



Kansas PRAMS

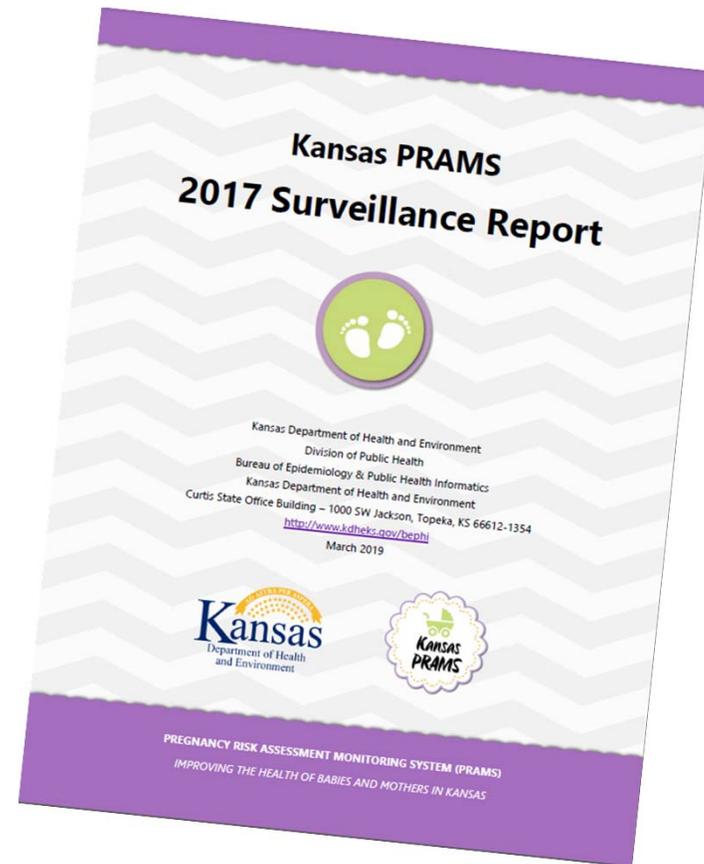
Lisa Williams, Project Coordinator

Brandi Markert, Epidemiologist

Results from 2017

Results from 2017 are here!

- ▶ The **2017 Surveillance Report** is available on the KDHE website!





Results from 2017

Population

- ▶ **995** Kansas mothers who gave birth to a live infant in Kansas (representing a population of **34,401**)

Topics to discuss

- Health insurance
- Pregnancy intent
- Prenatal care
- Substance use
- Safe sleep
- Postpartum depression
- Home visiting services



Results from 2017

Health insurance

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Health insurance

PRAMS questions about health insurance

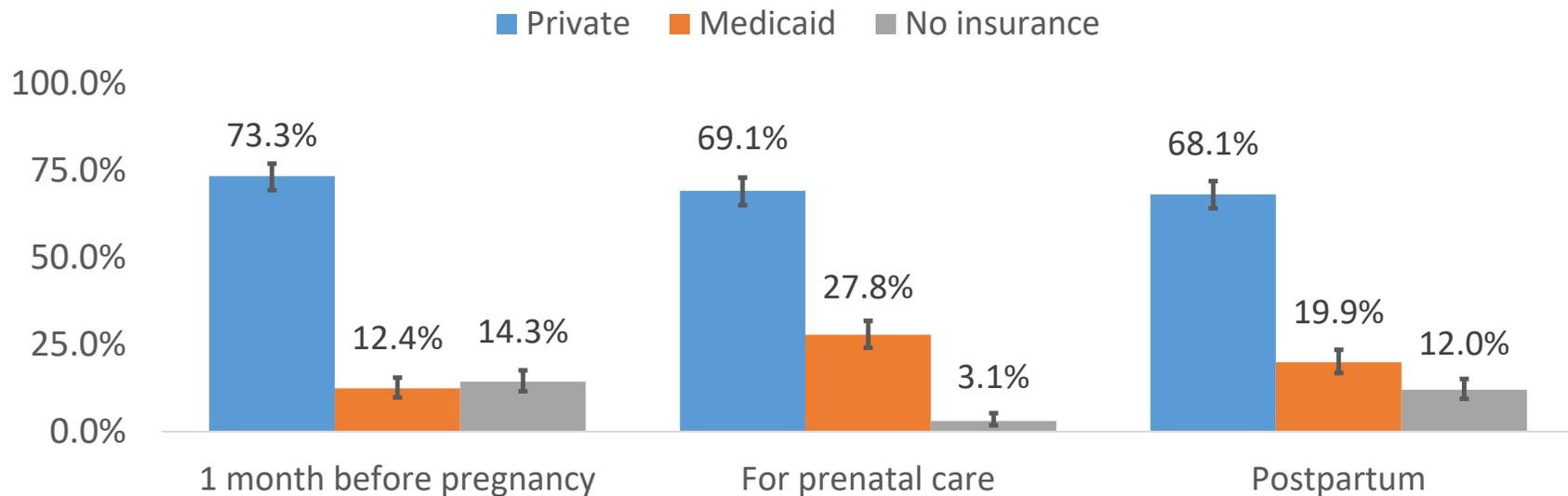
- ▶ Health insurance status:
 - During the month before becoming pregnant
 - For prenatal care
 - At the time of completing the survey

Reasons for not having health insurance during the month before pregnancy



Health insurance

Health insurance status before, during, and after pregnancy, among Kansas women who had a live birth in 2017



Private = Private only, both Medicaid & private, any other insurance in combination with private, military health insurance

Medicaid = Medicaid

No insurance = No insurance or Indian Health Service only

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Reasons for not having health insurance, during the month before pregnancy

Among those who specified not having health insurance, the most frequently selected reasons were:

- ▶ • **70.9%** said health insurance was too expensive (95% CI: 59.5% to 80.2%)
- **25.8%** said that they could not get health insurance from work (95% CI: 17.2% to 36.7%)
- **22.1%** said their income was too high to qualify for Medicaid (95% CI: 14.3% to 32.6%)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Results from 2017

Pregnancy intention

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Pregnancy intention

Pregnancy intention

Question 13	Weighted %	95% CI
Thoughts about becoming pregnant, just before pregnancy:		
Wanted to be pregnant later	21.6	18.4 - 25.3
Wanted to be pregnant sooner	14.3	11.7 - 17.3
Wanted to be pregnant then	45.9	41.9 - 50.0
Did not want to be pregnant then or at any time in the future	5.1	3.6 - 7.1
Not sure	13.1	10.5 - 16.2

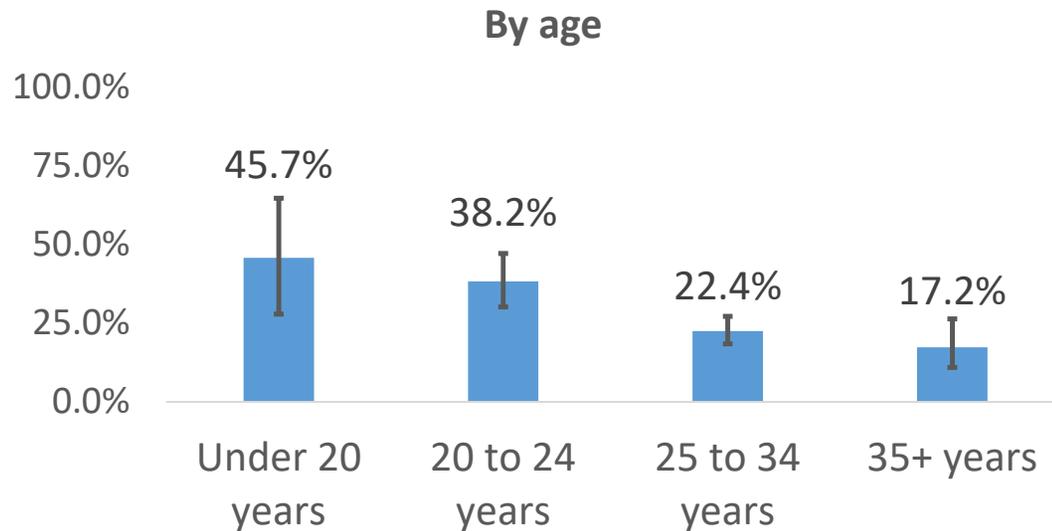
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Pregnancy intention

