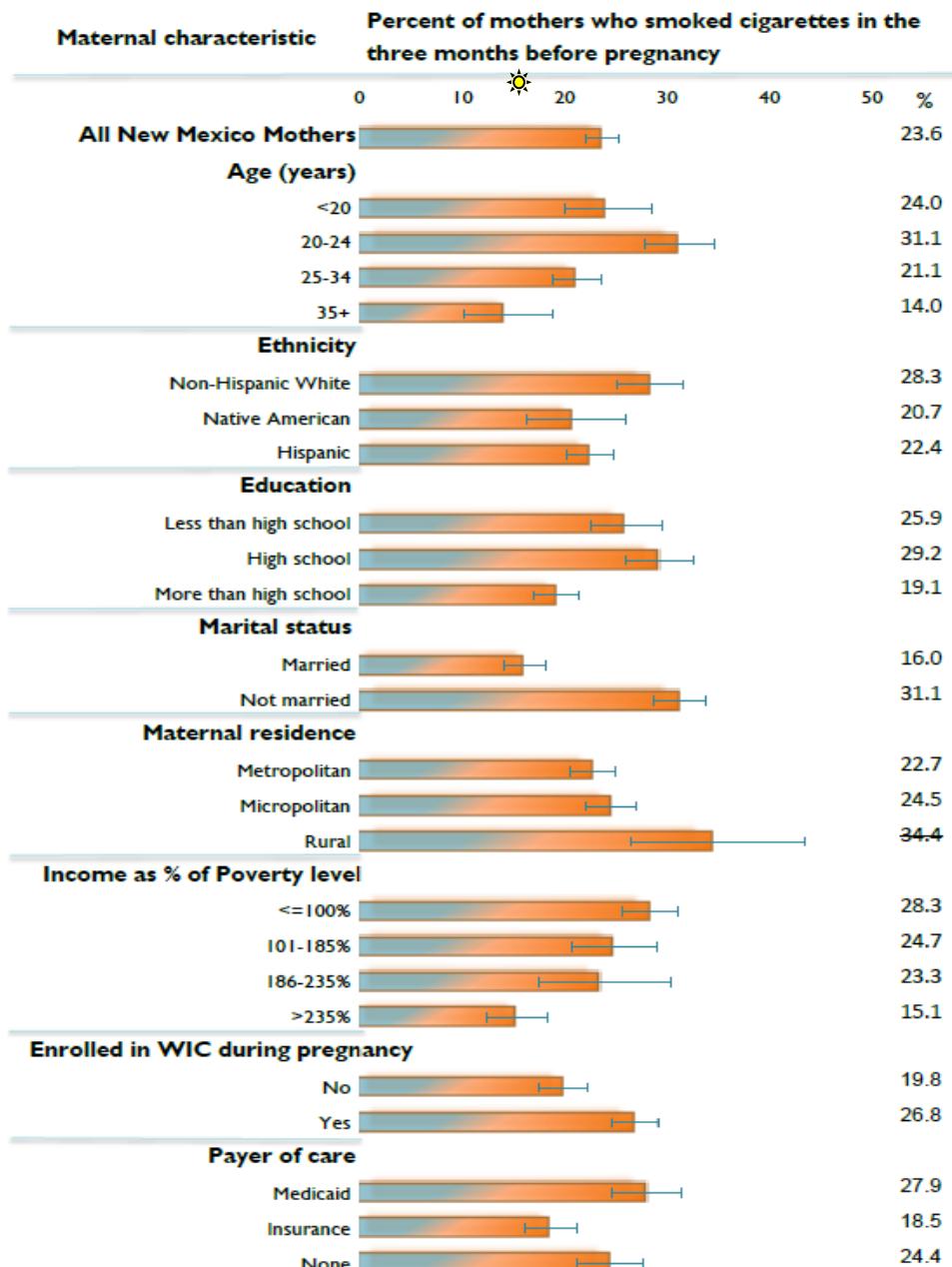


# Health Behaviors

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## Smoking before pregnancy

birth years 2009-2010

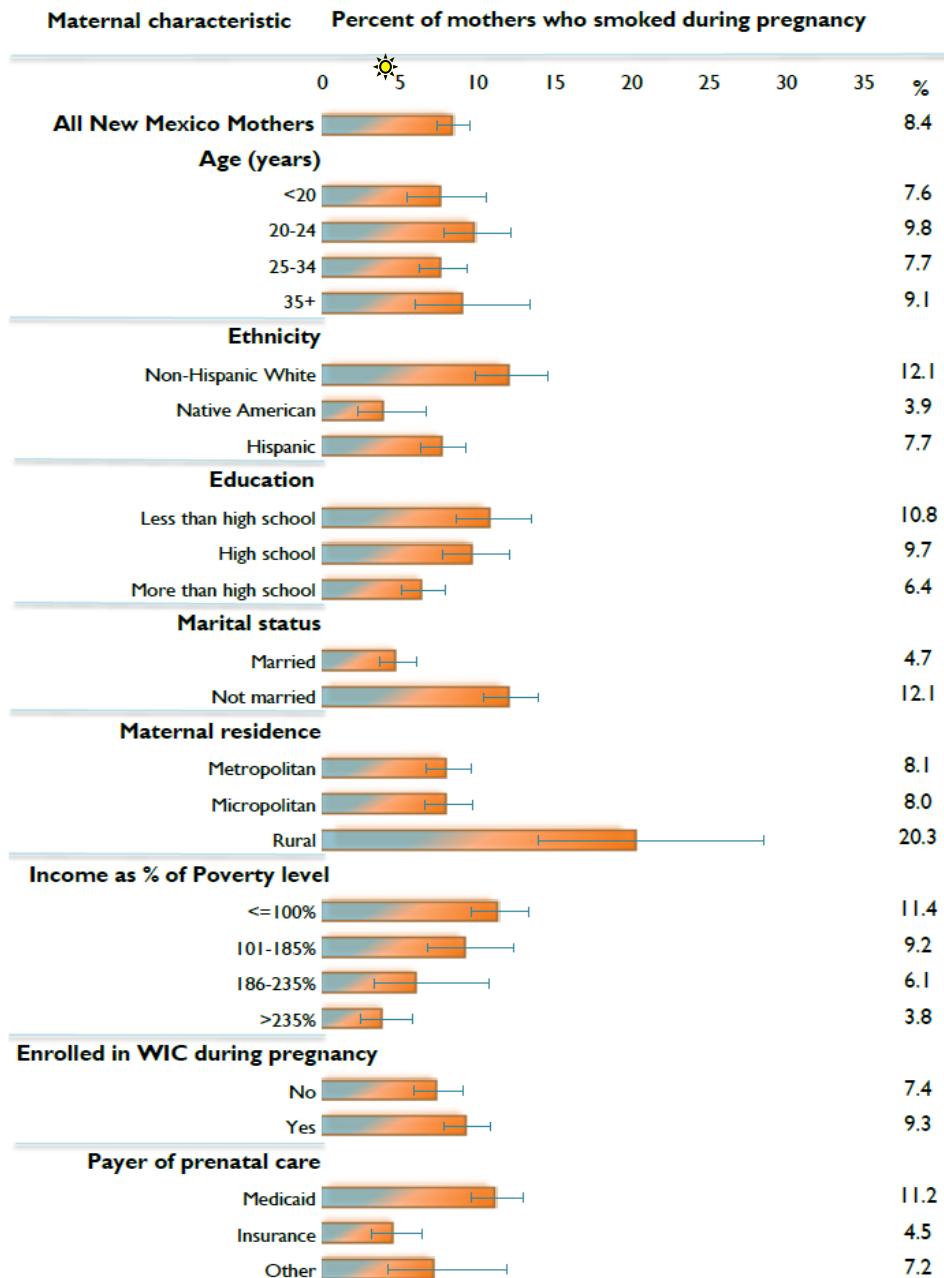


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Number of respondents = 2,757, population= 53,358.

# Smoking during pregnancy birth years 2009-2010

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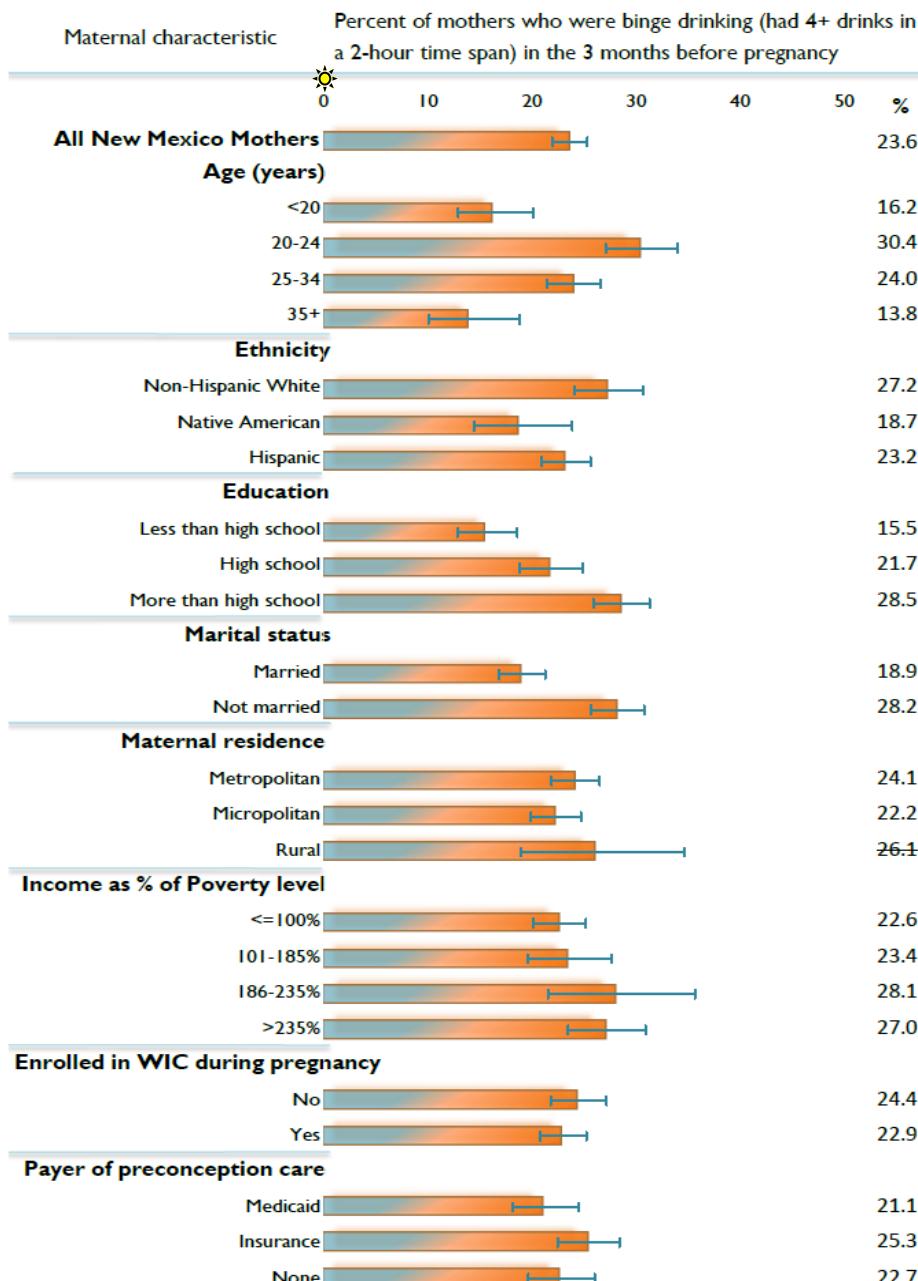
## **Smoking before or during pregnancy**

- ◆ Twenty-four percent of NM women with a recent live birth smoked cigarettes prior to pregnancy.
- ◆ Only 16% of married women smoked compared to 31% of unmarried women.
- ◆ Just 14% of women ages 35 and older smoked, but 31% of those between 20 and 24 years were smokers.
- ◆ Twenty-seven percent of women participating in WIC smoked before pregnancy, as did 20% of those without WIC.
- ◆ Medicaid recipients were more likely to smoke compared to those with private insurance (28% v. 19%).
- ◆ Rural residence was associated with smoking during pregnancy: 20% of rural residents smoked versus just 8% of women in micropolitan or metropolitan areas.
- ◆ Only 4% of Native American mothers smoked compared to 12% of non-Hispanic White women.
- ◆ Poverty level was inversely related to prenatal smoking prevalence.



## Binge drinking before pregnancy birth years 2009-2010

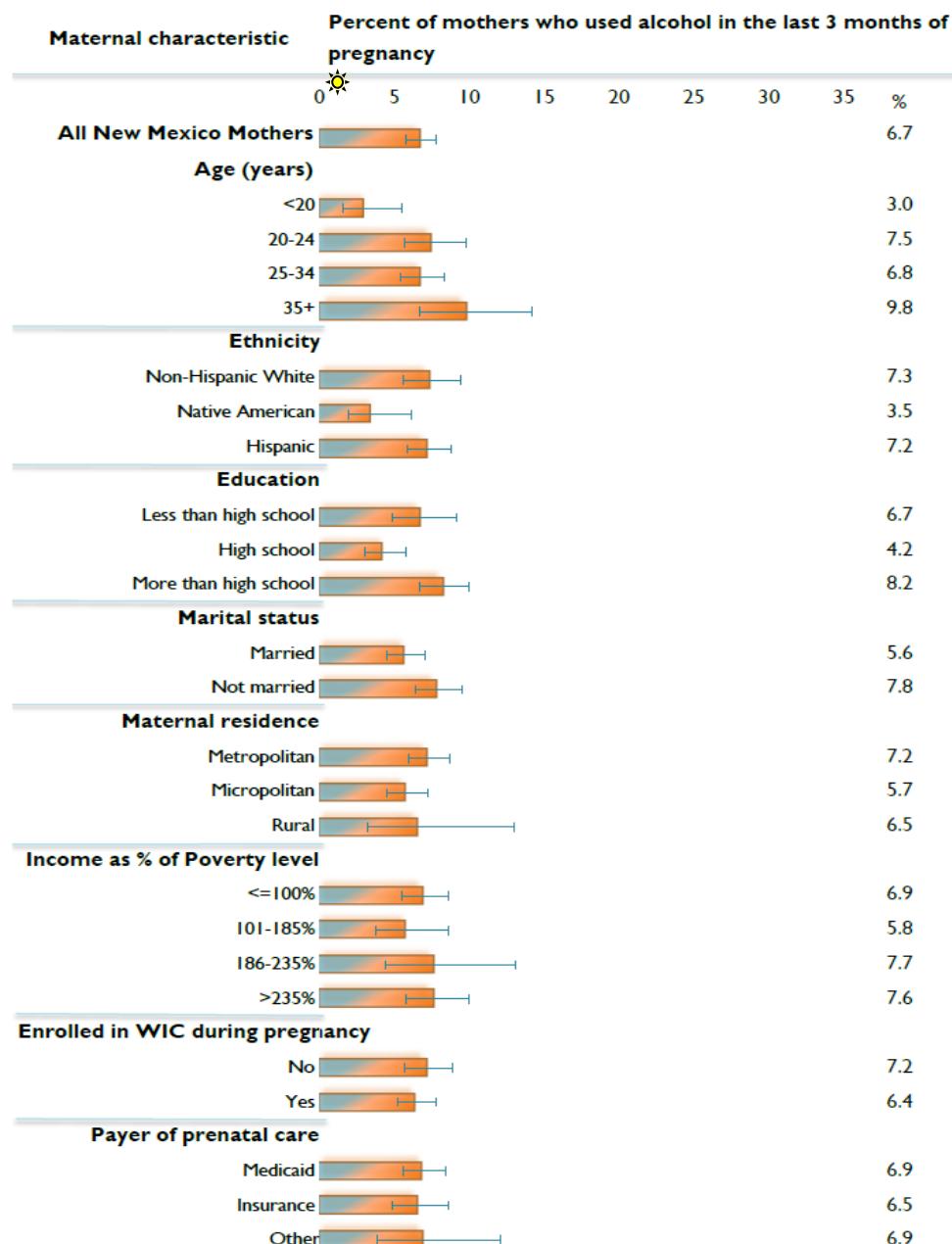
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## Alcohol use during pregnancy birth years 2009-2010

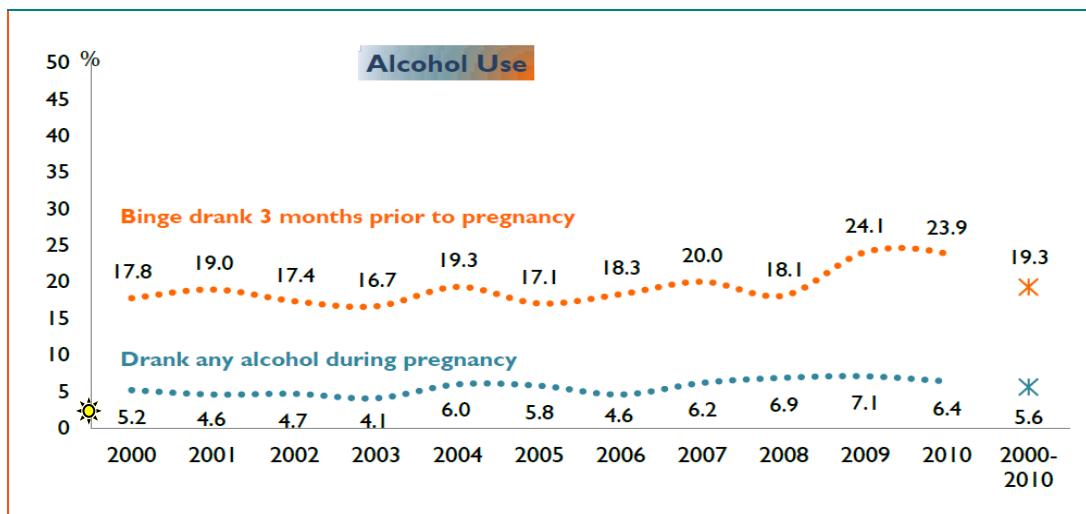


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## Use of alcohol before or during pregnancy

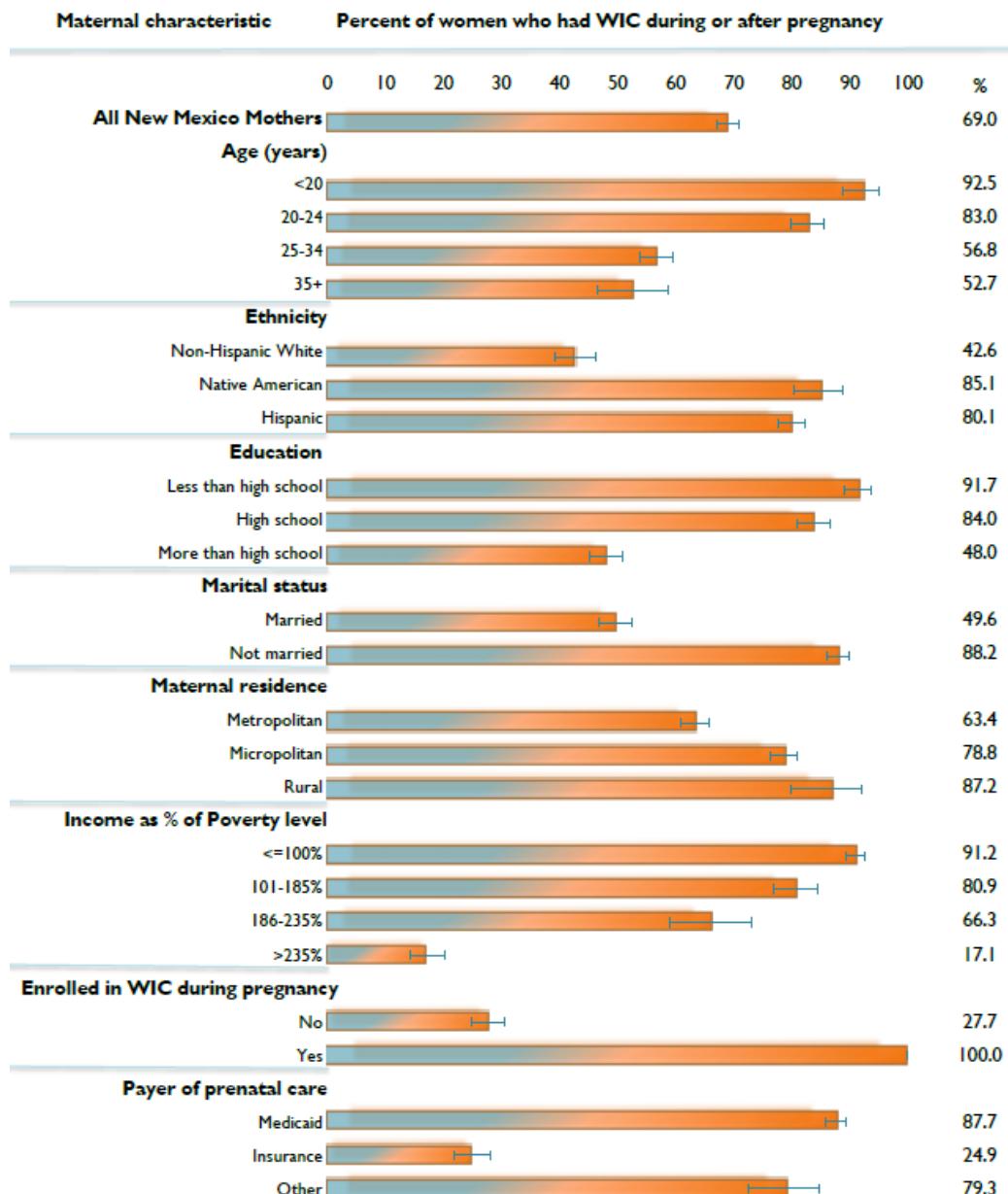
- ◆ Almost one quarter (24%) of NM women with a recent live birth in 2009-2010 reported binge drinking in the 3 months before pregnancy.
- ◆ Women with more than a high school education report binge drinking more than those with low educational attainment (29% v. 16%).
- ◆ A higher proportion of unmarried women (28%) reported binge drinking compared to married women (16%).
- ◆ Binge drinking was also more prevalent among Non-Hispanic White women compared to Native American or Hispanic women.
- ◆ Almost 7% of NM women giving live birth reported drinking during pregnancy.
- ◆ Only 4% of Native American drank during pregnancy compared to 7% of Hispanic and non-Hispanic White women.
- ◆ Maternal age was associated with drinking during pregnancy: 3% of women under the age of 20 drank, but close to 10% of women 35 years and over drank alcohol during pregnancy. Women residing in Metropolitan areas were more likely to drink compared to those in other areas. Women with WIC were less likely to engage in prenatal drinking compared to those without WIC.



# Health Services

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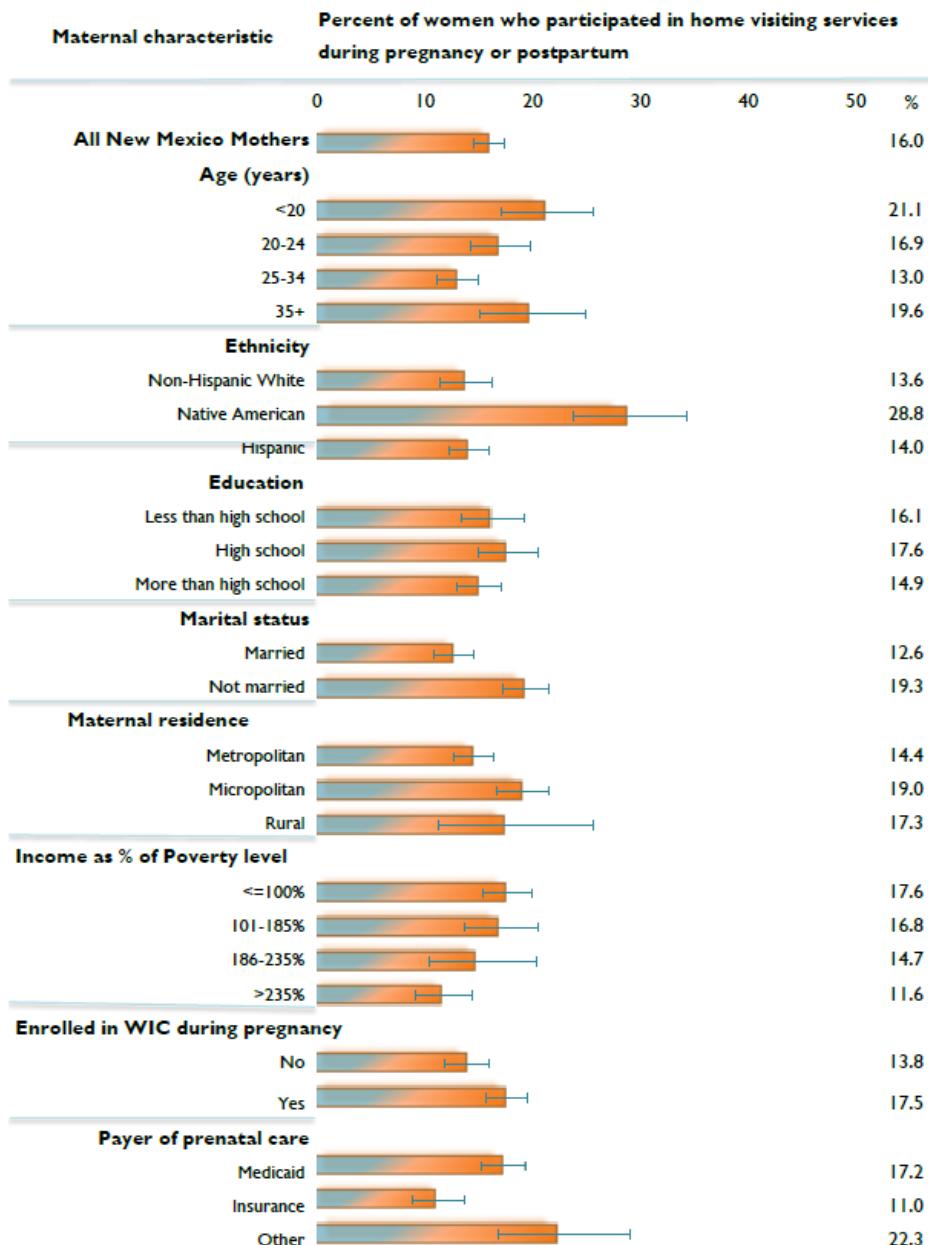
## WIC Participation birth years 2009-2010



