

Michigan PRAMS

Pregnancy Risk Assessment Monitoring System

1997

*Michigan Department
of Community Health*



*John Engler, Governor
James K. Haveman, Jr., Director*

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EXECUTIVE SUMMARY

This is a summary of selected results of the 1997 Michigan Pregnancy Risk Assessment Monitoring System (PRAMS). The survey described here was conducted with a random sample of women who had given birth to a live infant in Michigan in 1997. The topics of the survey were selected based on their relevance to infant mortality and birth outcomes. Some of the highlights of the findings are presented here.

- Of pregnancies resulting in a live birth in Michigan in 1997, it was estimated that 43.2 percent were unintended (i.e., the pregnancy was not wanted or it was wanted later than it happened).
- Overall, 7.7 percent of live births were low birthweight infants. Teenaged women were more likely to give birth to low birthweight infants than were women 20 years of age and older.
- More than one-third (30.5 percent) of respondents were receiving Medicaid at the time of delivery.
- Nearly four in 10 respondents (38.8 percent) reported that they were receiving assistance from the Women, Infants, and Children (WIC) program.
- Prenatal care was initiated in the first trimester by 88.8 percent of the respondents.
- About 80 percent (79.7 percent) of respondents indicated that they had their first prenatal care visit as early as they had desired.
- 67.4 percent of respondents indicated that private health insurance was a source of prenatal care payments.
- More than half of respondents (61.7 percent) reported having breastfed their infant for any length of time.
- The three main reasons for stopping breastfeeding were having to go to work or school (25.2 percent), the infant did not breastfeed very well (28.3 percent), and the mother did not have enough milk (26.1 percent).
- When asked about specific stressors, 75.6 percent of respondents indicated that they had experienced at least one of the stressors in the year prior to childbirth, and 21.6 percent had experienced four or more of the stressors. Stressors included items such as moving to a new home, a family death or illness, being unable to pay bills, and losing one's job.
- Overall, 32.0 percent of respondents smoked cigarettes three months before pregnancy, 20.2 percent smoked in the last three months of the pregnancy, and 26.2 percent smoked in the three month period following childbirth.
- 5.9 percent of respondents reported drinking alcohol in the last three months of the pregnancy.

INTRODUCTION

The Michigan Pregnancy Risk Assessment Monitoring System (PRAMS) is an ongoing survey project of post-partum mothers in Michigan. PRAMS is part of an effort to reduce infant mortality and adverse birth outcomes by providing information useful for developing and implementing intervention programs and for evaluating existing programs. This data is used to monitor progress toward national and state pregnancy-related health objectives, including the increase of positive birth outcomes. PRAMS is also used to identify and monitor selected self-reported maternal behaviors and experiences that occur before, during, and after pregnancy among women who deliver live-born infants.

The indicators in this report cover a variety of topics, including low birthweight, birth control use, intendedness of pregnancy, health insurance, prenatal care, alcohol and tobacco use, major life stressors during pregnancy, intensive care for infants, hospital stays (pre-delivery and delivery), breastfeeding, resources needed, and resources accessed.

The data collection methods used by PRAMS include several components. In 1997 approximately 200 post-partum women were selected monthly from a frame of eligible birth certificates and were sent mailed surveys. If the women did not initially respond, follow-ups included additional mailings and telephone contact. In order to increase participation of urban and minority women, data collection also included a hospital component. In this component, black mothers were sampled from hospital delivery logs and interviews were attempted before the mother left the hospital. A mailed questionnaire followed two to six months after the in-hospital interview, which focused on post-partum experiences (See Methodology for more details).

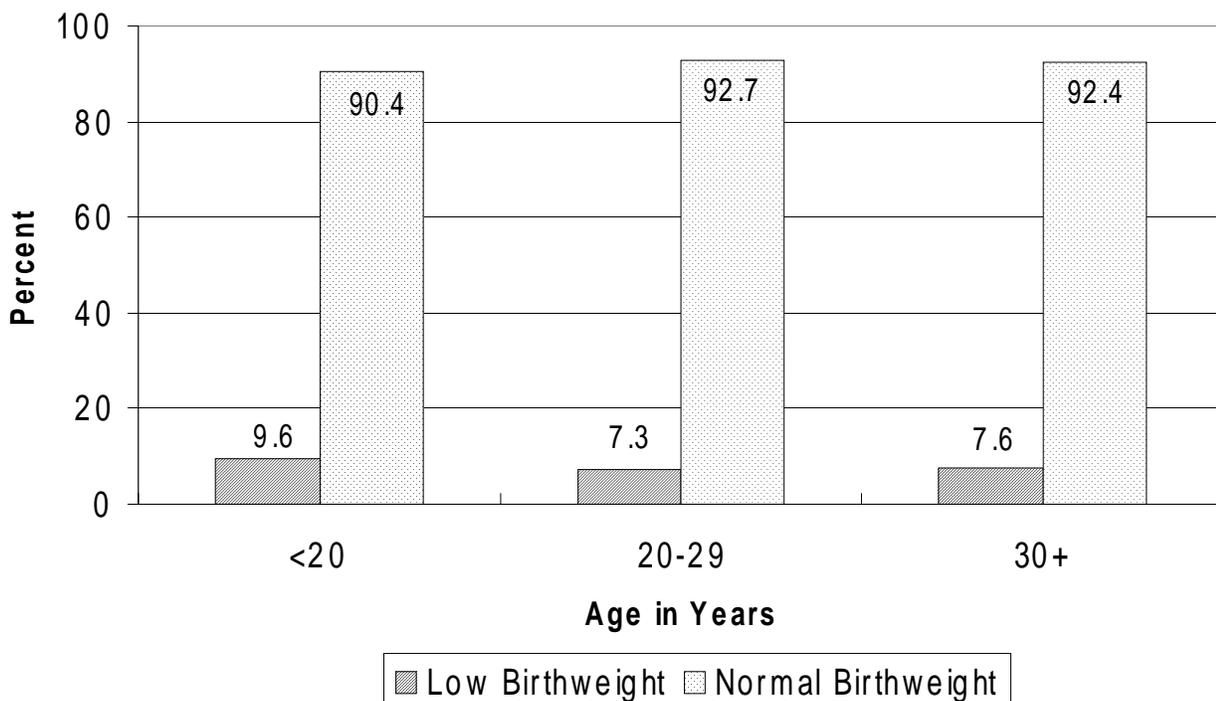
This report covers results from 1997 calendar year data. The body of the report provides graphical presentation of selected results. All results presented are weighted which provides estimates that are reflective of Michigan women who had a live birth in 1997 (see Appendix I for further information on weighting). Results are also presented along with demographic characteristic breakdowns in appended tables. The 95 percent confidence intervals (CI) are included in the appended tables and are referenced in the text with the \pm symbol. PRAMS data are intended to be representative of women whose pregnancies resulted in a live birth. Therefore, caution should be used in generalizing the results to all pregnant women.

1997 RESULTS

Low Birthweight

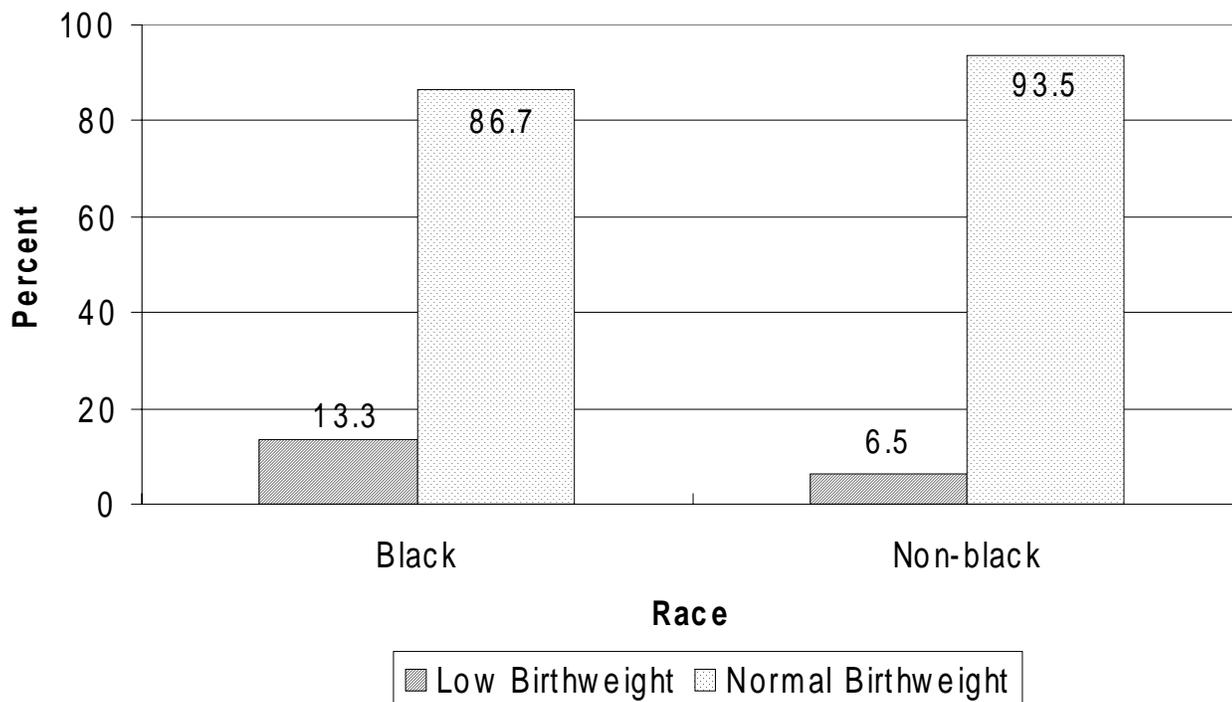
About seven percent (7.7%, 95% CI ± 0.2) of respondents gave birth to infants who had low birthweight (less than 2,500 grams). The likelihood of having a low birthweight infant was highest for women <20 years of age, and then for women aged 30+ (Figure 1).

FIGURE 1
Percentage of Low and Normal Birthweight Infants
by Mother's Age at Delivery
1997 Michigan PRAMS



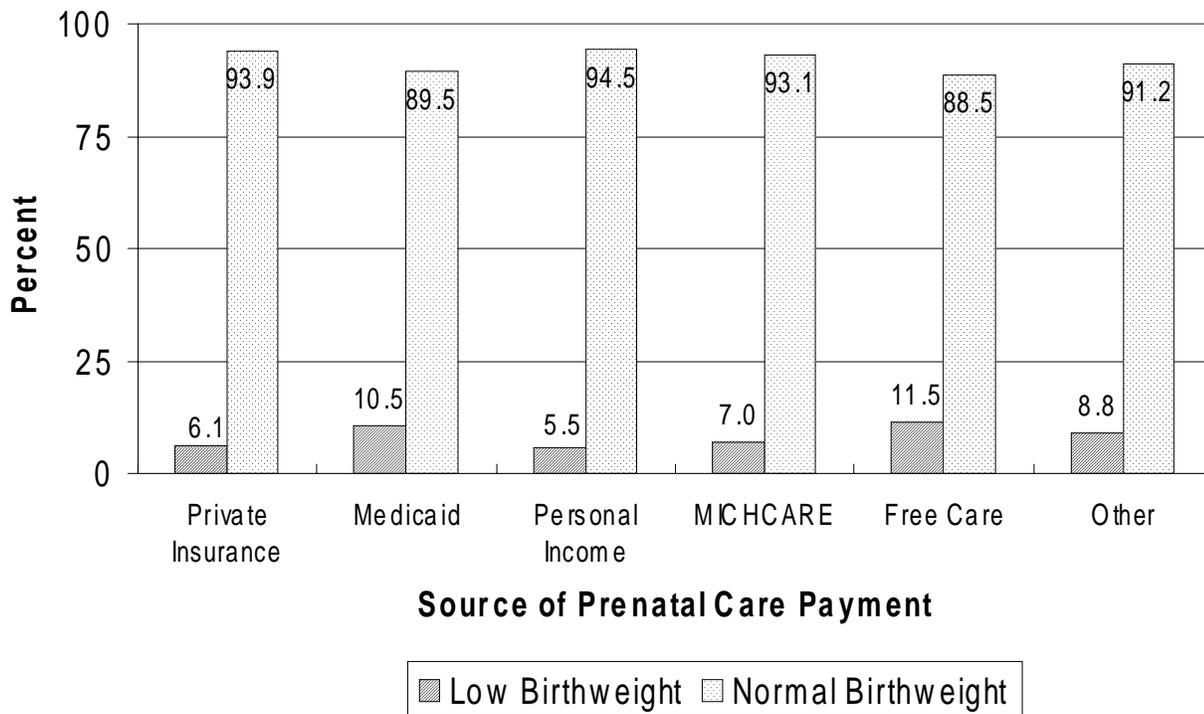
Black mothers were twice as likely to have a low birthweight infant than were non-black mothers (Figure 2).

FIGURE 2
Percentage of Low and Normal Birthweight Infants
by Mother's Race
1997 Michigan PRAMS



Women who had Medicaid or free care as a source of prenatal care payments were almost twice as likely to have a low birthweight infant compared with women who had personal income as a source of prenatal care payments (Figure 3).

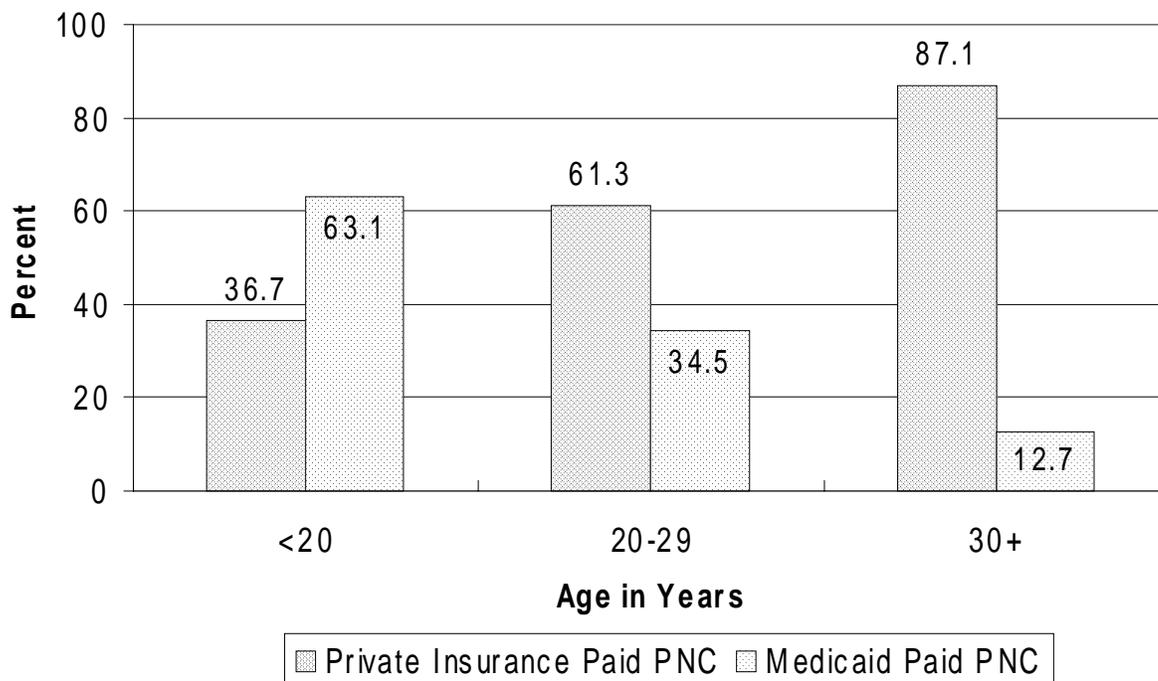
FIGURE 3
Infant's Birthweight by Source of Prenatal Care Payment
1997 Michigan PRAMS



Health Insurance and Medicaid Coverage of Prenatal Care

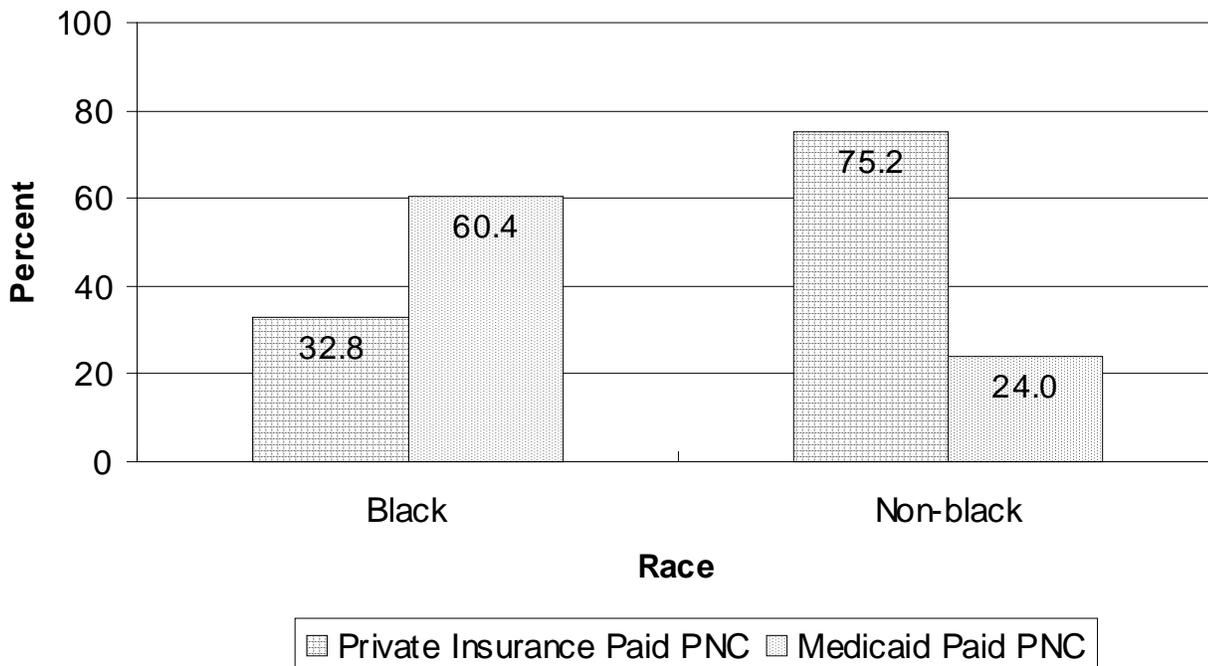
Respondents indicated whether they had private health insurance, Medicaid, personal income, or other sources of payment for prenatal care (PNC). Respondents could indicate more than one source. Nearly two-thirds (67.5%, 95% CI \pm 3.5) of respondents had private health insurance, and about one-third (30.5%, 95% CI \pm 2.7) had Medicaid coverage (Table 9 of Appendix II). Medicaid coverage varied by age, with nearly two-thirds of teenaged respondents having Medicaid pay for PNC, but only 12.7 percent of women aged 30 or older having Medicaid (Figure 4).

