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South Dakota Pregnancy Risk Assessment Monitoring System (PRAMS)

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South Dakota Pregnancy Risk Assessment Monitoring System (PRAMS)

The Pregnancy Risk Assessment Monitoring System (PRAMS) was developed by the Centers for Disease Control and Prevention (CDC) in 1987 and is done in collaboration with various state health departments. PRAMS is a statewide survey that collects valuable information from new mothers to find out why some babies are born healthy and others are not.

The PRAMS provides state agencies and the CDC with data so they can monitor changes in maternal and child health indicators such as the prevalence of unintended pregnancy, prenatal care, breastfeeding, and smoking and drinking behaviors. PRAMS data can be used to identify groups of women and children who are at high risk for health problems and to measure the progress of goals that are developed to improve the health of women and children. PRAMS data also can be used by researchers to investigate emerging issues of maternal and child health, by state and local governments to design or review maternal and child health programs and policies, and by state agencies to help plan maternal and child health programs.

Currently forty states and New York City participate in the PRAMS, representing approximately 78% of all U.S. live births. The Ethel Austin Martin Program at South Dakota State University, in partnership with the South Dakota Department of Health, is conducting the state's first-ever statewide PRAMS.

In 2007 a South Dakota Tribal PRAMS (SDT PRAMS) was conducted by the Great Plains Tribal Chairmen's Health Board and the Northern Plains Tribal Epidemiology Center. It was the first PRAMS run by a tribe and focused on maternal and health data for the American Indian population. In comparison, the SD PRAMS is collecting data statewide on all races with the ultimate goal of improving the health of future mothers and children.

How is a PRAMS conducted?

The PRAMS survey is organized as a questionnaire in a booklet format. The questionnaire itself has gone through many modifications since its original development by the CDC in 1987. It is composed of two parts, the CDC's core questions and pre-tested standard questions. The core portion contains questions about a mother's attitudes and feelings during her most recent pregnancy, the content of her prenatal care, maternal alcohol and tobacco consumption, physical abuse before and during pregnancy, contraceptive use, and knowledge of pregnancy-related health issues. In addition to the core questions, states can also choose from a standard list of 185 pre-tested questions or develop their own state-specific questions as they see fit.

The standard questions provide additional information on topics that are already addressed in the core questions but also address such topics such as social support, mental health and injury prevention. South Dakota PRAMS selected 83 standard and core questions and added 10 Adverse Childhood Experience questions to better understand how a mother's childhood experiences may affect pregnancy or birth outcomes. The entire survey takes 15-20 minutes to complete.

The South Dakota PRAMS covers births occurring in 2014, randomly sampling mothers who deliver a baby during the year and asking them to complete the survey when the baby is 2-4 months of age. The sample is pulled from South Dakota's birth certificate file and will include about 1,800 women. For confidentiality purposes, at no time is a name associated with the individual survey results.

In order to obtain sufficient numbers within different race categories, American Indian mothers and mothers of other races are being oversampled. It is important to have a high response rate to insure that the data reflect South Dakota mothers and to get the best overall picture of maternal and child health in the state. The random sample is representative of in-state births but some exclusions do apply. Births that occur to South Dakota residents out-of-state and those that occur in-state to non-residents are excluded. Also excluded are adopted and surrogate births and births for which the birth certificate is processed more than 6 months after the birth. For multiple births, only one sibling is randomly chosen.

Per CDC protocol the randomly selected women are first contacted by mail. The first mailing introduces the PRAMS study and notes that a questionnaire will follow in the near future. Three to seven days later, the first questionnaire packet is mailed. It contains a cover letter that describes the PRAMS study, encourages participation and explains how to fill out and return the survey. It also includes the PRAMS questionnaire booklet, a self-addressed pre-paid return envelope, a brochure that provides additional information about the PRAMS survey, and a cash incentive as a thank you for participation. If the mother does not respond, a reminder letter is mailed 7-10 days after the packet. If the reminder letter generates no response, a second packet is mailed 7 to 14 days after the reminder. This packet also contains an informative cover letter, another PRAMS questionnaire booklet, and a self-addressed pre-paid return envelope.

While CDC data collection protocol calls for mailing a third packet 7 to 14 days after the second packet, South Dakota PRAMS has chosen to eliminate that step and follow-up by telephone 7 days after mailing the second packet. Calls are made at various times of day and different days of the week.

South Dakota is also using other resources to promote participation in the PRAMS survey. This includes reaching out to the mother's local Women's, Infants and Children Program (WIC) office as well as to many community hospitals, clinics, medical associations, newspapers and radio stations throughout the state. Finally, South Dakota offers mothers the option to complete their PRAMS questionnaire online at <u>www.sdprams.me</u>.

The Goal of South Dakota PRAMS

The South Dakota PRAMS has several goals. One is to supplement existing birth certificate information. Another is to increase awareness of the disparities that exist in the state and determine why they exist and what can be done to eliminate them. Another goal is to provide accurate estimates on what is occurring in the state in terms of maternal and child health. Specifically, the South Dakota PRAMS hopes to learn about unintended pregnancies, barriers to accessing prenatal care, and trends in mother's behaviors and attitudes. Other states have used PRAMS results to:

- understand how maternal behaviors and experiences correlate with infant health at birth
- develop new maternal and child health programs and modify existing programs
- influence public health policy
- help health professionals incorporate the latest research into current standards of practice
- monitor the progress of local, state and national health objectives

The PRAMS survey will provide the state of South Dakota with important information on maternal attitudes and experiences before, during, and shortly after pregnancy. For more information about the South PRAMS please call 1-844-SD-PRAMS.

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