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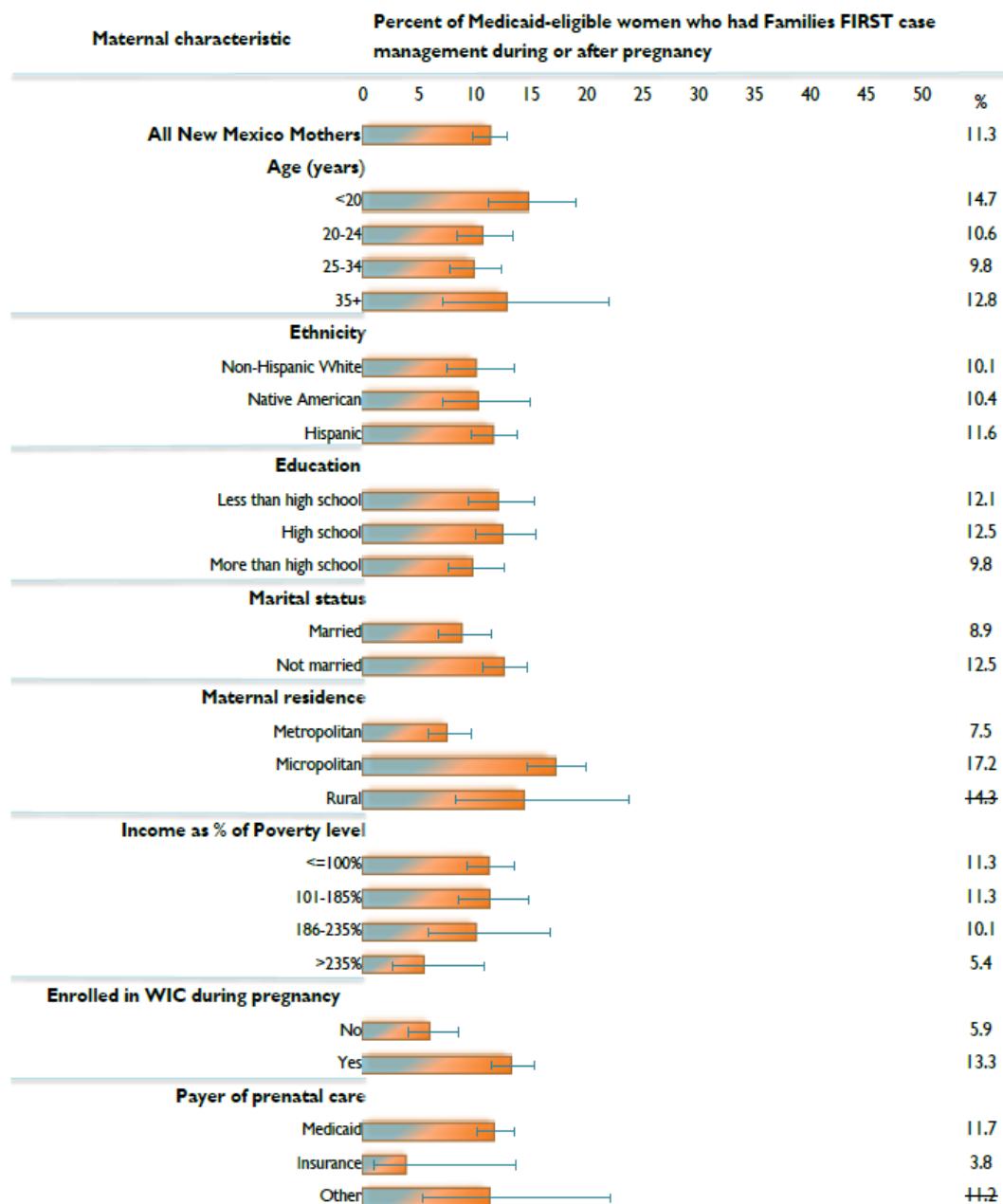
## Home visiting services birth years 2009-2010



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## Families FIRST participation

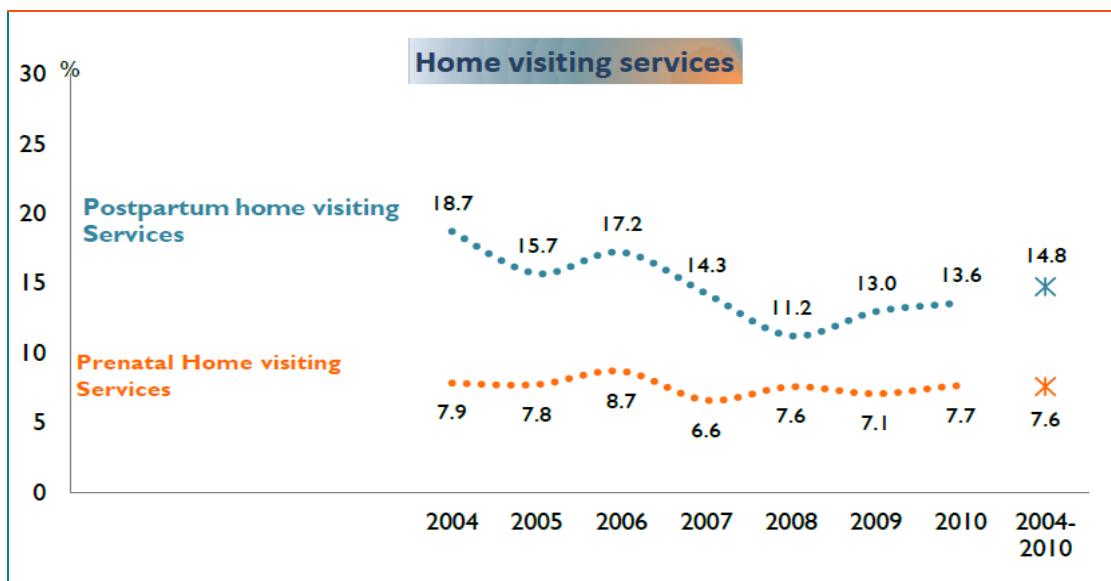


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## Health Services

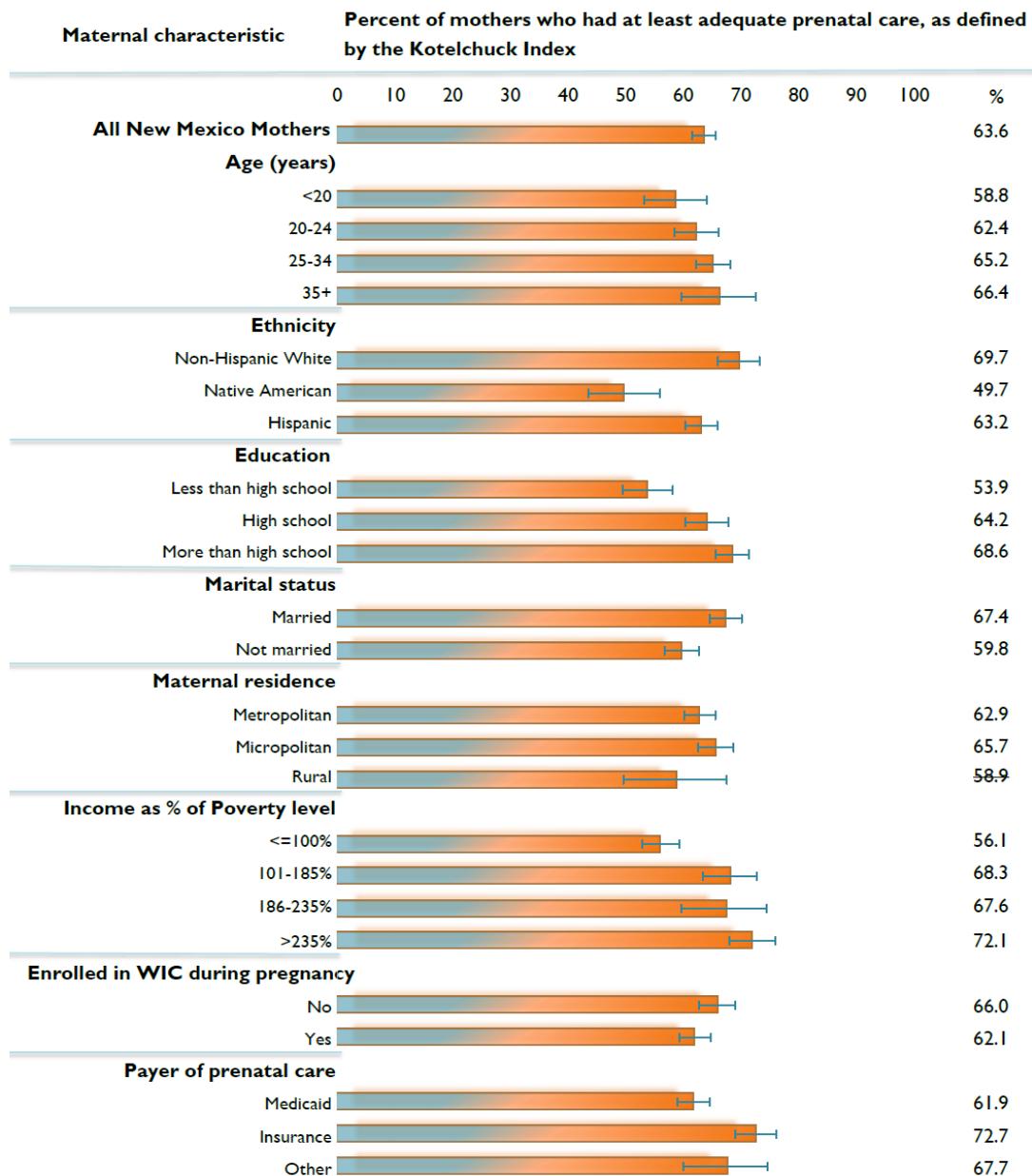
- ◆ Almost 70% of women giving live birth in 2009-2010 participated in WIC either during their pregnancy or postpartum. Young mothers under the age of 20 were the most likely to participate (93%) and 88% of Medicaid recipients also had WIC.
- ◆ Eighty-eight percent of unmarried women participated and almost 50% of married women also received WIC. Eighty-five percent of Native American women and 80% of Hispanic women had WIC while only 43% of non-Hispanic White women did.
- ◆ Sixteen percent (16%) of NM women giving live birth had home visiting services either during or after pregnancy. Almost 30% of Native American women had home visiting.
- ◆ Prenatally, only 7% of women had home visiting services. Fourteen percent (14%) of Native American women had prenatal home visiting compared to 6% and 7% among non-Hispanic White and Hispanic women, respectively.
- ◆ Eleven percent (11%) of Medicaid-eligible women had Families FIRST case management. Seventeen percent of micropolitan residents accessed Families FIRST while 7% of metropolitan residents did so.
- ◆ Fifteen percent (15%) of mothers under the age of 20 had Families FIRST services.



# Prenatal Care

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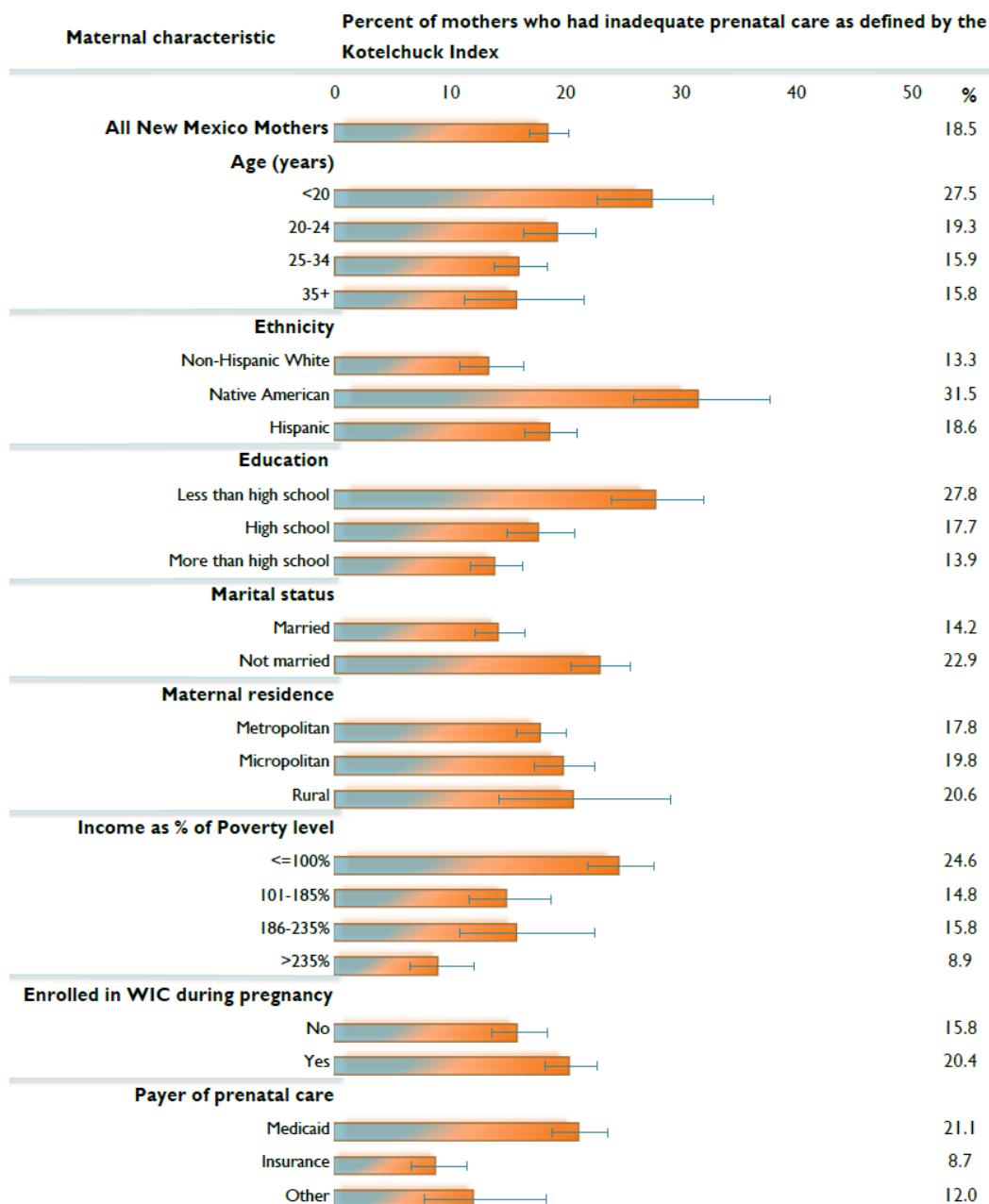
## Adequate prenatal care birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

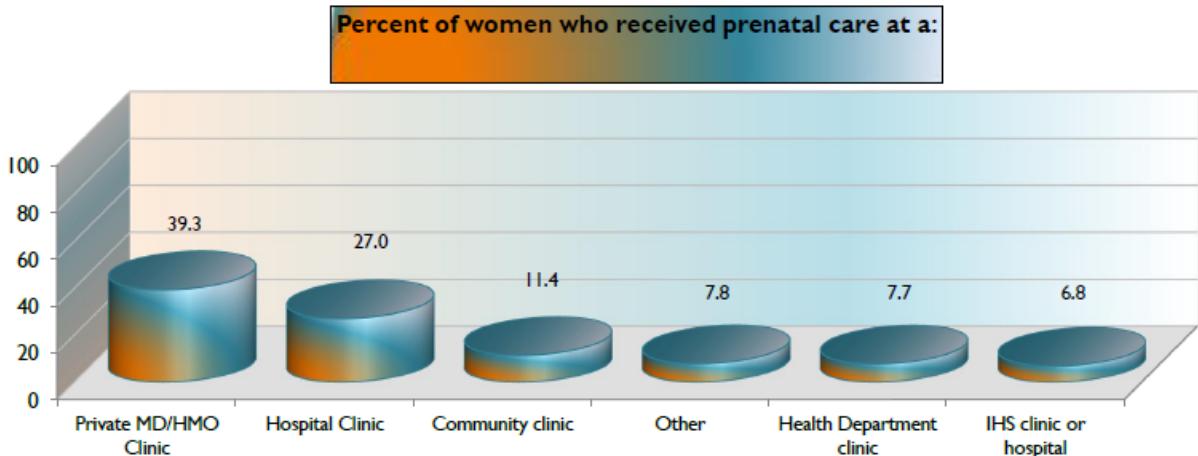
## Inadequate prenatal care birth years 2009-2010



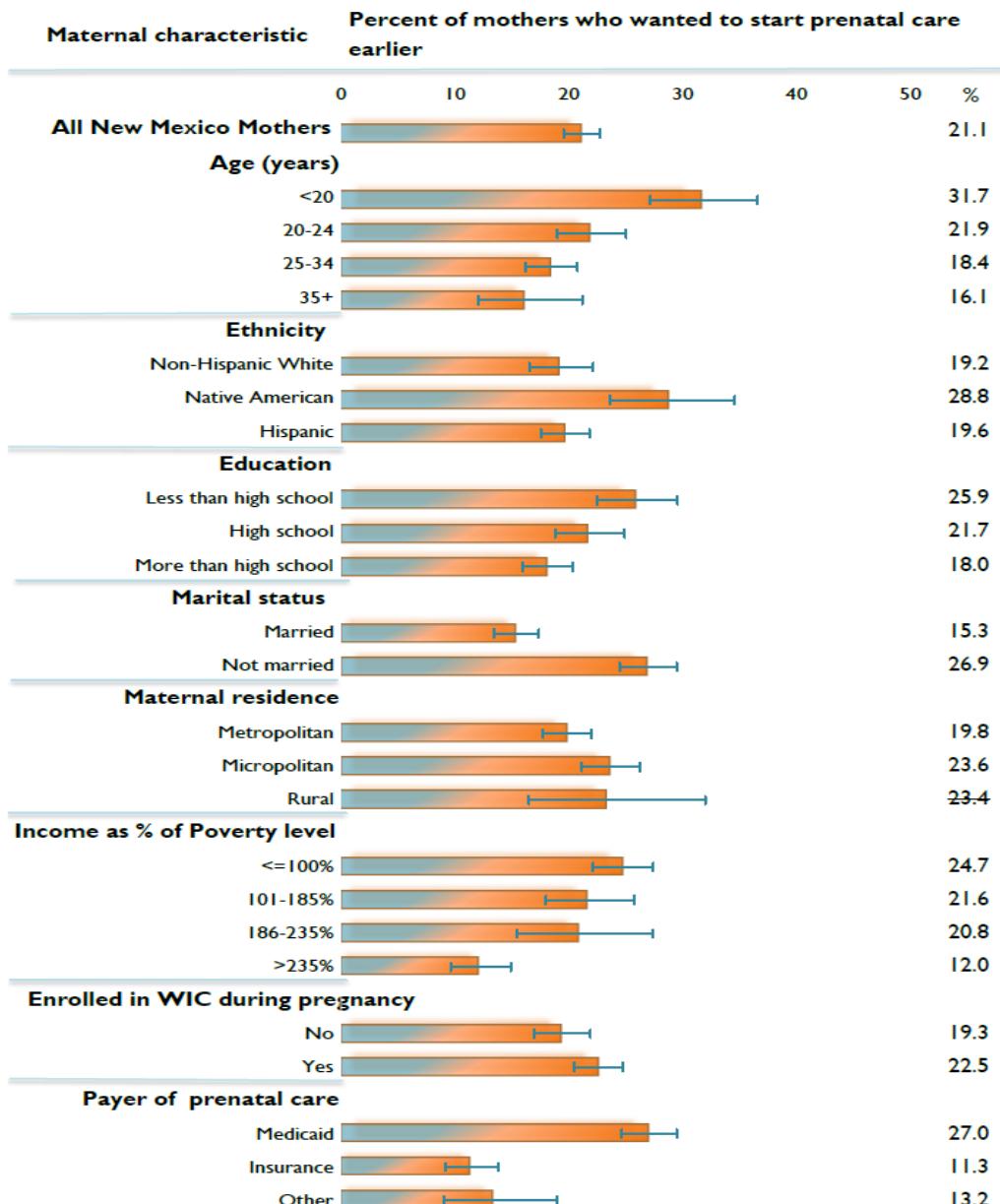
A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Prenatal Care location



## Wanted prenatal care earlier birth years 2009-2010

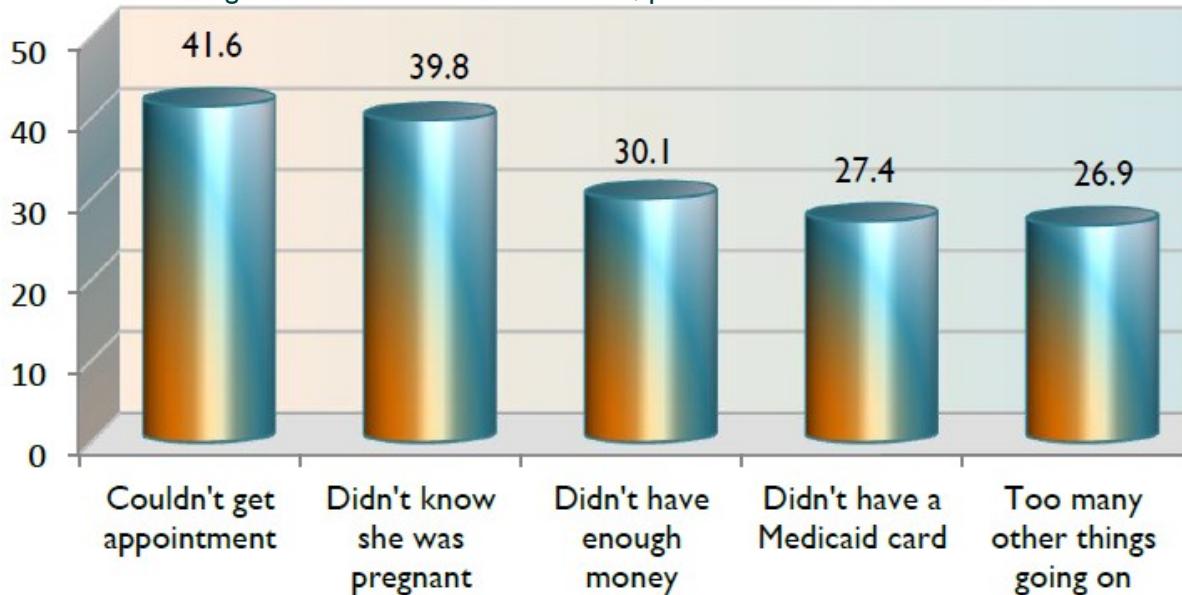


A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Barriers to Prenatal care

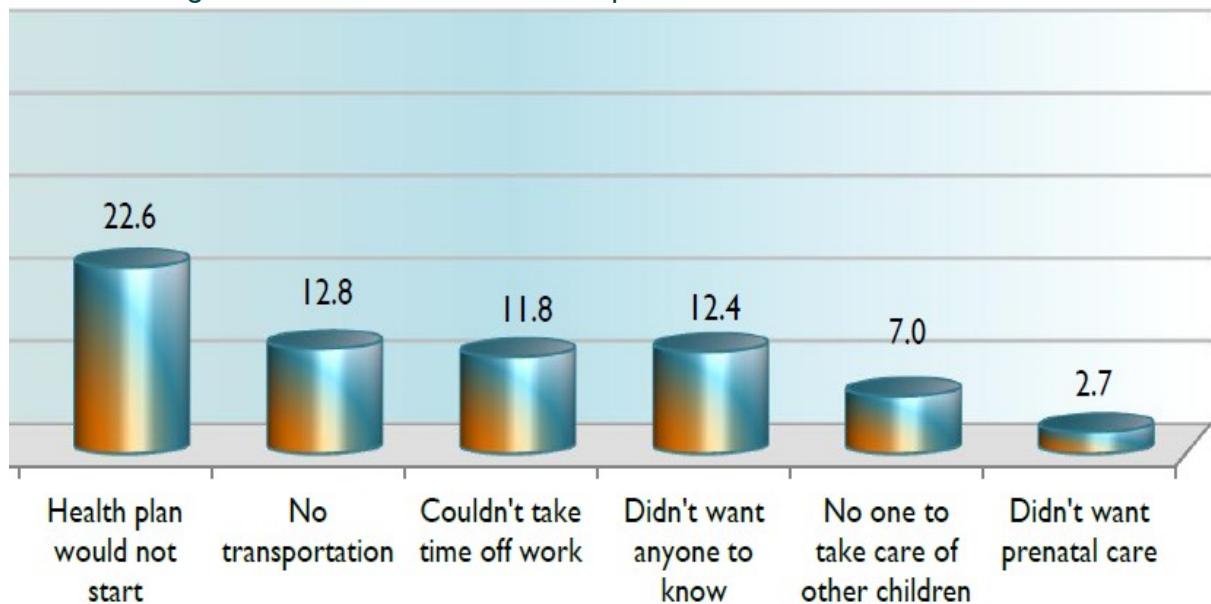
Among women who wanted care earlier, percent who said...



## Barriers to Prenatal care

Continued

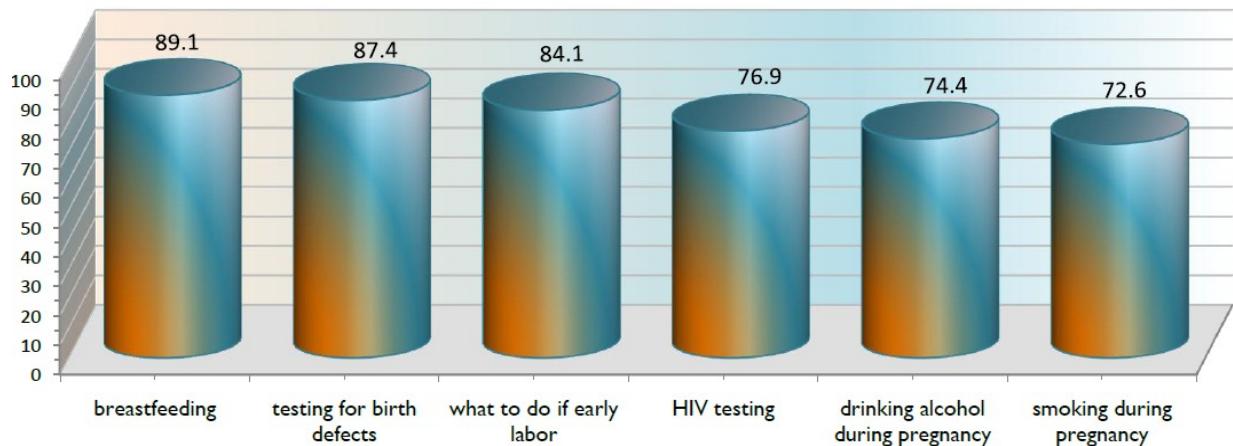
Among women who wanted care earlier, percent who said...