Proportion of mothers who had unintended pregnancies:

Overall: 26.7% (95% CI: 23.2% to 30.5%)



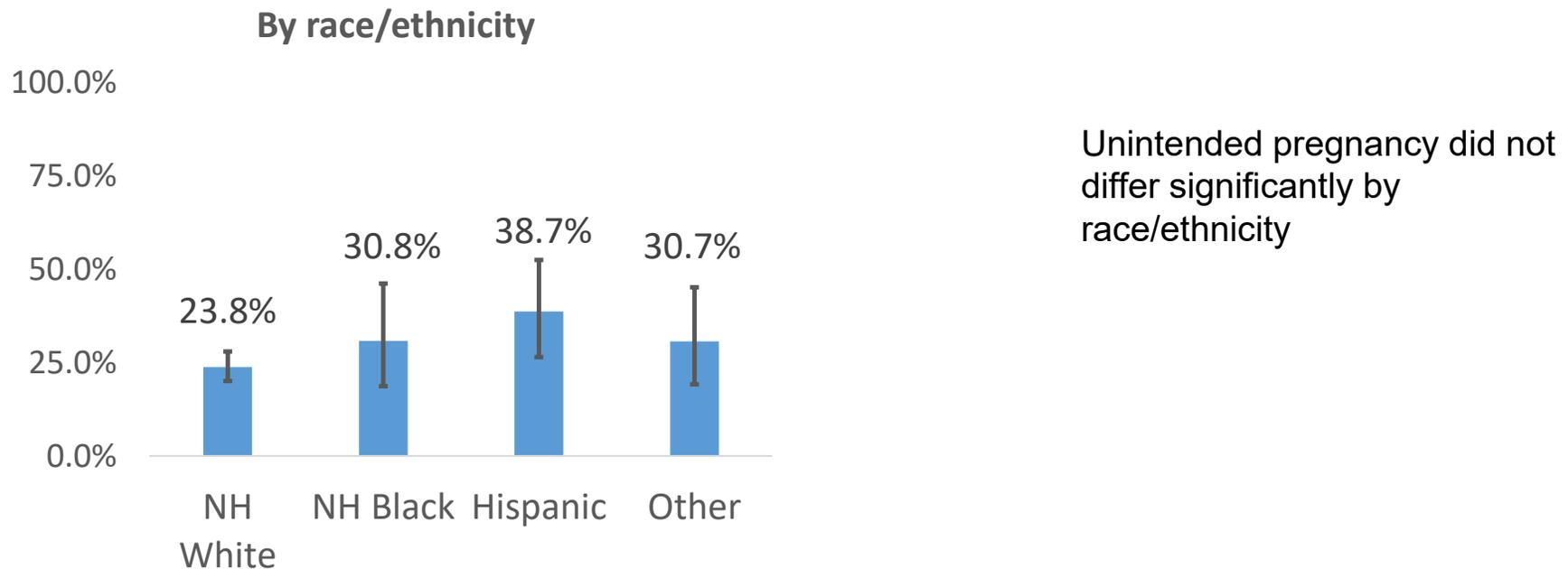
Unintended pregnancy was less prevalent among women ages 25 and older

Pregnancy was considered unintended if the mother had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Pregnancy intention

Proportion of mothers who had unintended pregnancies:

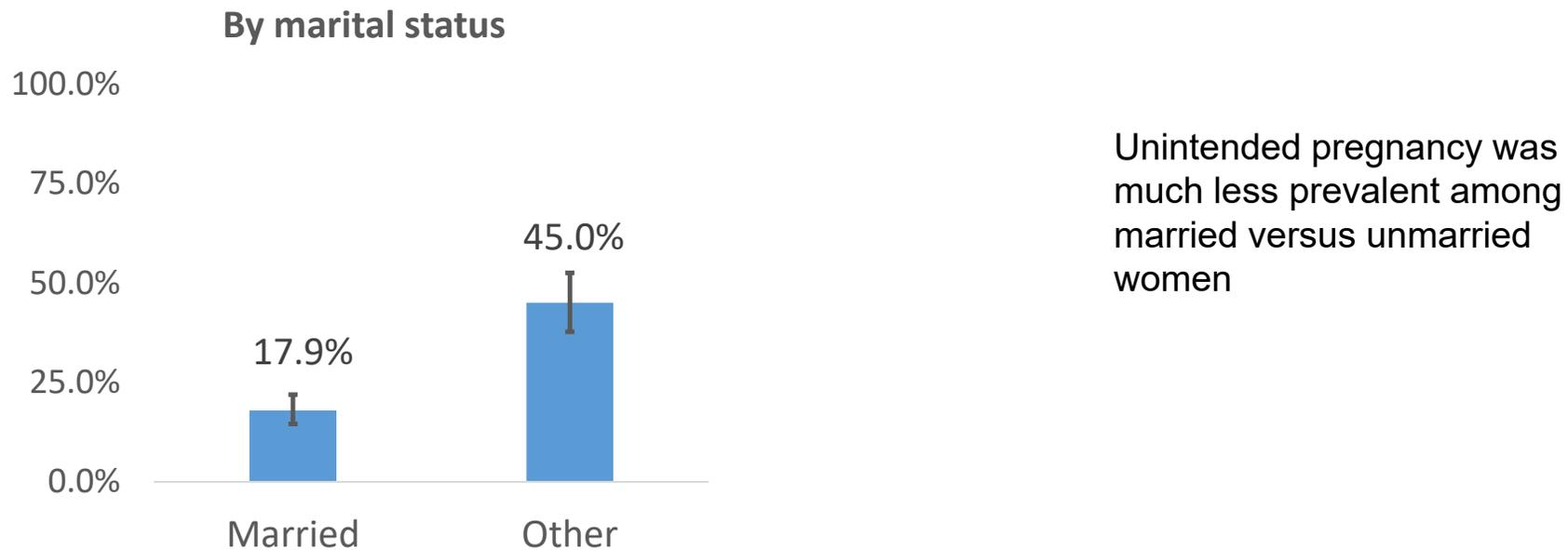


Pregnancy was considered unintended if the mother had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Pregnancy intention

Proportion of mothers who had unintended pregnancies:



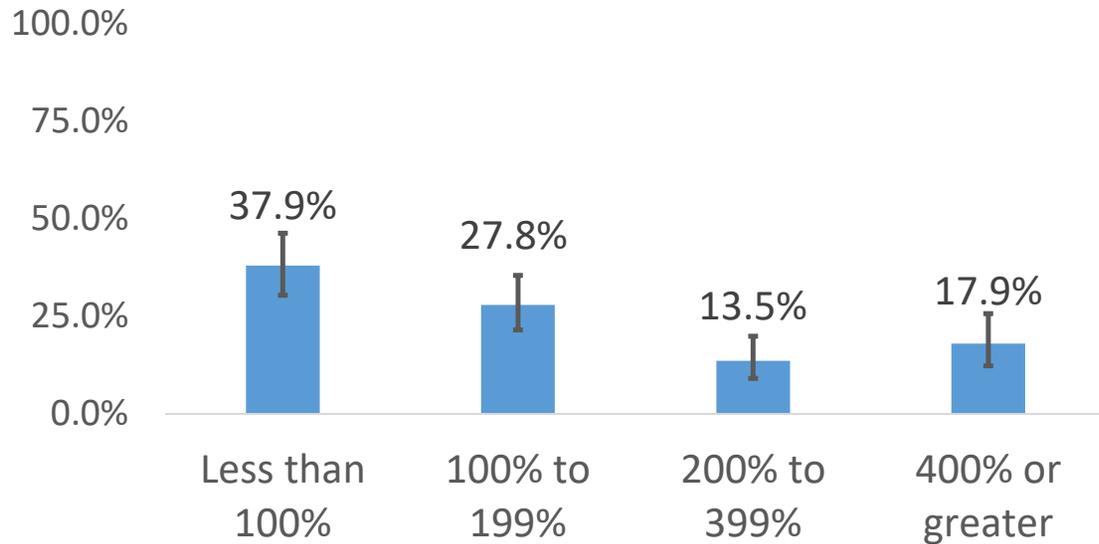
Pregnancy was considered unintended if the mother had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Pregnancy intention