FIGURE 4
 Percentage of Respondents Who Had Health Insurance or
 Medicaid Coverage for Prenatal Care by Mother's Age
 1997 Michigan PRAMS



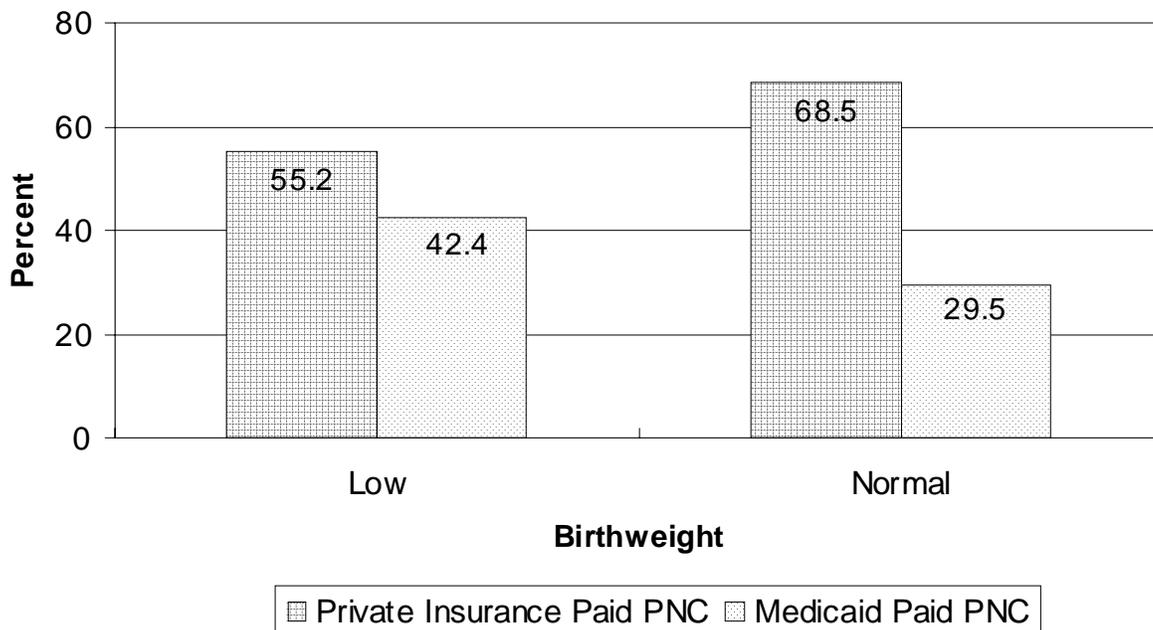
Medicaid coverage for PNC among black respondents was about two and a half that of non-black respondents (Figure 5).

FIGURE 5
Percentage of Respondents Who Had Health Insurance or Medicaid Coverage for Prenatal Care by Mother's Race
1997 Michigan PRAMS



Among women with low birthweight infants, 42.4 percent (95% CI \pm 3.3%) had Medicaid coverage for PNC (Figure 6). Among women with normal birthweight infants, 29.5 percent (95% CI \pm 3.0%) had Medicaid.

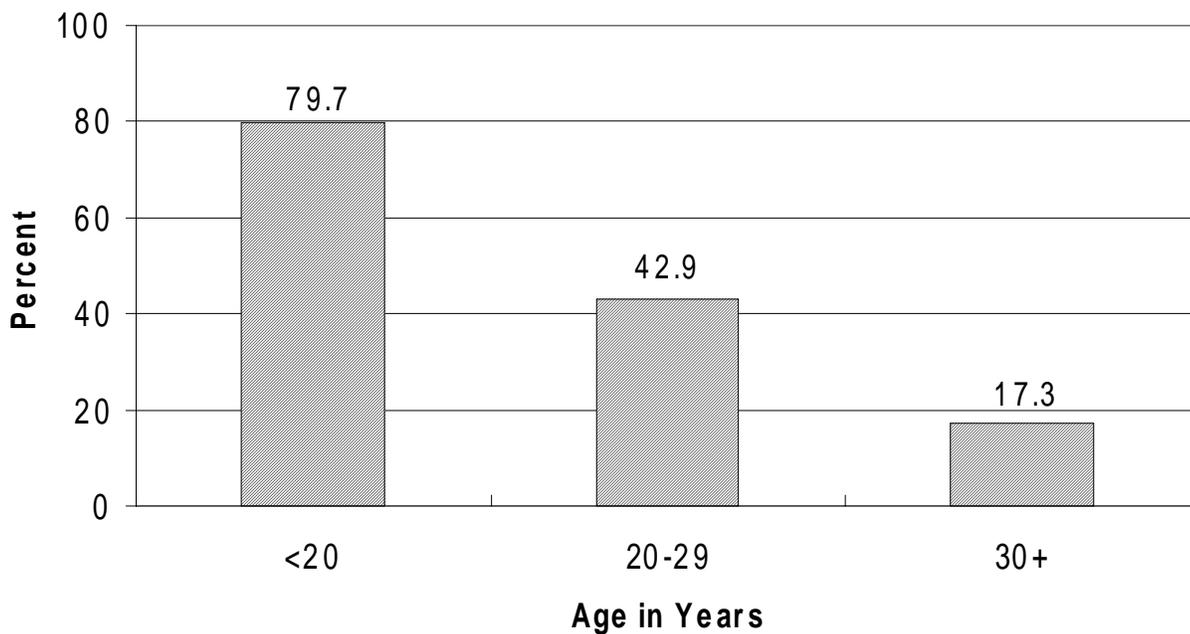
FIGURE 6
Percentage of Respondents Who Had Health Insurance or Medicaid Coverage for Prenatal Care by Infant's Birthweight
1997 Michigan PRAMS



Mothers Receiving WIC

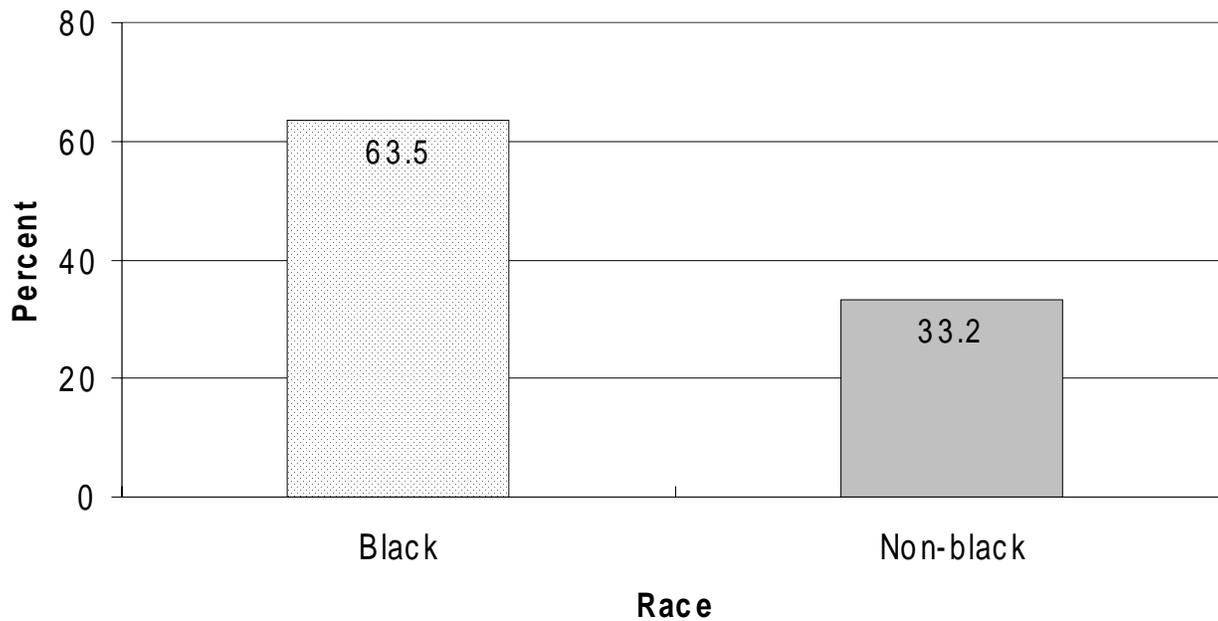
Nearly four in 10 respondents (38.8%, 95% CI \pm 3.1%) reported that they were receiving assistance from the Women, Infants, and Children program (WIC). This varied by age, however, decreasing with increasing age (Figure 7). Respondents under age 20 were four and a half times as likely to be receiving WIC as were women aged 30 and older.

FIGURE 7
Percentage of Respondents Receiving WIC by Age
1997 Michigan PRAMS



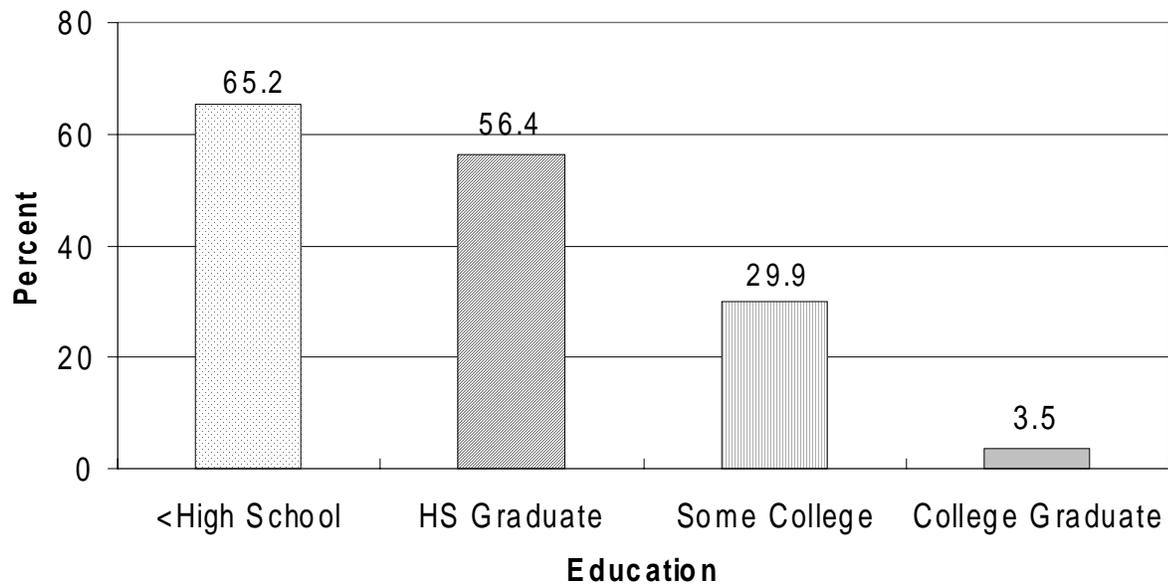
Almost twice as many black respondents reported being WIC participants compared to non-black respondents (Figure 8).

FIGURE 8
Percentage of Respondents Receiving WIC by Race
1997 Michigan PRAMS



The proportion of respondents on WIC declined dramatically with education from 65.2 percent (95% CI \pm 7.3%) among respondents with less than a high school diploma to 3.5 percent (95% C.I. \pm 2.0%) among respondents with a college degree (Figure 9).

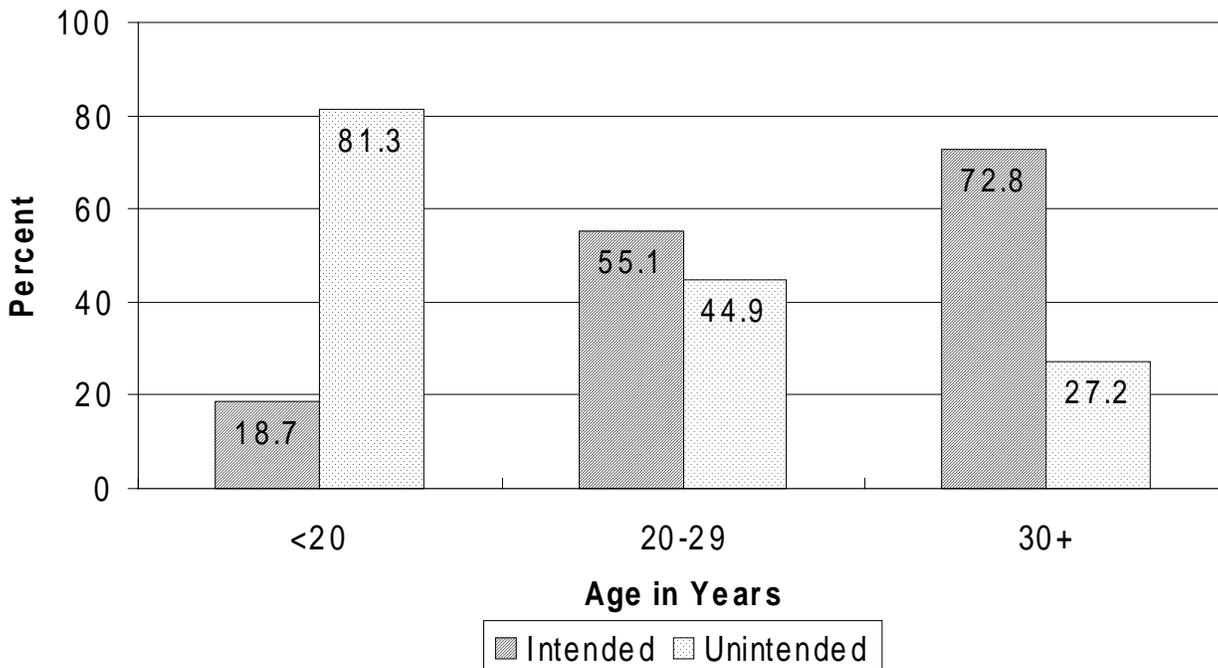
FIGURE 9
Percentage of Respondents Receiving WIC
by Educational Level
1997 Michigan PRAMS



Unintended Pregnancies

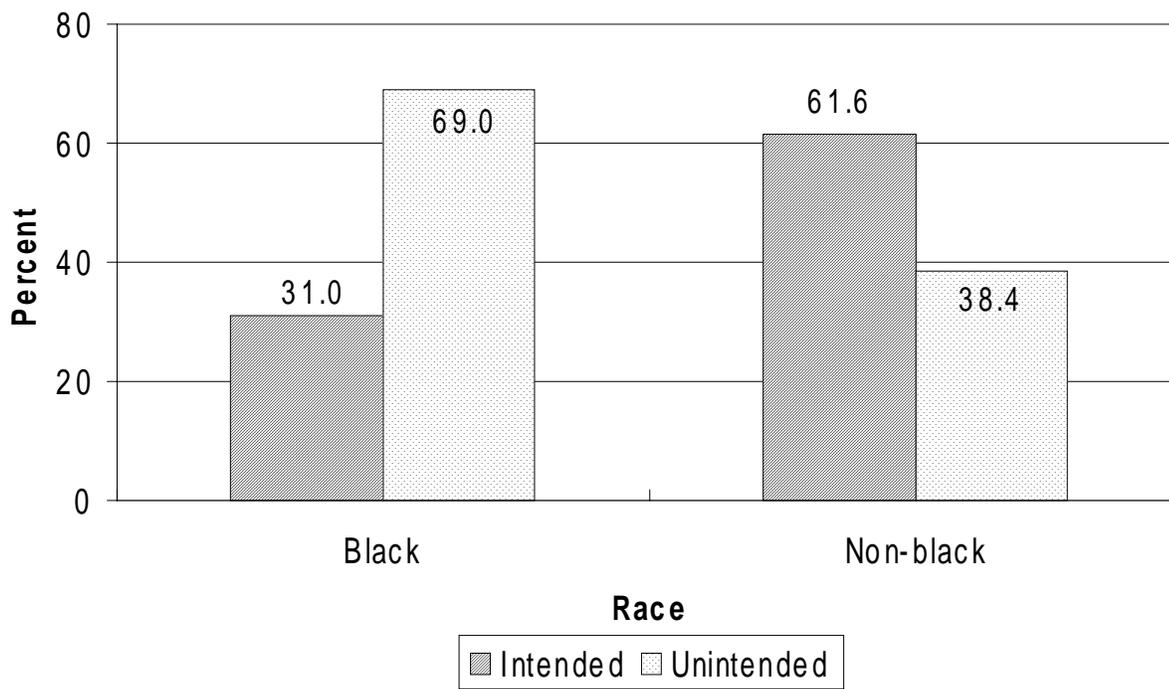
Over 40 percent of live births in Michigan in 1997 resulted from pregnancies that were unintended (43.2%, 95% CI \pm 6.7). Intended was defined as becoming pregnant when it was wanted or later than it was wanted. Unintended was defined as becoming pregnant sooner than was wanted or not wanting to become pregnant (See Table 3 in Appendix II for more information). Age was related to this indicator. Teenaged women were more likely to give birth as a result of an unintended pregnancy (81.3%, 95% CI \pm 7.9%) compared to women in their 20s (44.9%, 95% CI \pm 4.8%) and those over age 29 (27.2%, 95% CI \pm 5.0%) (Figure 10).

