

Pregnancy Risk Assessment Monitoring System (PRAMS)

Coordinator:

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State Website: [PRAMS \(ky.gov\)](https://prams.ky.gov)

National Website: <http://www.cdc.gov/PRAMS>

Why is it used?

- To increase understanding of maternal behaviors and experiences and their relationship to adverse pregnancy outcomes.
- To develop new maternal and child health programs and modify existing programs.
- To influence public health policy.
- To help health professionals incorporate the latest research findings into their standards of practice.
- To monitor progress toward local, state and national health objectives and goals.
- To provide data not available from other sources about pregnancy and the first few months after birth.
- To capture and investigate emerging maternal and child health issues.
- To evaluate health disparities.

What data is collected?

- State-specific, population-based data on maternal attitudes and experiences before, during and shortly after pregnancy.
- Data on perinatal maternal behavior and experiences that may be associated with adverse birth outcomes like smoking and oral health.
- Data is collected on a variety of topics including:
 - Demographics including race, age, education level, income and marital status.
 - Information about the mother's access to prenatal care, employment status, insurance status and quality of prenatal care.
 - Medical problems during pregnancy.
 - Information about the birth, infant sleeping position and whether breastfeeding or bottle-fed.

How is data collected?

- Mixed mode system of mail, telephone and web surveys.
- Survey distribution cycle is conducted over a period of three to six months with participant samples drawn each month.
 - The samples are derived from the live birth certificate files and are randomly generated to include women who gave birth three to six months prior to sample selection.



- Three types of questions available for use include core questions that are asked by all states, standardized questions that states may choose to use, and state-added questions related to the health needs of a particular state.

Data Strengths:

- Designed to supplement vital records data.
- Provides state-specific data on maternal behaviors and experiences to be used for planning and assessing perinatal health programs.
- Uses standardized collection methods.
- Provides data on health indicators not collected by other surveillance systems such as information about preterm births, low birth weight, infant mortality, breastfeeding and pregnancy intent.

Data Limitations:

- It is possible that recall bias may impact the accuracy of the data due to the mother's ability to recall the past events.
 - To alleviate this bias, calendars are included with survey mailings to help the mother develop a timeline of events during her pregnancy.
- Surveys are mailed based on address information collected from birth certificate files which can create non-response bias.
- Transient populations and non-English speaking populations are more difficult to reach, also creating response bias.
- It is possible that the results between non-response and respondent populations could be different.
- Only 50-60% of the approximately 150 women that are selected to participate each month respond so the sample size is small.

How is the system evaluated?

- Data collection follows the CDC model surveillance protocol to ensure consistent and valid sampling techniques and survey monitoring.

Data Set Availability

- Data will be made available once the program has one full calendar year of weighted data.
- Data will be available in SAS and comma-delimited format.
- A weighting variable will be included in the data sets so that prevalence estimates can be generalized to the state-wide population.
- Average yearly sample size is 1200.
- The data is provided at no cost.

Data Release Policy

- Data requests should be addressed to the PRAMS data coordinator, and data release policies will be discussed at that time.
- National data is available on the CDC PRAMS website.

Data Publications:

- PRAMS program will produce a statewide summary for each survey year. Once completed and approved, summary materials will be made available on the website.

Suggested Citation:

Kentucky Department for Public Health (KDPH). Pregnancy Risk Assessment Monitoring System Data. Frankfort, Kentucky: Division of Maternal and Child Health, [Data year].

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