Proportion of mothers who had unintended pregnancies:

By federal poverty level



Unintended pregnancy was much less prevalent among those with higher income versus those with the lowest income

(At or greater than 200% of the FPL, versus less than 100% of the FPL)

Pregnancy was considered unintended if the mother had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Results from 2017

Prenatal care

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Prenatal care



Prenatal care

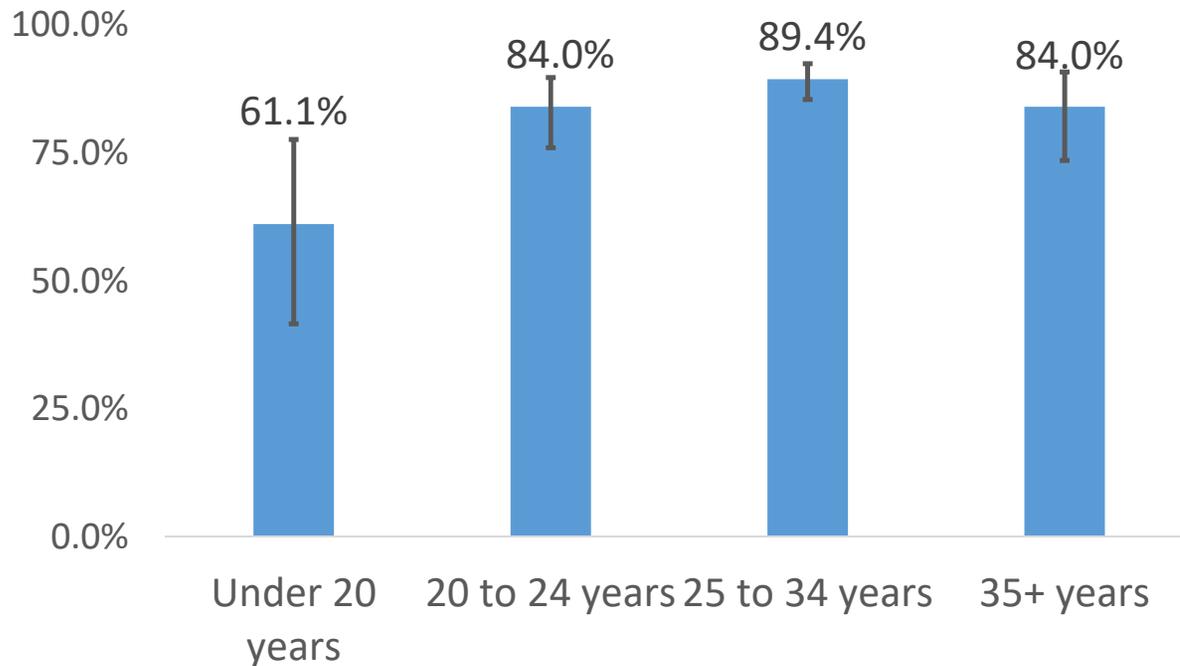
Question 14	Weighted %	95% CI
Started prenatal care during the first trimester:		
Yes	85.7	82.4 - 88.5
No	13.7	11.0 - 17.0
Did not receive prenatal care*	0.6	0.2 - 1.7

*This percentage may not be statistically reliable. Interpret with caution.
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Prenatal care

Proportion of mothers who received care during the first trimester:

By age

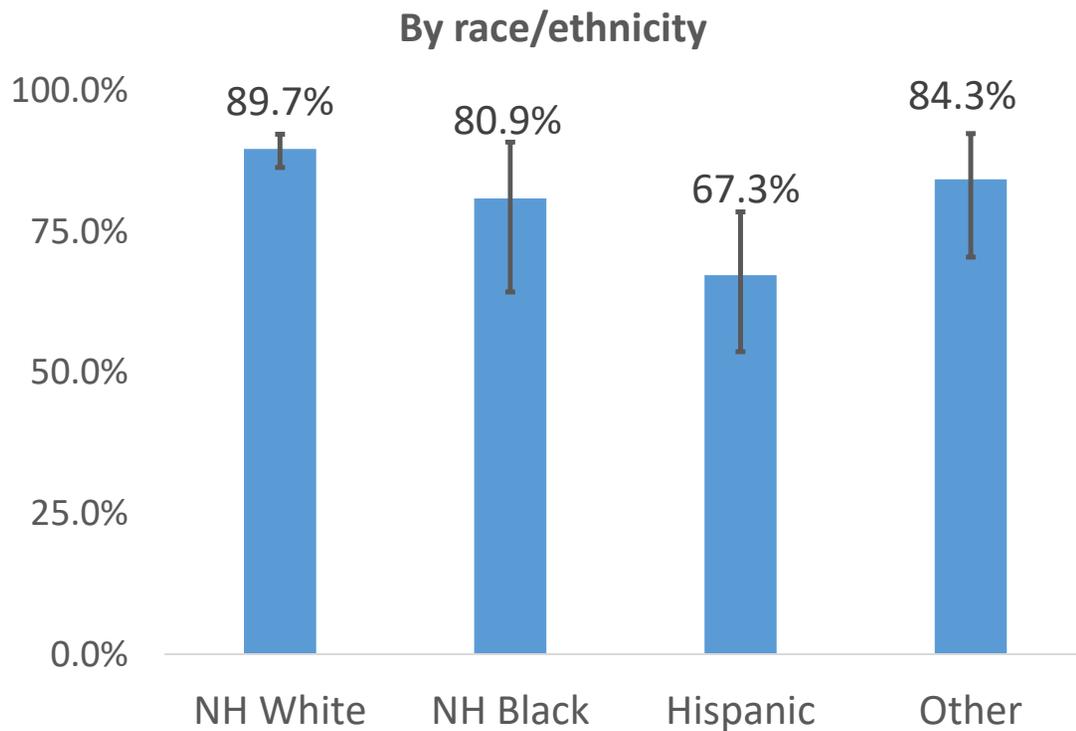


A greater proportion of mothers aged 25 to 34 years received care during the first trimester, compared to mothers under 20 years old

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Prenatal care

Proportion of mothers who received care during the first trimester:

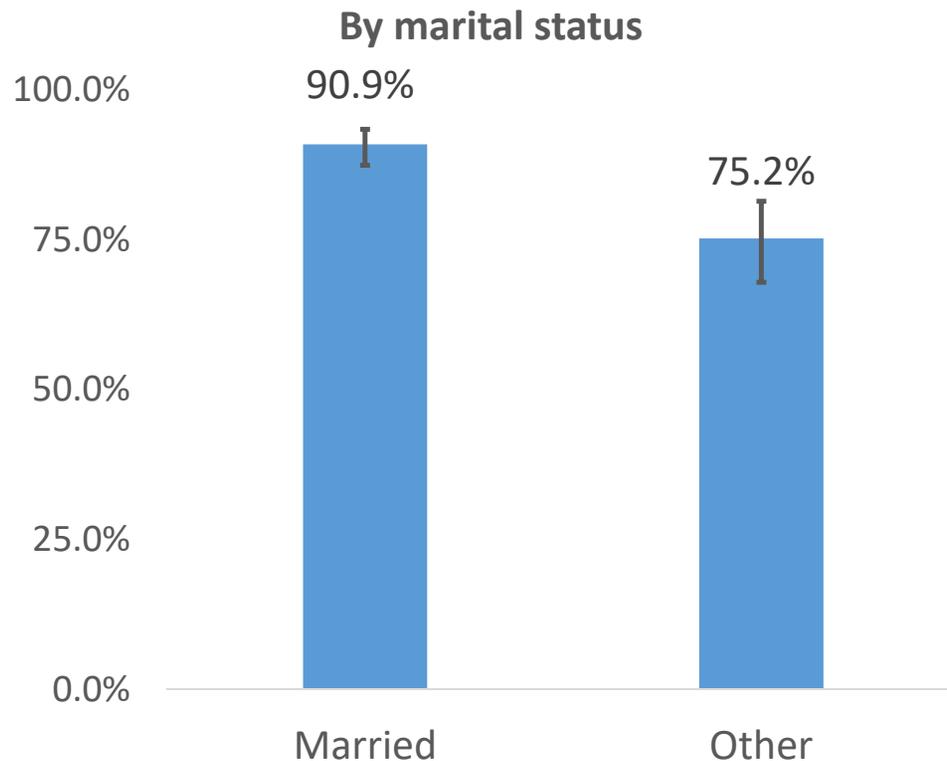


Hispanic mothers had a lower prevalence of receiving care during the first trimester, compared to Non-Hispanic White mothers

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Prenatal care

Proportion of mothers who received care during the first trimester:

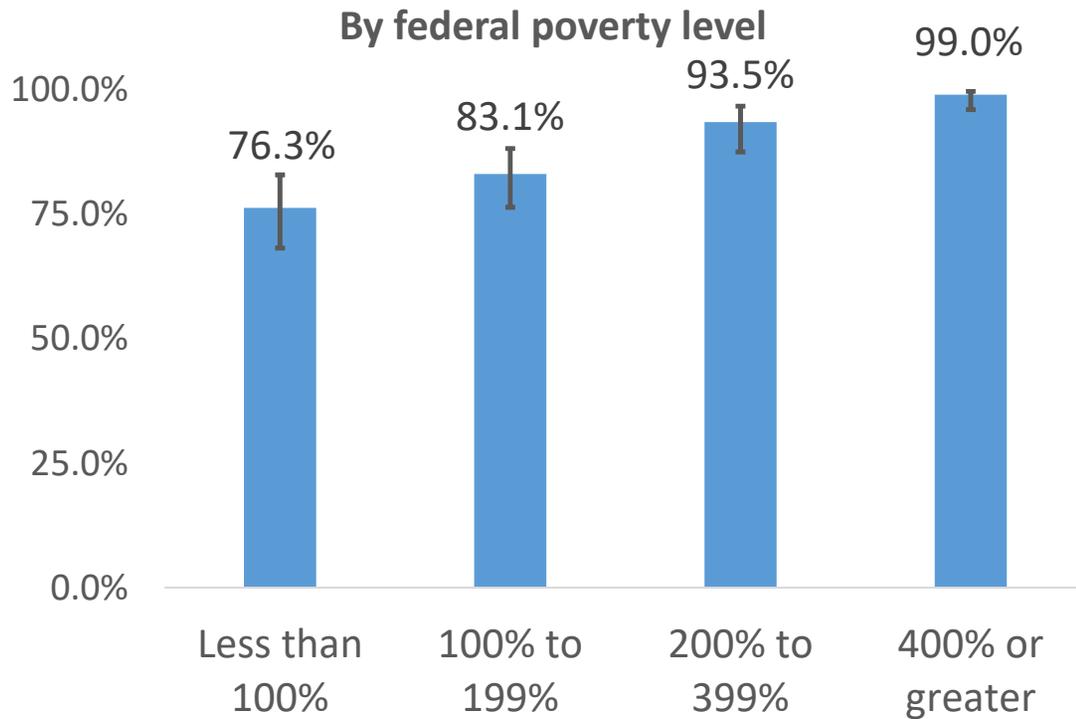


A greater proportion of married mothers received prenatal care during the first trimester, compared to unmarried mothers

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Prenatal care

Proportion of mothers who received care during the first trimester:



A higher proportion of mothers with higher income received prenatal care during the first trimester, compared to mothers with lower income

(At 400% of the FPL or greater, versus less than 200% of the FPL)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Received prenatal care as early as desired?

Question 15	Weighted %	95% CI
Received prenatal care as early as desired:		
No	13.4	10.8 - 16.5
Yes	86.6	83.5 - 89.2

Excludes respondents who indicated not having had prenatal care.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Barriers to obtaining prenatal care as early as desired:

The most frequently selected barriers included:

- **40.1%** did not know they were pregnant (95% CI: 29.4% to 52.0%)
- **40.0%** could not get an appointment at the desired time (95% CI: 29.3% to 51.8%)
- **31.6%** said that their doctor or health plan would not start care as early as desired (95% CI: 22.1% to 43.0%)
- **25.4%** did not have enough money or insurance (95% CI: 16.5% to 36.9%)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Results from 2017

Substance use

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Smoking before, during, and after pregnancy

- ▶ • **23.7%** had smoked in the past 2 years (95% CI: 20.4% to 27.3%)
- **20.6%** smoked in the 3 months before pregnancy (95% CI: 17.5% to 24.1%)
- **9.1%** smoked in the last 3 months of pregnancy (95% CI: 7.0% to 11.8%)
- **12.7%** were current smokers (95% CI: 10.3% to 15.7%)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Tobacco use

Changes in smoking during pregnancy

Changes in tobacco use during pregnancy:	Weighted %	95% CI
Non-smoker	79.4	75.9 - 82.5
Smoker who quit	11.5	9.1 - 14.4
Number of cigarettes reduced	4.9	3.4 - 7.0
Number of cigarettes increased or stayed the same	4.2	2.9 - 6.2

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Barriers to quitting smoking

- ▶ Among those who smoked in the 3 months prior to pregnancy, the most frequently reported barriers were:
 - **67.3%** indicated cigarette cravings as a barrier (95% CI: 58.1% to 75.3%)
 - **64.6%** indicated that quitting would mean loss of a way to handle stress (95% CI: 55.4% to 72.8%)
 - **61.8%** indicated other people smoking around them as a barrier (95% CI: 52.6% to 70.2%)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Tobacco use

Other tobacco products

Question 32	Weighted %	95% CI
Mother used any of these in the past 2 years: (% yes)		
E-cigarettes or other electronic nicotine products	8.9	6.8 - 11.7
Hookah	4.2	2.9 - 6.2
Chewing tobacco, snuff, snus, or dip*	1.0	0.4 - 2.5

* This percentage may be statistically unreliable. Interpret with caution.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Alcohol use

Alcohol use

Questions 35 & 36	Weighted %	95% CI
Consumed alcohol in the past 2 years:		
No	25.1	21.7 - 28.9
Yes	74.9	71.1 - 78.3
Consumed alcohol in the 3 months before pregnancy:		
No	36.7	32.8 - 40.7
Yes	63.3	59.3 - 67.2

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Use of other substances

Use of other substances, during pregnancy

- ▶ The most commonly used substances other than tobacco or alcohol:
 - **77.4%** had used over-the-counter pain relievers, such as aspirin (95% CI: 73.8% to 80.6%)
 - **7.9%** had used prescription pain relievers, such as codeine (95% CI: 6.0% to 10.3%)
 - **3.6%** had used marijuana (95% CI: 2.3% to 5.5%)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Results from 2017

Safe sleep

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Safe sleep

Infant's usual sleep position

Question 50	Weighted %	95% CI
Infant's most frequent sleeping position:		
Mostly on side	10.6	8.3 - 13.5
Mostly on back	80.2	76.6 - 83.4
Mostly on stomach	7.2	5.3 - 9.8
Combination of positions^a	2.0	1.0 - 3.6

^a A small percentage of respondents selected more than one position, such as “side and back”, “side and stomach”, “back and stomach”, or “all 3 positions”. This percentage may be statistically unreliable.