## Prenatal care discussion topics

**Percent of women who reported that a health care worker talked with them about...**

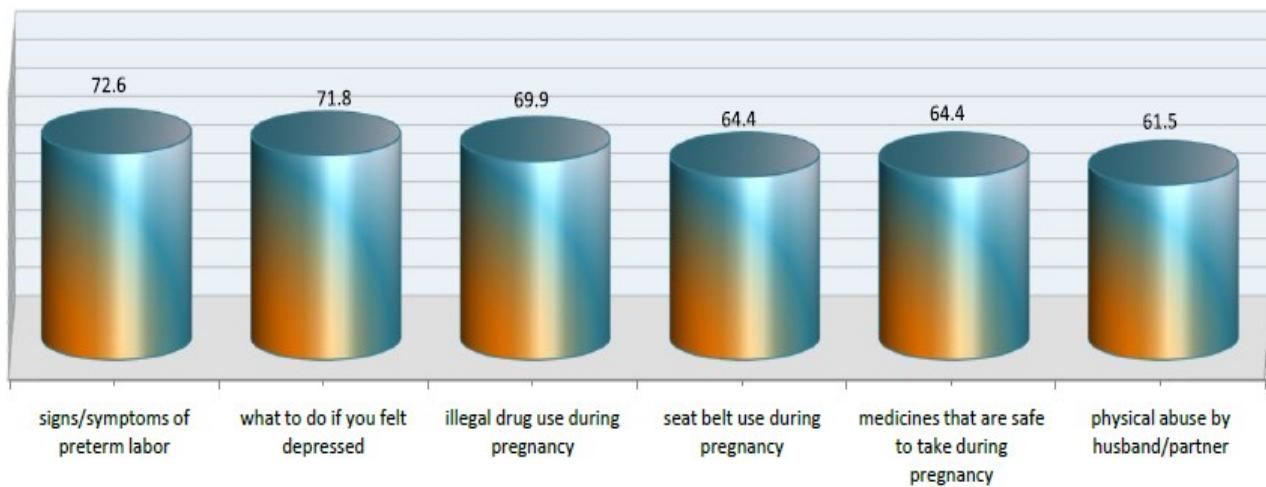
*(Response options were not mutually exclusive)*



**Percent of women who reported that a health care worker talked with them about...**

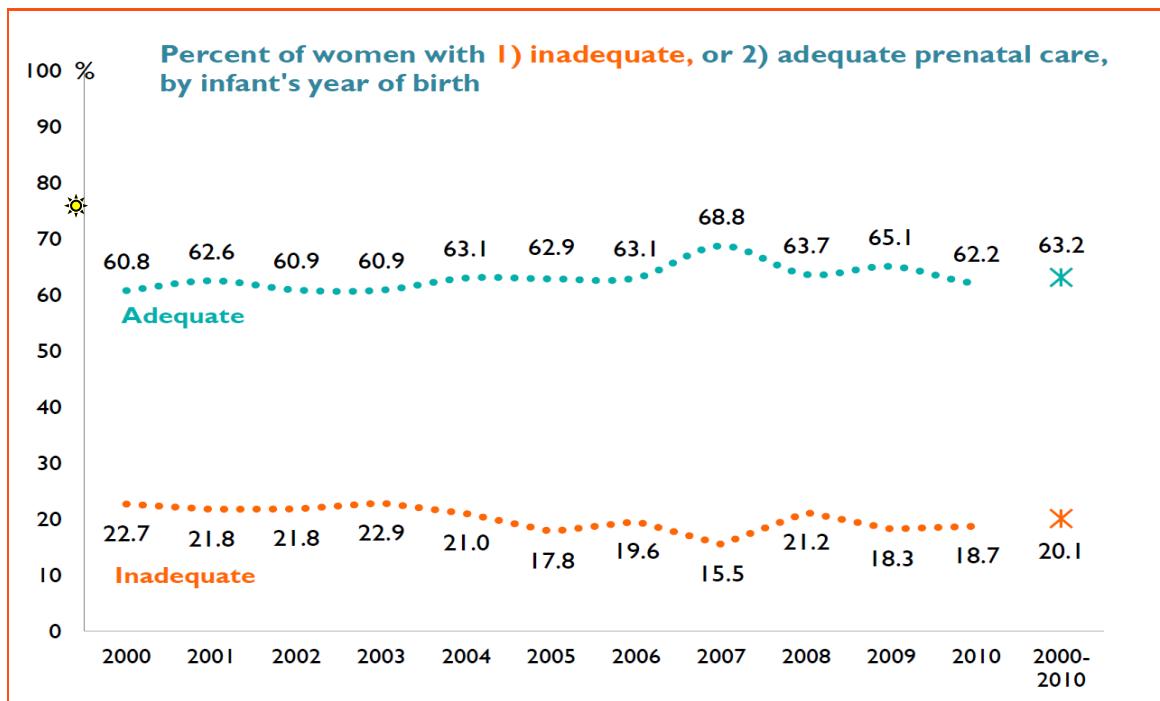
*(Response options were not mutually exclusive)*

**Continued**



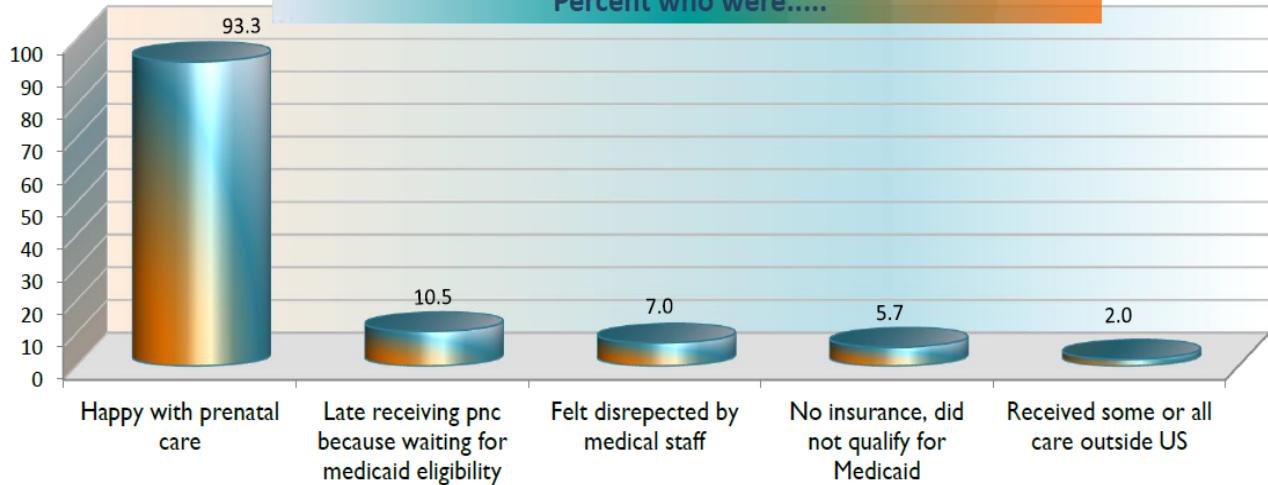
## Prenatal Care

- ◆ For the 2009-2010 birth years, 64% of NM women had an adequate level of prenatal care.
- ◆ Seventy-three percent of women with private insurance had adequate prenatal care compared to 62% of women with Medicaid 68% of those with no insurance.
- ◆ Only 60% of unmarried women had adequate prenatal care, and the lowest prevalence of adequate prenatal care (50%) was observed among Native American women.
- ◆ Thirty-two percent of Native American women had inadequate prenatal care. Over 20% of women with Medicaid had inadequate prenatal care, and almost 30% of mothers under the age of twenty had inadequate prenatal care.

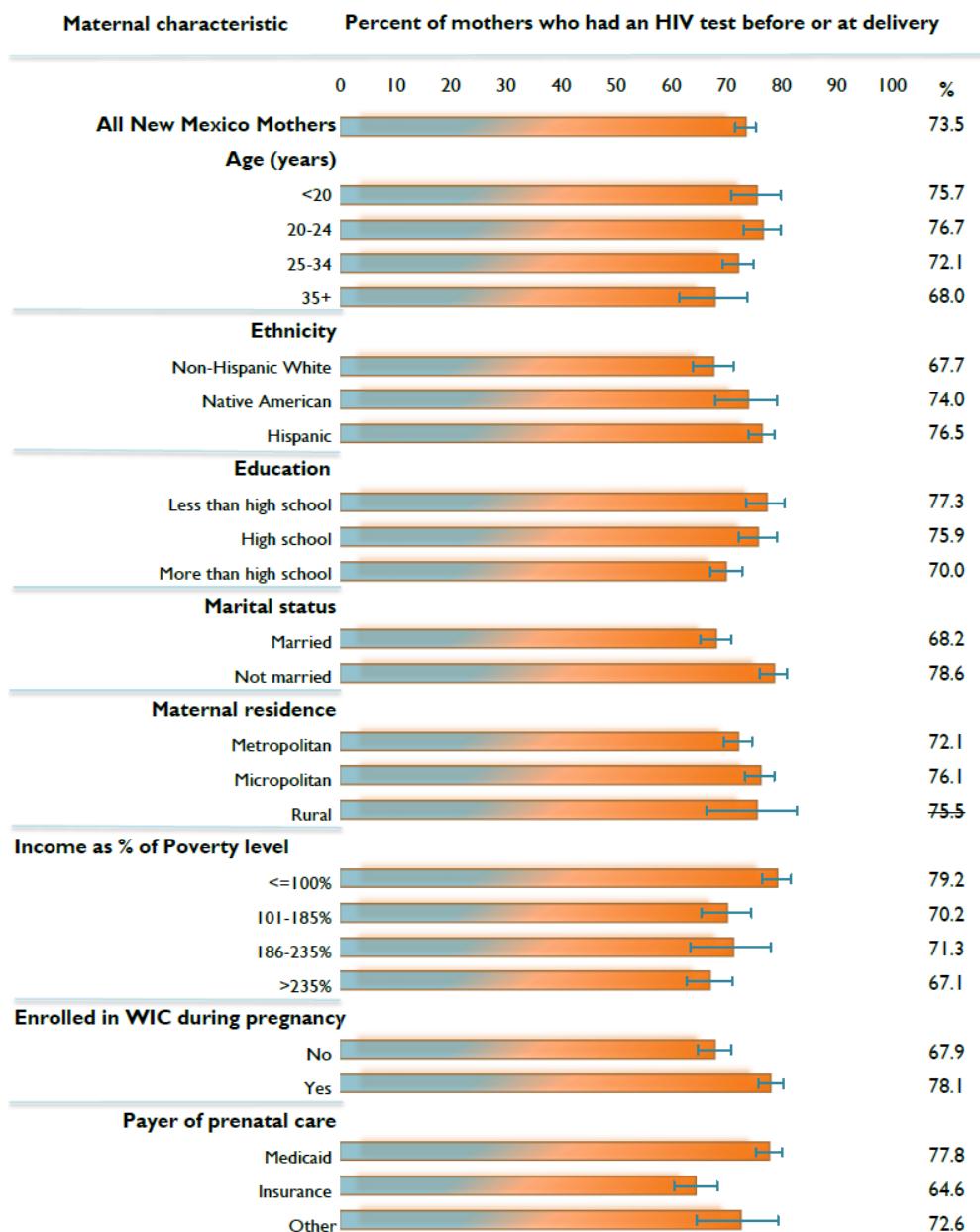


## Feelings & experiences with prenatal care

Maternal feelings about prenatal care for birth years 2009-2010  
Percent who were.....



## HIV testing birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## **HIV Test**

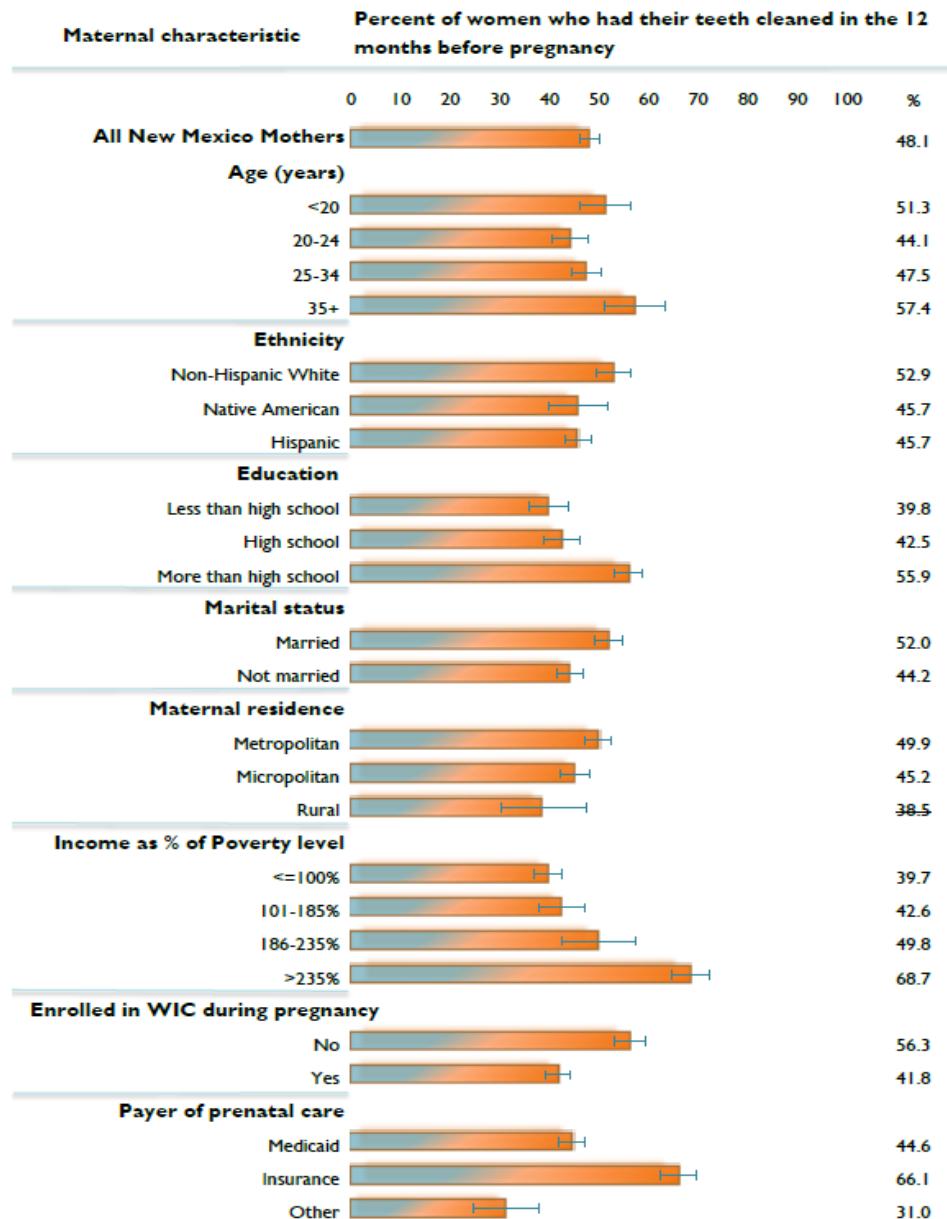
- ◆ Nearly three-quarters (74%) of NM women with live birth said they were tested for HIV during prenatal care or at delivery.
- ◆ Seventy-eight percent (78%) of women with Medicaid were tested versus 65% of women with private insurance.



# Oral Health

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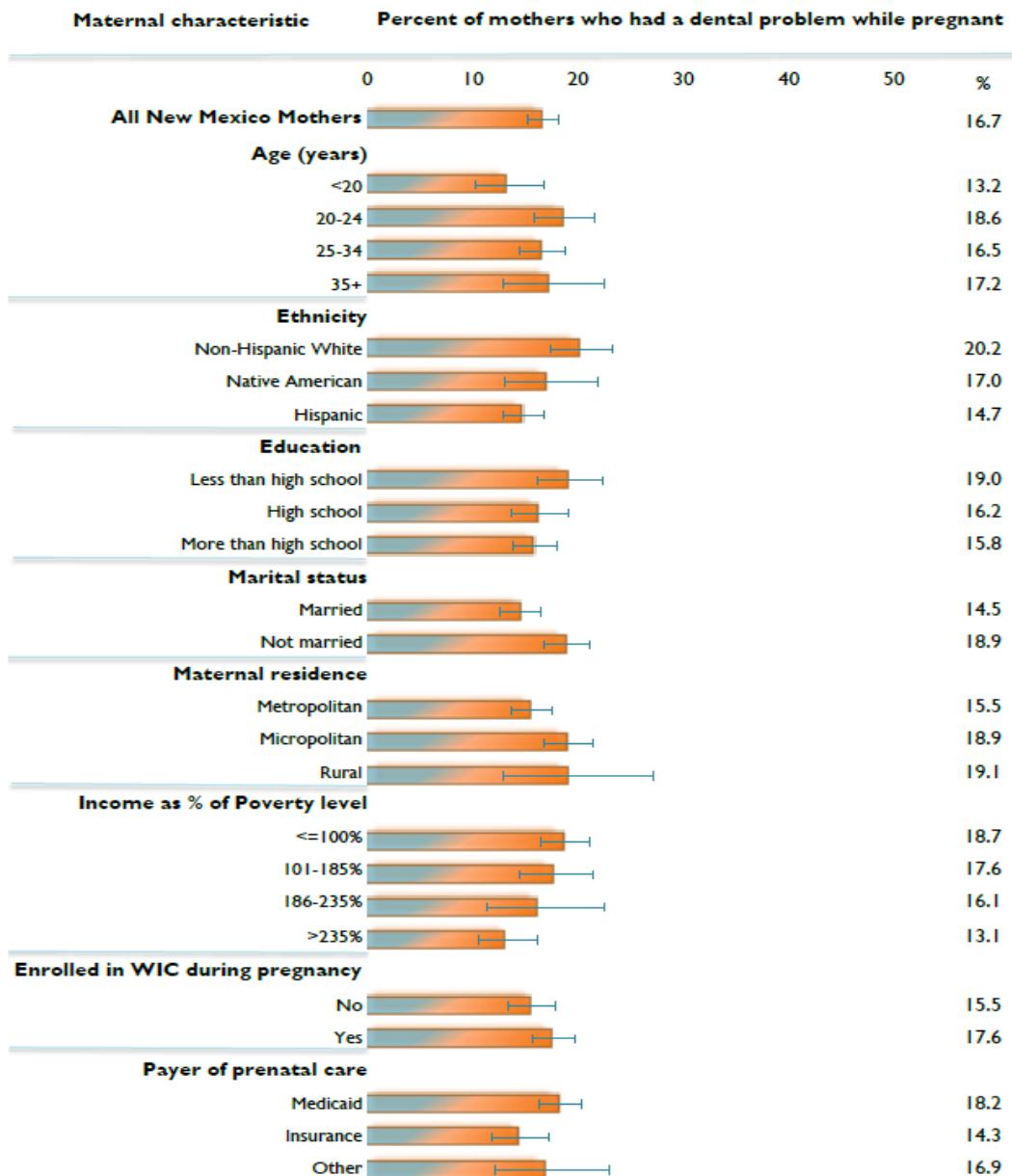
## Oral Health- preconception teeth cleaning birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

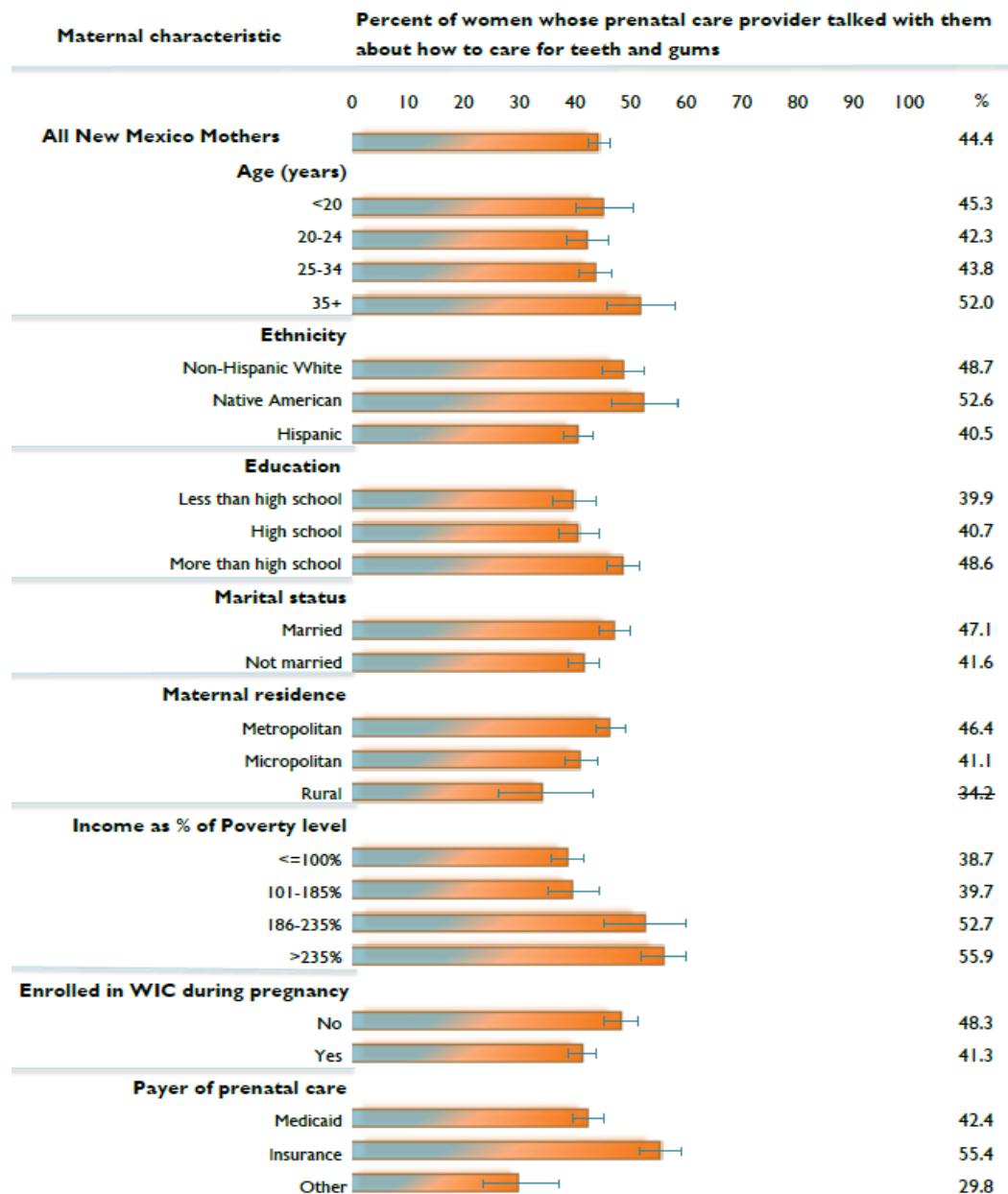
**Dental problem  
birth years 2009-2010**



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

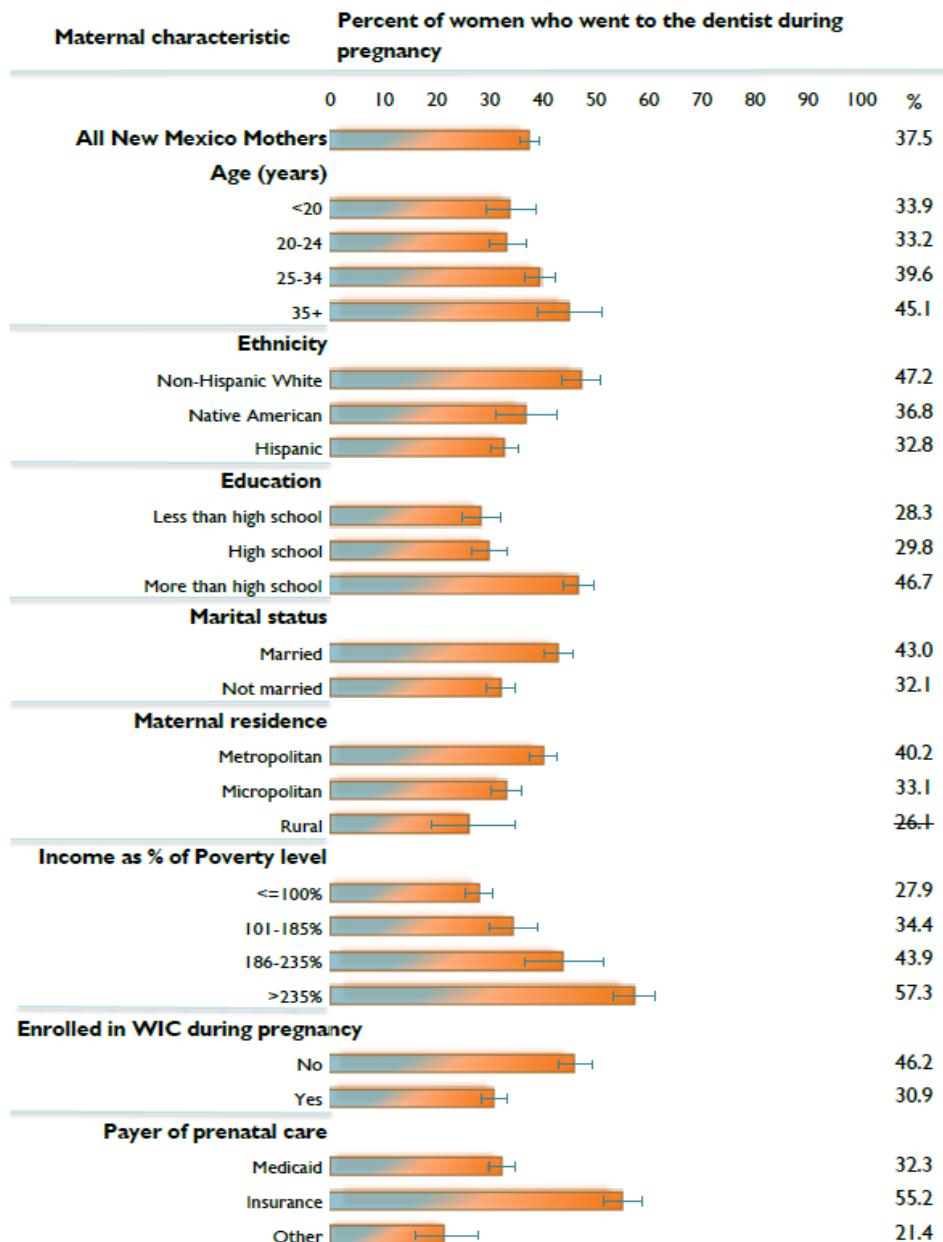
## Oral health -prenatal discussion birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

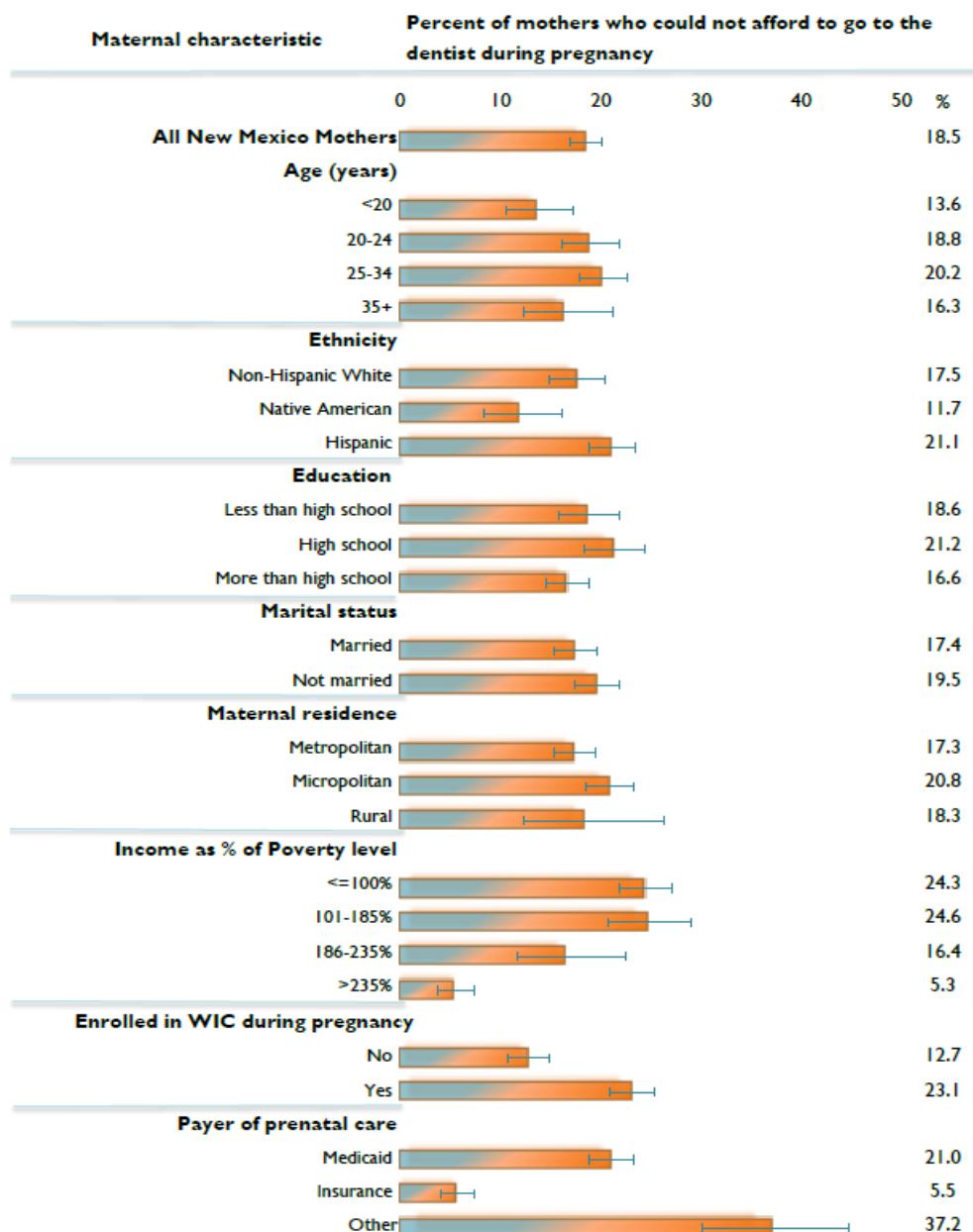
## Prenatal dental visit birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population = 53,358.