FIGURE 10
Percentage of Unintended Live Births by Mother's Age
1997 Michigan PRAMS



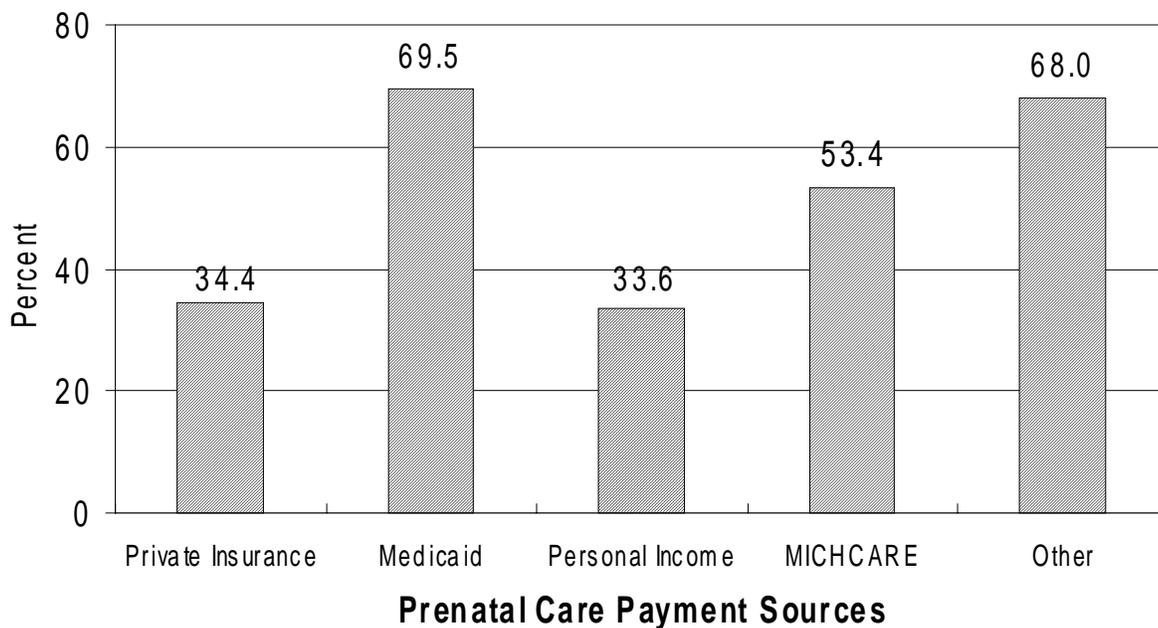
Among black respondents, 69.0 percent of live births (95% CI \pm 4.4%) were the result of an unintended pregnancy, which was almost twice the proportion of unintended pregnancy among nonBlack respondents (38.4%, CI \pm 3.9%) (Figure 11).

FIGURE 11
Percentage of Unintended Live Births by Mother's Race
1997 Michigan PRAMS



Among women who had Medicaid-paid prenatal care, (69.5%, 95% CI \pm 5.4) had unintended pregnancies, which was a large proportion compared to women who had other sources of payment for prenatal care (Figure 12).

FIGURE 12
Percentage of Unintended Live Births
by Prenatal Care Payment Source
1997 Michigan PRAMS

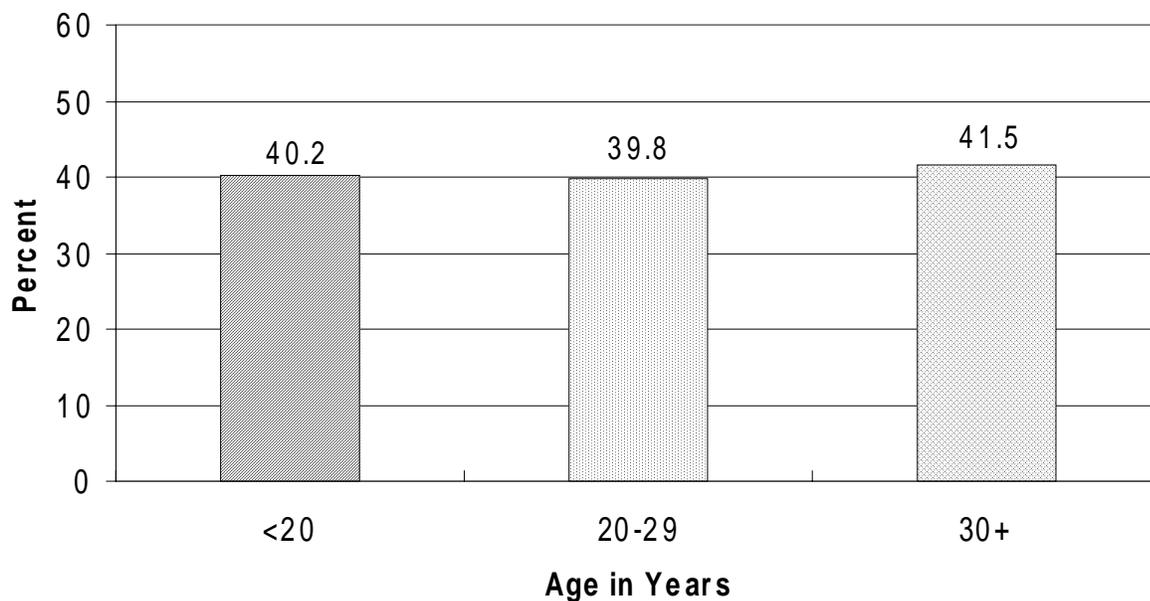


Birth Control Use Among Women Not Intending Pregnancy

Overall, about one in five respondents (22.4%, 95% CI ± 2.8) were using some method of birth control at the time the pregnancy occurred. Among women who were not intending pregnancy, however, 40.3 percent (95% CI ± 5.1) were using birth control (See Table 5 in Appendix II). Younger respondents who did not intend pregnancy were as likely to report the use of birth control at the time pregnancy occurred compared to older respondents (Figure 13).

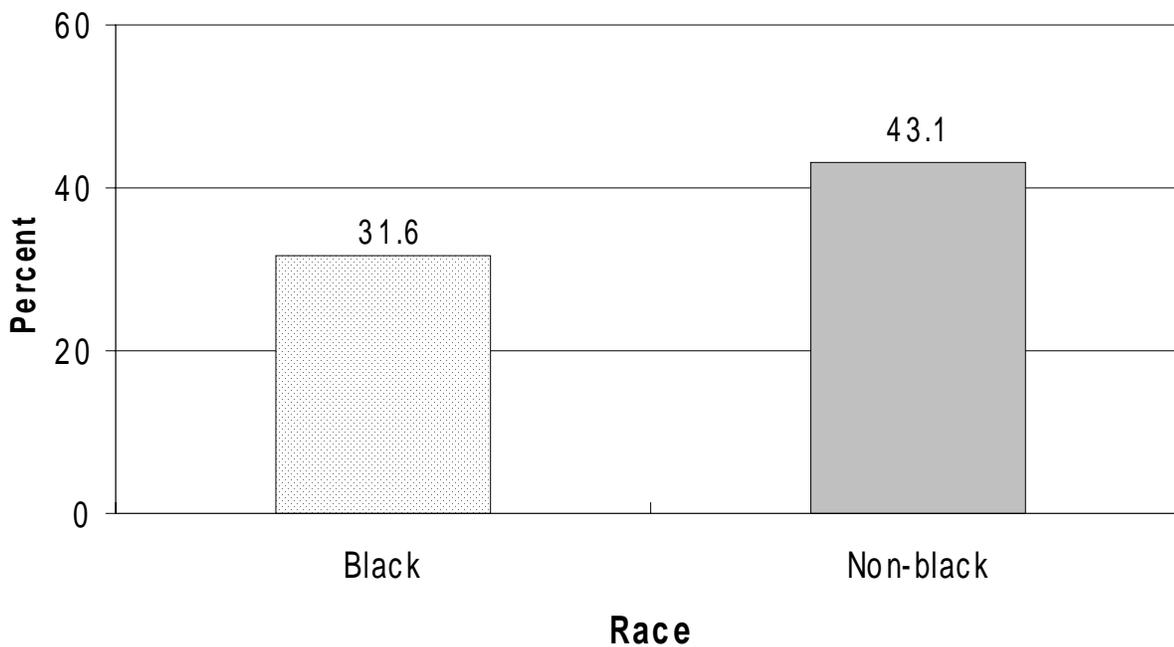
FIGURE 13

Use of Birth Control at the Time Pregnancy Occurred Among Mothers Who Did Not Intend to Become Pregnant by Mother's Age
1997 Michigan PRAMS



Black women who had not intended pregnancy were less likely to use birth control than non-black women (Figure 14).

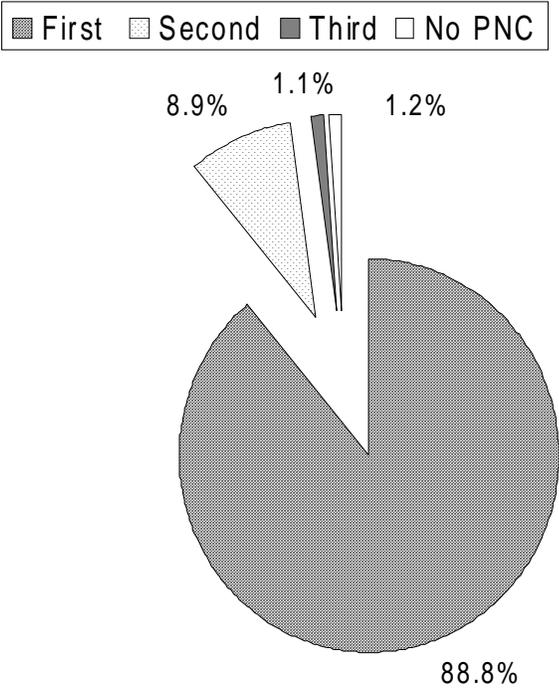
FIGURE 14
Use of Birth Control at the Time Pregnancy Occurred Among Mothers
Who Did Not Intend to Become Pregnant by Mother's Race
1997 Michigan PRAMS



Prenatal Care

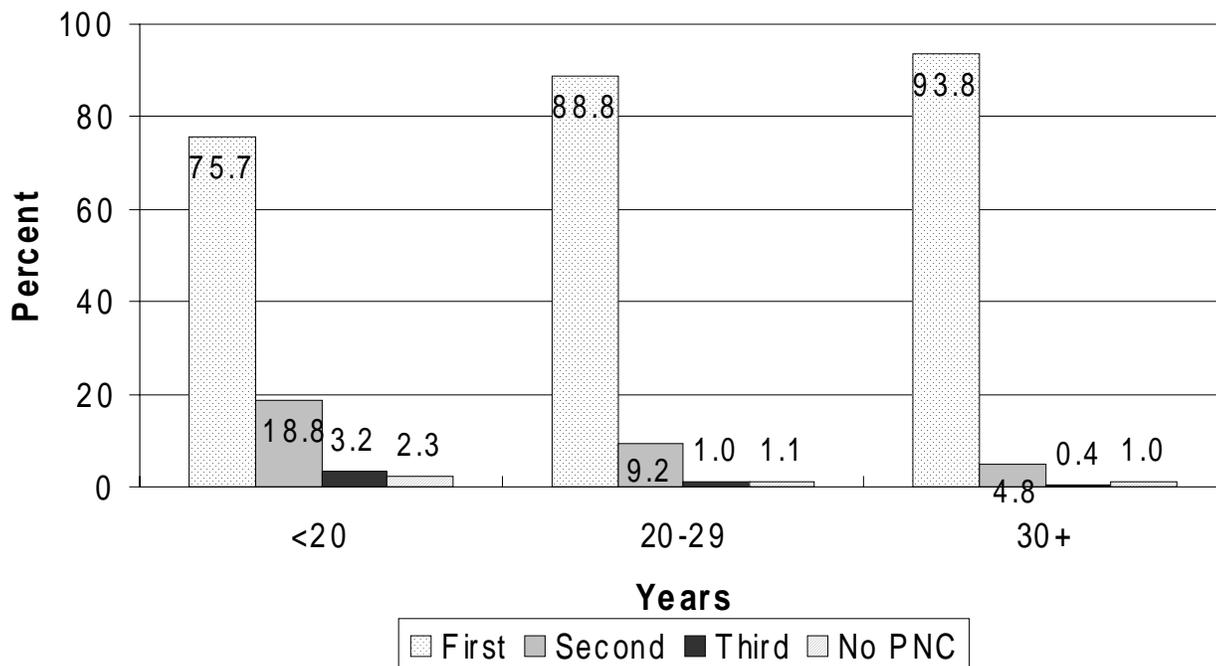
Prenatal care was initiated during the first trimester by 88.8 percent (95% CI ± 2.0) of the respondents in 1997 Michigan PRAMS (Figure 15).

FIGURE 15
Trimester When Prenatal Care Was Started
1997 Michigan PRAMS



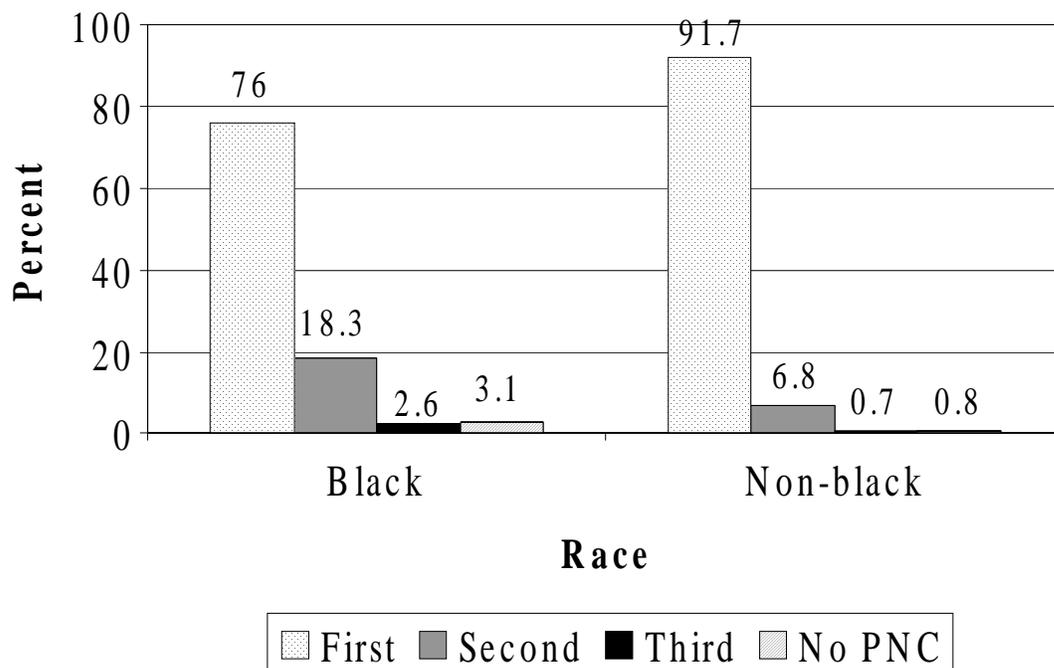
Respondents aged 20 or older were more likely to initiate prenatal care during the first trimester compared to teenaged respondents (Figure 16).