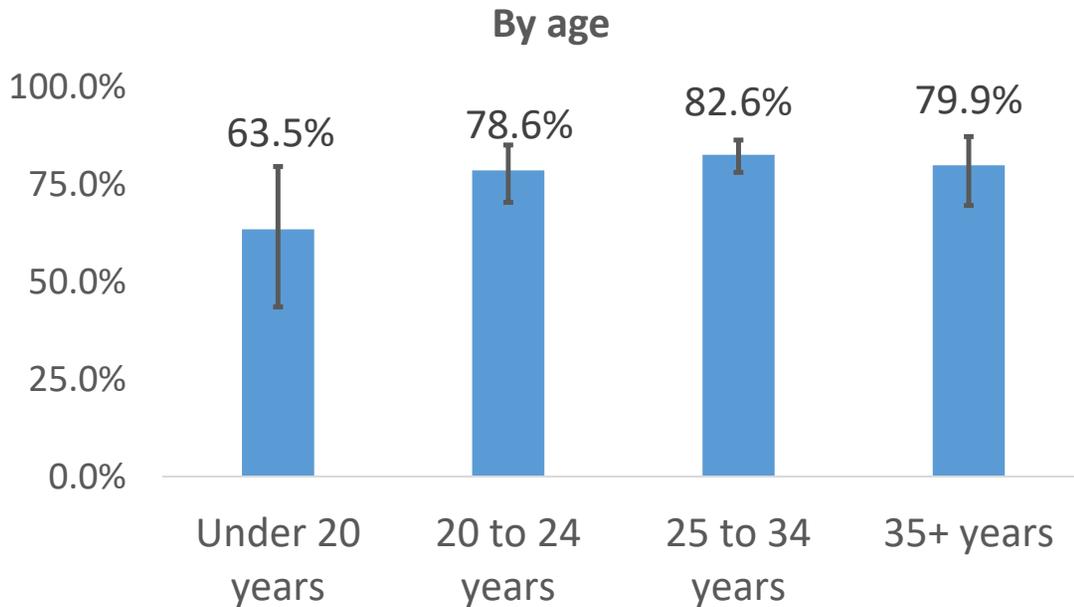
Excludes respondents whose infants were not alive or living with them.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Infant's usual sleep position

Proportion of mothers who usually placed infants to sleep on their backs:

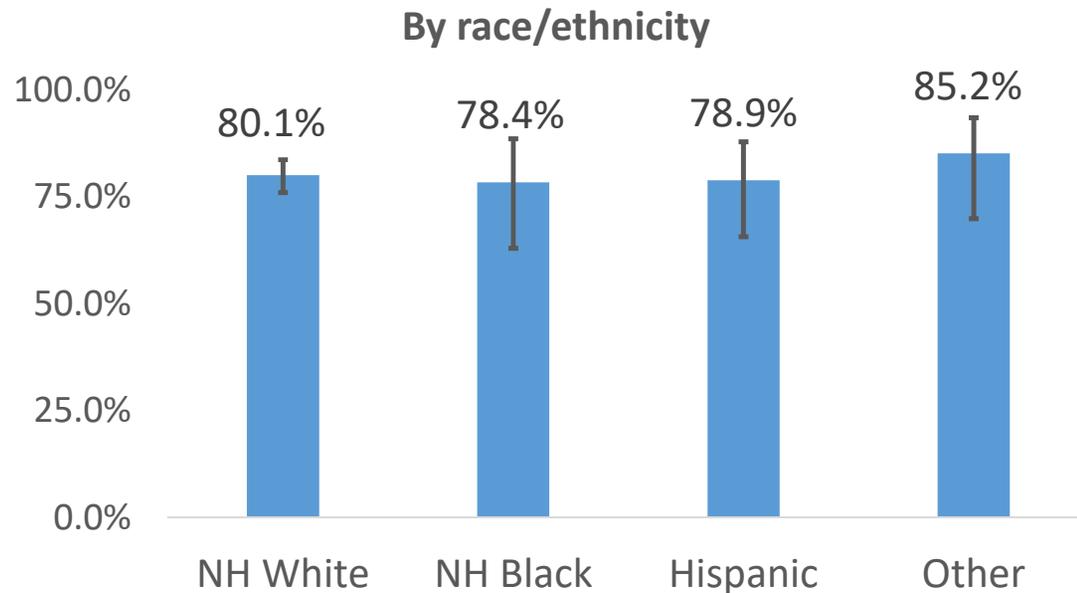


The proportion of mothers placing their infants to sleep on their backs was similar across all age groups

Excludes mothers whose infants were not alive or currently living with them.
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Infant's usual sleep position

Proportion of mothers who usually placed infants to sleep on their backs:

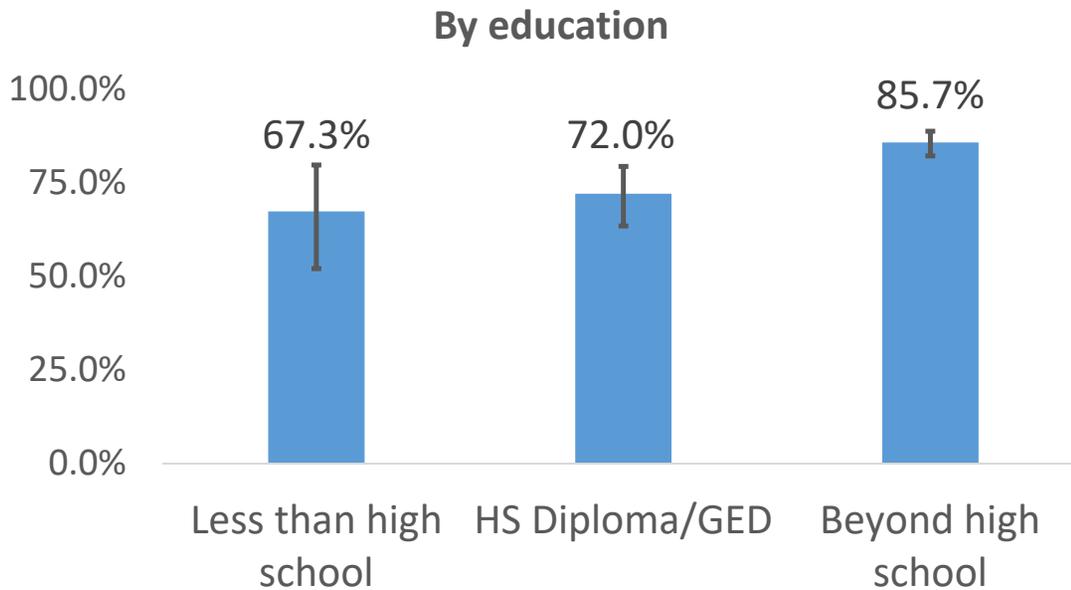


The proportion of mothers placing their infants to sleep on their backs was similar across race/ethnicity

Excludes mothers whose infants were not alive or currently living with them.
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Infant's usual sleep position

Proportion of mothers who usually placed infants to sleep on their backs:

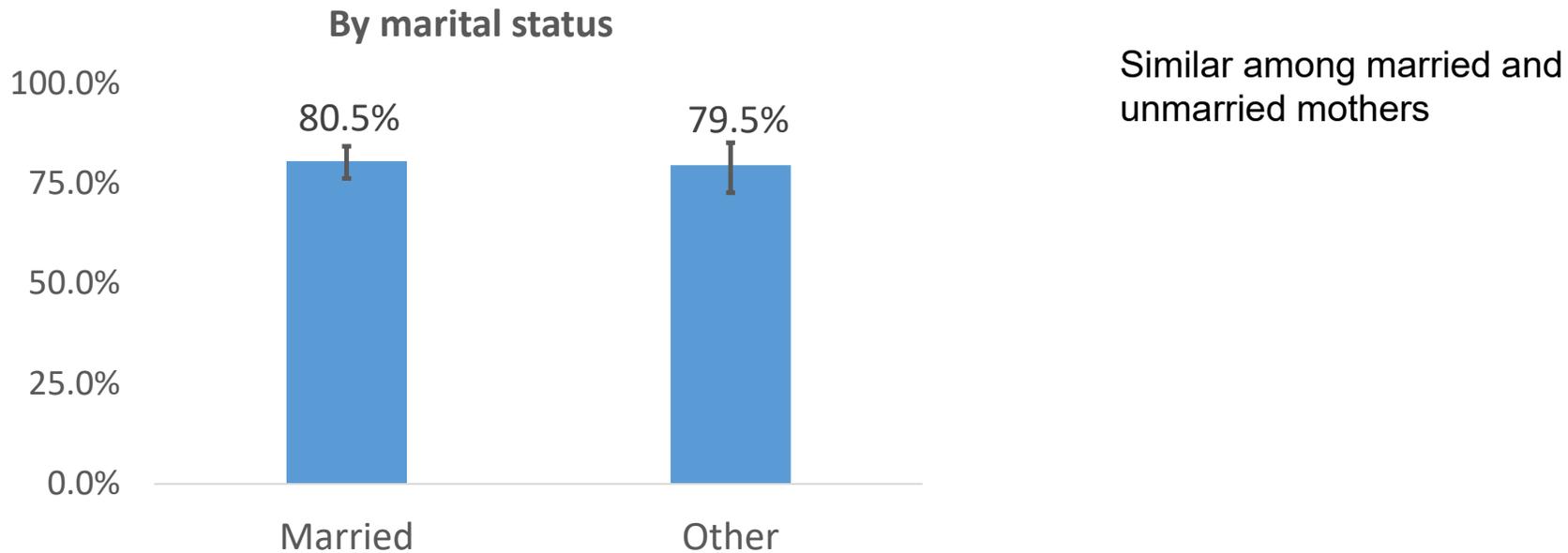


A greater proportion of mothers who had formal education beyond high school laid their infants to sleep on their backs, compared to mothers with a high school diploma or less

Excludes mothers whose infants were not alive or currently living with them.
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Infant's usual sleep position

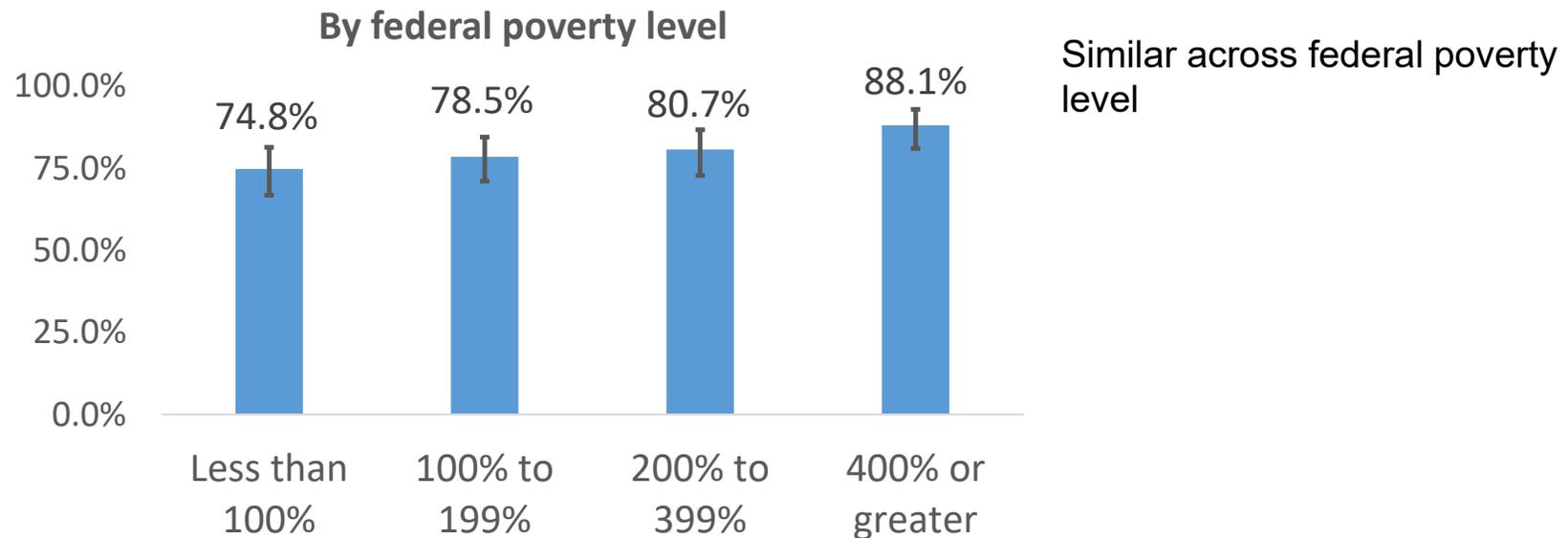
Proportion of mothers who usually placed infants to sleep on their backs:



Excludes mothers whose infants were not alive or currently living with them.
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Infant's usual sleep position

Proportion of mothers who usually placed infants to sleep on their backs:



Excludes mothers whose infants were not alive or currently living with them.
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Safe sleep

Frequency of solo sleeping

Question 51	Weighted %	95% CI
In the past 2 weeks, how often infant slept alone in his/her own crib or bed:		
Always	57.1	53.0 - 61.1
Often	20.5	17.4 - 24.0
Sometimes	7.8	5.8 - 10.4
Rarely	5.8	4.1 - 8.1
Never	8.8	6.7 - 11.5

Excludes respondents whose infants were not alive or living with them.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Ways the infant slept, during the past 2 weeks:

- ▶ • **88.5%** slept in a crib, bassinet, or pack and play (95% CI: 85.5% to 91.0%)
- **25.8%** slept on a twin-size or larger mattress or bed (95% CI: 22.2% to 29.7%)
- **45.3%** slept in an infant car seat or swing (95% CI: 41.2% to 49.4%)
- **49.4%** slept with a blanket (95% CI: 45.3% to 53.6%)
- **8.1%** slept with toys, cushions, or pillows (95% CI: 6.1% to 10.8%)

Read more about safe sleep in the PRAMS report!

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Results from 2017

Postpartum depression

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Postpartum depression

Postpartum depression

The PRAMS questionnaire contains two questions that attempt to gauge mothers' potential for having postpartum depression:

- Since your new baby was born, how often have you felt down, depressed, or hopeless?
- Since your new baby was born, how often have you had little interest or little pleasure in things you usually enjoyed?

Depression was indicated if mothers answered "often" or "always" to one or both questions.



Postpartum depression

Postpartum depression

Approximately 1 in 8 mothers (**12.4%**) were indicated for postpartum depression.

Questions 62-63	Weighted %	95% CI
Depression indicator		
No	87.6	84.6 - 90.1
Yes	12.4	9.9 - 15.4

Depression is indicated if the mother answered “always” or “often” to one or both questions about depression.