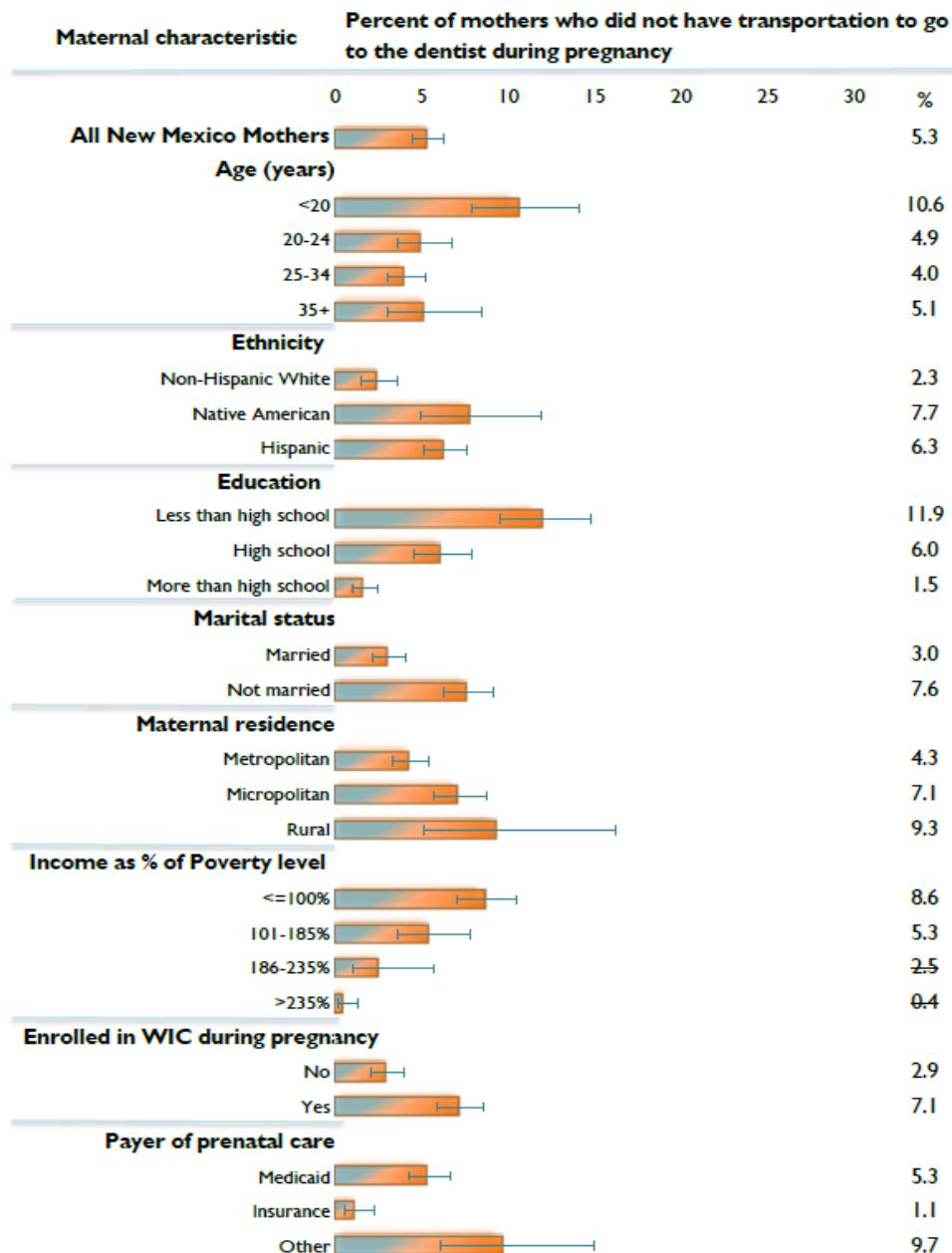
## Oral Health barriers- could not pay birth years 2009-2010



Number of respondents = 2,757, population= 53,358.

## Oral health barriers- no transportation birth years 2009-2010

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A strikethrough indicates a large margin of error and the need to use the data with caution.

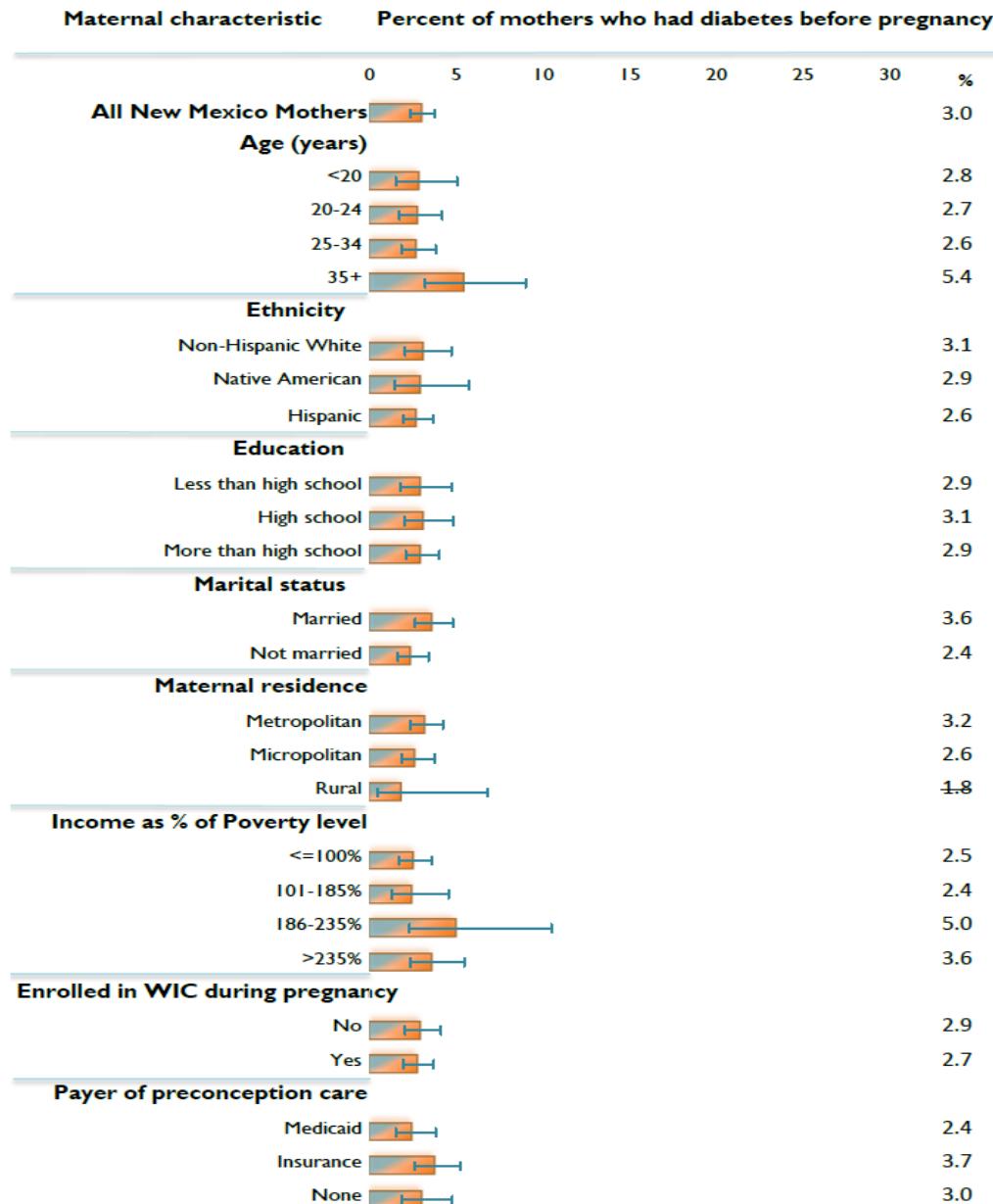
Number of respondents = 2,757, population= 53,358.

## Oral Health

- ◆ Almost half of NM women with a recent live birth in 2009-2010 had their teeth cleaned in the 12 months before pregnancy. Sixty-six percent of women with private insurance before pregnancy had their teeth cleaned, but only 31% of women without insurance had their teeth cleaned. Almost 70% of women with a household income level at or above 235% FPL had their teeth cleaned.
- ◆ Almost 40% (37.5%) of NM moms went to the dentist during pregnancy. Forty-seven percent of mothers with more than high-school education went to the dentist, but 28% of those with less than high school went. Income level had a positive relationship with dental visit prevalence.
- ◆ Fifteen percent of Hispanic mothers had a dental problem during pregnancy compared to 20% of non-Hispanic White women. Just 13% of mothers at 235% FPL had a dental problem versus 19% of women at 100% FPL.
- ◆ Nineteen percent (19%) of NM moms could not afford to go to the dentist, however just 6% of those with private health insurance during pregnancy said they could not afford dental visits compared to 37% of women without any prenatal insurance. Almost one-quarter of WIC recipients could not afford a prenatal dental visit compared to 12% of women without WIC.
- ◆ Only 5% of NM women with recent live birth said they had no way to get to the dentist, but among moms under 20 years of age, 11% had no way to get there. Five percent of moms said they could not find a provider who would take pregnant patients.



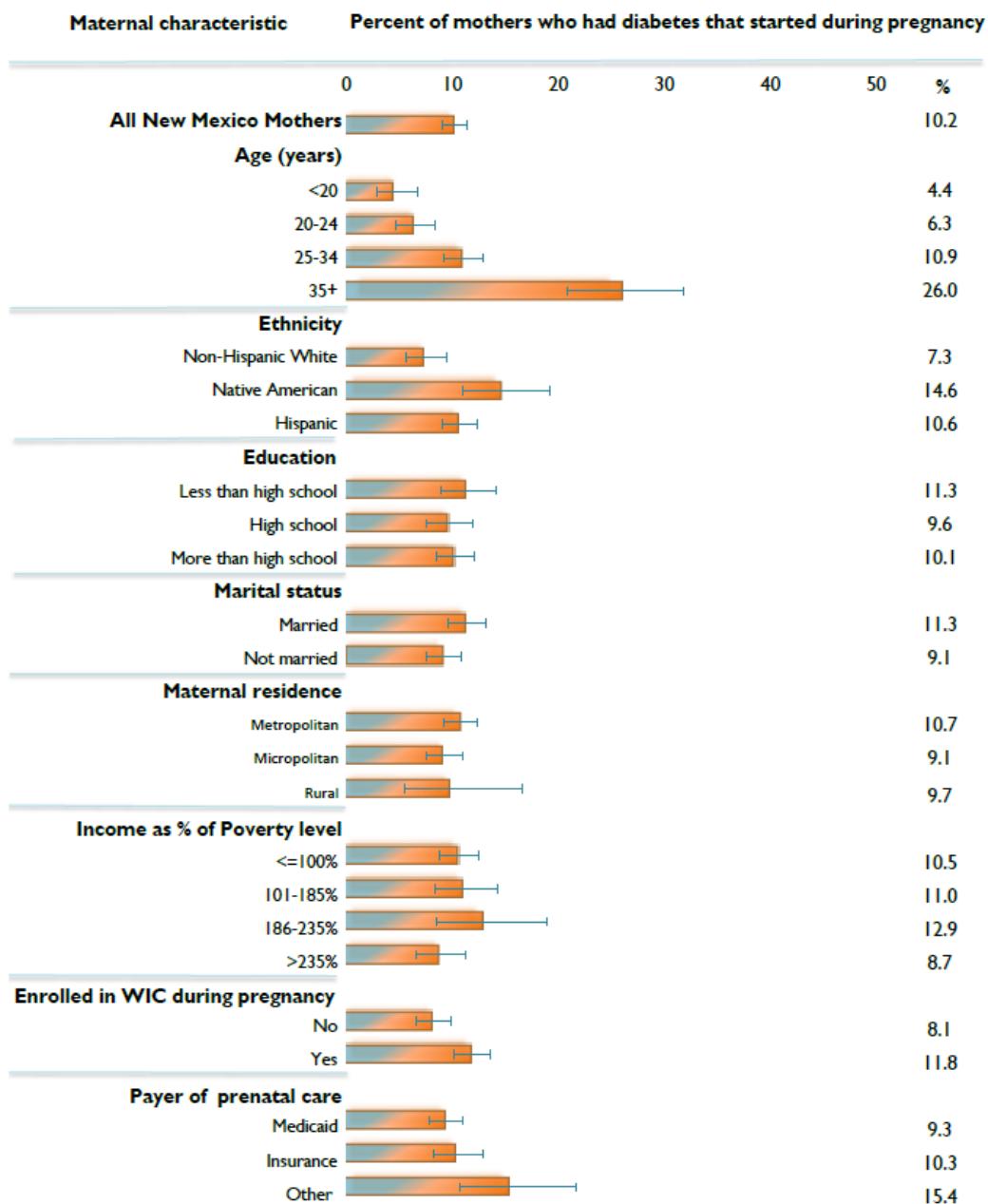
## Pre-existing Diabetes birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

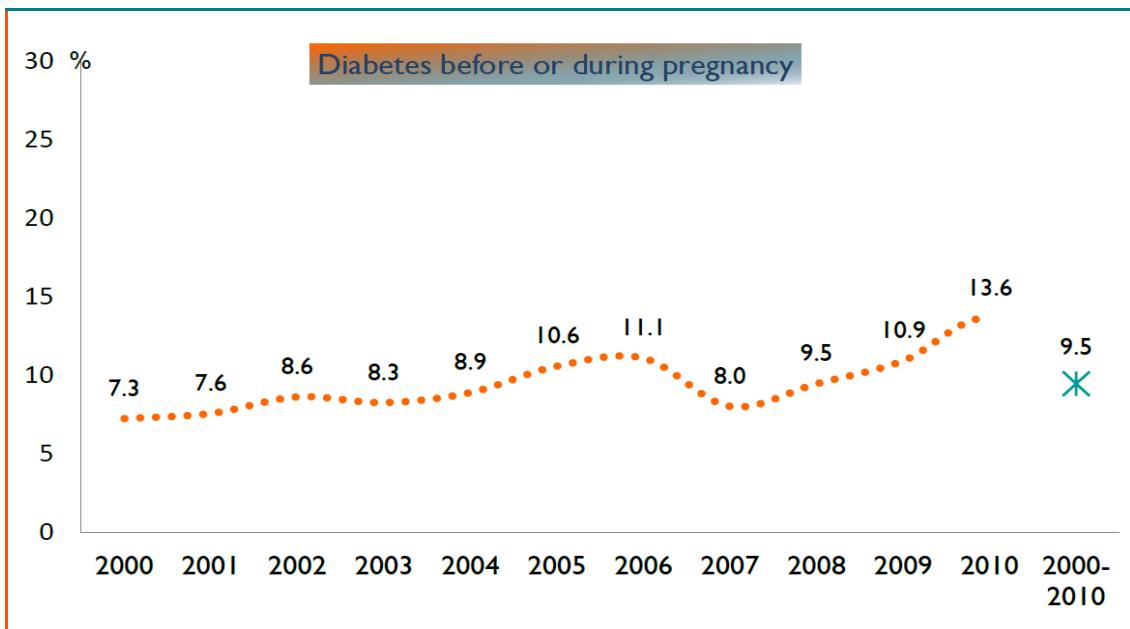
## Gestational Diabetes birth years 2009-2010



Number of respondents = 2,757, population= 53,358.

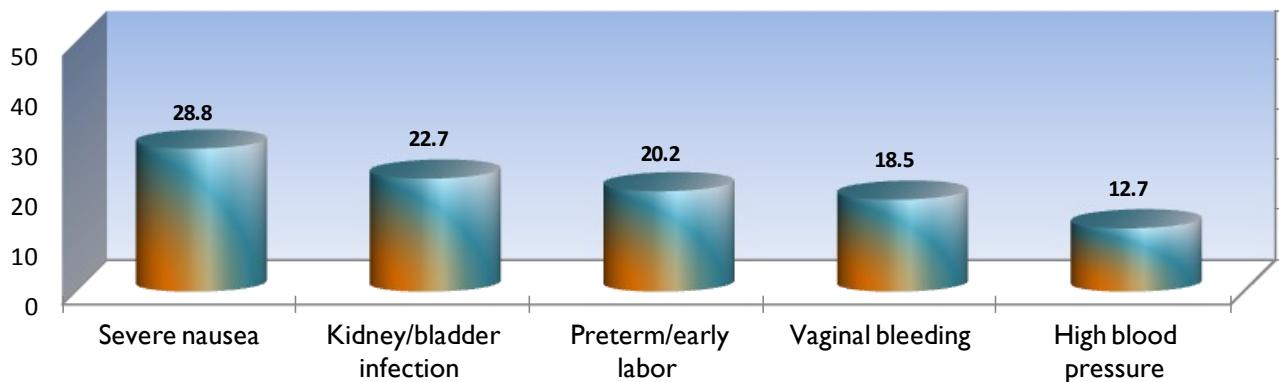
## Diabetes

- ◆ Three percent of women giving live birth had diabetes before their pregnancy, and 10% developed gestational diabetes in 2009-2010.
- ◆ Twenty-six percent of women 35 or older had gestational diabetes.
- ◆ Fifteen percent of women without health insurance had gestational diabetes compared to 9% of women with Medicaid. Fifteen percent of Native American women also had gestational diabetes.
- ◆ The prevalence of diabetes before or during pregnancy nearly doubled between the 2000 and 2010 birth periods (7% to 14%).
- ◆ Three percent of women giving live birth in 2009-2010 had diabetes before their pregnancy, and 10% developed gestational diabetes.



## Maternal morbidity

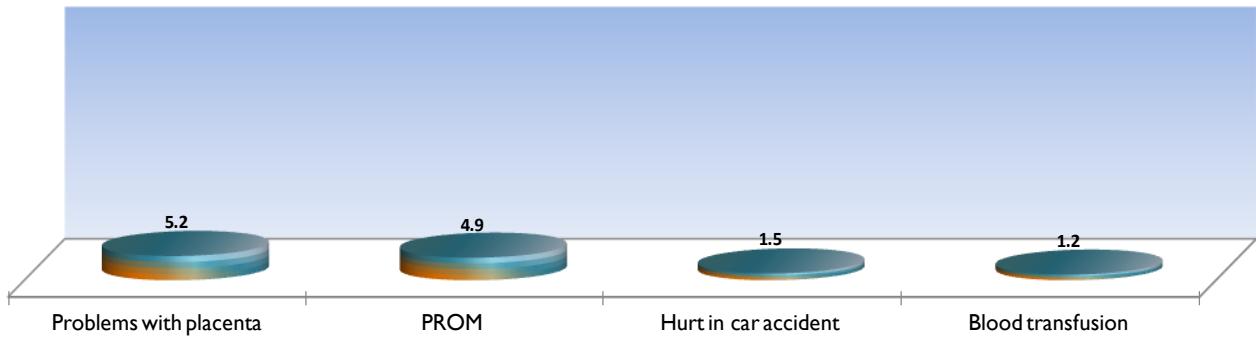
Percent of women who reported the following medical problem during pregnancy:



## Maternal morbidity, continued

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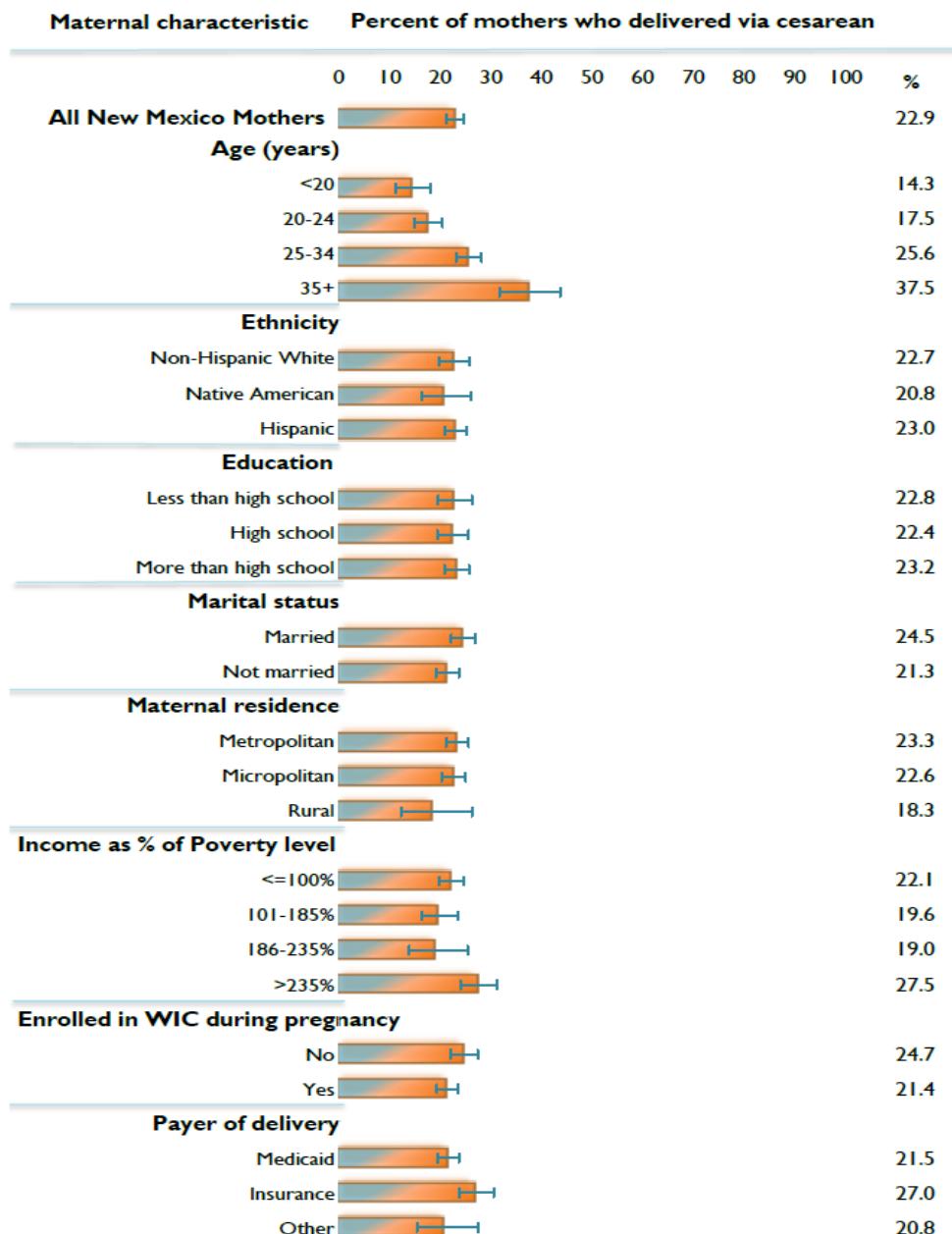
Percent of women who reported the following medical problem during pregnancy:



Problems with placenta included conditions such as Placenta Previa and Abruptio placenta.  
PROM= Premature Rupture of Membranes.

Medical conditions were self-reported and do not represent confirmed medical diagnoses.

## Cesarean delivery birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Cesarean Section

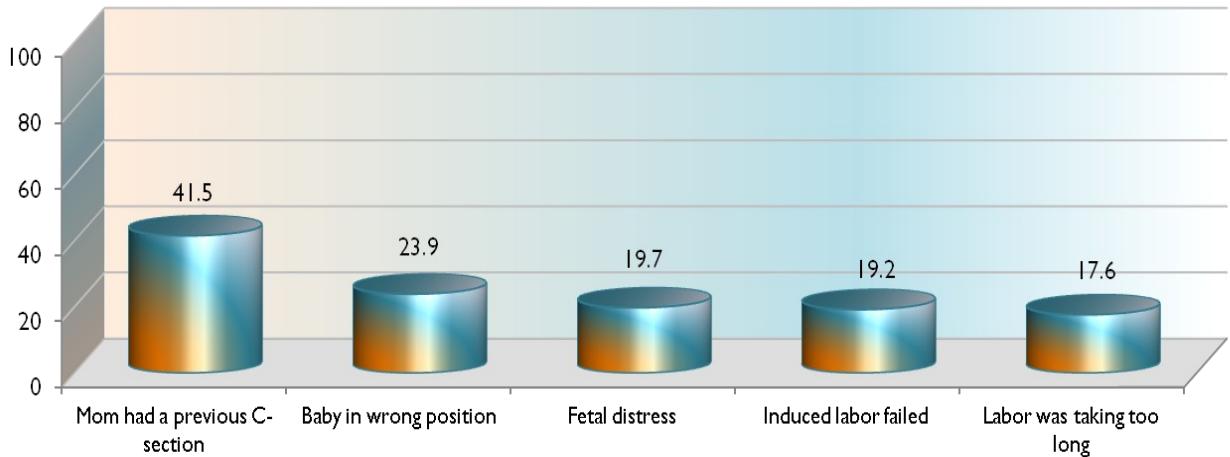
- ◆ C-section prevalence was highest among women 35 years and older (38%) and those with income levels over 235% of FPL (28%).
- ◆ Twenty-seven percent (27%) of women with private insurance had C-sections compared to 22% of those with Medicaid.
- ◆ Only 21% of Native American women reported a C-section compared to 23% of Hispanic or non-Hispanic White women.
- ◆ Among women with a delivery by C-section, 42% said it was because they had a previous Cesarean.
- ◆ Twenty-four percent (24%) their baby was in the wrong position.
  - ◆ Twenty percent of women with a C-section said it was because the fetal monitor indicated problems or distress for the baby.