FIGURE 16
 Trimester When Prenatal Care Started by Mother's Age
 1997 Michigan PRAMS



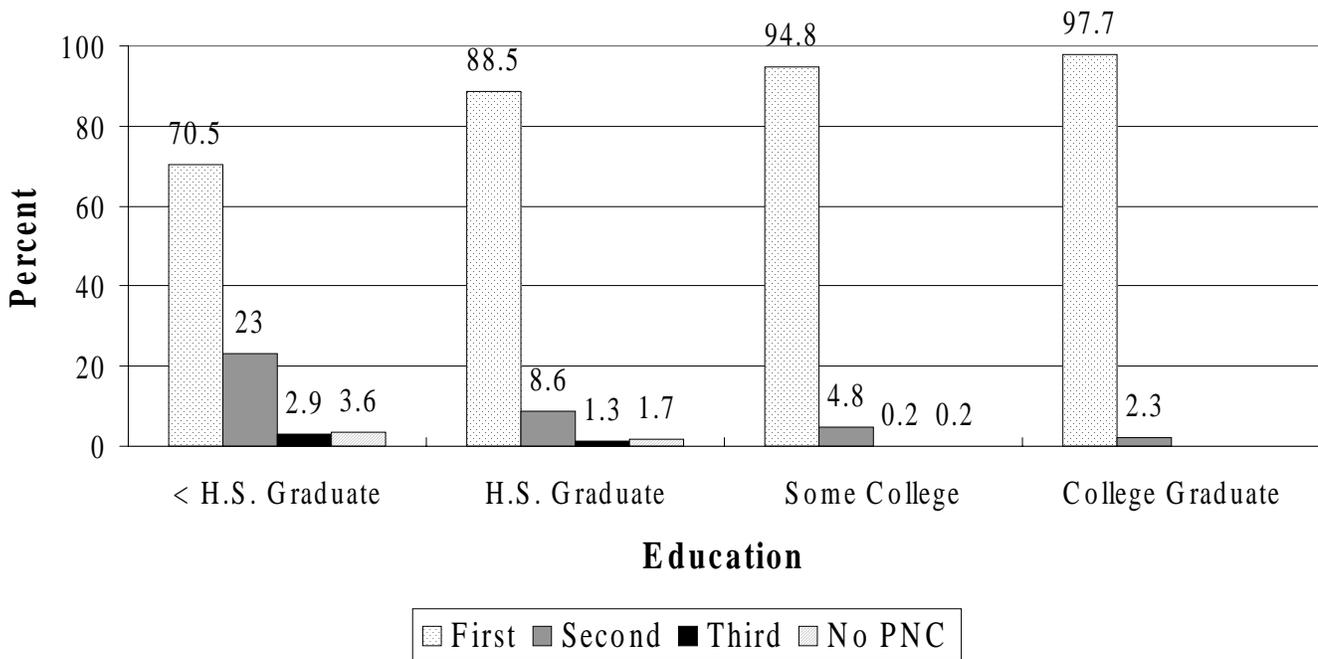
Non-black respondents were more likely to initiate prenatal care during the first trimester compared to black respondents (Figure 17).

FIGURE 17
Trimester When Prenatal Care Started by Mother's Race
1997 Michigan PRAMS



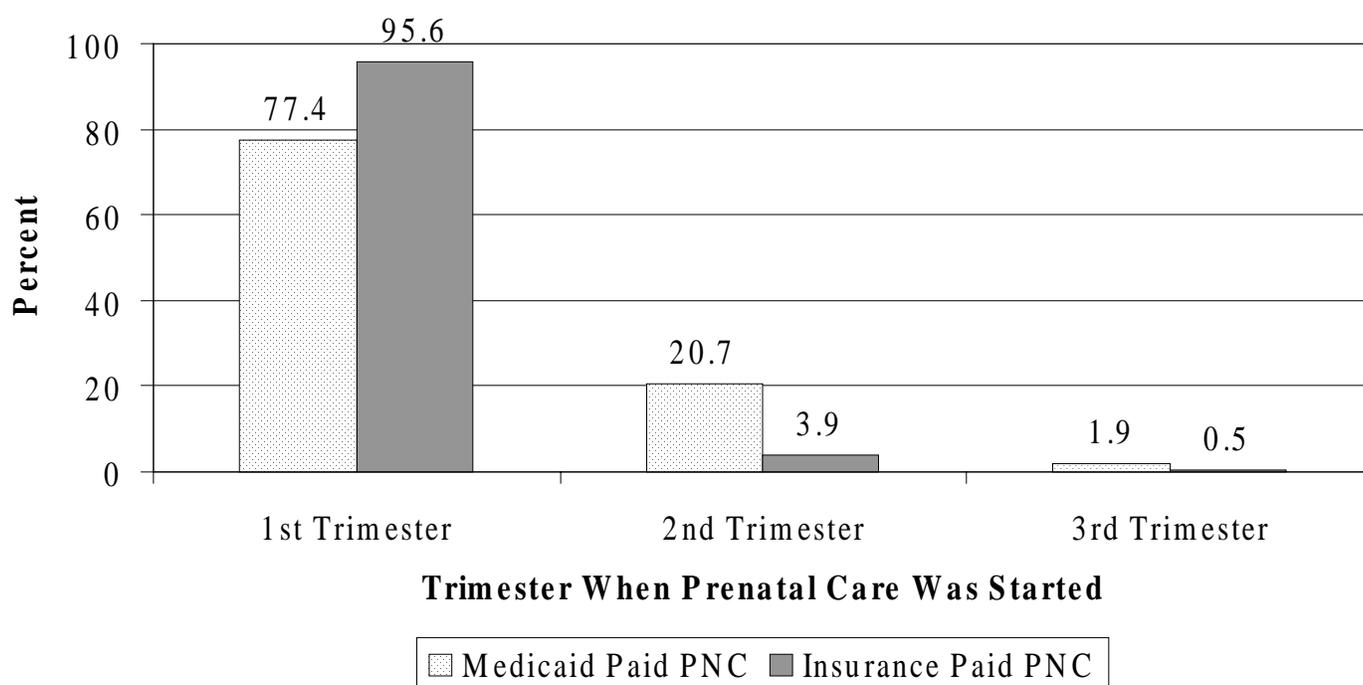
Education level was also related to when prenatal care was started. Respondents who had higher levels of education were more likely to report initiating prenatal care in the first trimester, compared to respondents with lower levels of education (Figure 18).

FIGURE 18
Trimester When Prenatal Care Started by Mother's Education Level
1997 Michigan PRAMS



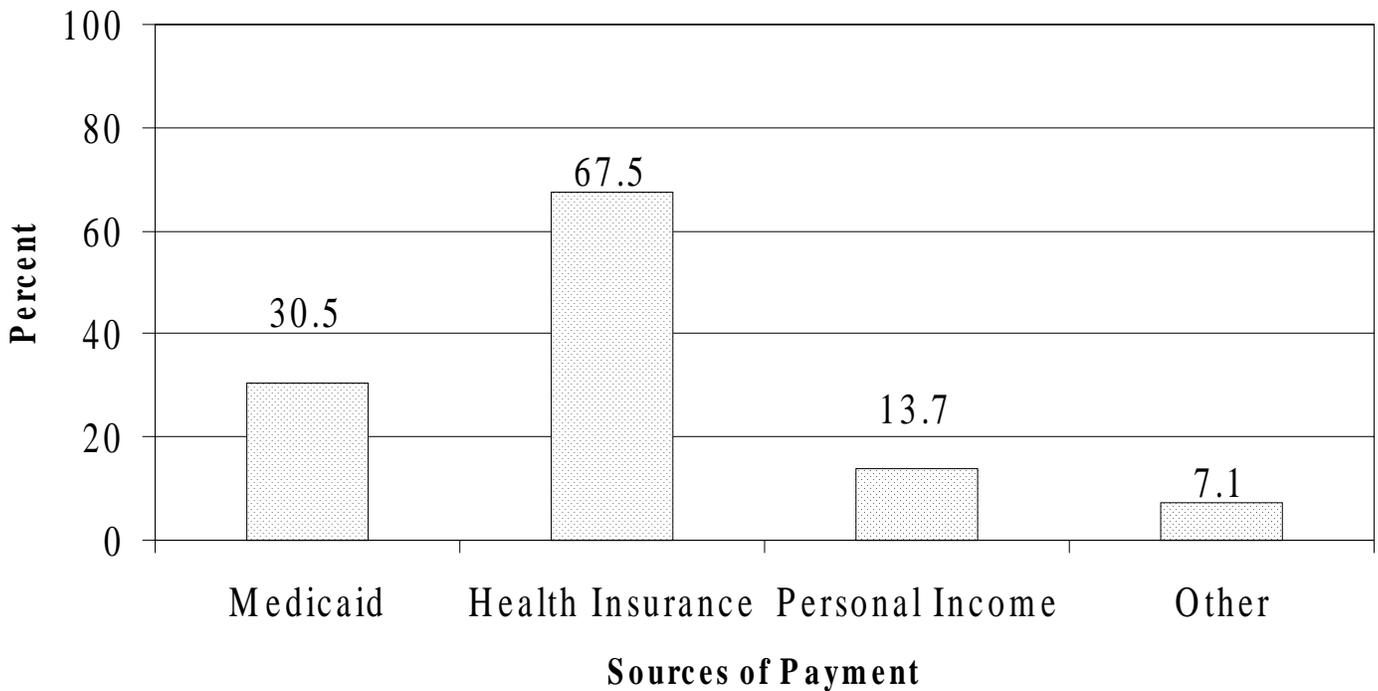
Among respondents who had Medicaid-paid PNC, 77.4 percent (95% CI \pm 4.7) started PNC in the first trimester (Figure 19). Among respondents who had private insurance pay for PNC, 95.6 percent (95% CI \pm 1.4) began PNC in the first trimester. Respondents who had Medicaid-paid PNC were five times as likely to have PNC initiated in the second trimester compared to respondents with private insurance, and almost four times as likely to have PNC initiated in the third trimester compared to respondents with private insurance (Figure 19).

FIGURE 19
Trimester When Prenatal Care Started by Source of
Prenatal Care Payments
1997 Michigan PRAMS



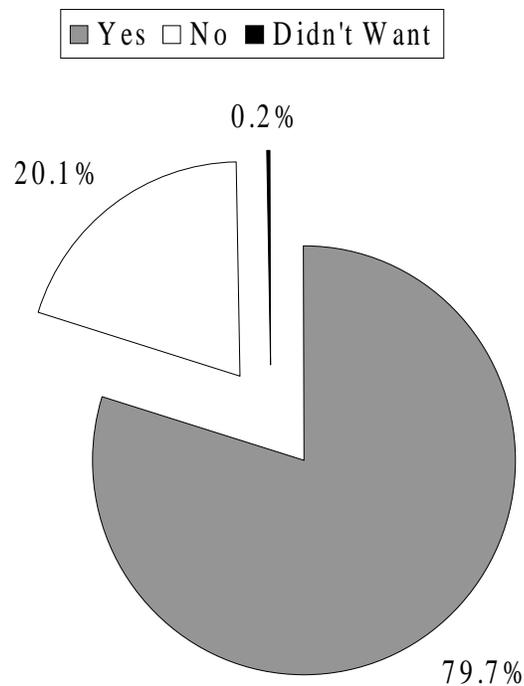
Respondents were asked the sources of payment for their prenatal care. Some indicated more than one source of care payment, thus the percents add up to more than 100 percent. About two-thirds of respondents indicated that private health insurance was a source of payment for the costs of prenatal care, 13.7 percent indicated that personal income was a source of payment and 30.5 percent indicated Medicaid as source of payment (Figure 20).

FIGURE 20
Distribution of Sources of Payment for Prenatal Care (%)
1997 Michigan PRAMS



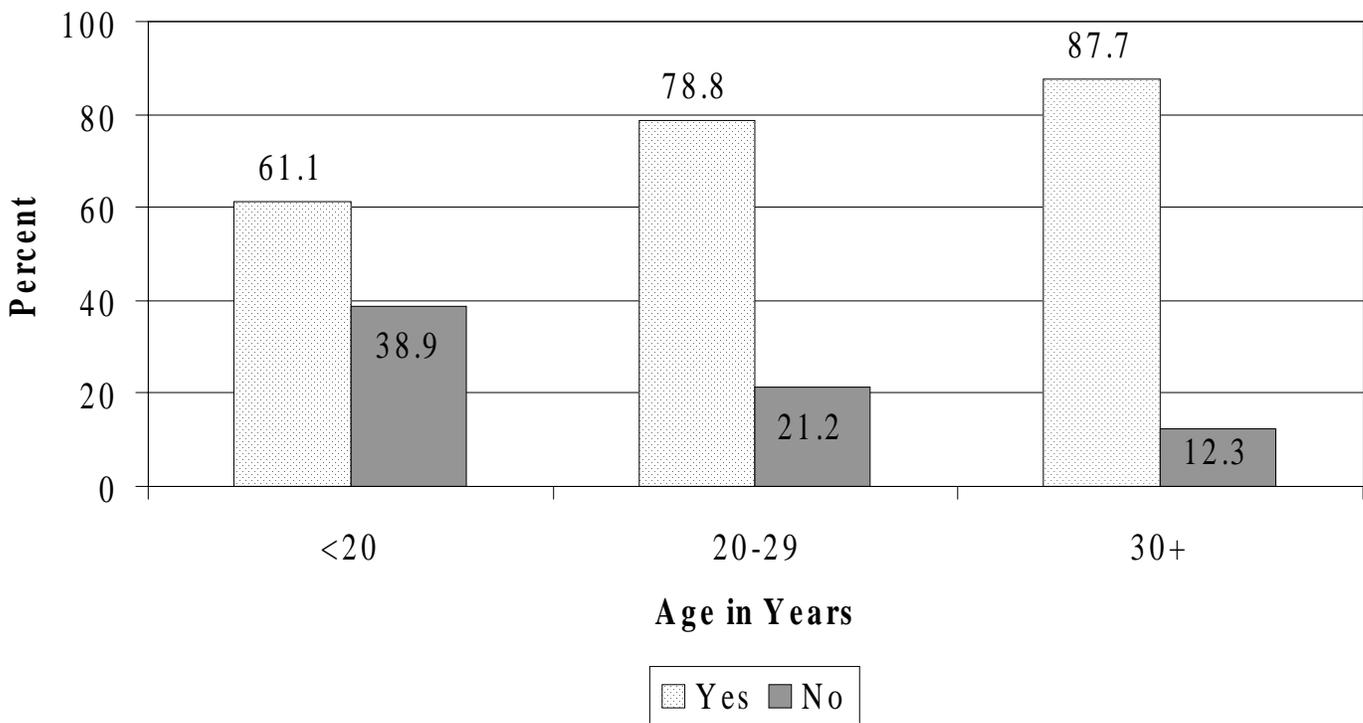
Respondents were asked if they had received the first prenatal care visit as early as they had desired. About 80 percent (79.7%, 95% CI ± 2.5) indicated that they had received the first prenatal care visit as early as they had desired (Figure 21).

FIGURE 21
Percentage of Respondents Who Started Prenatal Care
as Early as They Desired
1997 Michigan PRAMS



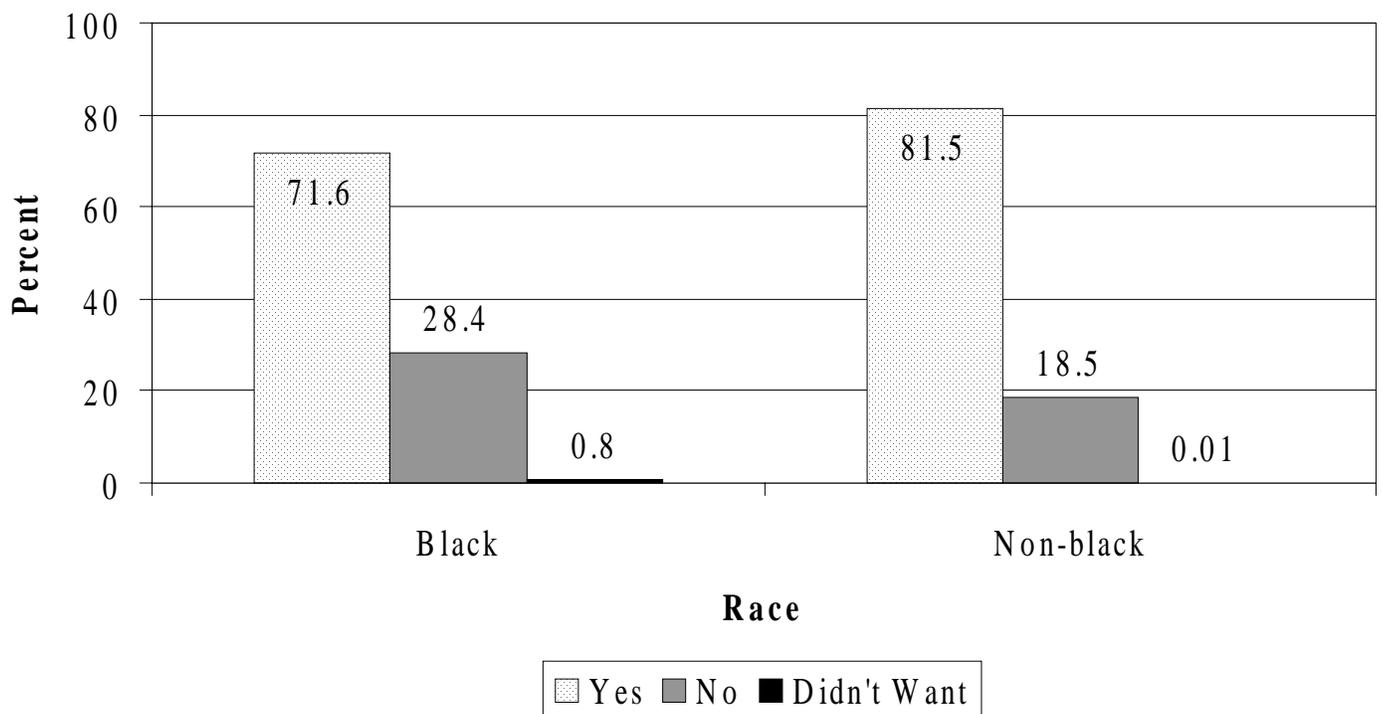
Over half of teenaged respondents affirmed receiving prenatal care as early as desired compared to the majority of older respondents (Figure 22).

