

Minnesota Pregnancy Risk Assessment Monitoring System (PRAMS)

A SURVEY ABOUT THE HEALTH OF MOTHERS AND BABIES IN MINNESOTA

Background

The Pregnancy Risk Assessment Monitoring System (PRAMS) is a surveillance project between the Minnesota Department of Health (MDH) and the <u>Centers for Disease</u> <u>Control and Prevention (CDC)</u>. PRAMS is a population—based survey designed to collect information on maternal behaviors and experiences before, during and after a woman's pregnancy.

The CDC initiated PRAMS in 1987 in an effort to reduce infant mortality and the incidence of low birth weight. PRAMS was first implemented in Minnesota in May of 2002. Data are collected on self-reported maternal attitudes, experiences and behaviors that occur shortly before, during and after pregnancy.

Importance of PRAMS

PRAMS provides data for state health officials to use to improve the health of mothers and infants.

PRAMS allows CDC and the states to monitor changes in maternal and child health indicators (e.g., unintended pregnancy, prenatal care, breastfeeding, smoking, drinking, and infant health).

PRAMS enhances information from birth certificates used to plan and review state maternal and infant health programs.

PRAMS not only provides state—specific data but also allows comparisons among participating states because the same data collection methods are used in all states.

About Minnesota PRAMS

Minnesota (PRAMS) is an important part of Minnesota Department of Health's surveillance activities to reduce infant mortality and morbidity.

The goal of Minnesota PRAMS is to improve the health of mothers and infants by reducing adverse outcomes such as:

- low birth weight
- infant mortality and morbidity
- maternal morbidity

Each month, approximately 250 mothers are selected from the Minnesota Vital Statistics file of birth certificates of babies born in Minnesota during the preceding 2–4 months.

- 1 out of 5 new African American mothers is selected to participate in the survey;
- 1 out of 2 new American Indian mothers is selected to participate in the survey; and
- 1 out of 45 all other new mothers is selected to participate in the survey.

Mothers must be Minnesota residents and have delivered a live-born infant. A PRAMS questionnaire is mailed to selected mothers

with instructions for completing and returning the information. Some surveys are completed by a telephone interview and translation services are available.

The PRAMS questionnaire has core questions asked by every state. The other questions are state—specific chosen from a standard list developed by the CDC or by states. The questions collect a mother's response to topics such as:

- Preconception Health
- Pregnancy intention
- Attitudes/feelings about pregnancy
- Pregnancy-related morbidity
- Maternal alcohol/tobacco use
- Breastfeeding
- Infant safe sleep
- Dental care
- Chronic health problems
- Contraceptive use
- Prenatal care
- Flu Vaccine
- Mother's knowledge about pregnancy
- Maternal Stressors
- Infant health care
- Postpartum depression
- Social support
- Abuse

State—specific information gathered through <u>survey questionnaires</u> will help with program and policy evaluation. PRAMS data has been used to:

Develop and implement new maternal and child health (MCH) programs. For example, a community with a high prevalence of new mothers with maternal stressors working with local public health, tribal health and/or a community clinic/hospital to host a mom's club.

- Modify existing MCH programs. For example, PRAMS data can be used to show the growing disparities and inequities in areas such as birth outcomes, maternal stressors; and it can be used to advocate for improved maternal, infant, child and adolescent health policies, systems and environmental changes on a local and statewide level.
- Inform public health policy.
- Monitor trends and progress toward local, state, and national health objectives and goals such as <u>Healthy</u> <u>People 2020 topics and objectives.</u>

PRAMS Advisory Committee

The MN PRAMS Advisory Committee, is required by the Centers for Disease Control and Prevention (CDC), to advise the Minnesota PRAMS staff in the development and selection of state—specific questions and on the use, dissemination, and application of findings. The multi—disciplinary committee includes individuals from the public, private, and academic sector. The PRAMS Advisory Committee meets annually.

Megan Lynn Udoeyop (PRAMS Coordinator)
Minnesota Department of Health
Pregnancy Risk Assessment Monitoring System
PO Box 64882, St. Paul, MN 55164-0882
651-201-3652

<u>health.mnprams@state.mn.us</u> <u>www.health.state.mn.us</u>



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