*Response options were not mutually exclusive*

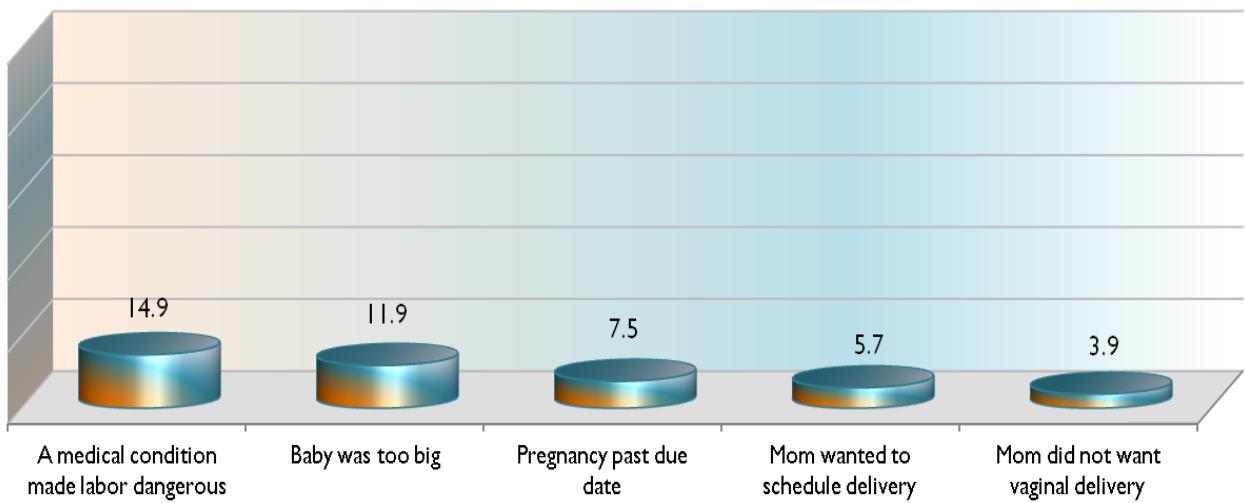
## Reasons for C-section

Among women with a c-section delivery, percent who gave the following reasons...



## Reasons for C-section continued

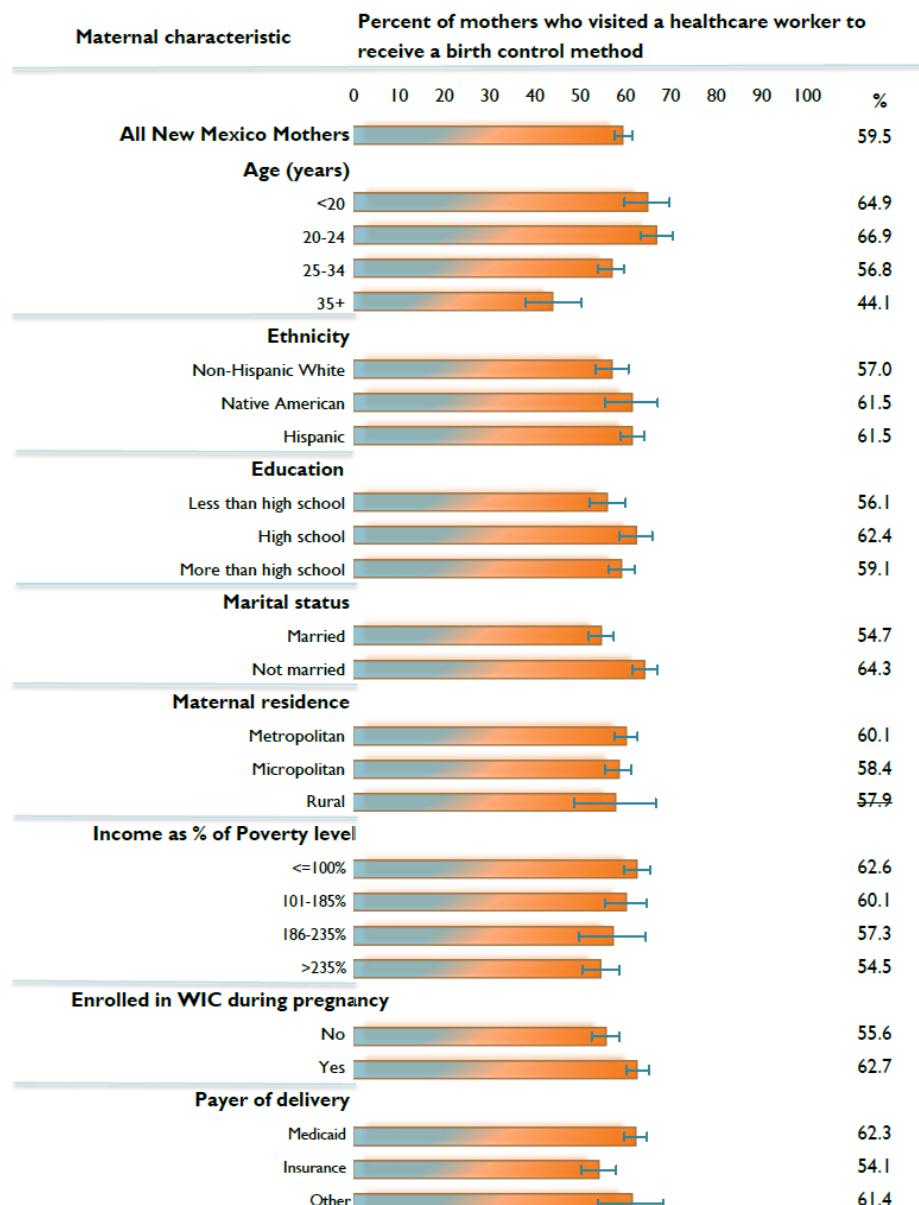
(responses are not mutually exclusive)



# Postpartum Care

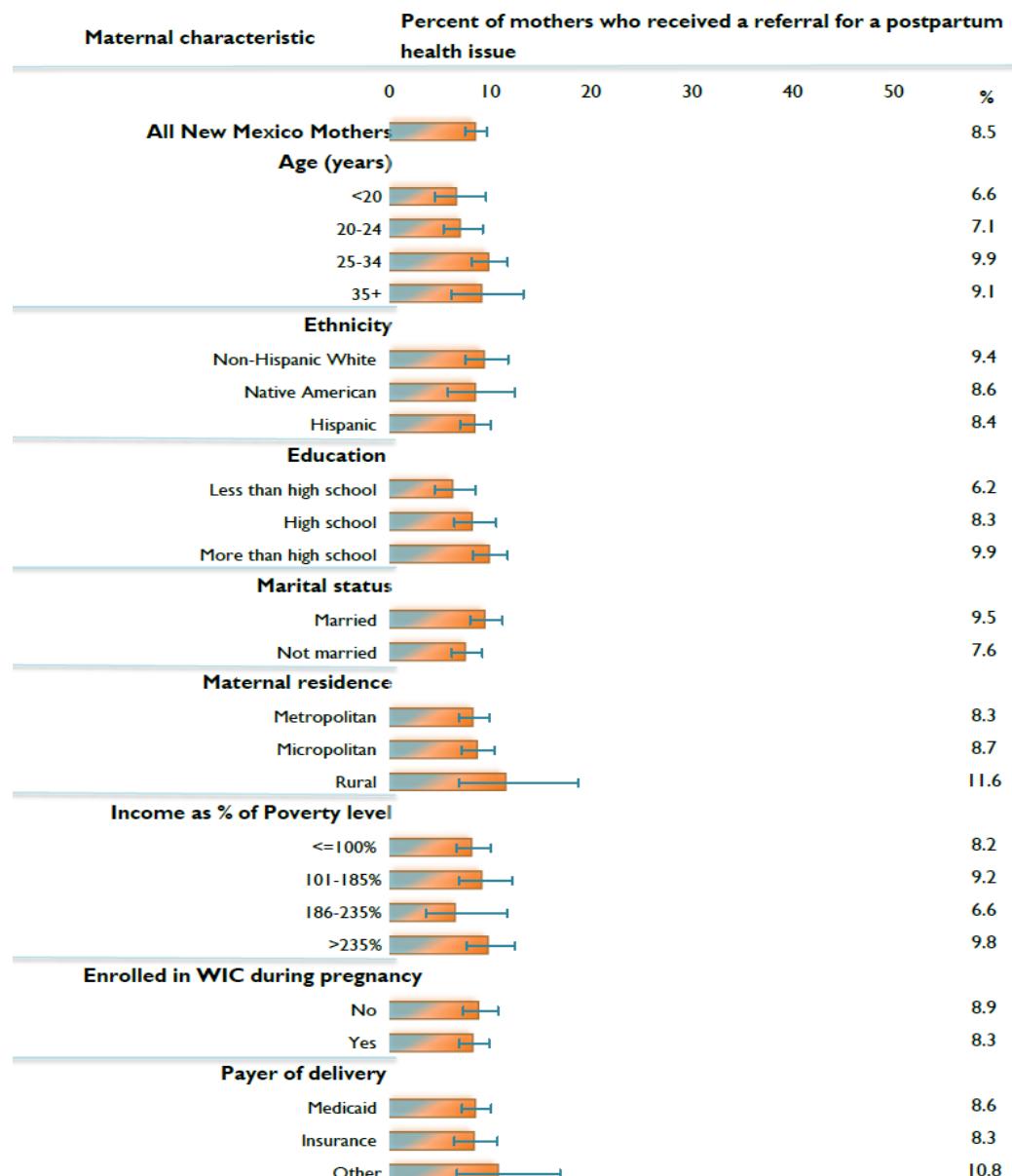
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## Postpartum healthcare visit-birth control birth years 2009-2010



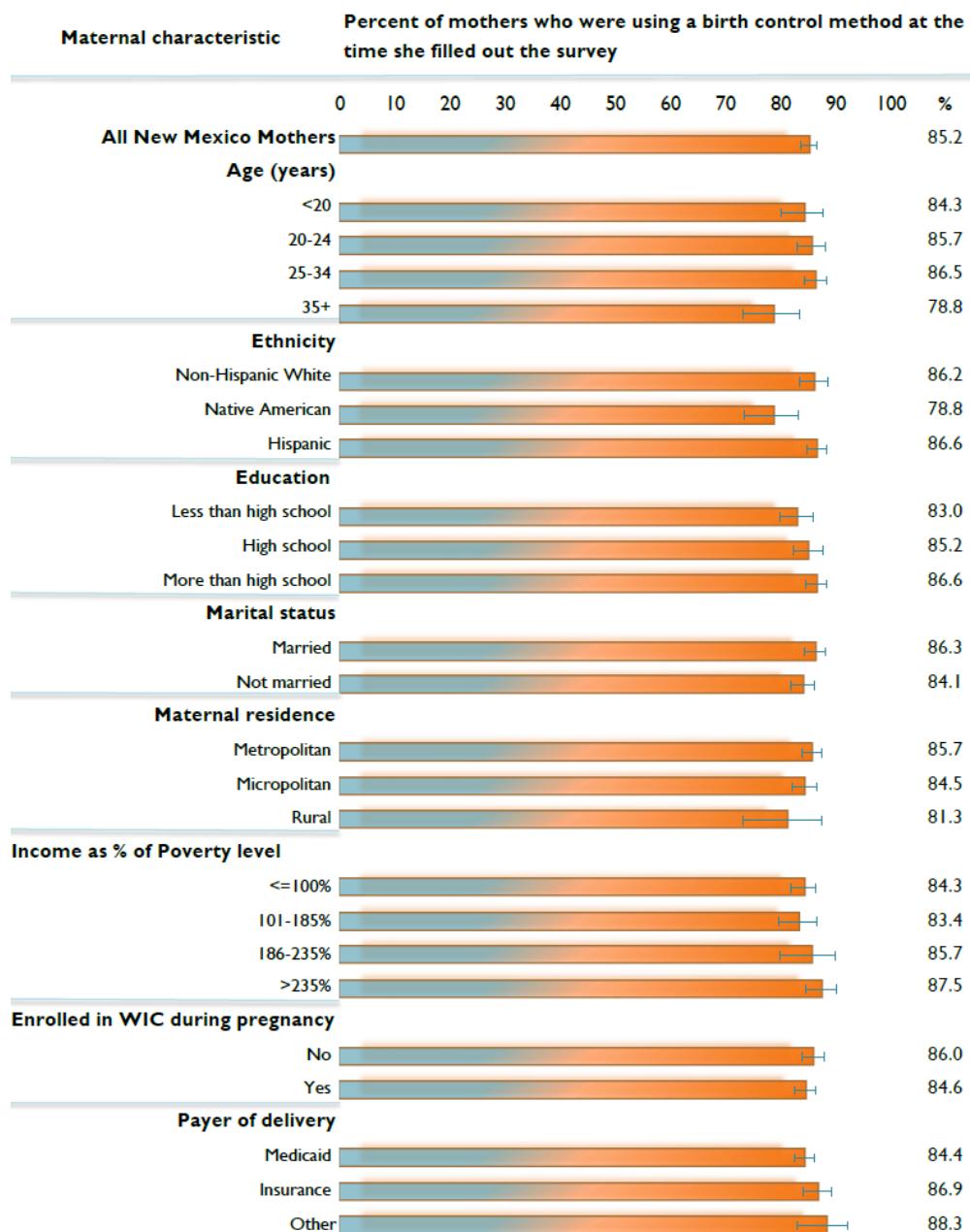
A strikethrough indicates a large margin of error and the need to use the data with caution.

**Postpartum healthcare referral  
birth years 2009-2010**



A strikethrough indicates a large margin of error and the need to use the data with caution.

## Postpartum contraception birth years 2009-2010

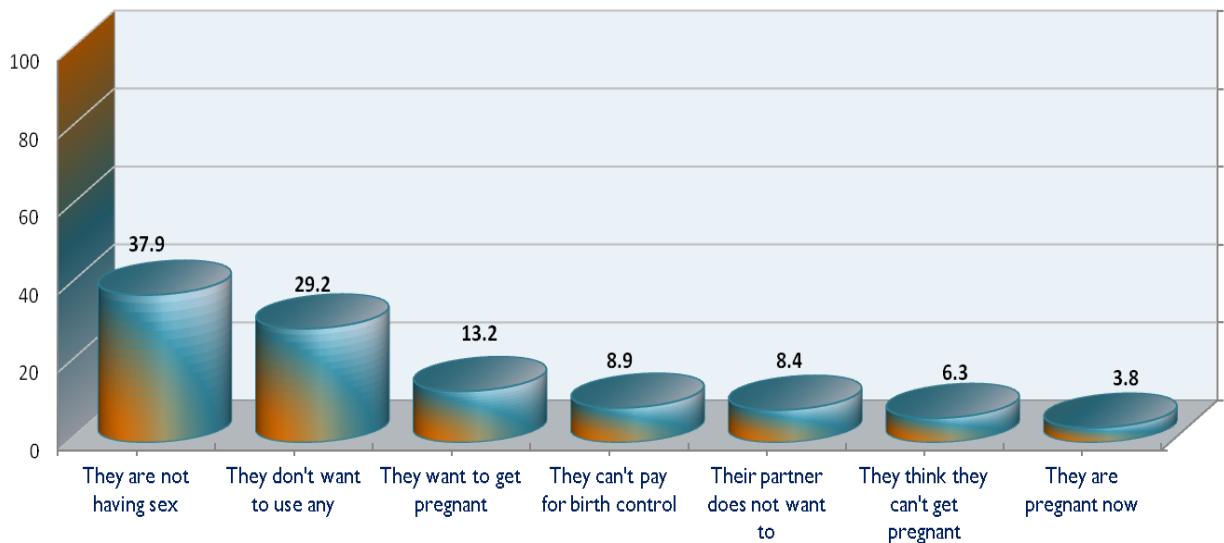


A strikethrough indicates a large margin of error and the need to use the data with caution.

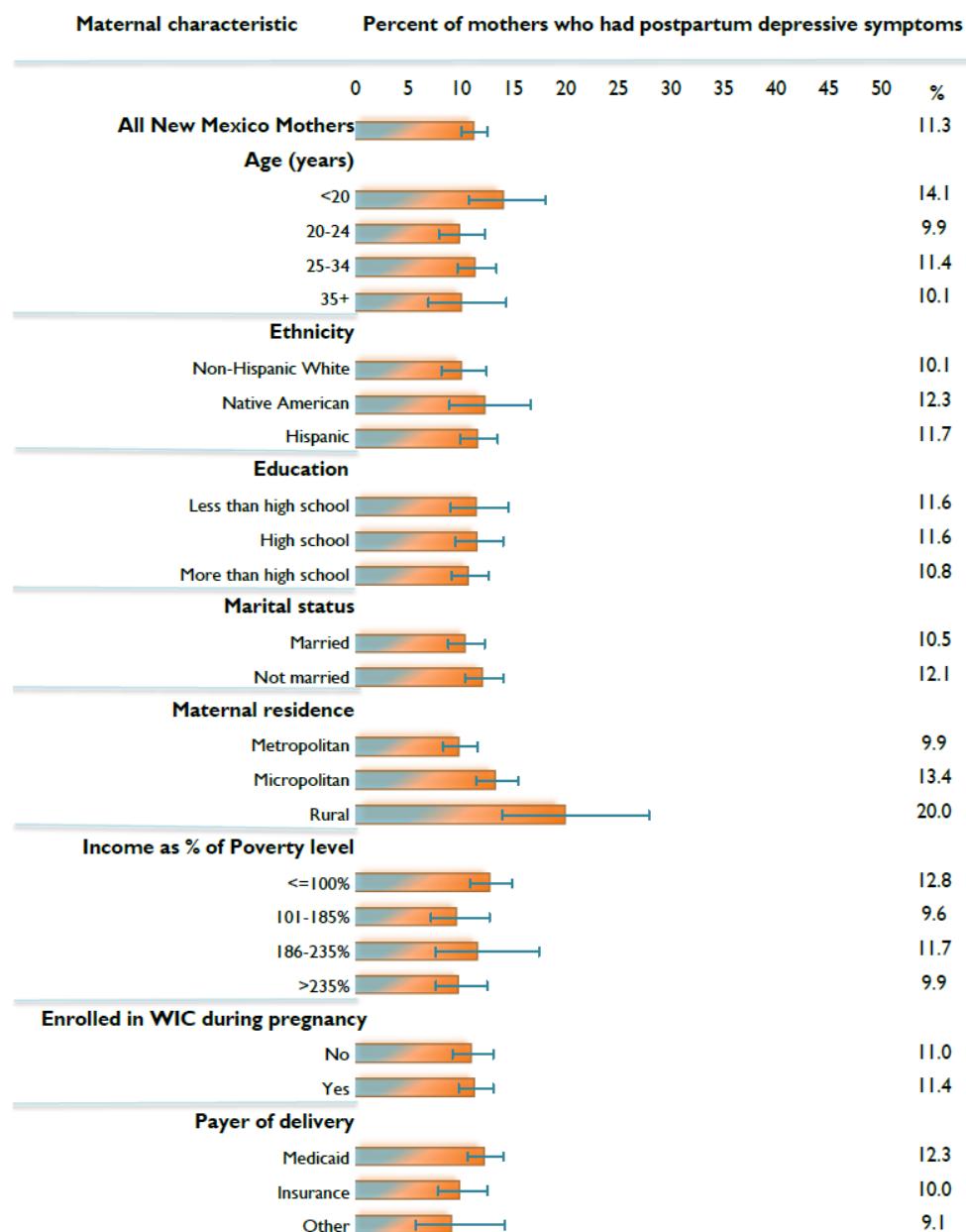
Number of respondents = 2,757, population= 53,358.

## **Reasons for not using birth control, postpartum**

Among women who were not using contraception, percent who said



## Postpartum Depression birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Help for postpartum depression/baby blues birth years 2009-2010

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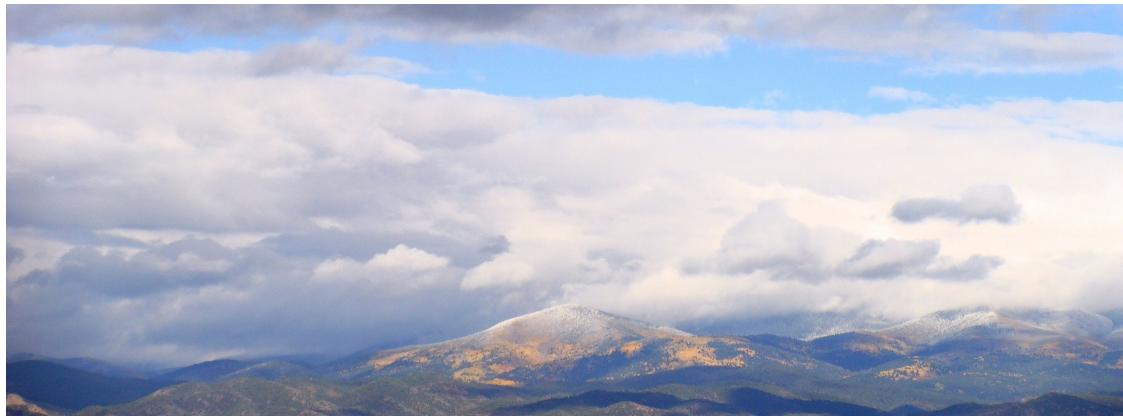


A strikethrough indicates a large margin of error and the need to use the data with caution.

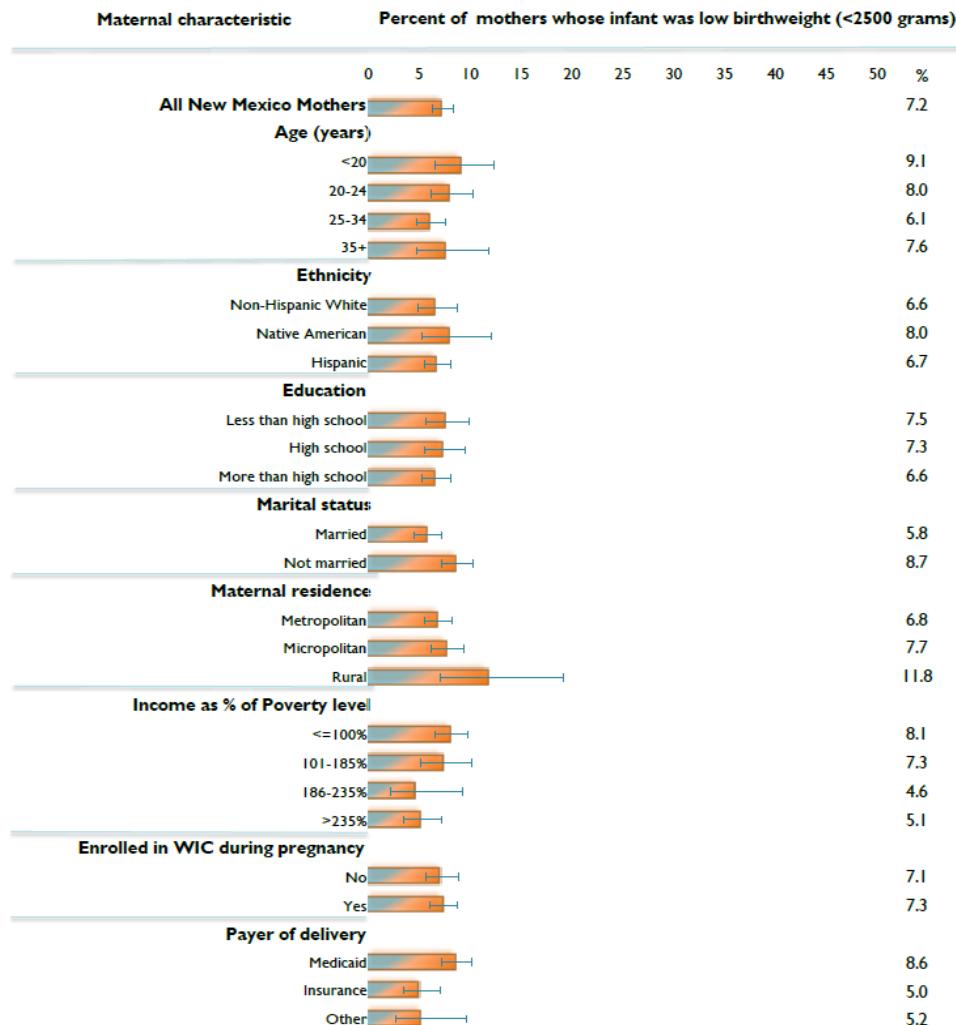
Number of respondents = 2,757, population= 53,358.

## Postpartum health

- ◆ Eleven percent (11%) of NM women reported depressive symptoms at the time of survey (2-6 months, postpartum). Prevalence was highest among young women and those living in rural areas (20% v. 13% in micropolitan, and 10% in metropolitan areas). Among women with postpartum depressive symptoms, 29% received help from a healthcare provider.
- ◆ Eighty-five percent of newly-delivered women were using contraception at survey. Among those not using contraception 38% were not having sex, 29% said they did not want to use birth control, and 13% said they wanted to get pregnant again.
- ◆ Sixty percent (60%) of women said they had visited a healthcare provider to get a birth control method after delivery.
- ◆ Nine percent (9%) of delivering women said they received a referral for a health problem, postpartum.