FIGURE 22
Percentage of Respondents Who Started Prenatal Care
as Early as They Desired by Mother's Age
1997 Michigan PRAMS



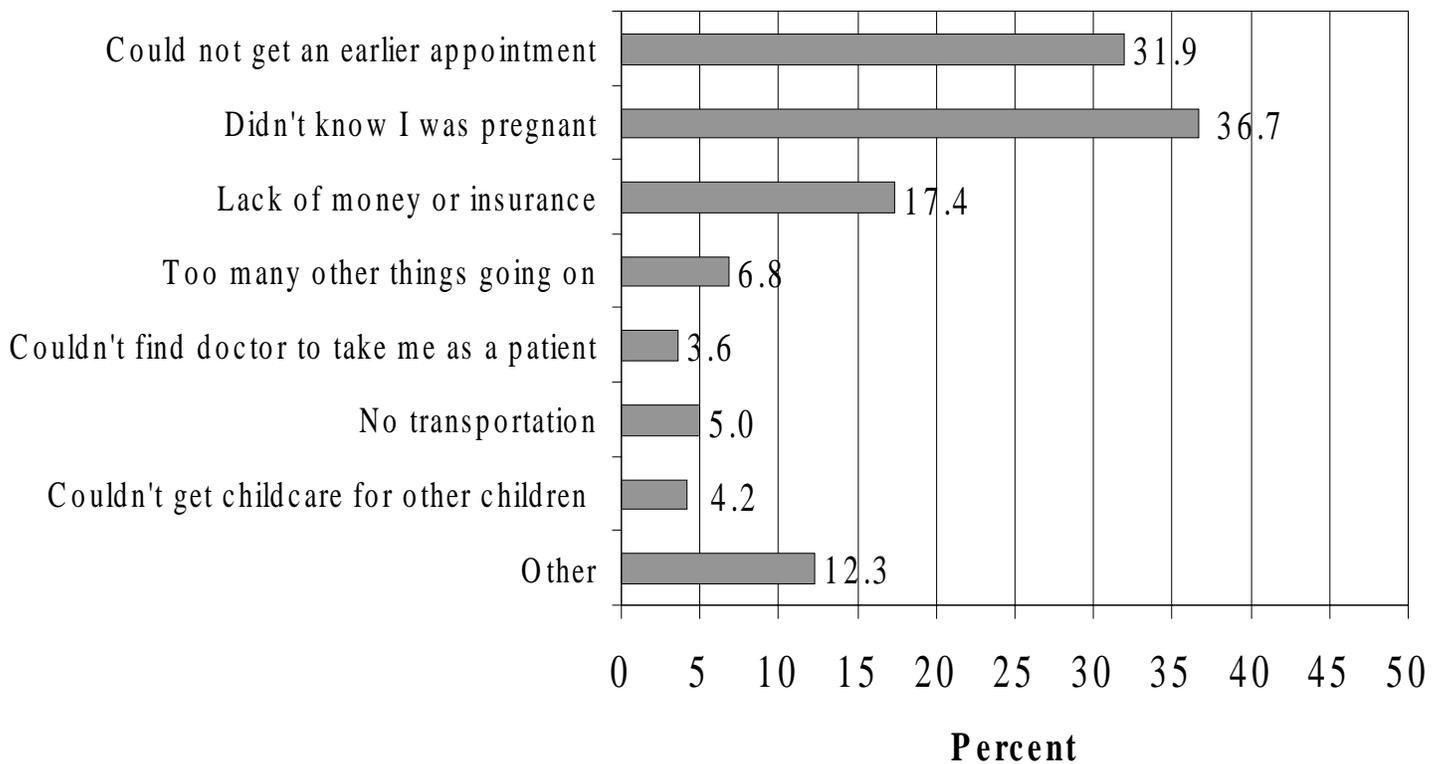
Non-black respondents (81.5%) were more likely to affirm that they had received the first prenatal care visit as early as they had desired compared to black respondents (71.6%) (Figure 23).

FIGURE 23
 Percentage of Respondents Who Started Prenatal Care
 as Early as They Desired by Mother's Race
 1997 Michigan PRAMS



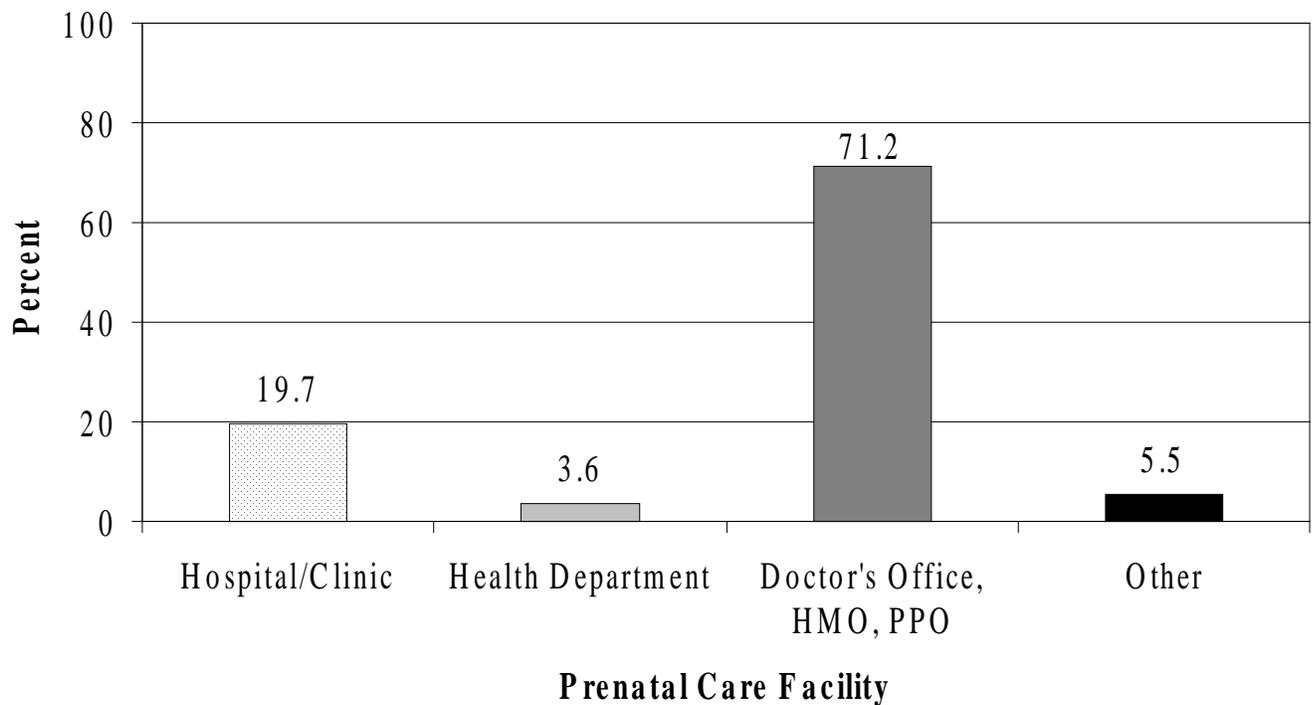
Among those who did not receive prenatal care as early as desired, nearly one-third indicated that they had difficulty getting an appointment, and nearly one-third indicated that they had not realized that they were pregnant (Figure 24).

FIGURE 24
Reasons for Not Starting Prenatal Care as Early as Desired (%)
1997 Michigan PRAMS



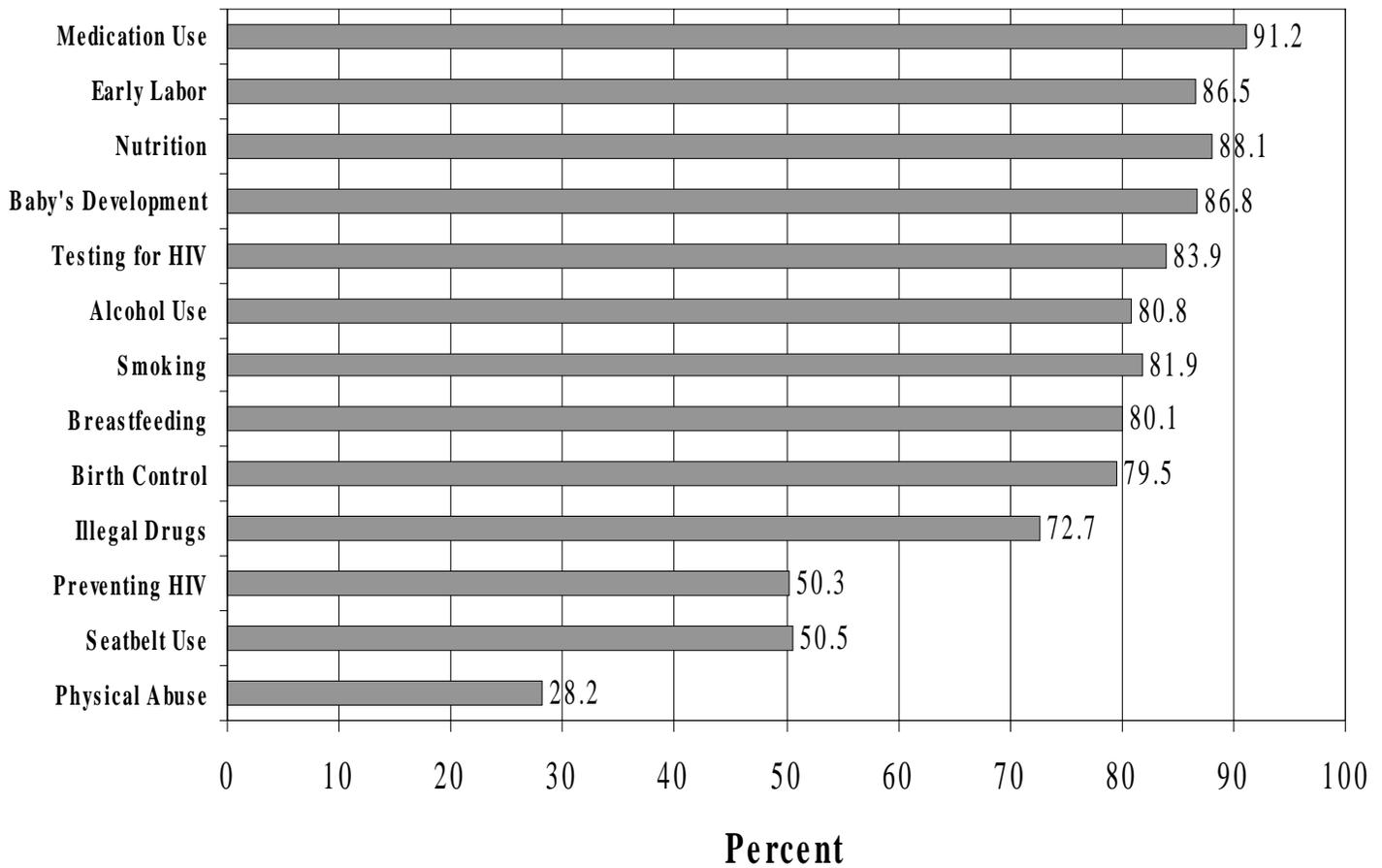
Most of the prenatal care services were delivered at a physician's office or an HMO or PPO clinic (Figure 25).

FIGURE 25
Distribution of Facilities Where Prenatal Care Was Received (%)
1997 Michigan PRAMS



Respondents indicated whether on any of their prenatal care visits a doctor, nurse or other health care worker had talked with them about specific topics. Nearly all respondents (91.0%) reported that a health care provider had discussed medication use during a prenatal care visit, but only one-quarter (28.2%) reported that a health care provider had discussed physical abuse of women by their husbands or partners (Figure 26).

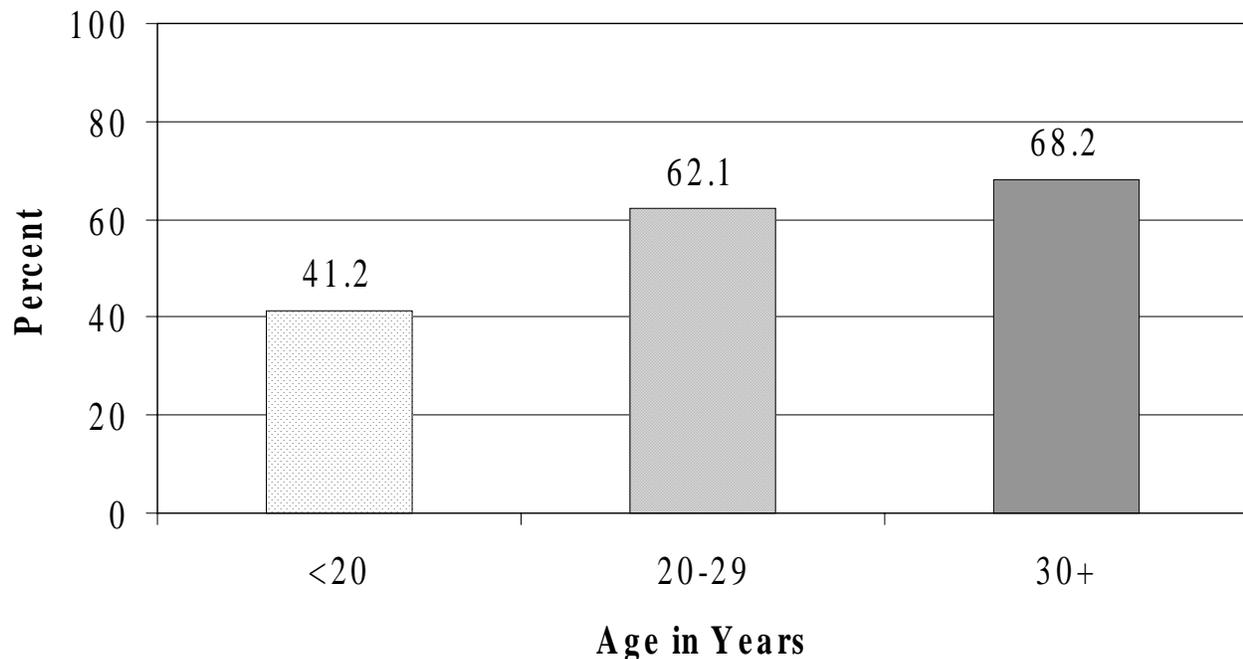
FIGURE 26
Topics Addressed by Health Care Professionals During Prenatal Care Visits (%)
1997 Michigan PRAMS



Breastfeeding

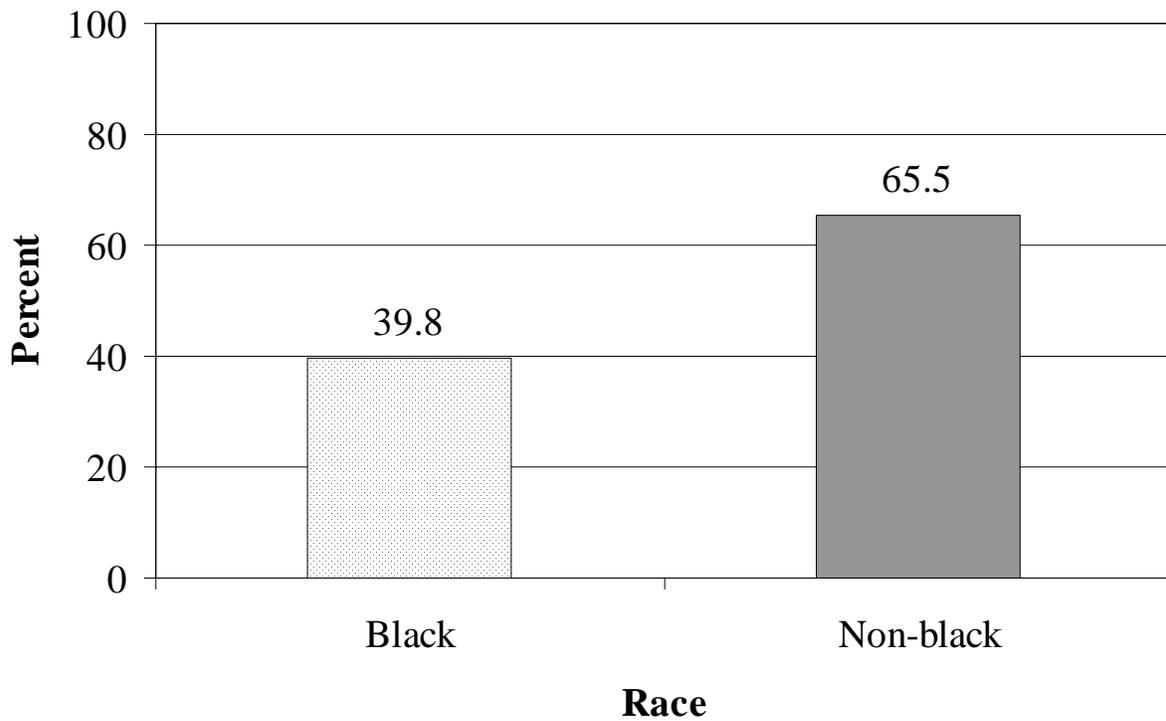
Breastfeeding was defined as a mother having breastfed her newborn for any length of time, including less than one week. Overall, 61.7 percent (95% CI ± 3.1) of respondents breastfed their newborns. The likelihood of breastfeeding tended to increase with age (Figure 27).