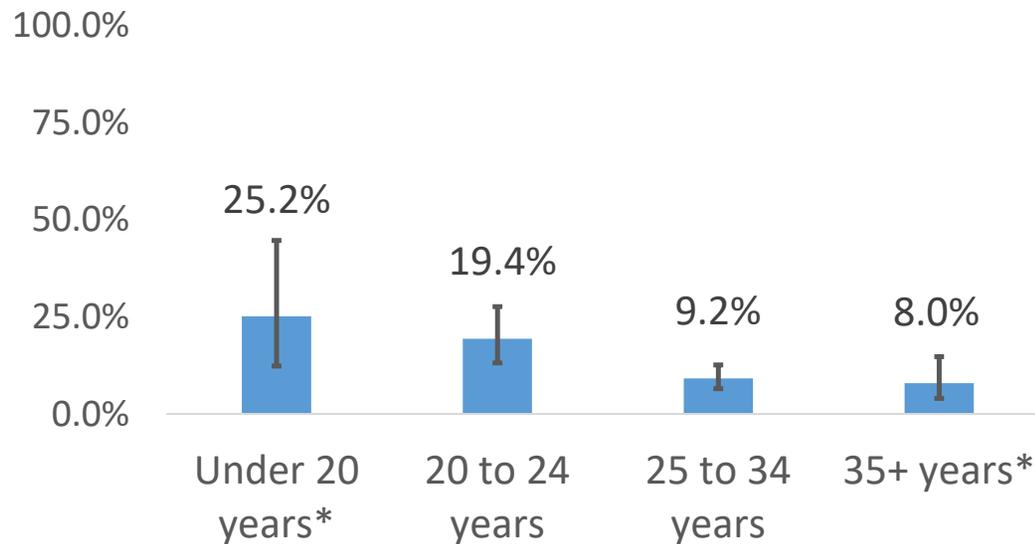
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Postpartum depression

Postpartum depression

By age



Prevalence was slightly lower among mothers aged 25 to 34, compared to mothers aged 20 to 24

However, note wide confidence intervals for some groups

* This estimate may be statistically unreliable. Interpret with caution.

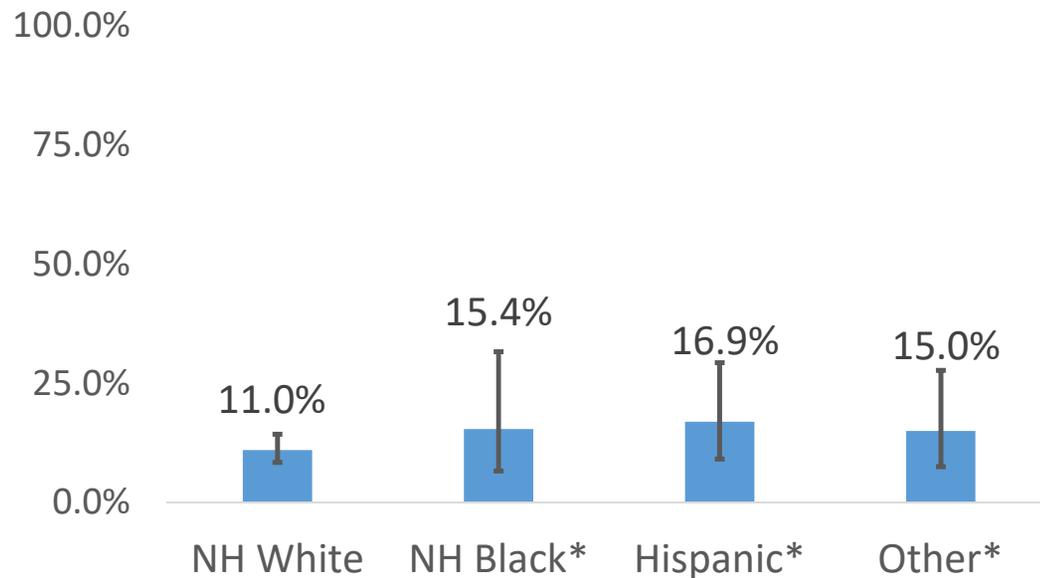
Depression is indicated if mothers answered “always” or “often” to one or both questions about depression.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Postpartum depression

Postpartum depression

By race/ethnicity



Prevalence was similar across race/ethnicity

However, note wide confidence intervals for some groups

* This estimate may be statistically unreliable. Interpret with caution.

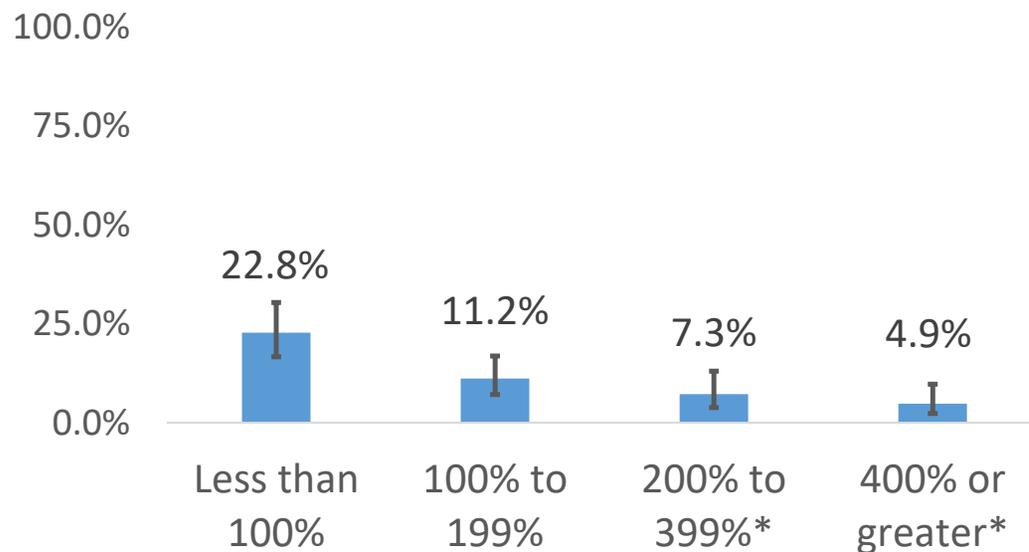
Depression is indicated if mothers answered “always” or “often” to one or both questions about depression.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Postpartum depression

Postpartum depression

By federal poverty level



Prevalence appeared to be higher among lower-income mothers versus higher-income mothers

However, note wide confidence intervals for some groups

* This estimate may be statistically unreliable. Interpret with caution.

Depression is indicated if mothers answered “always” or “often” to one or both questions about depression.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Postpartum depression

Access to care for depression after pregnancy

Question 76	Weighted %	95% CI
Since delivery, mother thought she needed treatment or counseling for depression, but did not get it:		
No	87.0	84.0 - 89.6
Yes	13.0	10.4 - 16.0

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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Postpartum depression

Reasons for not getting help for depression:

Among those who indicated not getting help, even though they felt they needed it:

- ▶ • **26.3%** could not find a provider they liked (95% CI: 16.7% to 38.8%)
- **66.6%** felt that it was too difficult or overwhelming (95% CI: 54.8% to 76.6%)
- **56.9%** were worried about the cost or could not afford it (95% CI: 44.8% to 68.3%)
- **46.1%** did not have time because of a job, childcare, or another commitment (95% CI: 34.6% to 58.0%)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Results from 2017

Home visiting services

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Home visiting services

Home visiting services during pregnancy

Questions 70-71	Weighted %	95% CI
During most recent pregnancy, mother was offered home visiting services:		
No	83.7	80.4 - 86.5
Yes	16.3	13.5 - 19.6
Mother accepted the offer of home visiting services:		
No	55.4	45.1 - 65.2
Yes	44.6	34.8 - 54.9