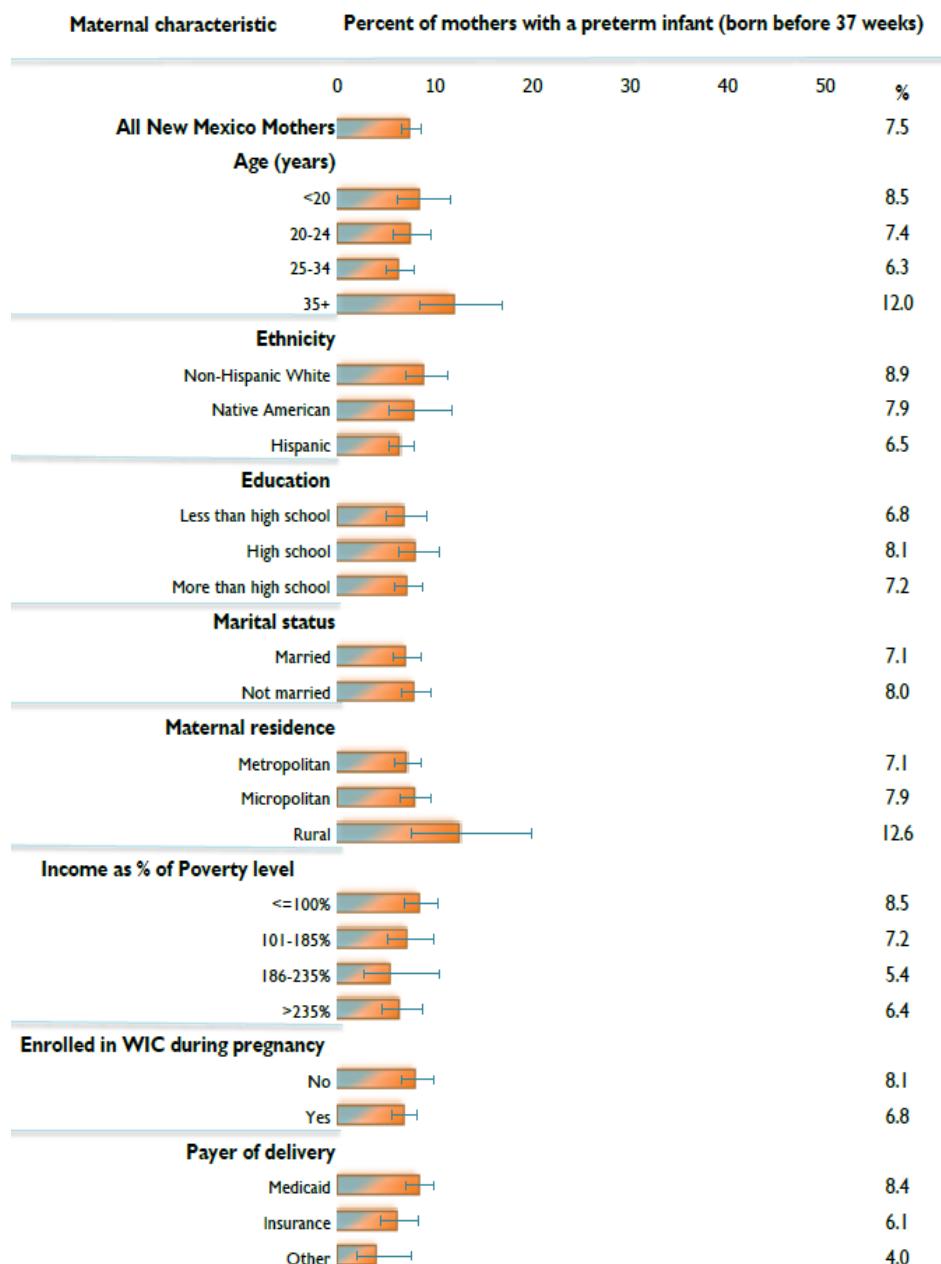
### Low Birth Weight birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

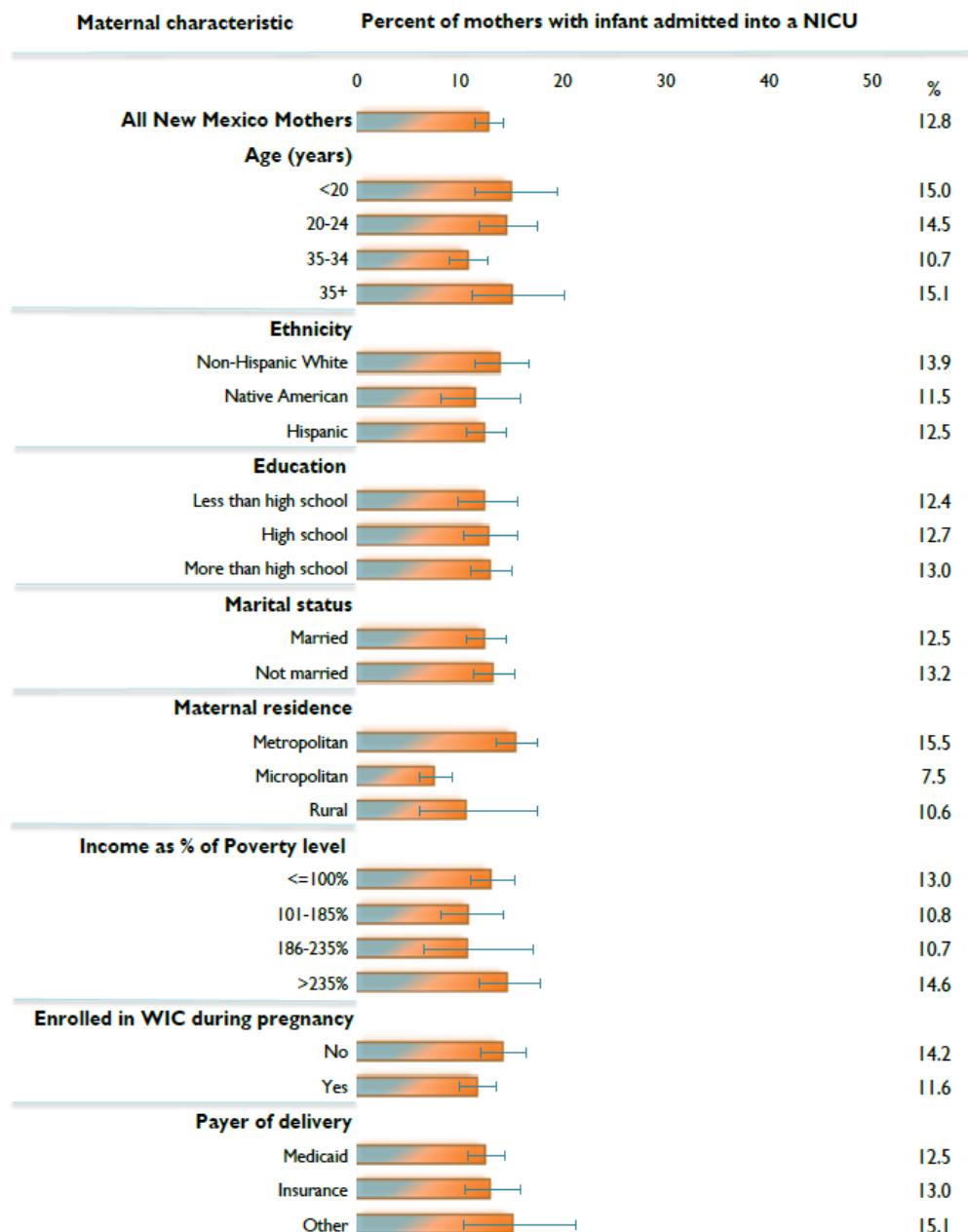
## Preterm delivery birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Neonatal Intensive Care Unit



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

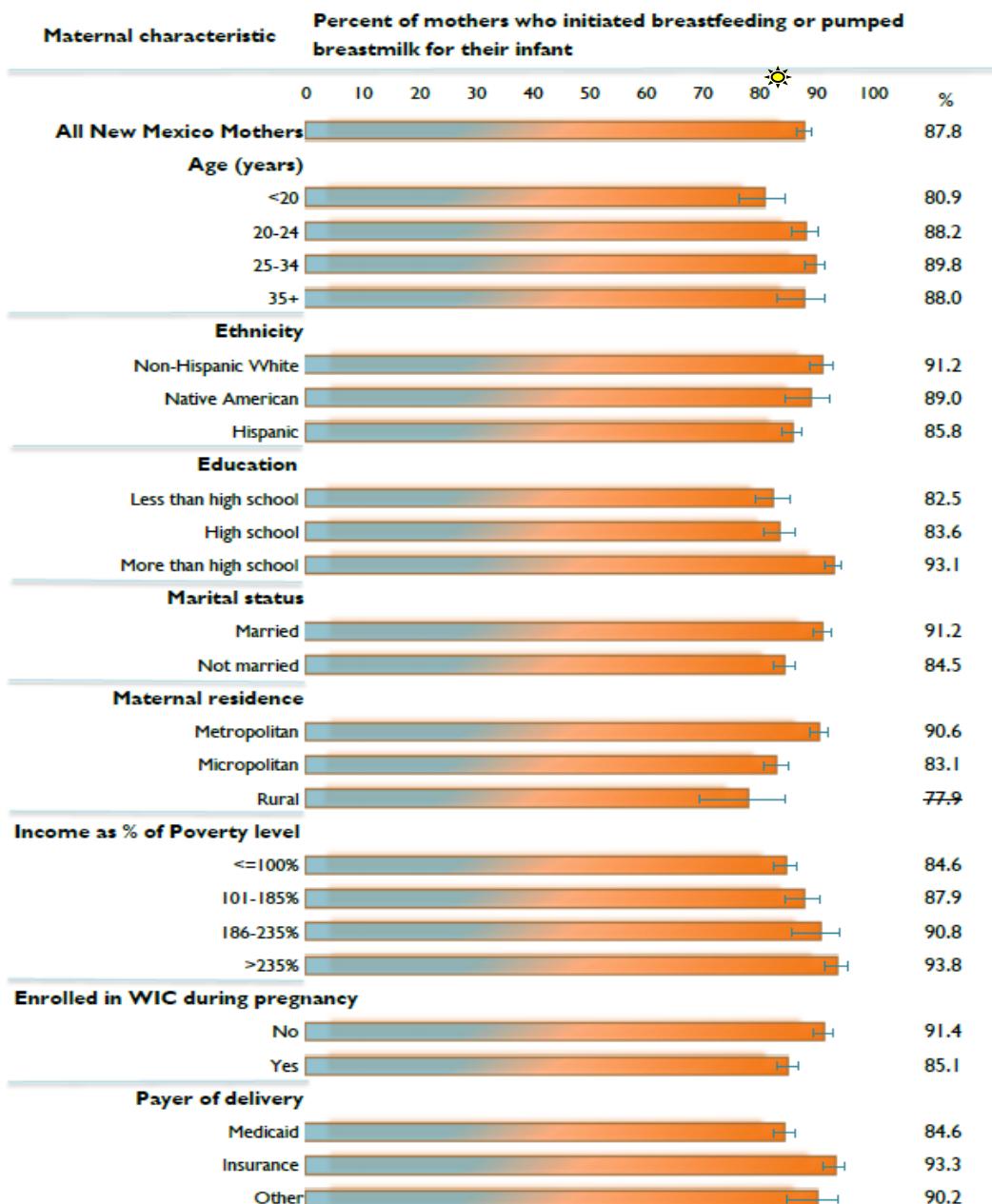
## Neonatal health outcomes

- ◆ LBW- Seven percent of NM women giving live birth had an infant weighing less than 2500 grams\*. Women with Medicaid were more likely to have a LBW infant compared to those with private insurance (8.6% v. 5.0%).
- ◆ Unmarried women (8.7%) also had a higher proportion of LBW infants compared to married women (5.8%).
- ◆ Almost eight percent of new NM moms had a preterm delivery\*; 12% of women 35 years and older had a preterm infant, and 8% of unmarried women had a preterm delivery compared to 7% of married women.
- ◆ NICU- Thirteen percent (13%) of NM mothers had an infant that was in an intensive care unit after they were born.
- ◆ Sixteen percent (16%) of women residing in a metropolitan area had an infant admitted to the NICU compared to 8% of those in micropolitan areas.



\*Low birth weight and preterm birth statistics from the PRAMS survey differ from those reported by the NM DOH Bureau of Vital Records and Health Statistics for the state birth population due to sampling error and non-response bias.

### Breastfeeding initiation birth years 2009-2010

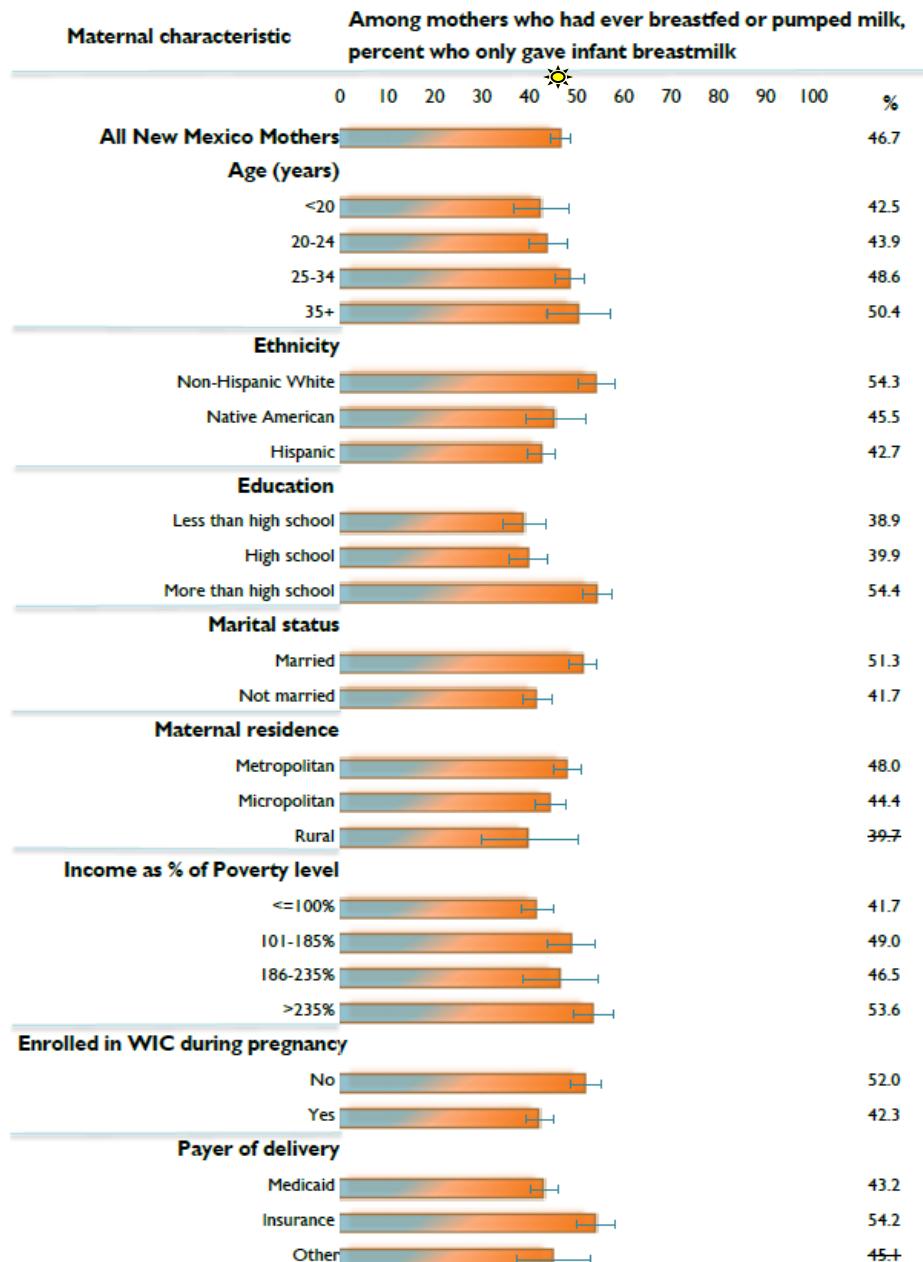


A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

**Breastfeeding exclusively**

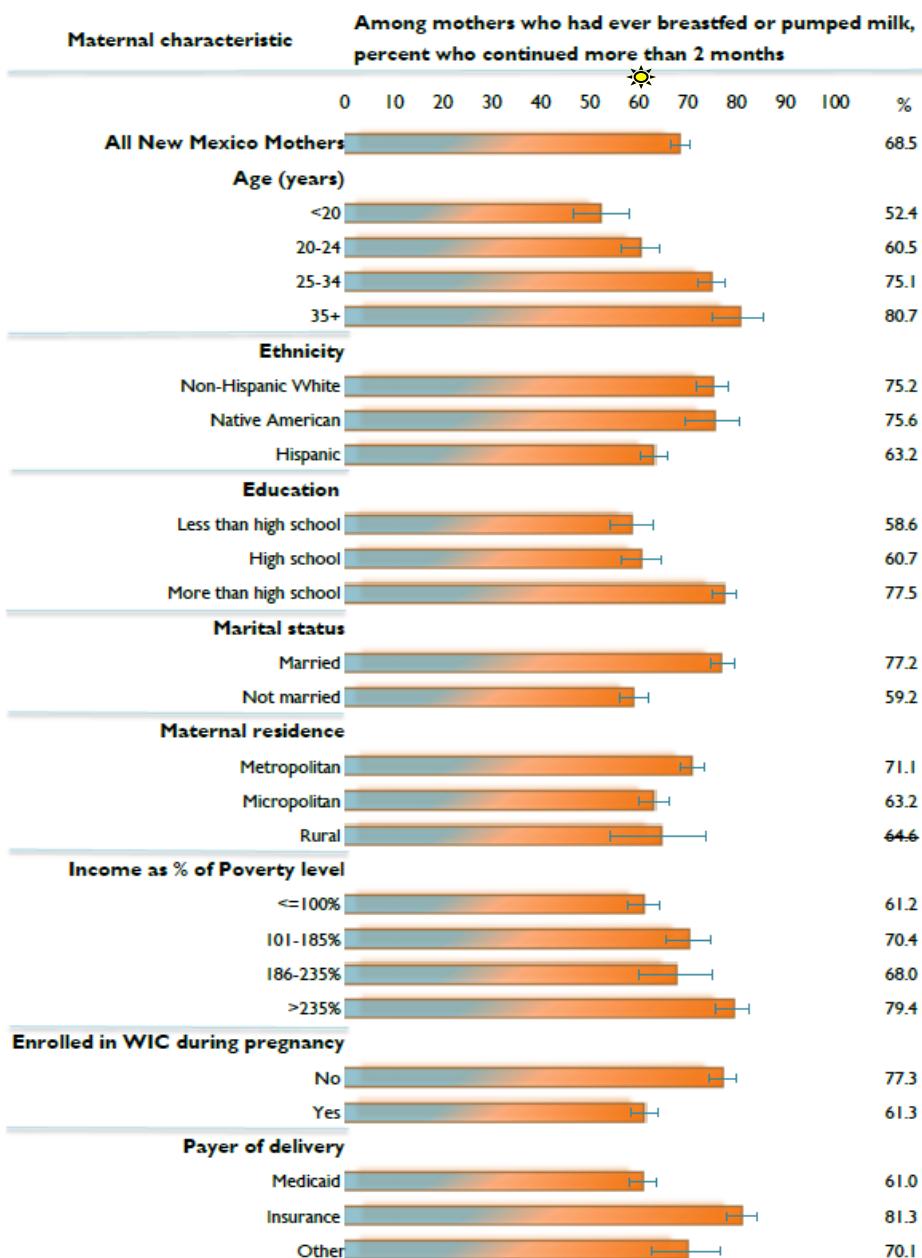
birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

### Breastfeeding continuation birth years 2009-2010

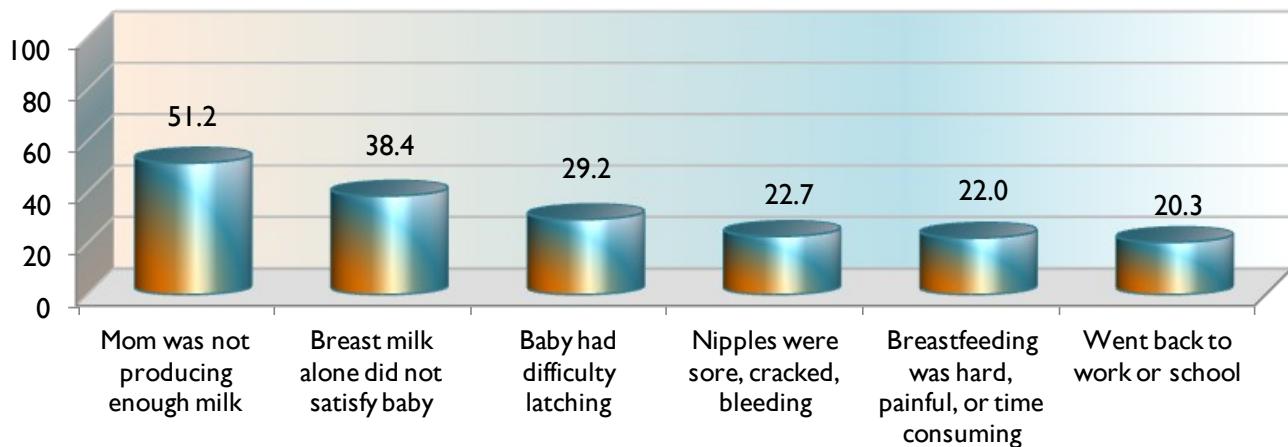


A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Breastfeeding Barriers

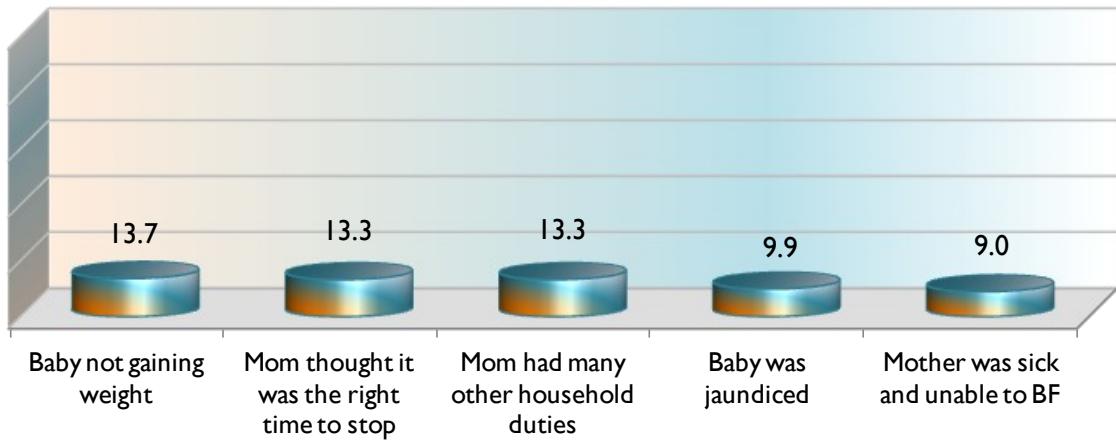
Among women who were not breastfeeding at the time of survey, percent who



## Breastfeeding Barriers

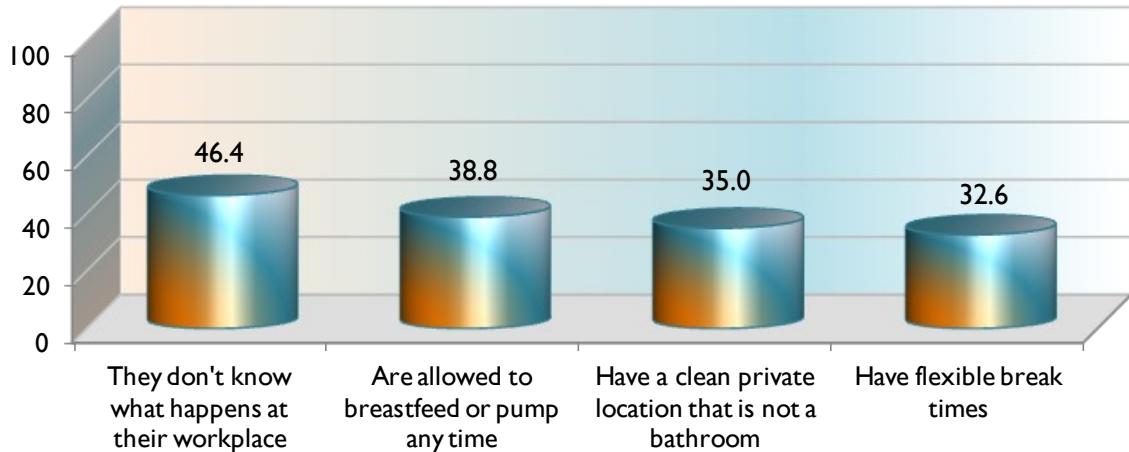
Page 85

Continued



## Breastfeeding and pumping- workplace policies

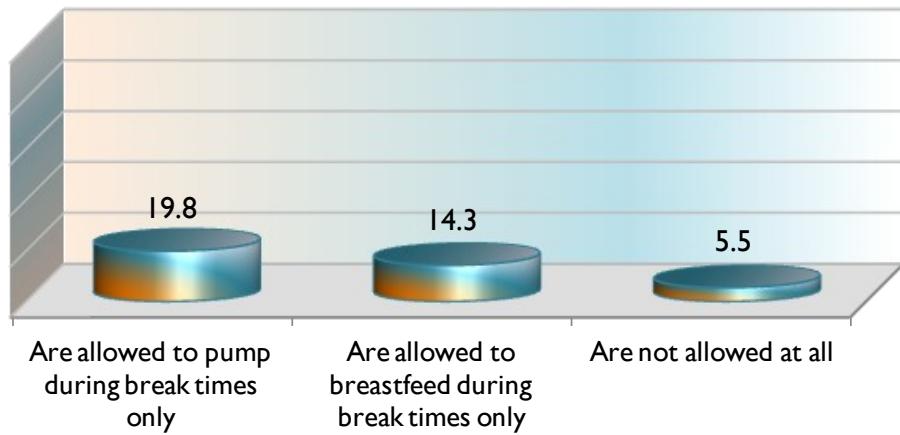
Among women who worked in the past 2 years, percent who said the following about breastfeeding or pumping at their workplace:



## Breastfeeding and pumping - workplace policies

Page 87

Continued



## Breastfeeding

- ◆ Eighty-eight percent (88%) of recently-delivered NM moms reported breastfeeding initiation, and 47% of all moms said they had not given their infant any other liquid or food at the time of survey.

- ◆ Breastfeeding initiation was most prevalent among women with private insurance (93%), and women with the highest income level relative to FPL (94%). Married women and women with higher education levels were more likely to breastfeed compared to their counterparts.

Among women who started breastfeeding, 69% breastfed for over two months. Only 63% of Hispanic mothers breastfed over two months compared to 75% of White or Native American women.



- ◆ Just 56% of unmarried women kept breastfeeding compared to 77% of married women.
- ◆ Breastfeeding continuation was positively associated with federal poverty levels and education level. Maternal age was also strongly associated with longer breastfeeding; only 52% of women age 20 or younger were still breastfeeding after two months, but this proportion increased with each age group with 81% of women 35 years and older still breastfeeding.