FIGURE 27
Percentages of Mothers Who Ever Breastfed by Mother's Age
1997 Michigan PRAMS



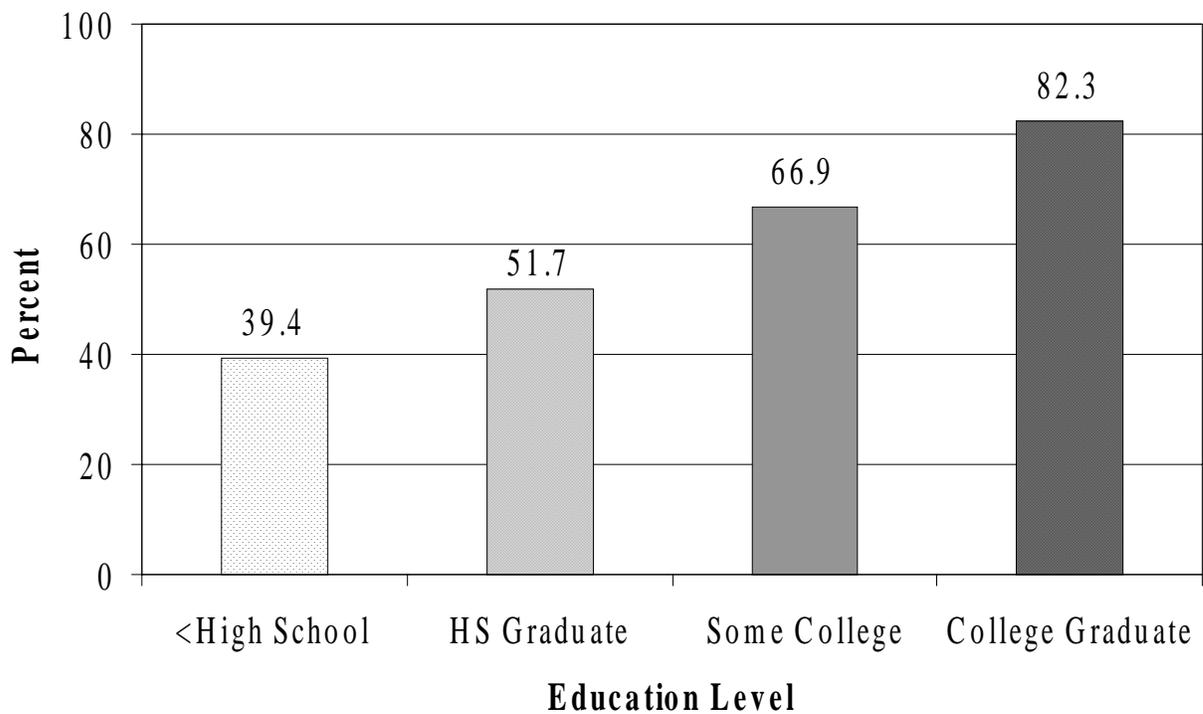
The proportion of non-black respondents who indicated that they breastfed their newborns was much higher than for black respondents (Figure 28).

FIGURE 28
Percentages of Mothers Who Ever Breastfed by Mother's Race
1997 Michigan PRAMS



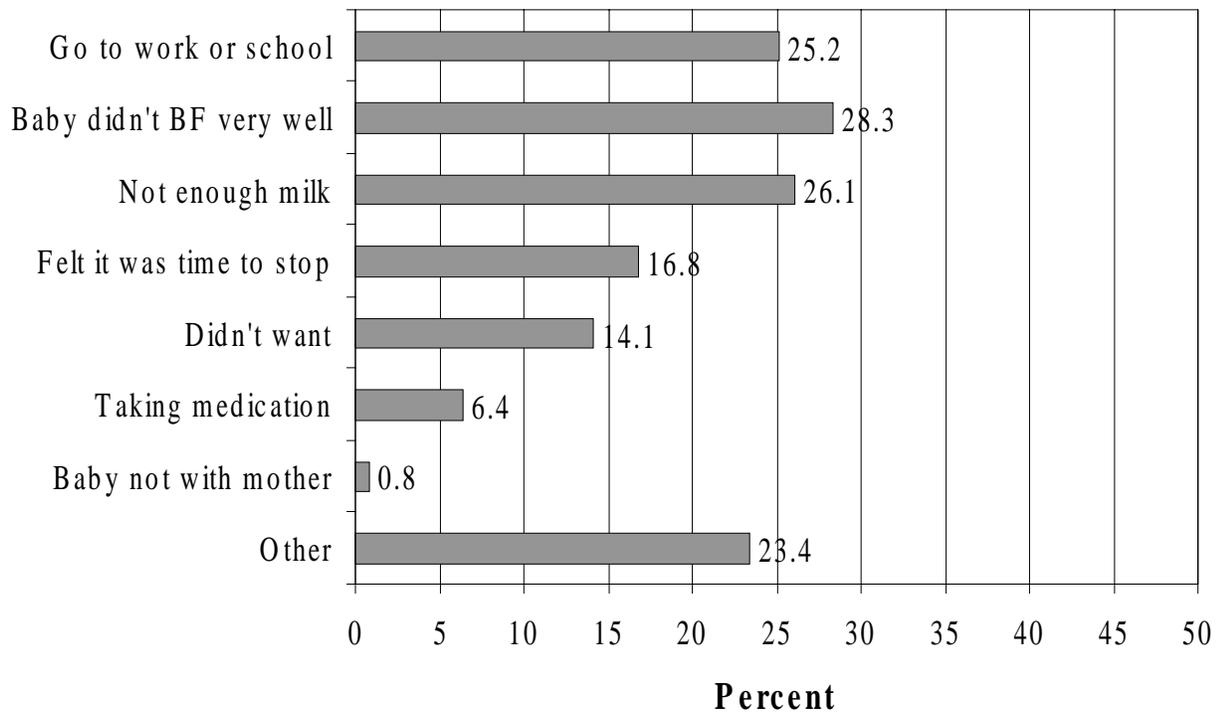
The proportion of respondents who indicated that they breastfed their newborns also increased with the mother's education level (Figure 29).

FIGURE 29
Percentages of Mothers Who Ever Breastfed by Mother's Education Level
1997 Michigan PRAMS



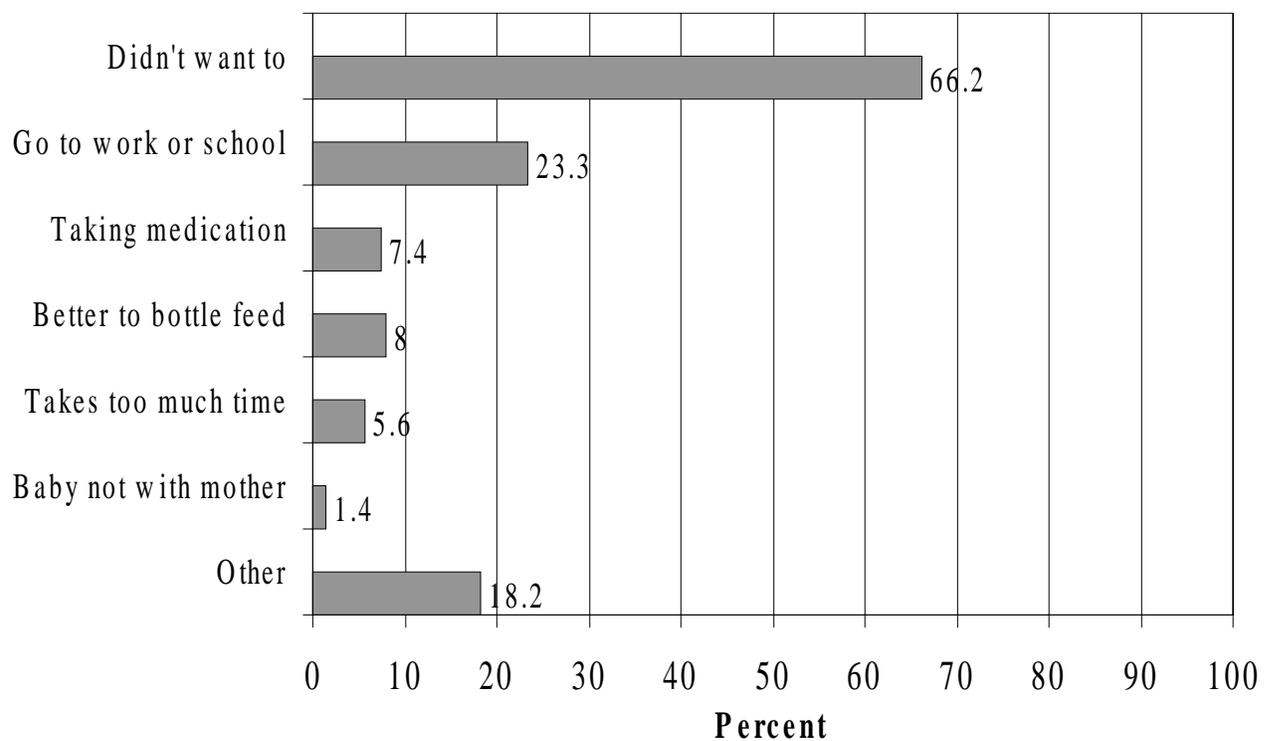
Among respondents who had breastfed their newborns and had stopped breastfeeding at the time of the survey, the top three reasons for stopping breastfeeding were: the mother had to go to work or school (25.2%); the baby didn't breastfeed very well (28.3%); and the mother did not have enough milk (26.1%) (Figure 30).

FIGURE 30
Reasons for Stopping Breastfeeding (%)
1997 Michigan PRAMS



Among respondents who did not breastfeed their newborn at any time, 66.2 percent reported that they did not want to breastfeed, and 23 percent reported that they had to go to work or school (Figure 31).

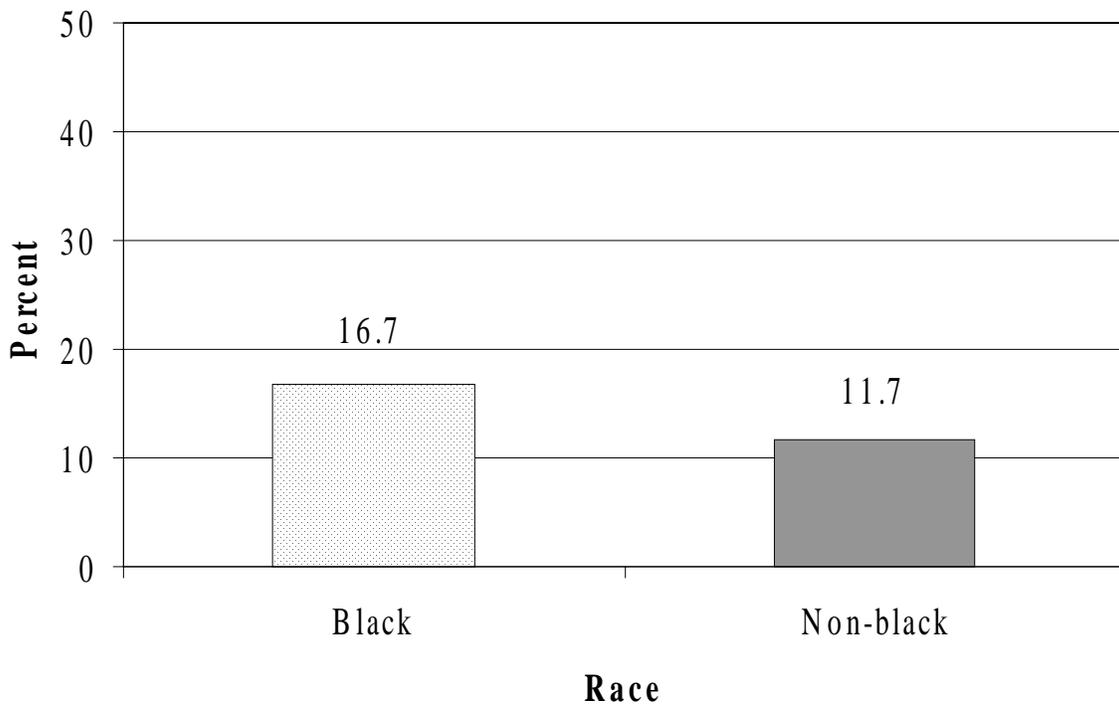
FIGURE 31
Reasons for Not Breastfeeding (%)
1997 Michigan PRAMS



Infants in Intensive Care

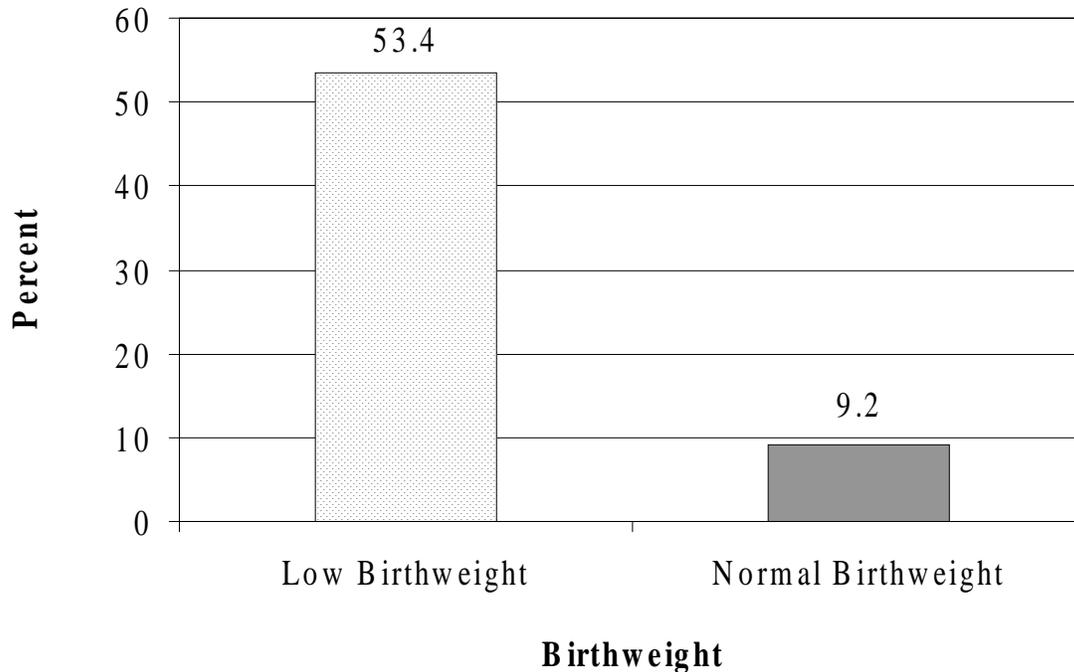
Nearly one in eight (12.5%, 95% CI \pm 2.0) respondents indicated that their infant was placed in an intensive care unit following delivery. Infants born to black respondents were more likely to be placed in an intensive care unit compared to infants born to non-black respondents (Figure 32).

FIGURE 32
Percentage of Infants Placed in Intensive Care Unit Following Delivery
By Mother's Race
1997 Michigan PRAMS



Among normal birthweight infants, 9.2 percent were placed in an intensive care unit following delivery and 53.4 percent of low birthweight infants were placed in an intensive care unit following delivery. (Figure 33).

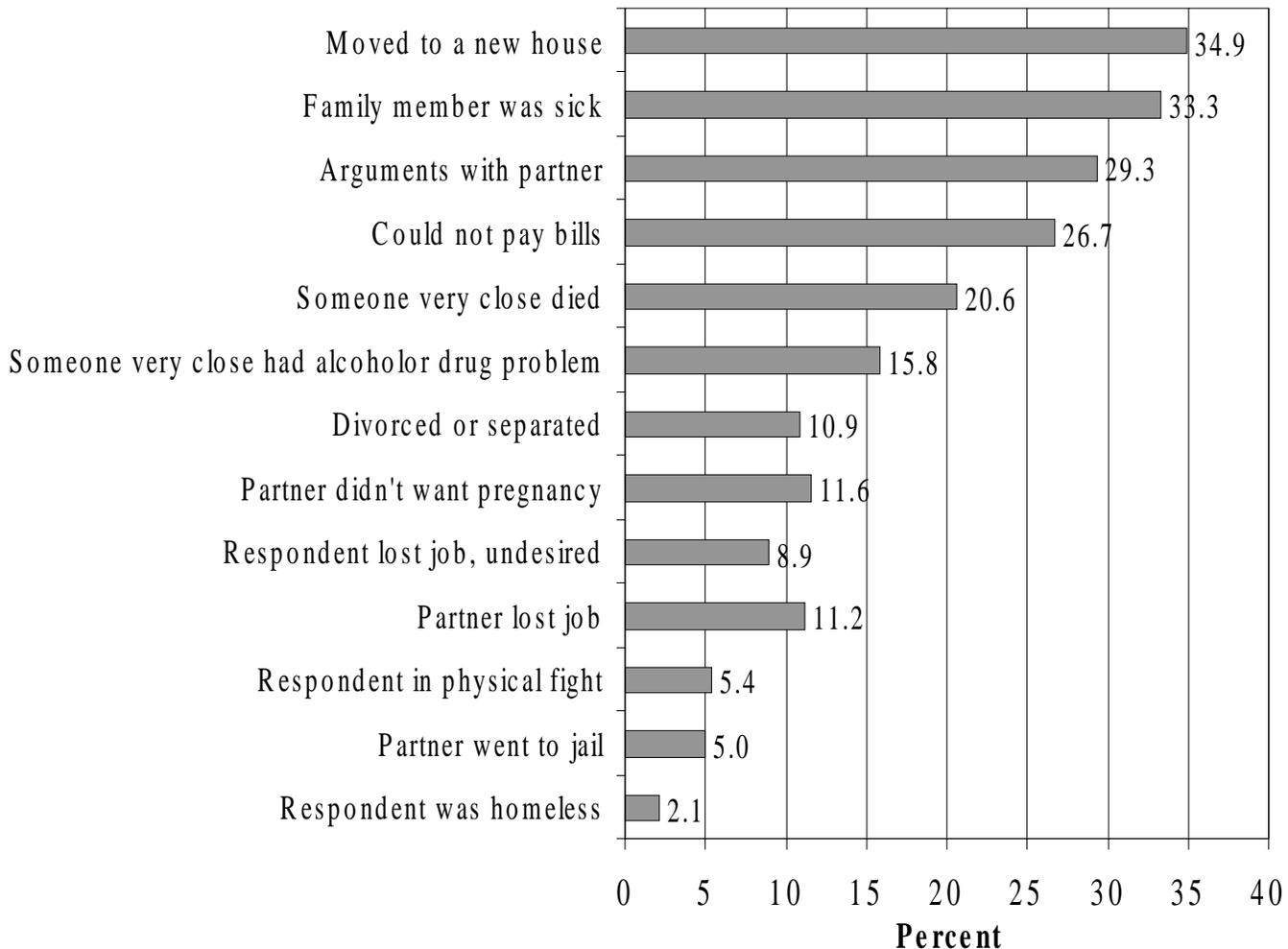
FIGURE 33
Percentage of Infants Placed in Intensive Care Unit Following Delivery
By Infant's Birthweight
1997 Michigan PRAMS



Stressors in the Year Prior to Delivery

Respondents were asked to select the stressors (from a list of 13) that they had experienced during the year prior to delivery. Three-quarters of the respondents (75.6%, 95% C.I. \pm 3.6%) experienced at least one of the stressors listed, and 21.6 percent (95% CI \pm 3.1%) selected four or more stressors (See Table 22 in Appendix II). The stressors most commonly reported by respondents included moving to a new residence, having had a sick family member, and arguing with one's partner (Figure 34).