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

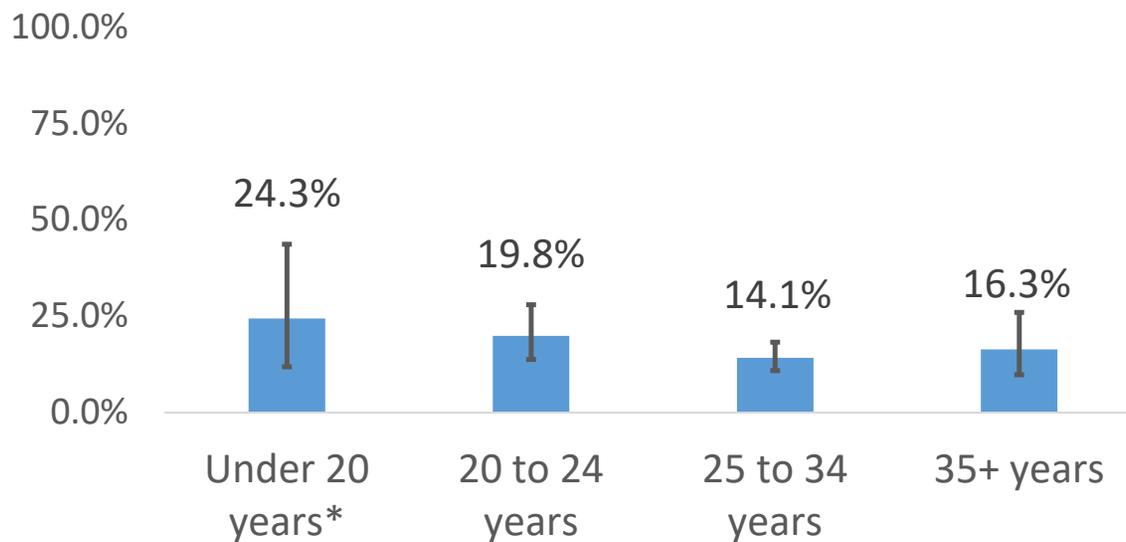
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Home visiting services

Home visiting services

Proportion of mothers who were offered home visiting services:

By age



Similar across age groups

However, note wide confidence interval representing mothers less than 20 years old

This estimate may be statistically unreliable. Interpret with caution.

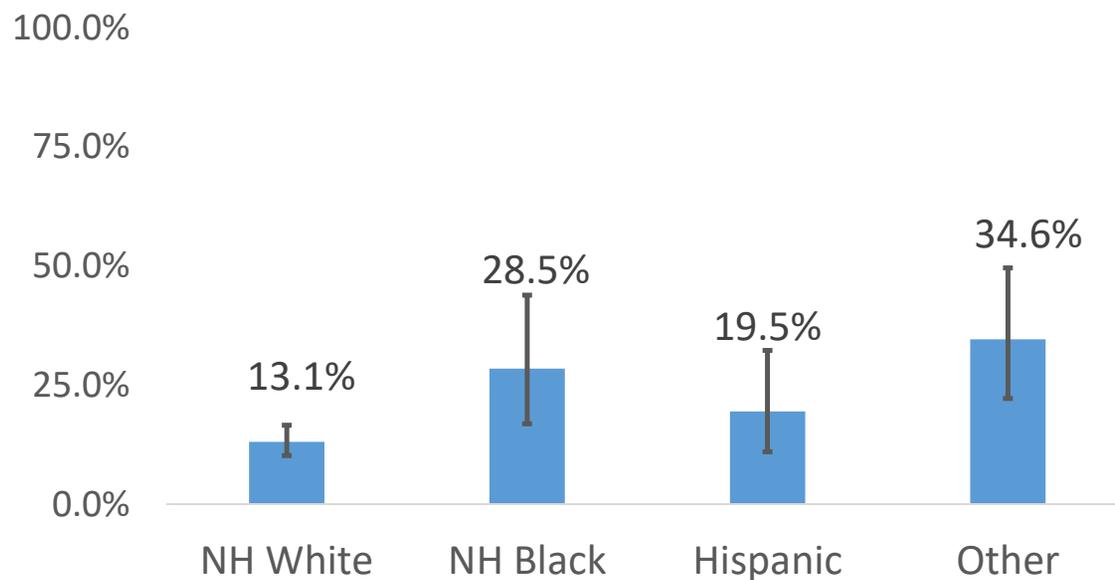
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Home visiting services

Home visiting services

Proportion of mothers who were offered home visiting services:

By race/ethnicity



More Non-Hispanic Black mothers and mothers of other race/ethnicity were offered home visiting services, compared to Non-Hispanic White mothers

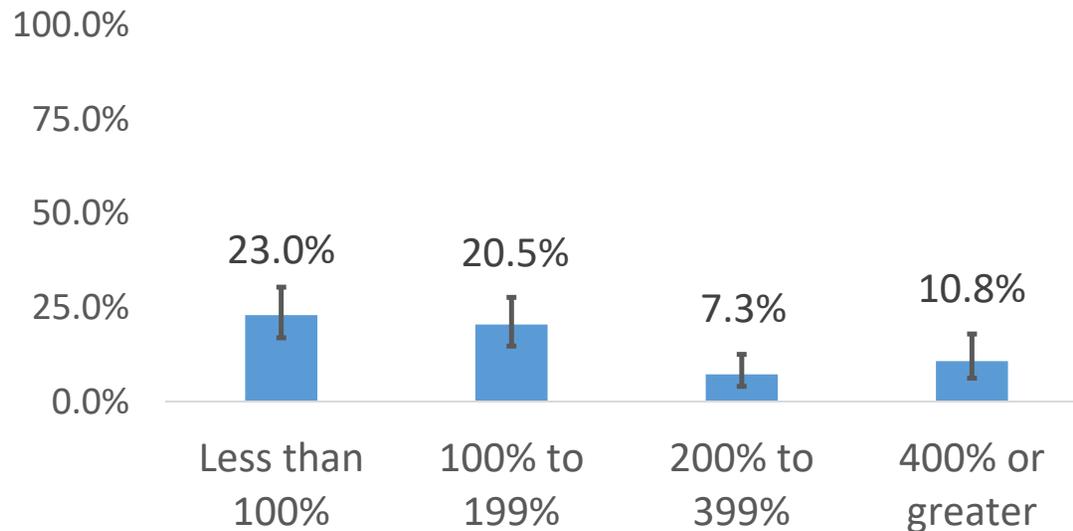
Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

Home visiting services

Home visiting services

Proportion of mothers who were offered home visiting services:

By federal poverty level



More lower-income women were offered home visiting services, compared to higher-income women

(Significant difference between women at less than 200% of the FPL, versus between 200% and 399% of the FPL)

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017



Home visiting services

Reasons for refusing home visiting services

Among those who refused:

- ▶ • **71.9%** did not think they needed home visiting services (95% CI: 57.8% to 82.7%)
- **11.3%*** did not understand how it would help them (95% CI: 5.3% to 22.7%)
- **7.5%*** did not want anyone in their homes (95% CI: 2.9% to 18.0%)
- **14.1%*** gave some other reason (95% CI: 6.6% to 27.7%)

* This estimate may be statistically unreliable. Interpret with caution.

Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017

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For more information

Need more information?

- ▶ • Check out the Surveillance Report!

- Request data!



Requesting data

Want to request data?

- ▶ Data requests are fulfilled by KDHE's Bureau of Epidemiology & Public Health Informatics

Webpage:

http://www.kdheks.gov/phi/data_requests.htm



Requesting data

Examples of information that PRAMS can provide

- ▶ • Outcomes by different demographics
 - race/ethnicity, age, WIC status, insurance status, rural/urban residence
- Outcomes by different lifestyle or environmental factors
 - stressful life experiences, basic needs, substance use
- Variables from the birth certificate



Requesting data

Some caveats

- ▶ • Cannot provide sub-state data at this time (i.e., at the county level)
- Some questionnaire items yielded very few responses
 - Breakouts by demographics or other factors may not be possible for those items



Other PRAMS updates

Other news:

- ▶ • We began Year 3 of data collection this month!
- We have also implemented two new supplements to the PRAMS questionnaire:
 - **Disability supplement**
 - 6 questions
 - Implemented in January, with the October 2018 batch
 - **Opioid supplement**
 - 13 questions
 - Implemented in April, with the January 2019 batch



Contact Kansas PRAMS staff

Thank you! Questions?

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