## Breastfeeding

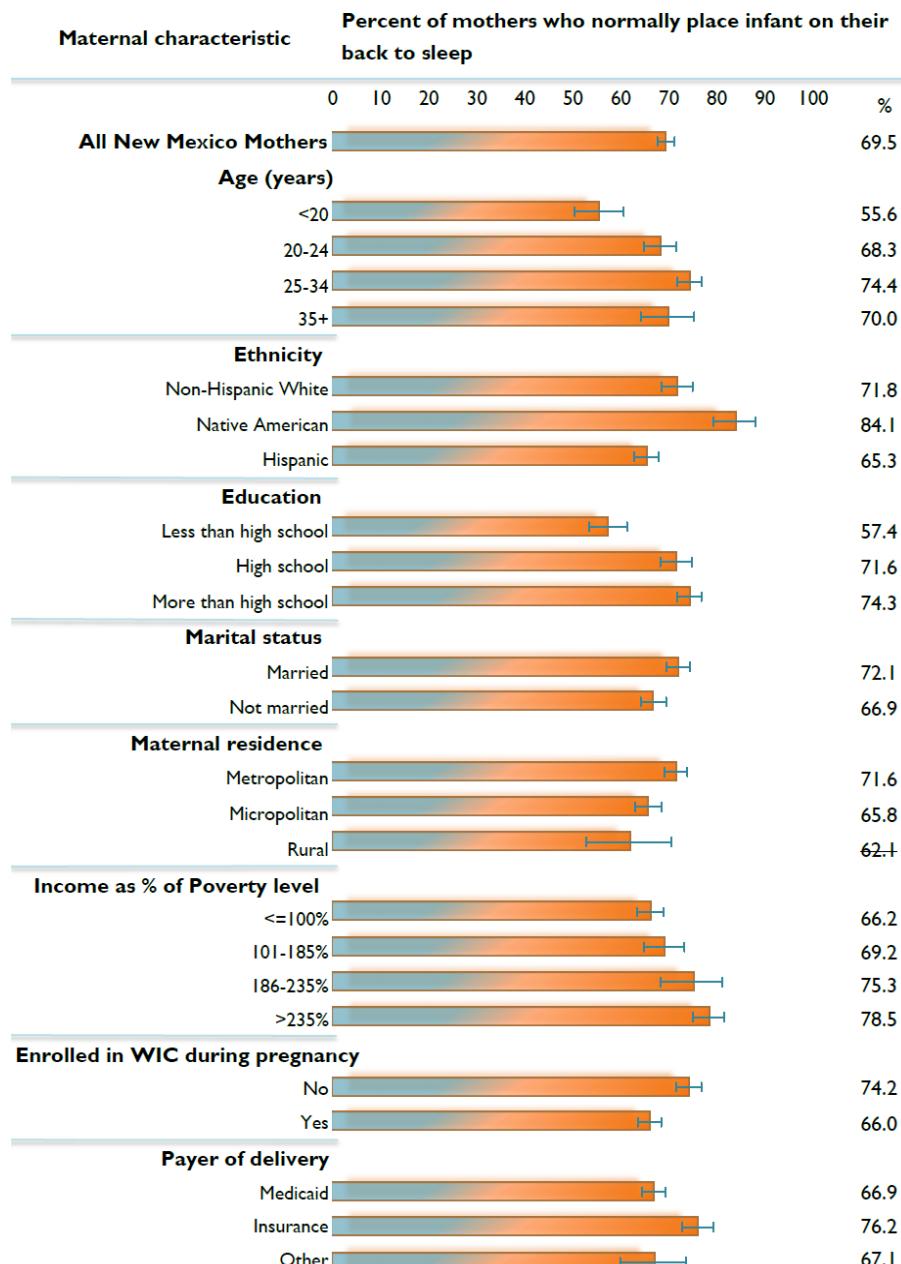
- ◆ Among women who were no longer breastfeeding after two months, the following reasons were given: 51% were not producing enough milk, 39% said breast milk alone did not satisfy their baby, and 29% said their baby had difficulty latching on.
- ◆ Twenty-three percent of moms no longer breastfeeding cited sore, cracked or bleeding nipples as the reason, and 20% said it was because they had to go back to work or school. Fewer than 15% said they curtailed breastfeeding because their baby was not gaining enough weight, women had too many household duties, or they felt it was the right time to stop (13%).
- ◆ Among women who had worked in the previous two years, 38% said they could pump or breastfeed any time at their workplace. Thirty-five percent (35%) said their workplace had a clean, private place to pump milk that was not a bathroom.
- ◆ Thirty-three percent (33%) also stated that they had flexible breaks for pumping or breastfeeding.
- ◆ Twenty percent said they were allowed to pump milk only during break times, and 14% said they were allowed to breastfeed only during break times.
- ◆ Almost 6% said they were not allowed to breastfeed or pump milk at their place of employment.



# Infant safety

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## Supine sleep position birth years 2009-2010

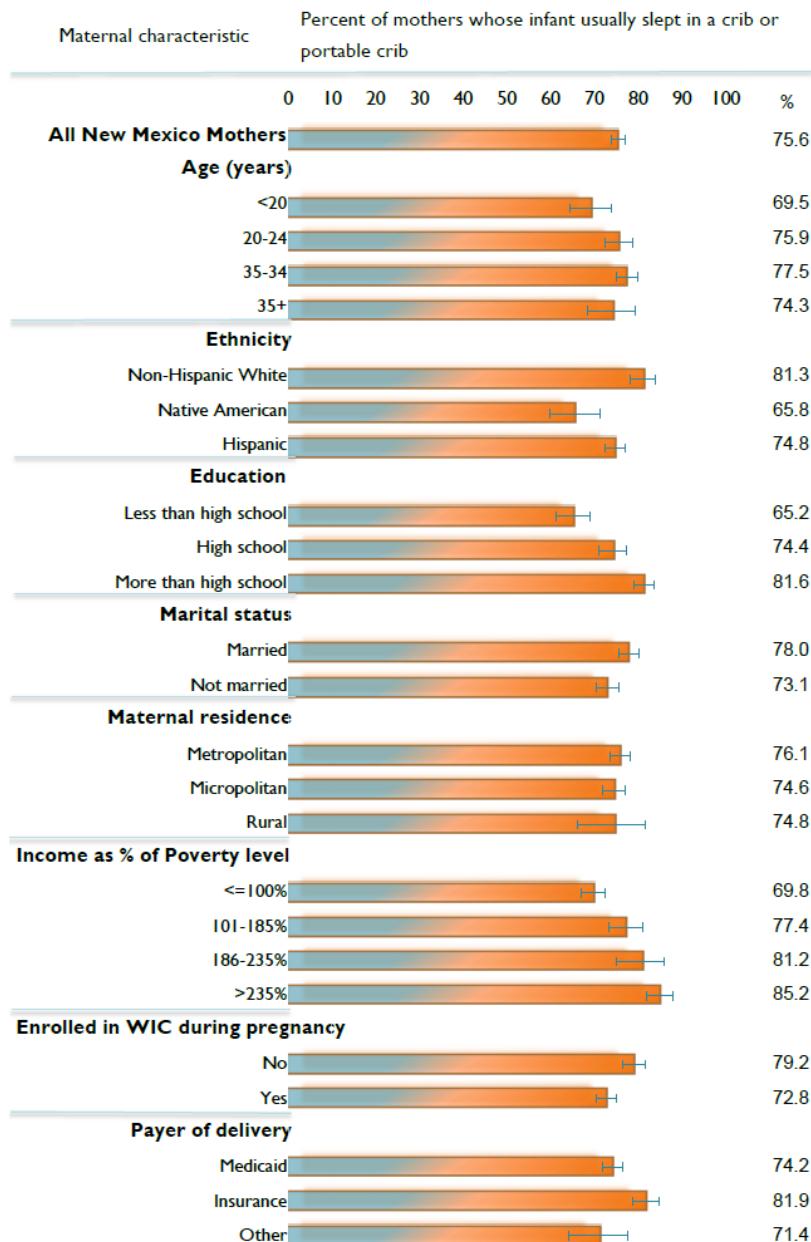


A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2 757, population = 53 358

## Crib use birth years 2009-2010

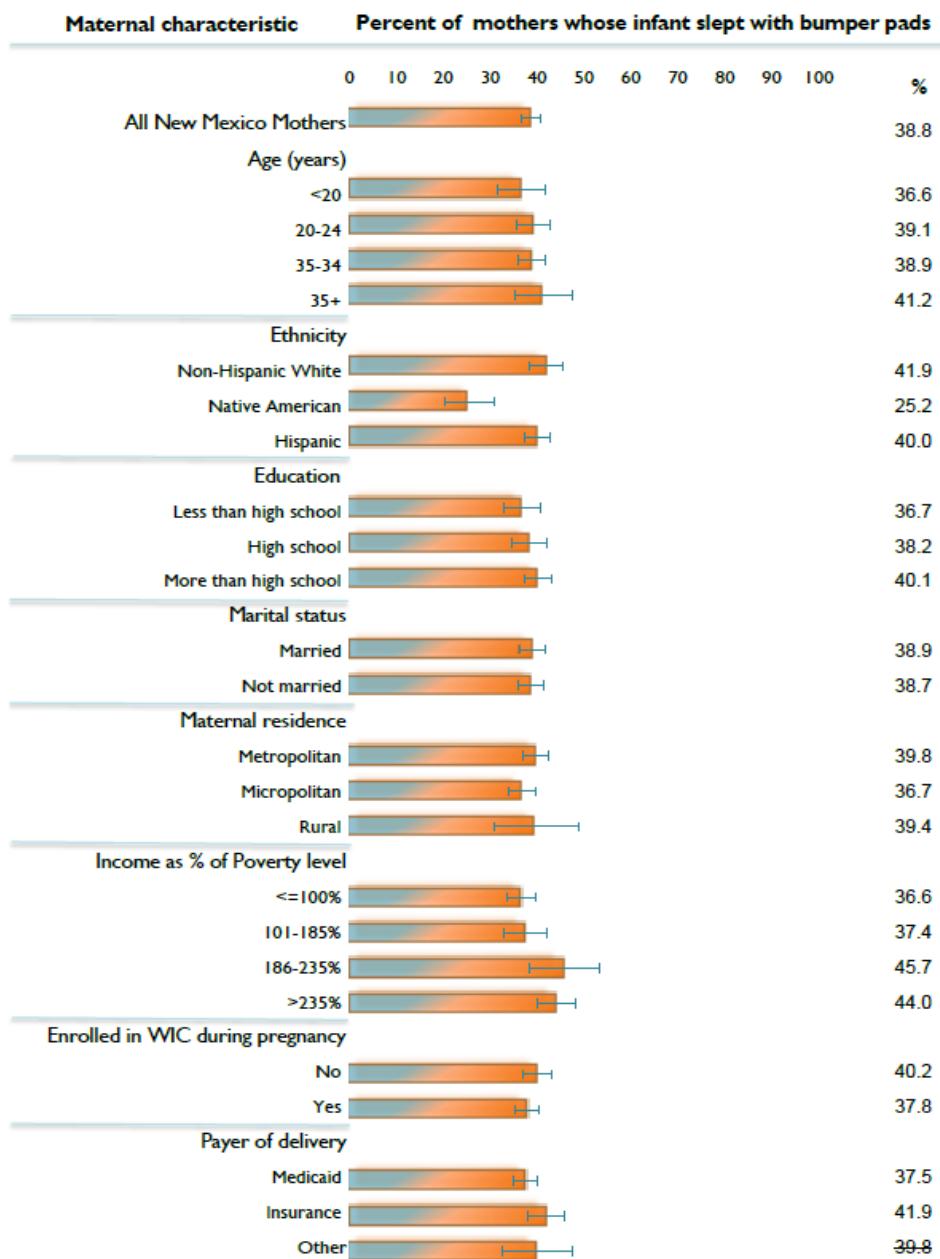
Page 91



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

**Bumper pads  
birth years 2009-2010**

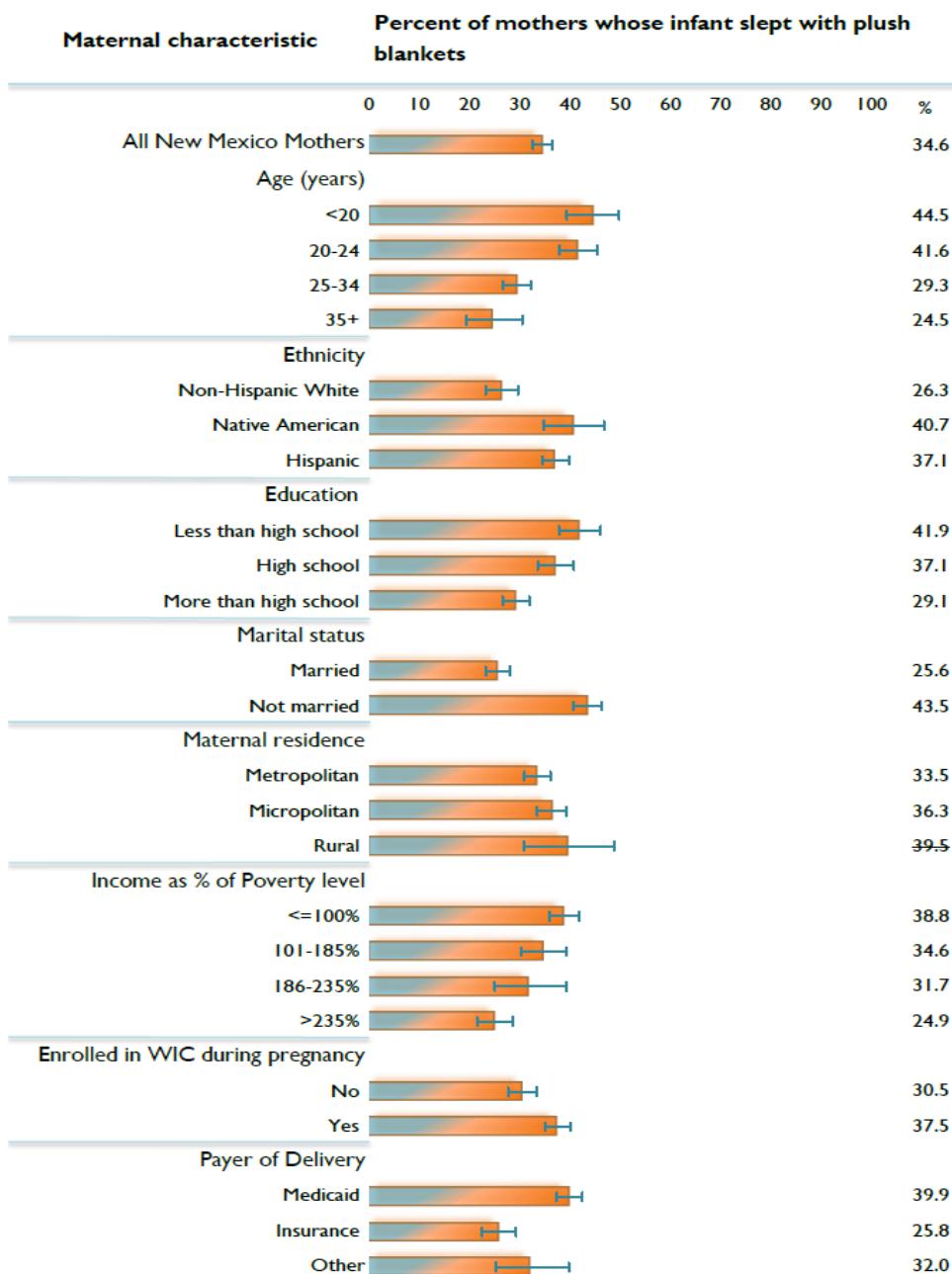


A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757. population= 53,358.

**Plush or thick blankets  
birth years 2009-2010**

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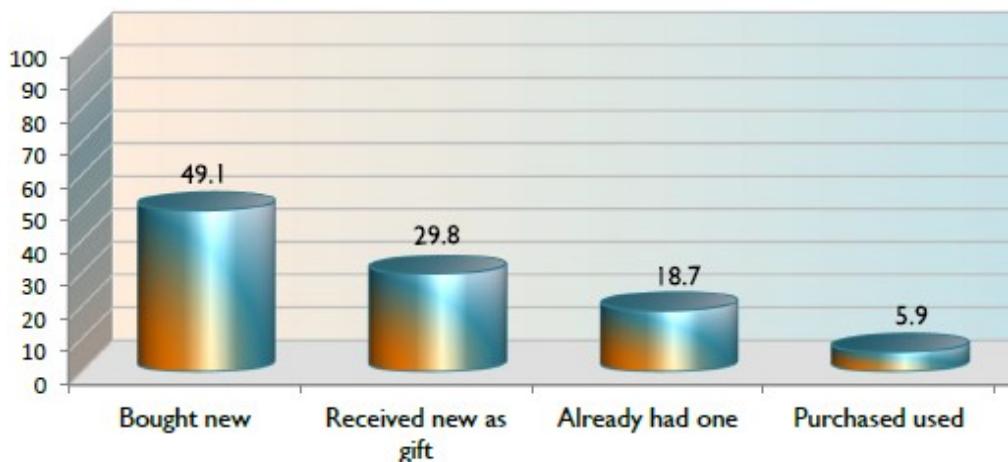


A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Source of infant car seat

**Percent of moms who said they obtained an infant car seat in the following way:**

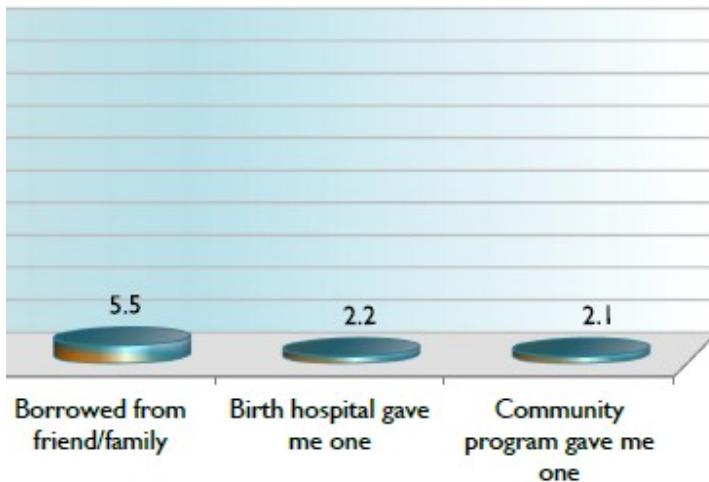


Options with less than 1% response are not represented in this chart, including “borrowed/rented a car seat from a loaner program” and “did not get a carseat”.

## Source of infant car seat

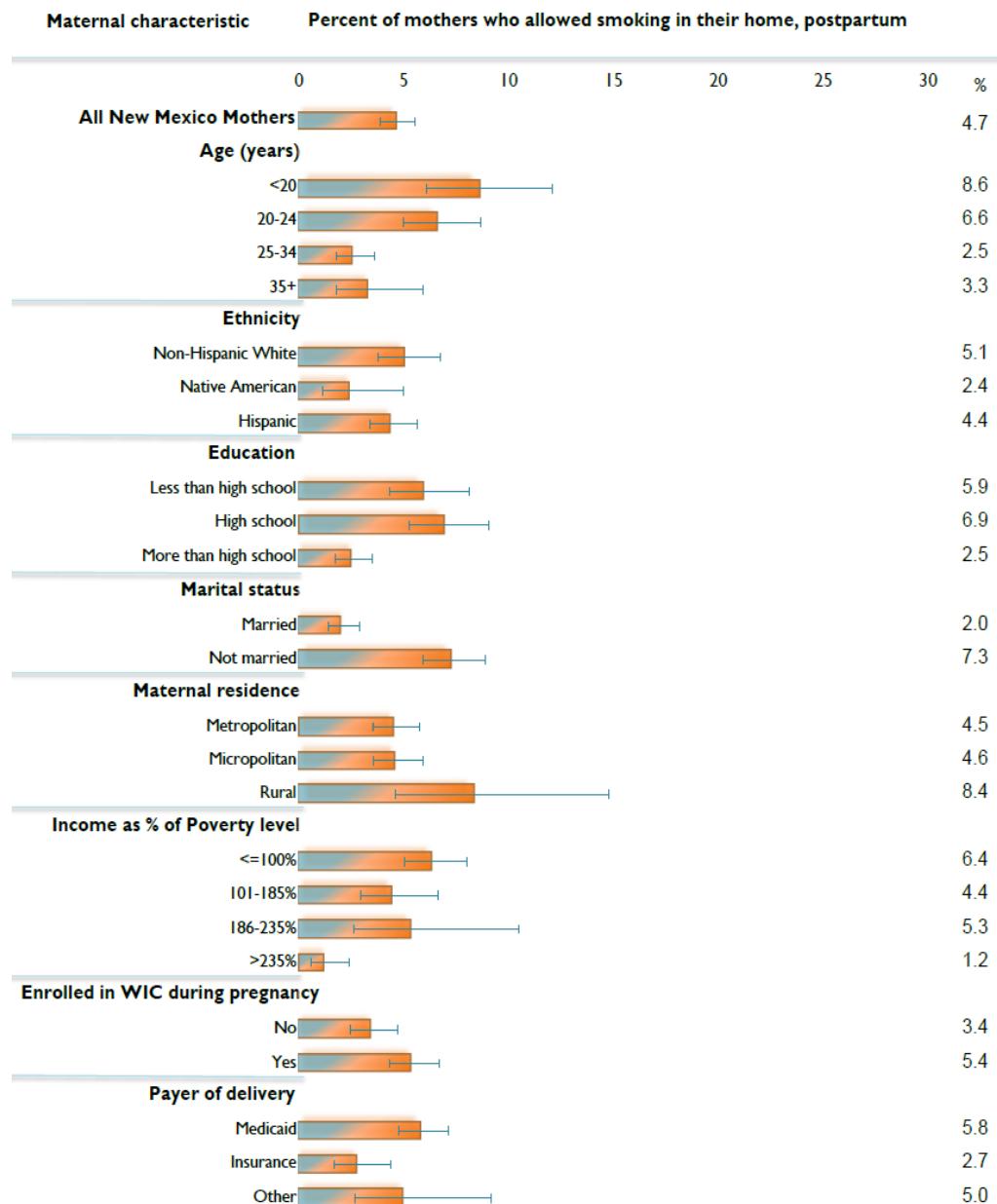
Page 95

**Percent of moms who said they obtained an infant car seat in the following way:**



Options with less than 1% response are not represented in this chart, including “borrowed/rented a car seat from a loaner program” and “did not get a carseat”.

## Smoking allowed in home birth years 2009-2010



A strikethrough indicates a large margin of error and the need to use the data with caution.

Number of respondents = 2,757, population= 53,358.

## Infant Care

- ◆ Seventy-six percent (76%) of all NM moms said their baby usually sleeps in a crib, but 33% also said their infant usually sleeps with another person (indicators were not mutually exclusive).
- ◆ Other risky sleep environment factors included 35% of women with infants sleeping with plush or thick blankets, 14% with pillows, and 5% with stuffed toys.
- ◆ Close to 40% of NM mothers said their infant slept with bumper pads (normally marketed for use in cribs or cradles).
- ◆ On a positive note, 79% of new moms said their infant slept on a hard or firm mattress. Still, there was a disparity between very young moms (<20 years), 68% reporting a hard or firm mattress and older women, ranging from 79-83%.
- ◆ The same pattern was observed by educational level, income level and payer of delivery. Non-Hispanic white women were also more likely to use a firm/hard mattress for their infant compared to Hispanic or Native American women.
- ◆ Seventy percent (70%) of NM women place their infants in the supine position to sleep. Mothers receiving WIC were less likely than those without WIC to use the supine position (66% v. 74%).
- ◆ Supine position was also associated with income level: it ranged from 66% among women with 100% poverty up to almost 80% among women with incomes at 235% of FPL. Women with less than a high school education were the least likely to observe the back-to-sleep recommendation; only 57% did.
- ◆ Eighty-four percent of Native American women practiced back to sleep, but only 65% of Hispanic women did.
- ◆ Almost 5% of women giving birth 2009-2010 said smoking was allowed in their home.



## Appendix/Technical notes

Sample numbers, response rates and population estimates  
for NM PRAMS by year of infant's birth

Year of infant's birth	Number sampled	Number responding	Percent responding (unweighted)	Population Estimate
2000	2210	1615	73.1	25821
2001	2265	1599	70.6	25835
2002	2243	1562	69.6	26237
2003	2049	1428	69.7	26219
2004	2194	1530	69.7	26868
2005	1524	1056	69.5	18210
2006	2396	1549	64.6	28346
2007	1646	1037	62.9	28836
2008	2109	1292	61.3	28473
2009	2336	1420	60.8	27263
2010	2192	1334	60.9	26095

### Data analysis software

This report was prepared by NM PRAMS with SAS-callable SUDAAN version 10.0 (Research Triangle Park, NC).



## Response rates

Unweighted response rates are presented in the table on page 98. To be called a respondent, a woman had to answer at least 75% of the survey. PRAMS strives for a weighted response rate of at least 65%. Weighted response rates generally differ from unweighted rates by less than one percentage point. Estimated population numbers above are provided as a denominator for estimating counts from percentages in the report.

## Sample Stratification

For years 2001-2005, the sampling strategy was to select women equally based on residence from five Department of Health Public Health Regions, about 1/12 women per region. From 2006 to 2010 the sampling strata were based on race/ethnicity by Hispanic, Non-Hispanic White and Other race/ethnicity grouping.

## Potential sources of bias

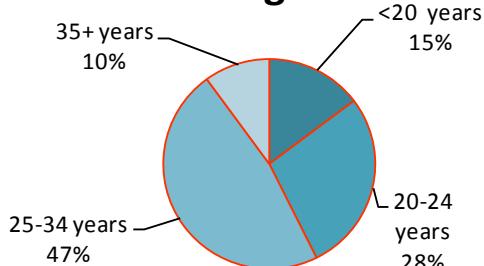
Bias may result from non-response, especially when response rates fall below 60% for that stratum or domain (a domain is a subgroup other than the sampling stratum). Other potential sources of bias include omitting observations with missing values, lack of control for important confounders, or analysis by domains. Item non-response, where data are missing from questions on the survey or birth certificate may lead to bias. Low response rates can limit the reliability of prevalence estimates and representativeness or comparisons among populations. Estimates were not reported for groups with fewer than 50. Criteria for strikethroughs were a confidence interval spanning more than 15 percentage points or a relative error (standard error divided by point estimate) equal or greater than 0.40.

## Population and sample

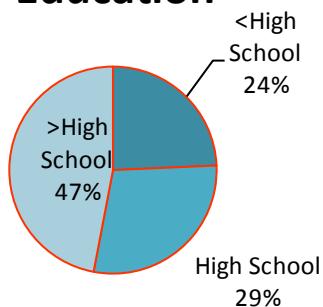
The NM PRAMS population refers to all New Mexico resident mothers giving live birth in NM. Exclusions: births to mothers who gave their infant up for adoption, if known, infants who were older than 180 days (six months) old when their birth was registered, and only one infant from multiple gestation births is included. Only mothers of twins and triplets are sampled; higher order multiple gestation births are excluded. Births are also excluded for records where a mother's last name is missing from the birth certificate.