FIGURE 34
Types of Stressors Respondents Encountered
During the Year Prior to Delivery (%)
1997 Michigan PRAMS

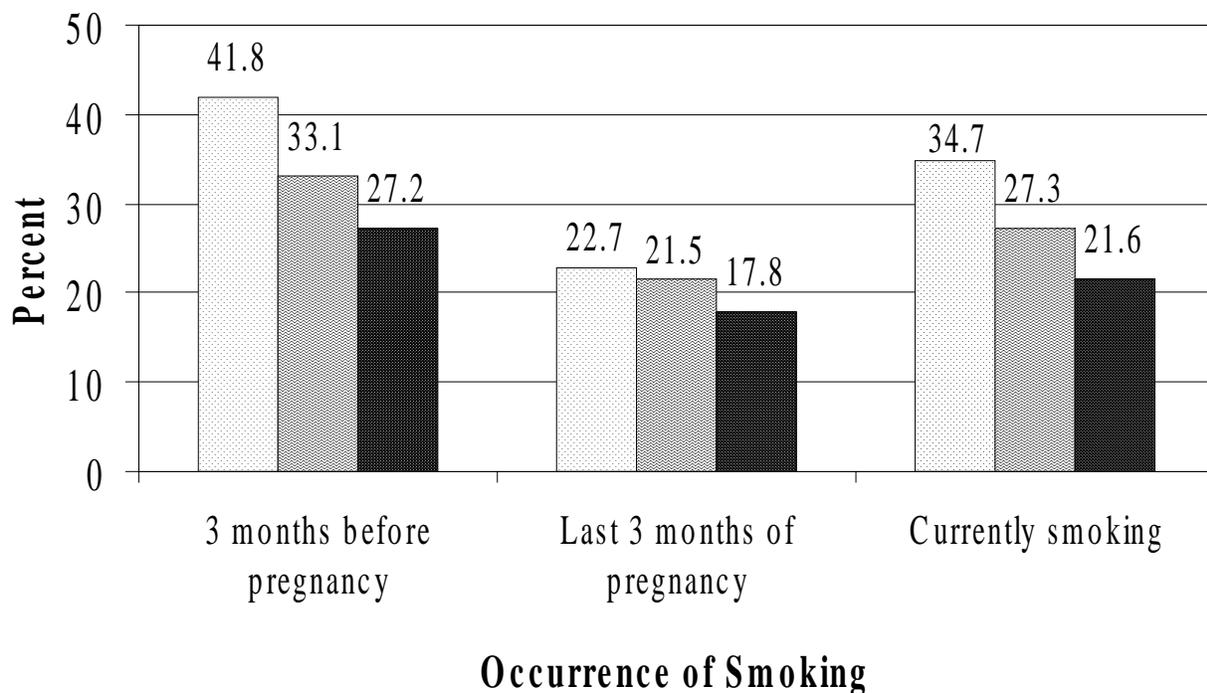


Cigarette Smoking

Respondents were asked whether they smoked cigarettes during the three-month period before they became pregnant, during the last three months of pregnancy, and during the three-month period immediately following delivery. Overall, 32.0 percent (95% CI \pm 3.8%) of respondents smoked during the three-month period preceding pregnancy, 20.2 percent (95% CI \pm 3.3%) smoked during the last three months of pregnancy, and 26.2 percent (95% CI \pm 3.6%) smoked during the three-month-period following delivery (See Table 24 in Appendix II).

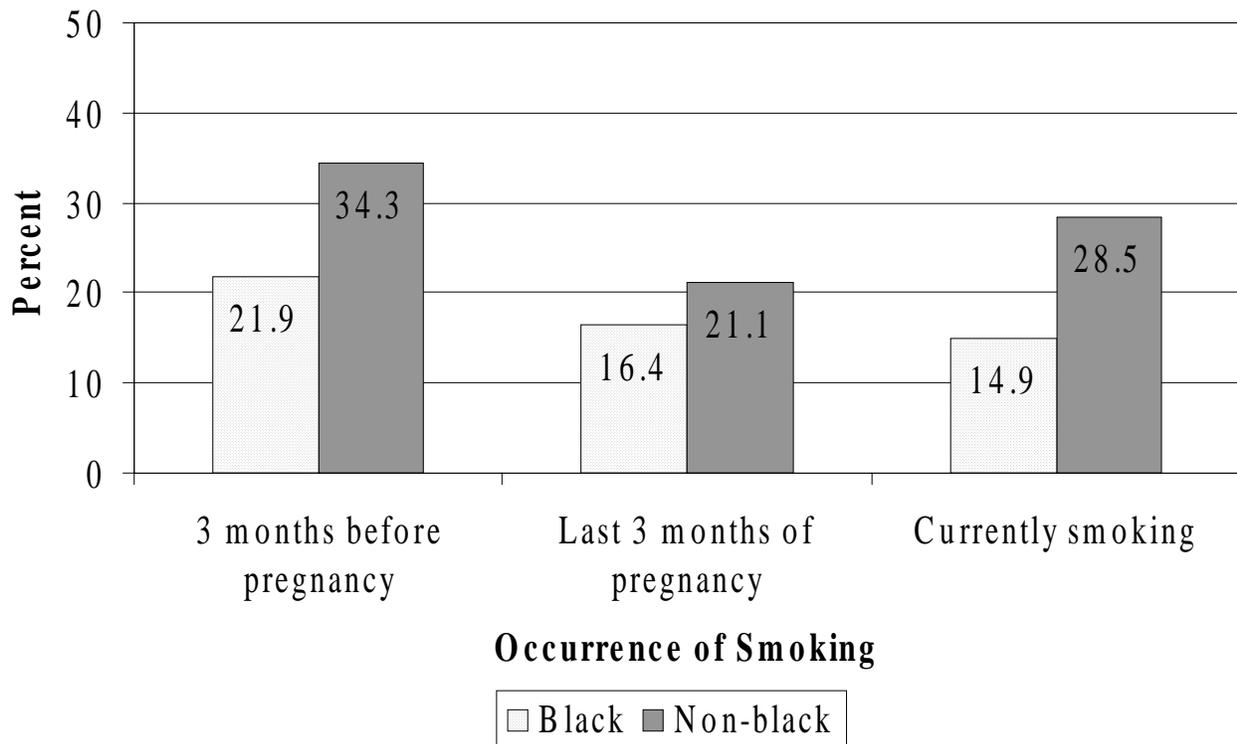
A smaller proportion of respondents aged 30 and older reported smoking at each of the three periods surrounding pregnancy compared with younger respondents (Figure 35).

FIGURE 35
Percentage of Mothers Who Smoked by Mother's Age:
Before, During and After Pregnancy
1997 Michigan PRAMS



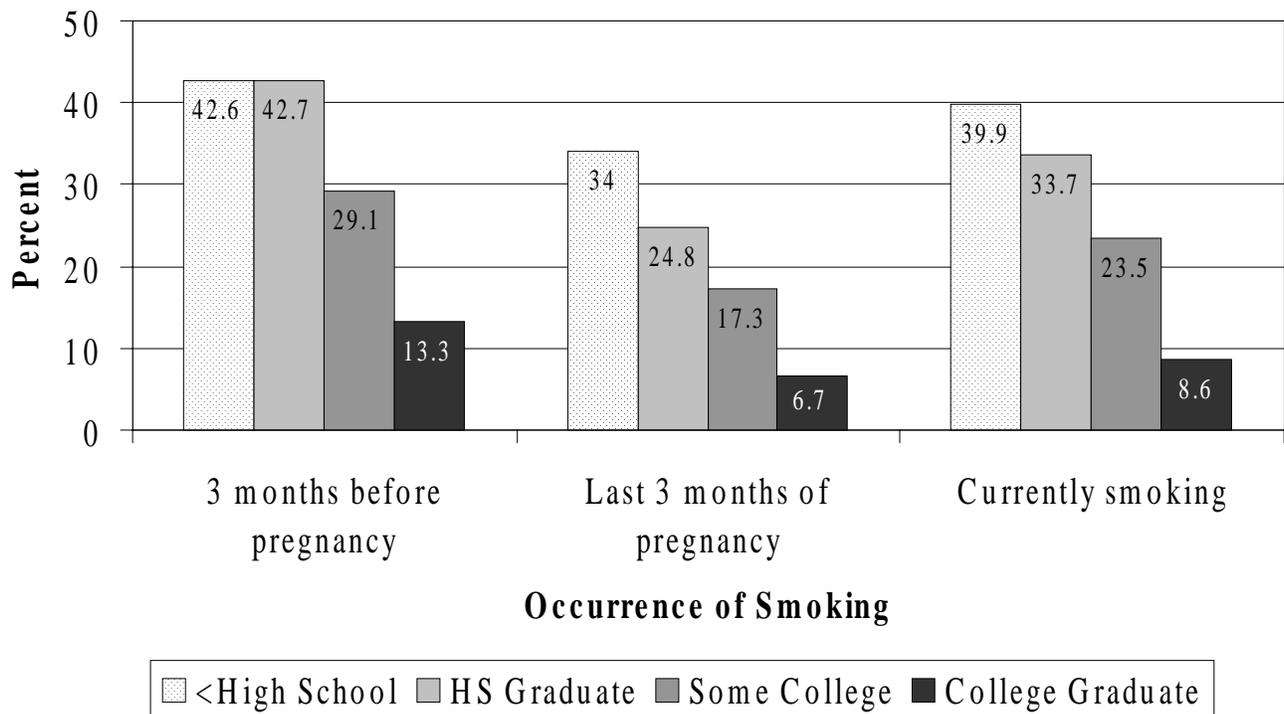
Black respondents were less likely to have reported smoking during any of the three periods surrounding pregnancy compared with non-black respondents (Figure 36).

FIGURE 36
Percentage of Mothers Who Smoked by Mother's RACE:
Before, During and After Pregnancy
1997 Michigan PRAMS



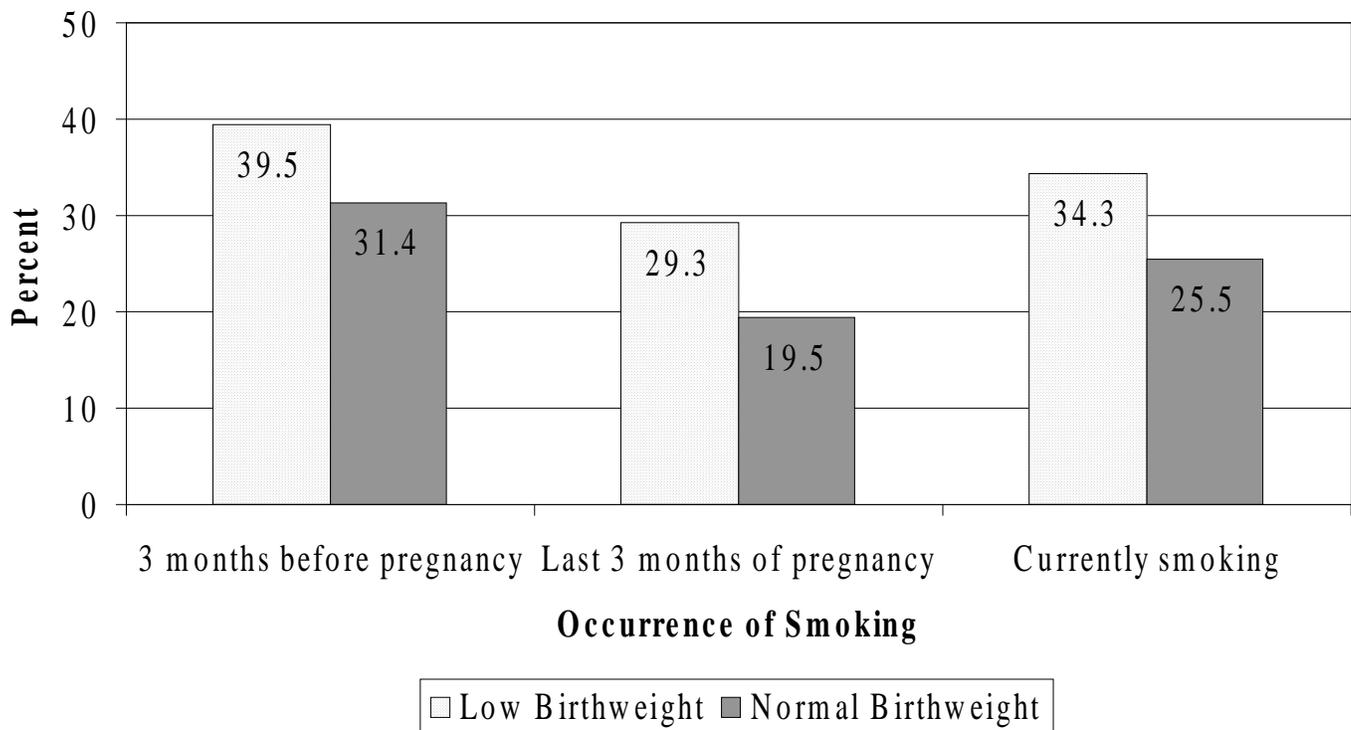
At each of the time periods surrounding pregnancy, education was negatively correlated with cigarette smoking (Figure 37).

FIGURE 37
Percentage of Mothers Who Smoked by Mother's Education Level:
Before, During and After Pregnancy
1997 Michigan PRAMS



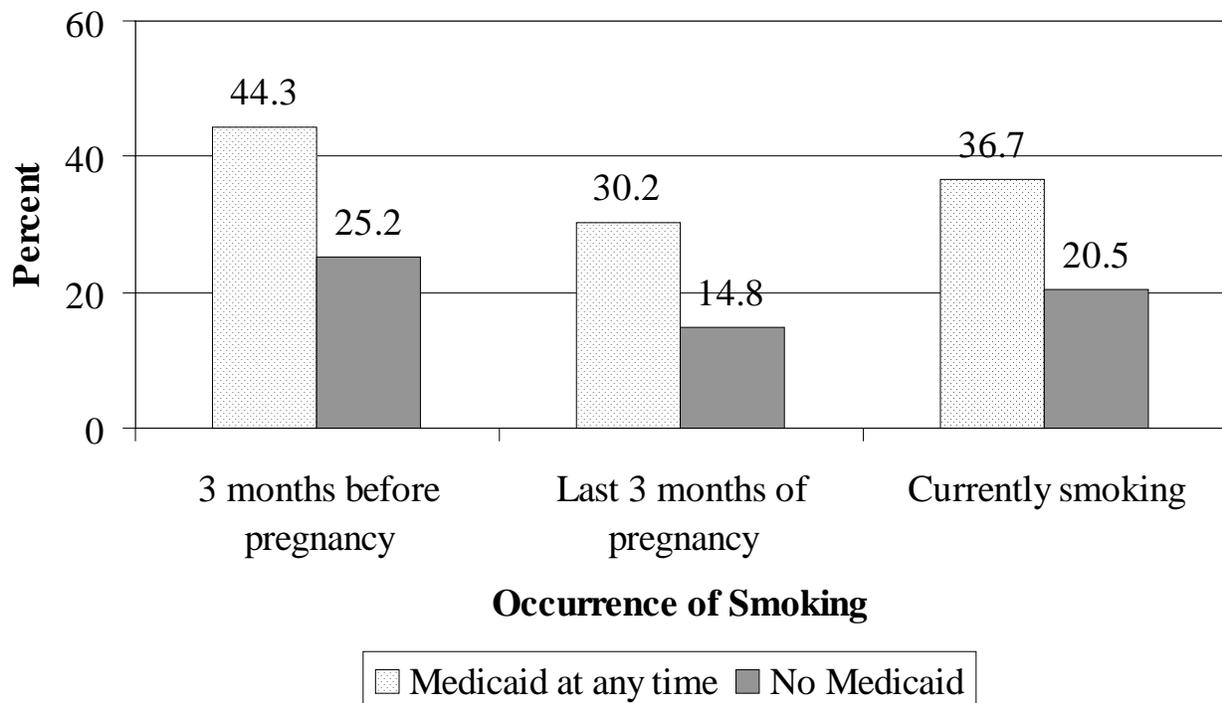
At each time period surrounding pregnancy, respondents with low birthweight infants were also more likely to have smoked compared with respondents with normal birthweight infants (Figure 38).

