Pregnancy Risk Assessment Monitoring System (PRAMS)

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PRAMS Overview

• Population-based surveillance system

• Self-reported maternal behaviors and experiences around the time of pregnancy

• Supplements birth certificate information

• State and near-national estimates
PRAMS Background and Goals

• Established in 1987 as part of an Infant Health Initiative

• Congressional funding provided to CDC to establish state-based programs

• Reduce maternal and infant morbidity and mortality
  - Maternal and infant health programs
  - Health policies
  - Maternal behaviors
Who Participates in the PRAMS Surveys?

• **Women who recently delivered a live infant**
  
  – Random sample from birth certificate records
  
  – Women are sampled when infants are 2 - 6 months old
  
  – State sample ~100-300 mothers each month
  ~1000–3000 women per year
    
    • VA sampled 1,145 in 2015
  
  – 47 states, NYC, Puerto Rico, DC, and Great Plains Tribal Chairmen’s Health Board
    
    • Representing approximately 83% of US live births
PRAMS in Virginia

• Began data collection in 2007
  – Reach response rate threshold (60%) in 2015
  – Oversample Richmond city, Thomas Jefferson health district

• Standard and Core questions
  – PRAMS Steering Committee advises on survey questions, uses and dissemination of data, making contacts to put data to use
  – Revisions are made to reflect guidelines or emerging issues, & improve the questionnaire
Virginia PRAMS Preliminary Zika Data Analysis

This data was collected from mothers of babies born May-September 2016

Z1. During your most recent pregnancy, how worried were you about getting infected with Zika virus?
Z2. At any time during your most recent pregnancy, did you talk with a doctor, nurse, or other health care worker about Zika virus?
Z3. During your most recent pregnancy, did you get a blood test for Zika virus?
Z4. During your most recent pregnancy, were you aware of recommendations that pregnant women should avoid travel to areas with Zika virus?
Z13. Did you think it was safe to use insect repellents with DEET during your pregnancy?
Z14. While you were pregnant, did you always take steps to ensure that small containers outside your home were drained or covered?

<table>
<thead>
<tr>
<th>Question Z1</th>
<th>Percent</th>
</tr>
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<tbody>
<tr>
<td>Very worried</td>
<td>27.6</td>
</tr>
<tr>
<td>Somewhat worried</td>
<td>34.7</td>
</tr>
<tr>
<td>Not at all worried</td>
<td>30.8</td>
</tr>
<tr>
<td>I had never heard of Zika virus during my most recent pregnancy</td>
<td>6.9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Z2</td>
<td>61.3</td>
<td>38.7</td>
<td>--</td>
</tr>
<tr>
<td>Z3</td>
<td>10.7</td>
<td>89.3</td>
<td>--</td>
</tr>
<tr>
<td>Z4</td>
<td>92.8</td>
<td>7.2</td>
<td>--</td>
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<tr>
<td>Z13</td>
<td>32.8</td>
<td>33.9</td>
<td>31.5</td>
</tr>
<tr>
<td>Z14</td>
<td>50.6</td>
<td>26.0</td>
<td>23.4</td>
</tr>
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</table>
People Involved in VA PRAMS

• Central Office- Office of Family Health Services; Division of Population Health Data
  – Coordinator and Epidemiologist

• Contract with Rutgers Bloustein Center for Survey Research for implementation

• Steering Committee Members
PRAMS Surveys

- Data collection primarily by mailed paper survey
- Survey booklets are 14 pages and around 85 questions in length
- Telephone follow-up
- Takes 20 - 30 minutes to complete
76. I’m going to read a list of Virginia programs. For each one, please tell me if you have heard of the program.

(PROBE: Have you heard of ___________________________?)

Program

a. Quit Now Virginia (1-800-QUIT-NOW)
b. 2-1-1 Virginia
c. TEXT4BABY
d. VA Department of Health Family Planning Clinics
e. Plan First/Family Planning Waiver
f. Care Connection for Children
g. Baby Care
h. Loving Steps/Healthy Start
i. Resource Mothers
j. Parents as Teachers
k. Home Instruction Program for Preschool Youngsters (HIPPY)
l. Nurse – Family Partnership (NFP)
m. Healthy Families
n. Part C Early Intervention
o. Project LINK
p. CHIP of VA
PRAMS Questionnaire Cycle

• PRAMS collects data in phases
  – Corresponds to questionnaire revision length and time in the field

• Phases usually last 3-5 years
  – Affected by various factors such as funding new sites, launching new data collection systems, or plans to do quality assessment

• Phase 6 data for 2009 – 2010 and 7 (2012-2014) are currently available for analysis

• Phase 7 data still being collected (2015 now available for VA)
Why do we only have data up through 2015?

Sampling
- Mothers are sampled from VA birth certificates
- Conducted by PRAMS data analyst monthly

Sample Sent to Rutgers
- A list of sampled mothers are sent to Rutgers research staff who then try to find contact information

Survey
- Rutgers attempt to contact mothers 3 times via mail, then by phone

Survey data sent to CDC
- At the end of the year, the survey data is sent to CDC to be weighted
- This means the CDC ensures the data is representative of ALL Virginia live births

Birth File sent to CDC
- When the birth file is finalized by Vital Statistics, it can be sent to the CDC for weighting

Final data received
- Once the data is weighted, the CDC sends a final file back to the PRAMS coordinator and data analyst
Why is PRAMS important?

• Collect population-based data
• Conduct comprehensive analyses
• Translate results from analyses
• Build capacity of states
Why share PRAMS data?