## Distribution of Respondents by Maternal Characteristics

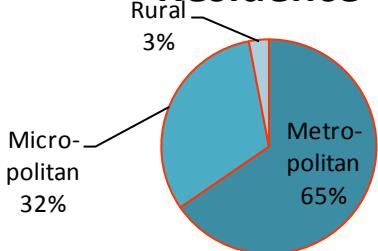
### Age



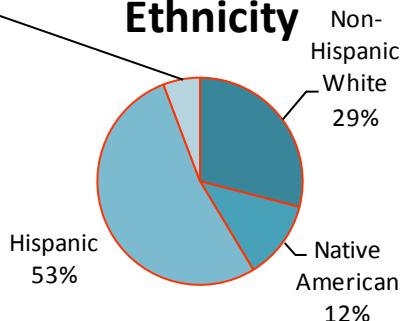
### Education



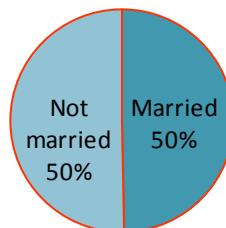
### Residence



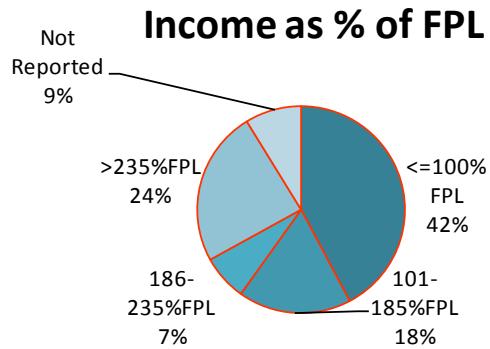
### Ethnicity



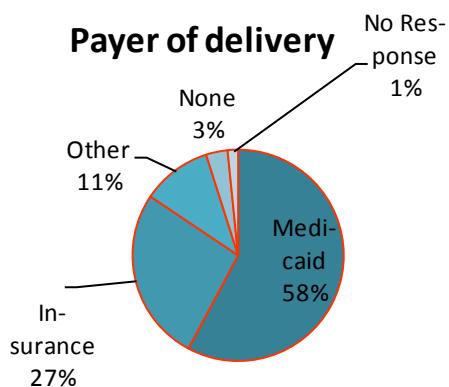
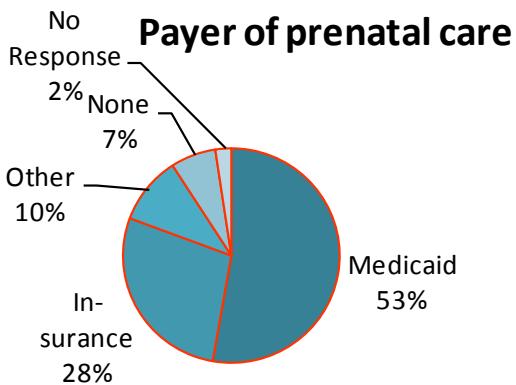
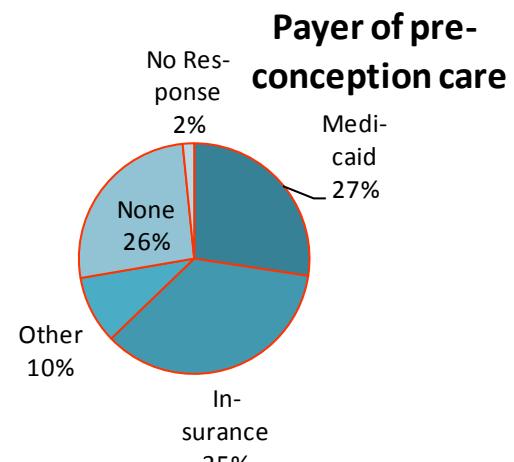
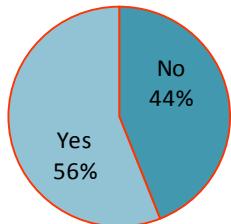
### Marital status



## Distribution of Respondents by Maternal Characteristics (continued)



### Enrolled in WIC



## Variable definitions

**Survey variable definitions.** Unless otherwise stated, all variables below are derived from the PRAMS survey questionnaire.

**Maternal Age**– Data from the birth certificate. Mother's age at the time of the baby's birth.

**Ethnicity**– Data from the birth certificate. Categorized according to NM DOH reporting guidelines. Mothers who did not fall into the three largest categories were excluded (6%).

[http://ibis.health.state.nm.us/docs/StandardsRace\\_Guidelines.pdf](http://ibis.health.state.nm.us/docs/StandardsRace_Guidelines.pdf).

**Education**– Data from the birth certificate. Those with missing data were excluded (1%).

**Marital Status**– Data from the birth certificate. Marital status of the mother is reported at the time of the baby's birth.



**Residence** – Data from the birth certificate. Residence of the mother at the time of the baby's birth. County of residence is categorized according to the U.S. Census' metropolitan / micropolitan geographic designation. A map and description is provided in the front of the report on page 3.

**Income** – Household income and number of household members were converted to Percentage of the U.S. Health and Human Services Federal Poverty Level (FPL). See guidelines: <http://aspe.hhs.gov/poverty/>. Those with missing data were excluded (10%).

**WIC**— Mothers reported that they participated in WIC during pregnancy. Those with missing data were excluded (1%). For the table on WIC participation (p. 38) women who had WIC during pregnancy or postpartum were included.

**Payer of preconception care** – The respondent could choose up to seven options for source of insurance coverage before pregnancy. The variable in this report combined these options hierarchically into three categories: Medicaid, Private Insurance, or No payer. Those who did not fall into the three main categories were excluded (12%).

**Payer of prenatal care** – The respondent could choose up to seven options for her payer of prenatal care. This variable was created by categorizing the payers hierarchically as: Medicaid, Private insurance, Other payers or no coverage. Those with no coverage or no response (9%) were excluded.

**Payer of delivery** – This variable was coded in the same manner as payer of prenatal care. Four percent (4%) of respondents with no coverage or no response were excluded.

**Alcohol use** – *Binge drinking* is defined as having 4 or more alcoholic beverages in a 2-hour time span. *Drinking during pregnancy* means that the mother reported drinking at least one alcoholic beverage in the last three months of pregnancy.

**Breastfeeding** – *Initiation*: the respondent reported that she breastfed or pumped milk for her infant at least once. *Continuation to at least 2 months*: the mother reported that she was still breastfeeding at the time of the survey. *Breastfeeding exclusively*: meant among moms who initiated breastfeeding, they had not introduced any liquids or solids. Those who were no longer breastfeeding at the time of survey were asked the reasons that they stopped.

**Cigarette smoking** – Respondents who said they smoked at least 100 cigarettes in the past 2 years were asked how many cigarettes they smoke on an average day (before, during, and after pregnancy). If the mother said she smoked at least one cigarette or she did not know how many cigarettes she smoked, she was coded as a smoker.

**Diabetes** – Pre-existing and gestational. These conditions are self reported about what a health provider said, and may not indicate a valid medical diagnosis.

**Government assistance** – The PRAMS survey queried mothers about applying for and receiving aid such as Temporary Assistance for Needy Families (TANF), welfare or public assistance, during the 12 months before the baby was born. 26% of women said they or a household member applied. Those applying and receiving help represented about 20% of the birth population.

**Postpartum depressive symptoms** – Three survey questions were used to measure symptoms of postpartum depression: 1. I felt down, depresses or sad; 2. I felt hopeless; 3. I felt slowed down; with the following response options: 1=never, 2=rarely, 3=sometimes, 4=often, and 5=always. Women with a sum of 10 or higher for the three questions were classified as having depression. This definition was recommended by the CDC Division of Reproductive Health, and the coding was developed by Dr. Sherry Farr and Dr. Patty Dietz.

**Pregnancy intention** – The PRAMS survey asked mothers how they felt about being pregnant at the time of conception, with the following response options : 1) wanted to be pregnant sooner, 2) wanted to be pregnant later, 3) wanted to be pregnant then, or 4) did not want to be pregnant then or at any time in the future. Unintended pregnancy includes both mistimed (option 2) and unwanted (option 4) pregnancies.

**Preconception multivitamin-** Mothers were asked how frequently they took a multivitamin, a prenatal vitamin, or a folic acid vitamin during the month before they became pregnant. Those who did not take a vitamin were asked the reasons for not taking a vitamin.

**Preconception weight problem** – Body Mass Index (BMI) is calculated from the mother's self-reported pre-pregnancy weight and height and calculated by dividing weight (kg) divided by height squared ( $m^2$ ). Overweight/obese is defined as a BMI of 25.0 or more for mothers 20 years of age and older. For children under 20 years of age, gender- and age-specific charts (BMI-for-age) define underweight as BMI-for-age at or below the fifth percentile; normal as 5th to below 85th percentile; at risk for overweight as 85th to below 95th percentile; and overweight as 95th percentile or more. BMI cutoffs are available from [www.cdc.gov/nccdphp/dnpa/bmi/adult.htm](http://www.cdc.gov/nccdphp/dnpa/bmi/adult.htm).

**Prenatal care**– adequate or inadequate prenatal care utilization (APNCU). Definitions are taken from the Kotelchuck (also called Adequacy of Prenatal Care Utilization Index). A concise reference can be found at <http://www.mchlibrary.info/databases/HSNRCPDFs/>

## The PRAMS questionnaire

### Changes between survey phases

This section highlights survey changes between Phase 4 (birth years 2000-2003), Phase 5 (birth years 2004-2008), and Phase 6 (birth years 2009-2010). These changes may account for slight differences in multiyear comparisons.

#### **-Contraception at conception and postpartum:**

“Norplant” and “shots [Depo-Provera]” were removed as examples for Phase 5 and “cervical ring” was added to the list of examples. Phase 4 (2000) added the filter question, “When you got pregnant with your new baby, were you trying to become pregnant?”(Yes/No). Women responding “yes” were instructed to skip the question about whether they used contraception at conception.

**-Diabetes:** Prior to 2004 pre-existing and gestational diabetes were not distinguished from one another. From 2004 on, one question asks about pre-existing high blood sugar or diabetes and another asks about gestational diabetes during pregnancy.

**-Insurance:** The questions were modified for phase 6 to differentiate between private insurance through employment and plans purchased outside of work. It also separated Indian Health Service and military health care options from Medicaid.

#### **-Multivitamin use:**

This question was revised for Phase 5: “In the month before” was replaced with “During the month before” and the term “prenatal vitamin” was added. Starting in 2009, ‘folic acid vitamin’ was added to ‘prenatal’ and ‘multivitamin’. Reasons for not taking prenatal or multivitamins before pregnancy were added in 2009.

**-Postpartum depression** questions were added in 2004. They changed between 2008 and 2009, so the estimates are not comparable for the two periods.

#### **-Smoking before and during pregnancy:**

In 2004, the number of cigarettes options were made categorical, and the write-in option was removed.

**The phase 6 survey is found at the end of this appendix.**

## References

- I. Centers for Disease Control and Prevention (CDC) website: <http://www.cdc.gov/prams>.

For January 2000 through December 2003 births, NM used the Phase 4 questionnaire developed by the CDC. State-developed questions were included at the end of the survey. For January 2004-2008 births, NM implemented the Phase 5 questionnaire, and starting with 2009 births Phase 6 was initiated. Each questionnaire consisted of two parts: a core portion that was the same for all states, several standard questions available to all states for selection, and a state-specific portion that was tailored to NM State needs. Topics in the core questions covered barriers to and content of prenatal care, obstetric history, maternal use of alcohol and cigarettes, nutrition, economic status, maternal stress and early infant development and health status. The CDC provided standard Spanish translations, and both the English and Spanish questionnaires were adapted for telephone interviews.



**NM PRAMS survey, Phase Six: Birth years 2009-2011**  
The actual survey is formatted differently from this document, in which the response options are condensed.  
Skip patterns refer to page numbers in the original format, not to page numbers in this appendix. A phone survey as worded differently and there is also a Spanish language version.

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

1. 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 circle Y (yes) if you did it or circle N (no) if you did not.  
(a) I was dieting to lose weight N/Y; (b) I was exercising 3 or more days of the week N/Y; (c) I was regularly taking prescription medicines other than birth control N/Y; (d) I visited a health care worker to be checked or treated for diabetes N/Y; (e) I visited a health care worker to get checked or treated for high blood pressure N/Y; (f) I visited a health care worker to be checked or treated for depression or anxiety N/Y; (g) I talked to a health care worker about my family medical history N/Y; (h) I had my teeth cleaned by a dentist or dental hygienist N/Y

2. During the month you got pregnant with your new baby, were you covered by any of these health insurance plans? Check all that apply.

Health insurance from your job or the job of your husband, partner, or parents; health insurance that you or someone else paid for (but not from a job); Medicaid or Salud; TRICARE or other military health care; Indian Health Service (IHS); Indigent Health Care; Other Please tell us; I did not have any health insurance before I got pregnant.

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

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

4. What were the reasons for not taking multivitamins, prenatal vitamins, or folic acid vitamins during the month before you got pregnant with your new baby? Check all that apply:

I wasn't planning to get pregnant; I didn't think I needed to take vitamins; The vitamins were too expensive; the vitamins gave side effects (such as constipation); Other; Please explain

5. Just before you got pregnant, how much did you weigh?  
Pounds OR Kilos

6. How tall are you without shoes? Feet and inches OR centimeters

7. What is your date of birth? Month Day Year

9. Before your new baby, did you ever have any other babies who were born alive?  
No: Go to Question 10 Yes

10. Did the baby born just before your new one weigh 5 pounds, 8 ounces (2.5 kilos) or less at birth?  
No/Yes

11. Was the baby just before your new one born more than 3 weeks before his or her due date?  
No/Yes

12. Thinking back to just before you got pregnant, how did you feel about becoming pregnant? Check one answer.

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

13. When you got pregnant with your new baby, were you trying to become pregnant?  
No/Yes: Go to Page 2, Question 14.

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

No / Yes: Go to Question 15

15. What were you 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 partner or I was sterile (could not get pregnant at all); My husband or partner did not want to use anything; Other - Please tell us:

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 advise about pregnancy.

16. 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.)

(1) Months OR (2) Weeks (3) I don't remember

17. 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].)

(1) Months OR (2) Weeks (3) I didn't go for prenatal care

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

No / Yes: Go to Question 20 / I didn't want prenatal care

19. Did any of these things keep you from getting prenatal care as early as you wanted? Check all that apply:

(a) I couldn't get an appointment when I wanted one (b) I didn't have enough money or insurance to pay for my visits (c) I had no transportation to get to the clinic or doctor's office I didn't know that I was pregnant (d) The doctor or my health plan would not start care earlier (e) I had too many other things going on (f) I couldn't take time off from work or school (g) I did not have my Medicaid or Salud card (h) I had no one to take care of my children (i) I didn't know that I was pregnant (j) I didn't want anyone else to know I was pregnant (k) I didn't want prenatal care

If you did not go for prenatal care, go to Question 23.

20. Where did you go most of the time for your prenatal visits? Don't include visits for WIC. Check one answer

Hospital clinic; Health department clinic; Private doctor's office or HMO clinic; Indian Health Service (IHS) clinic or hospital; Community clinic; Other - Please tell us:

21. Did any of these health insurance plans help you pay for your prenatal care? Check all that apply.

Health insurance from your job or the job of your husband partner or parents; Health insurance that you or someone else paid for but not from a job; Medicaid or Salud; TRICARE or other military health care; Indian Health Service (IHS) with or without Medicaid; State Coverage Insurance (SCI); Premium Assistance for Maternity (PAM); Other source Please tell us:

22. 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 literature 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.

(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) Medicines that are safe to take during

*my pregnancy N/Y; (f) How using illegal drugs could affect your baby N/Y; (g) Doing tests to screen for birth defects or diseases that run in my family N/Y; (h) The signs and symptoms of preterm labor (labor more than 3 weeks before the baby is due) 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) What do if I feel depressed during pregnancy or after my baby is born N/Y; (l) Physical abuse to women by their husbands or partners N/Y;*

23. 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

24. During your pregnancy, were you on WIC (the special supplemental nutrition program for Women, Infants, and Children)?  
 No /  Yes

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

26. Did you have any of these problems during your pregnancy? *For each item, circle Y (Yes) if you had the problem or circle N (No) if you did not:*  
 (a) Vaginal bleeding N/Y; (b) Kidney or bladder (urinary tract) infection N/Y; (c) Severe nausea, vomiting, or dehydration N/Y; (d) Cervix had to be sewn shut (cerclage) for incompetent cervix N/Y; (e) High blood pressure, hypertension (including pregnancy-induced hypertension (PIH) preeclampsia or toxemia) N/Y; (f) Problems with the placenta (such as abruptio placentae, placenta previa) N/Y; (g) Labor pains more than 3 weeks before my baby was due (preterm or early labor) N/Y; (h) Water broke more than 3 weeks before your baby was due (premature rupture of membranes, PROM) N/Y; (i) I had to have a blood transfusion N/Y; (j) I was hurt in a car accident N/Y

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

27. Have you smoked any cigarettes in the past 2 years?  
 No / Go to Question 31 /  Yes

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

41 Cigarettes or more;  21 to 40 cigarettes;  11 to 20 cigarettes;  6 to 10 cigarettes;  1 to 5 cigarettes;  Less than 1 cigarette a day;  I didn't smoke then

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

41 Cigarettes or more;  21 to 40 cigarettes;  11 to 20 cigarettes;  6 to 10 cigarettes;  1 to 5 cigarettes;  Less than 1 cigarette a day;  I didn't smoke then

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

41 Cigarettes or more;  21 to 40 cigarettes;  11 to 20 cigarettes;  6 to 10 cigarettes;  1 to 5 cigarettes;  Less than 1 cigarette a day;  I don't smoke now

31. Which of the following statements best describes the rules about smoking *inside* your home now? *Check one answer*  
 No one is allowed to smoke anywhere inside my home;  
 Smoking is allowed in some rooms or at some times;  Smoking is permitted anywhere inside my home

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

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

No Go to Question 32 /  Yes

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

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

33b. During the 3 months before you got pregnant, how many times did you drink 5 alcoholic drinks or more in one sitting? A sitting is a two 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 one sitting

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

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

34b. During the last 3 months of your pregnancy, how many times did you drink 5 alcoholic drinks or more in one sitting?

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

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.

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

(a) A close family member was very sick and had to go into the hospital N/Y; (b) I got separated or divorced from your 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 did not want me to be pregnant N/Y; (i) I had a lot of bills I could not pay N/Y; (j) I was in a physical fight N/Y; (k) My husband or partner or I went to jail N/Y; (l) Someone very close to me had a bad problem with drinking or drugs N/Y; (m) Someone very close to me died N/Y

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

No /  Yes

37. 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

38. When was your baby due? Month  Day  Year

39. When did you go into the hospital to have your baby?  
 (1) Month  Day  Year  (2) I did not have my baby in a hospital

40. When was your baby born? Month  Day  Year

41. How was your new baby delivered? *Vaginally* Go to Question 43/ *C-section*

42. What was the reason that your new baby was born by cesarean delivery (c-section)?

I had a previous cesarean delivery (c-section);  My baby was in the wrong position;  I was past my due date;  My health care provider worried that my baby was too big;  I had a medical condition that made labor dangerous for me;  my health care provider tried to induce my labor but it didn't work;  Labor was taking too long;  The fetal monitor showed that my baby was having problems during labor;  I wanted to schedule my delivery;  I didn't want to have my baby vaginally;  other please tell us

43. When were you discharged from the hospital after your baby was born? (It may help to use the calendar.)  
 (1) Month \_\_\_ Day \_\_\_ Year \_\_\_ (2) I did not have my baby in a hospital

44. Did any of these health insurance plans help you pay for the delivery of your new baby? Check all that apply.

*Health insurance from your job or the job of your husband, partner, or parents; Health insurance that you or someone else paid for (not from a job); Medicaid or Salud; TRICARE or other military health care; Indian Health Service (IHS); State Coverage Insurance (SCI); Premium Assistance for Maternity (PAM); Other source(s) Please tell us:*

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

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

  No Yes I don't know

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

*Less than 24 hours (Less than 1 day); 24–48 hours (1–2 days); 3 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 49*

47. Is your baby alive now?

No: Go to Question 57 / Yes:

48. Is your baby living with you now?

No: Go to Question 57 / Yes

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

No: Go to Question 53b / Yes

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

No / Yes: Go to Question 53a

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

(1) Weeks or (2) Months Less than 1 week

52. What were your reasons for stopping breastfeeding? Check all that apply:

*My baby had difficulty latching or nursing; Breast milk alone did not satisfy my baby; I thought my baby was not gaining enough weight; My nipples were sore, cracked, or bleeding; It was too hard, painful, or too time consuming; I thought I was not producing enough milk; I had too many other household duties; I felt it was the right time to stop breastfeeding; I got sick and was not able to breastfeed; I went back to work or school; My baby was jaundiced (yellowing of the skin or whites of the eyes); Other; Please tell us:*

53a. How old was your new baby first time he or she drank liquids other than breast milk (such as formula, water, juice, tea, or cow's milk)?

Weeks or Months; My baby was less than 1 week old; My baby has not had any liquids other than breast milk.

53b. How old was your new baby the first time he or she ate food (such as baby cereal, baby food, or any other food)? Weeks or Months; My baby was less than 1 week old; My baby has not eaten any foods.

If your baby is still in the hospital go to Question 57.

54. In which on 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.

55. Listed below are some things that describe how your new baby usually sleeps. For each item, circle T (True) if it usually applies or your baby or F (False) if it doesn't apply to your baby.

(a) *My new baby sleeps in a crib or portable crib T/F; (b) My new baby sleeps on a firm or hard mattress T/F; (c) My baby sleeps with pillows T/F; (d) My new baby sleeps with bumper pads T/F; (e) My new baby sleeps with plush blankets T/F; (f) My new baby sleeps with stuffed toys T/F; (g) My new baby sleeps with another person T/F*

56. Was your new baby seen by a doctor, nurse, or other health care worker for a one week check-up after he or she was born?

  No Yes

57. 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 [natural family planning or rhythm] or withdrawal, and using birth control methods such as the pill, condoms, vaginal ring, IUD, having their tubs tied, or their partner having a vasectomy.)  
  No Yes, Go to Question 59

58. 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; My husband or partner doesn't want to use anything; I don't think I can get pregnant (sterile); I can't pay for birth control; I am pregnant now; Other; Please explain:*

59. Below is a list of feelings and experiences that women sometimes have after childbirth. Read each item to determine how well it describes your feeling and experiences. Then, write on the line the number of the choice that best describes how often you have felt or experienced things this way since your new baby was born. Use the scale when answering:

1	2	3	4
Never	Rarely	Sometimes	Often

Always

- a. *I felt down, depressed, or sad.....* \_\_\_\_\_
- b. *I felt hopeless.....* \_\_\_\_\_
- c. *I felt slowed down.....* \_\_\_\_\_

The next questions are on a variety of topics.

If you did not go for prenatal care, go to Question 61.

60. There are many feelings and experiences women may have with prenatal care. Please select the statement or statements that most closely describe your feelings or experiences with prenatal care during your most recent pregnancy. Check all that apply.

*I was happy with the prenatal care I got; I felt disrespected by clinic or hospital staff during prenatal care; I did not have prenatal insurance coverage and I did not qualify for Medicaid; I wanted prenatal care earlier, but I was waiting for my Medicaid eligibility; I received some or all of my prenatal care outside of the United States; My husband/partner or boyfriend did not want me to get prenatal care.*

61. During your most recent pregnancy, did any of the following medical problems cause you to go to the hospital or emergency room? For each item, circle Y (yes) if it caused you to go to the hospital or emergency room or circle N (no) if it did not. It may help to look at a calendar when you answer this question.

(a) *Prematurity or early labor N/Y; (b) Severe nausea or dehydration N/Y; (c) Kidney or bladder infection N/Y; (d) High blood pressure N/Y; (e) Vaginal bleeding N/Y; (f) Premature rupture of membranes N/Y; (g) Other; Please tell us:*

62. 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.

(a) *I had a dental problem while I was pregnant N/Y; (b) I went to a dentist or dental clinic while I was pregnant N/Y; (c) A dental or*

other healthcare worker talked with me about how to care for my teeth and gums N/Y; (d) I could not find a provider or clinic that would take Medicaid patients N/Y; (e) I could not find a provider or clinic that would take pregnant patients N/Y; (f) I could not afford to go to the dentist N/Y; (g) I had no way to get to the dentist N/Y;

63. During your most recent pregnancy, did you participate in any of these services? For each one, circle Y (yes) if you did participate or circle N (no) if you did not.

(a) Home visiting services by a nurse, social worker, or other health care worker N/Y; (b) Families First N/Y; (c) A class or support group to stop smoking cigarettes N/Y; (d) Healthy Start N/Y

If your baby is not alive or is not living with you go to Question 70.

64. How did you get your new baby's infant car seat(s)? Check all that apply:

I bought a car seat new; I received it new for this baby as a gift; I had one from another one of my babies; I bought a car seat used; I borrowed or rented a car seat from a loaner program; The hospital where my new baby was born gave me a car seat; A community program gave me a car seat; I did not ever get a car seat for my new baby; Other; Please tell us.....

65. Have you worked outside the home in the past two years?  
No/Tes

66. New Mexico state law requires that all employers provide a clean, private location for mothers to breastfeed or pump milk for their infants. What happens when a mother wants to breastfeed or pump milk for her baby at your current or most recent workplace? Check all that apply: She can breastfeed or pump breast milk any time; She can breastfeed her baby during break times only; She can pump breast milk during break times only; She has flexible break times to breastfeed or pump milk; She has a clean, private place that is not a bathroom, where she can breastfeed or pump milk; She is not allowed to breastfeed or pump milk at work; I don't know

67. Since you delivered your new baby, would you have the kinds of help listed below if you needed them? For each one, circle Y (Yes) if you would have it or circle N (No)

(a) Someone to loan me \$50 N/Y; (b) Someone to help me if I were sick and needed to be in bed N/Y; (c) Someone to talk with about my problems N/Y; (d) Someone to take care of my baby N/Y; (e) Someone to help me if I were tired and feeling frustrated with my new baby N/Y

68. Since your new baby was born, have you or your baby received any home visiting services by a nurse, social worker, or other health care worker? N/Y

69. Since your new baby was born, have you participated in any of these services? For each one circle Y (Yes) if you have participated or circle N (No) if you have not.

(a) Breastfeeding class or peer counseling N/Y; (b) WIC for you and your baby N/Y; (c) Families First N/Y; (d) A class or support group to stop smoking cigarettes N/Y; (e) Healthy Start N/Y

70. Since your new baby was born, have you seen a doctor, nurse, or midwife for yourself for any of these reasons? For each one, circle Y (Yes) if you did or circle N (No) if you did not.

(a) I got help for depression or "baby blues" N/Y; (b) I received a birth control method N/Y; (c) I received a referral for a health problem N/Y

71. During the past 12 months, which one of the following statements best describes the food eaten by you and your family? Check one answer:

Enough food to eat; Sometimes not enough food to eat; Often not enough food to eat.

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

72. During the 12 months before your new baby was born, did you or any member of your household apply for government payments such as welfare, TANF (Temporary Assistance for Needy Families), or other public assistance?

No Go to Question 74/Tes

73. Did any of these happen to you when you applied for government assistance? Check all that apply:

I received assistance; I was told I made too much money to get assistance; I was told I shouldn't apply because I might need my benefits later; I was told I couldn't get assistance because I am from another country

74. 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.)

- 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 to \$64,999
- \$65,000 to \$74,999
- \$75,000 or more

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

— People

76. What is today's date?

Month	/	Day	/	Year
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