- PRAMS data informs Virginia’s Title V MCH Block Grant measures

Title V Measure
% of Infants placed to sleep on back (PRAMS)

LHD Priority
Safe Sleep

Moms answer “On his or her back”

Sample of moms answer PRAMS survey

57. In which one position do you most often lay your baby down to sleep now?
- On his or her side
- On his or her back
- On his or her stomach

Check ONE answer

56. Did a doctor, nurse, or other health care worker talk with you about how to lay your new baby down to sleep?
- No
- Yes

PRAMS Survey
Survey is dispersed to sample of moms

Action
Educate mothers on back to sleep and safe sleep environment
How can data from PRAMS be used?

- Increase Understanding
- Develop and modify existing programs
- Influence public policy
- Help health professionals incorporate latest research findings
- Monitor progress toward health goals
Unintended Births and Contraception

- PRAMS is the only source for unintended birth data in Virginia
- Unintended births associated with poorer birth outcomes
- Use of contraception could decrease unintended pregnancies
- Healthy People 2020 goal is to increase percent of intended pregnancy by 10%
VA PRAMS Unintended Pregnancy

• Thinking back to just before you got pregnant with your new baby, how did you feel about becoming pregnant?
  – I wanted to become pregnant:

<table>
<thead>
<tr>
<th>Year</th>
<th>Then/Sooner</th>
<th>Later/Did not want</th>
<th>Wasn’t sure</th>
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<tbody>
<tr>
<td>2013</td>
<td>60.47</td>
<td>28.69</td>
<td>10.84</td>
</tr>
<tr>
<td>2014</td>
<td>58.27</td>
<td>25.79</td>
<td>15.94</td>
</tr>
<tr>
<td>2015</td>
<td>56.10</td>
<td>28.80</td>
<td>15.10</td>
</tr>
</tbody>
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Data to Action Example

- According to VA PRAMS 2011 data
  - Less than a quarter of pregnant Medicaid recipients reported seeing a dentist
- 2014- Data was used to support the development of a statewide plan for oral health improvement: Virginia Oral Health Plan
- 2015- Governor issued executive order to fund dental coverage for all pregnant women on Medicaid (up through 2 months after delivery)

- To date, more than 14,000 pregnant women in Virginia have received dental services they would not have been eligible to have covered prior to the policy change
Impact of Virginia PRAMS Data: Expansion of Dental Coverage to Pregnant Medicaid Recipients

Summary

In Virginia, PRAMS data helped change policy that increased dental coverage for low-income women during and shortly after their pregnancy. In 2011, PRAMS data showed that less than a quarter (24%) of pregnant Medicaid recipients reported seeing a dentist. This data was used to support the development of a statewide plan for oral health improvement, the Virginia Oral Health Plan. In response, the Governor of Virginia issued an executive order to fund dental coverage for all pregnant women on Medicaid. In 2013, comprehensive dental coverage became available to all pregnant women on Medicaid, up through 2 months after delivery. To date, more than 14,000 pregnant women in Virginia have received dental services since this policy change. Virginia’s General Assembly provided funding in its state budget to ensure sustainability of dental coverage. Virginia PRAMS and state partners will continue to examine trends in oral health care during pregnancy among all women, including women receiving the expanded Medicaid coverage.

Challenge

Due to hormonal changes during pregnancy, women are at increased risk of gum disease and dental decay, which also increases their risk of preterm birth. It is essential that pregnant women have access to oral health care. Prior to 2015, Medicaid coverage did not provide preventative dental benefits for pregnant women in Virginia. The Virginia PRAMS Project analyzed data from 2010-2011 on access to dental care during pregnancy. PRAMS data showed 45% of all new mothers in Virginia reported seeing a dentist during their pregnancy. However, among Medicaid recipients, only about one in four (25%) reported seeing a dentist during pregnancy.

Solution

PRAMS oral health data were included in Virginia’s Oral Health Burden Report, outlining the state of oral disease in Virginia. The Virginia Oral Health Coalition (VaOHC), a coalition of dental providers, educators, healthcare providers, and community members, supports the Virginia Oral Health Plan. VaOHC is leading grassroots advocacy efforts and legislative outreach to improve oral health in Virginia.

In the 2014 General Assembly, The VaOHC announced its legislative agenda, prioritizing a state budget amendment to add dental benefits for pregnant women enrolled in Medicaid. They spearheaded a campaign, including a legislative meet-and-greet and a webinar for stakeholders, to raise awareness among Virginia’s

What is PRAMS?

PRAMS is a joint surveillance project between the Centers for Disease Control and Prevention (CDC) and state health departments. It is the only surveillance system in the US that collects state population data on maternal attitudes and experiences before, during, and shortly after pregnancy.

Since 1987, PRAMS data have been used by researchers, state government, and policy makers to detect emerging issues, guide state programs, and introduce policies that address problems such as prenatal care, preterm birth, low birth weight, safe sleep, oral health, gestational diabetes, influenza, infant death, and maternal death.

In 2017, PRAMS has expanded to 51 sites, including 47 states, the District of Columbia, New York City, Puerto Rico, and the Great Plains Tribal Chairmen’s Health Board.
"Thank you, I appreciate the opportunity to provide my feedback on experiences during/before/after my pregnancy. This is important work..."

"Very happy to participate. Hope my answers are helpful!"

"I was surprised to see the list of mother/baby resources available (#76) in Virginia; I had no knowledge of most of these services & I work as a health care provider in Virginia. I would like to see more information (referral info) about these services be provided to urgent care/family practice offices, as we often care for patients in need of such resources."

"... it was my pleasure taking your survey."

"I've never heard of PRAMS before but this is pretty cool."
VA PRAMS Information

• Data tables

• More information about US PRAMS
  – https://www.cdc.gov/prams/index.htm

• More information about VA PRAMS

• VA PRAMS data analyst and interim coordinator
  – PRAMS@vdh.virginia.gov
Thank you!