FIGURE 38
Percentage of Mothers Who Smoked by Infant's Birthweight:
Before, During and After Pregnancy
1997 Michigan PRAMS



A higher proportion of respondents with Medicaid coverage at any time (i.e., Medicaid before pregnancy, Medicaid paid for prenatal care, or Medicaid paid for delivery) reported smoking at each time point compared to respondents who were not receiving Medicaid coverage at any time (Figure 39).

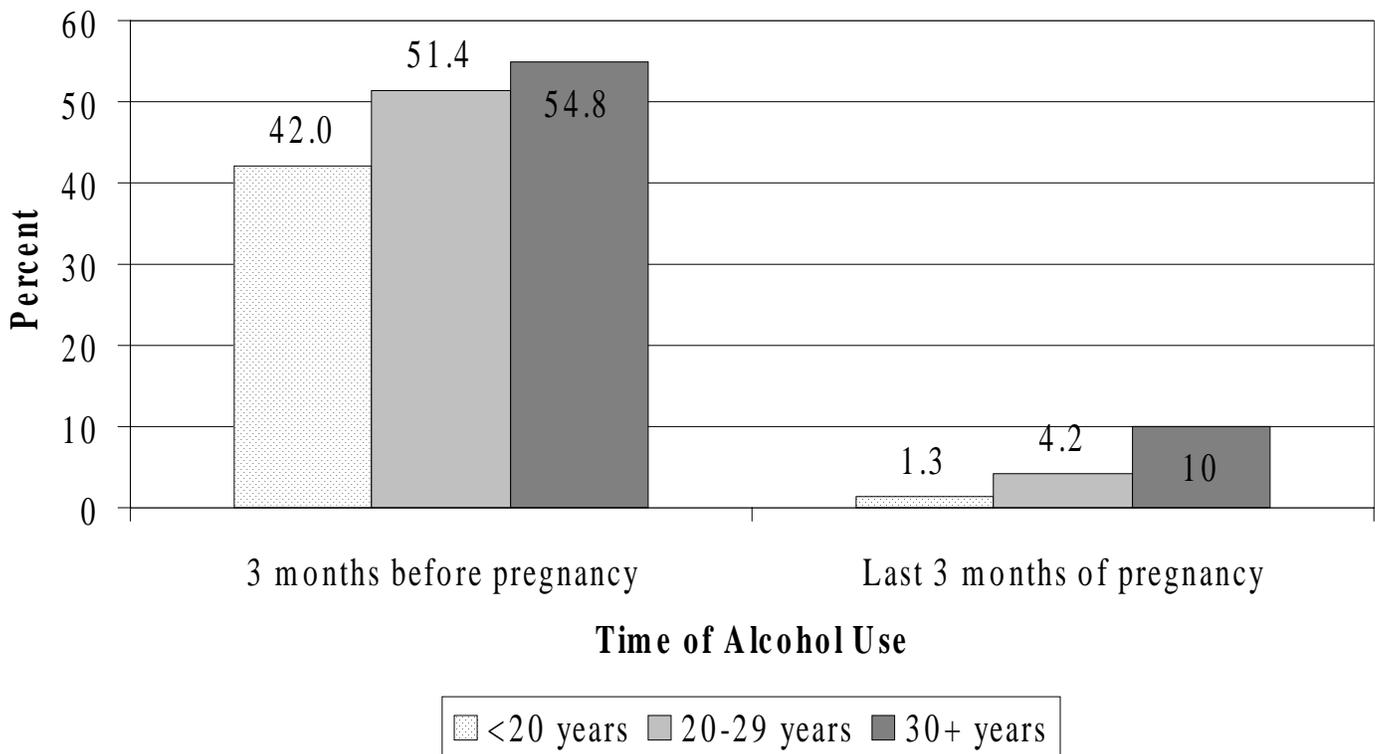
FIGURE 39
Percentage of Mothers Who Smoked by Medicaid Status:
Before, During and After Pregnancy
1997 Michigan PRAMS



Alcohol Consumption

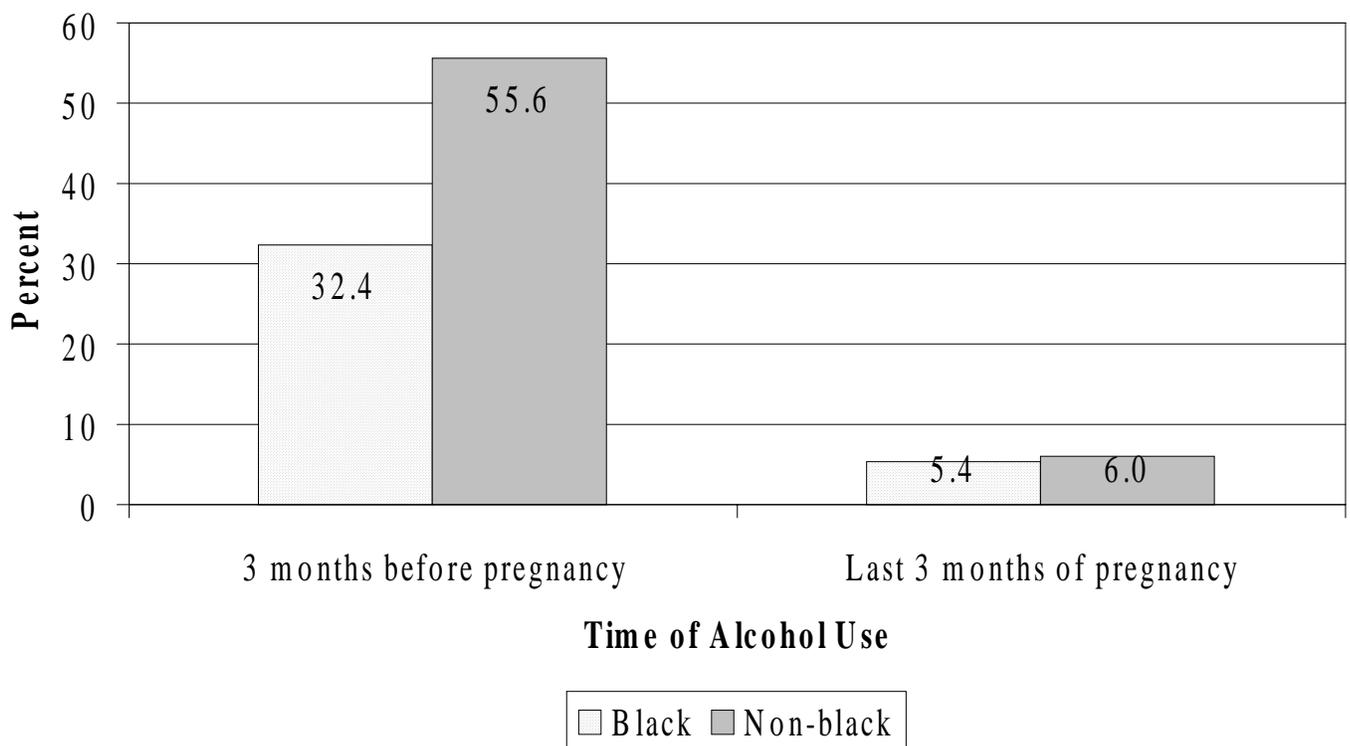
Respondents were asked whether or not they had consumed alcohol during the three-month period prior to becoming pregnant and during the last three months prior to delivery. Nearly half of all respondents (51.4%, 95% CI \pm 3.1%) reported drinking alcohol during the three-month period preceding pregnancy, while 5.9 percent (95% CI \pm 1.6%) reported drinking alcohol during the last three months preceding delivery. These indicators were related to age. Women over the age of 19 were more likely to drink alcohol in the three months prior to pregnancy, compared to teenaged respondents. Women aged 30 and older were three to seven times as likely to drink alcohol in the three months preceding delivery as were younger women. (Figure 40).

FIGURE 40
Percentage of Mothers Who Consumed Alcohol by Mother's Age:
Before and During Pregnancy
1997 Michigan PRAMS



Non-black women were more likely to drink alcohol three months prior to pregnancy than were black respondents (Figure 41). Drinking rates during the last three months of pregnancy were similar between black and non-black women.

FIGURE 41
 Percentage of Mothers Who Consumed Alcohol by Mother's Race:
 Before and During Pregnancy
 1997 Michigan PRAMS



APPENDIX I. METHODOLOGY

Survey Protocol, Sample, and Instrument

The data collection for the 1997 Michigan Pregnancy Risk Assessment Monitoring System (PRAMS) was conducted by the Michigan Department of Community Health and the Michigan Public Health Institute. Software designed under the supervision of the Centers for Disease Control and Prevention (CDC) was used to manage the 1997 sample, enforce the protocols, and enter the data.

There are two main components to the data collection for Michigan PRAMS. In the mail and phone component, the data collection methods used are standardized protocols used by CDC. A stratified systematic sample of approximately 200 new mothers is selected monthly from a frame of eligible birth certificates. Each sampled mother is mailed a letter of explanation, a 12-page survey, and an incentive two to six months after the birth of her child. A reminder letter, a second, and a third package are sent to those who do not respond. In addition, telephone calls are made to mothers who do not respond to the survey.

In the hospital component of data collection, at least 400 black mothers are sampled from hospital delivery logs per year, over 26 time points. Interviews are attempted before the mother leaves the hospital following delivery. A second mailed questionnaire follows two to six months after the in-hospital interview, which focuses on post-partum experiences. In 1997, five urban hospitals in Michigan participated in the PRAMS project (Hurley Medical Center, Hutzel Hospital, Sinai Hospital, Grace Hospital, and Riverview Hospital). The CDC methodology for PRAMS used by other states does not include the hospital component. This component is important for Michigan, however, because it allows oversampling of black women who are difficult to access via mailed surveys.

A total of 3,349 women were selected by the sampling frame to be eligible to participate in the study, and 2,211 women actually participated in the study. The demographic characteristics of the sample in this survey are presented in Table 1 in Appendix II.

The 1997 survey instrument included questions developed for PRAMS by the Centers for Disease Control and Prevention, as well as state-added questions. The survey instrument included questions on previous pregnancy, intendedness of pregnancy, health insurance, prenatal care, satisfaction with prenatal care, alcohol and tobacco use, major life stressors during pregnancy, physical abuse, hospital stays (pre-delivery and delivery), breastfeeding, second-hand smoke contact for infant, sleep position of infant, routine well baby care, income sources, resources needed, and resources accessed. Topics of particular interest were selected from the survey to include in this report.

Unless otherwise noted, respondents who refused to answer or who answered that they did not know were not included in the calculation of percentages of the population considered to have a certain characteristic or behavior. Sample sizes for each estimate varied and are reflected in the 95 percent confidence interval limits presented with each estimate.

As with all survey estimates, these estimates are subject to sampling error. The confidence intervals presented are an attempt to quantify this sampling error and to clarify the degree of confidence in the estimates presented.

Weighting and Interpretation of the Results

The 1997 Michigan PRAMS data was weighted by the Food and Nutrition Database Research Center at Michigan State University. There were three weighting components, which adjusted for the sample design, nonresponse, and omissions from the sampling frame. For the nonresponse step, development of the weight involved identifying, within each stratum, factors that are associated with response. These factors were age, education, and marital status. The stratum in the survey were race (black and non-black) and birthweight (low and normal). The weighting procedure results in estimates that are reflective of the characteristics and behaviors of women in Michigan in 1997 who had a live birth.

In 1997 the total response rate statewide was 64 percent. The response rates for each of the four stratum were as follows:

<u>Stratum</u>	
LBW, black	54%
LBW, non-black	72%
NBW, black	55%
NBW, nonblack	78%

When the total response rate in any of the strata is less than 70 percent then the interpretation of the results for that stratum must be viewed with caution.

APPENDIX II. TABLES OF RESULTS

Table 1
Percentage of mother's demographic characteristics
1997 Michigan PRAMS

	Sample n	Estimated N	Percent
Total	2,211	132,269	100.0
Age			
≤19 years	349	16,912	12.8
20-29 years	1,122	68,878	52.1
30+ years	740	46,478	35.1
Race			
Black	1,039	24,131	18.2
Non-black	1,172	108,138	81.8
Education			
<H.S. Graduate	512	22,593	17.5
H.S. Graduate	730	42,212	32.6
Some College	556	33,499	25.9
College Graduate	381	31,108	24.0
Marital Status			
Married	1,114	86,468	65.4
Other	1,097	45,801	34.6
Medicaid			
Medicaid at anytime ¹	1,056	47,782	36.1
Before pregnancy	543	19,520	14.9
PNC payment	882	39,727	30.5
Delivery payment	859	39,932	31.2
No Medicaid at anytime	1,155	84,487	63.9

1. Medicaid at anytime was defined as having had Medicaid coverage just before pregnancy occurred, Medicaid-paid prenatal care, or Medicaid-paid delivery.

Table 2
Prevalence of low and normal birthweight by demographic characteristics
 1997 Michigan PRAMS

	Low Birthweight Infants					Normal Birthweight Infants				
	Sample n	Estimated N	Percent	95% CI		Sample n	Estimated N	Percent	95% CI	
Total	1,053	10,176	7.7	± 0.2		1,128	121,769	92.3	± 0.2	
Age										
<19 years	175	1,628	9.6	± 2.2		172	15,257	90.4	± 2.2	
20-29 years	515	5,028	7.3	± 0.8		594	63,727	92.7	± 0.8	
30+ years	363	3,520	7.6	± 1.0		362	42,785	92.4	± 1.0	
Race										
Black	522	3,193	13.3	± 0.6		509	20,892	86.7	± 0.6	
Non-black	531	6,983	6.5	± 0.2		619	100,876	93.5	± 0.2	
Education										
<H.S. Graduate	287	2,760	12.2	± 2.2		222	19,791	87.8	± 2.2	
H.S. Graduate	359	3,782	9.0	± 1.2		358	38,308	91.0	± 1.2	
Some College	250	2,161	6.5	± 1.0		303	31,306	93.5	± 1.0	
College Graduate	143	1,318	4.3	± 0.8		228	29,671	95.8	± 0.8	
Marital Status										
Married	481	5,187	6.0	± 0.4		615	81,072	94.0	± 0.4	
Other	572	4,989	10.9	± 1.2		513	40,697	89.1	± 1.2	

Table 3
 Prevalence of pregnancies by intendedness of pregnancy
 1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Total	2,025	121,921	100	
Intendedness of pregnancy				
Wanted to become pregnant sooner	300	20,378	16.7	± 2.5
Wanted to become pregnant later	712	40,012	32.8	± 3.1
Became pregnant when wanted	680	47,540	39.0	± 3.3
Did not want to become pregnant	333	13,992	11.5	± 2.0

Table 4
Prevalence of intended and unintended pregnancies by demographic characteristics
1997 Michigan PRAMS

	Intended				Unintended			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	902	65,505	56.8 ±	6.7	913	49,729	43.2 ±	6.7
Age								
≤19 years	43	2,685	18.7 ±	7.9	229	11,693	81.3 ±	7.9
20-29 years	451	32,980	55.1 ±	4.8	475	26,891	44.9 ±	4.8
30+ years	408	29,840	72.8 ±	5.0	209	11,145	27.2 ±	5.0
Race								
Black	253	5,528	31.0 ±	4.4	532	12,288	69.0 ±	4.4
Non-black	649	59,976	61.6 ±	3.9	381	37,442	38.4 ±	3.9
Education								
<H.S. Graduate	97	4,421	24.6 ±	7.5	284	13,559	75.4 ±	7.5
H.S. Graduate	261	16,450	47.8 ±	6.4	321	17,991	52.2 ±	6.4
Some College	269	20,228	66.2 ±	6.0	206	10,317	33.8 ±	6.0
College Graduate	263	22,862	76.2 ±	5.8	91	7,161	23.9 ±	5.8
Marital Status								
Married	679	55,229	70.7 ±	3.9	298	22,934	29.3 ±	3.9
Other	223	10,276	27.7 ±	5.3	615	26,795	72.3 ±	5.3
Infant's Birthweight								
Low	422	4,418	53.9 ±	3.7	420	3,775	46.1 ±	3.7
Normal	464	60,917	57.1 ±	3.6	481	45,810	42.9 ±	3.6
Medicaid								
Medicaid at anytime ¹	245	11,507	31.3 ±	5.5	537	25,223	68.7 ±	5.5
Before pregnancy	94	3,259	22.8 ±	7.3	308	11,021	77.2 ±	7.3
No Medicaid at anytime	657	53,997	68.8 ±	3.9	376	24,506	31.2 ±	3.9

1. Medicaid at anytime was defined as having had Medicaid coverage just before pregnancy occurred, Medicaid-paid prenatal care, or Medicaid-paid delivery.

Table 5
Prevalence of birth control use among women not intending pregnancy
1997 Michigan PRAMS

	Birth Control Use (Not Intending)			
	Sample n	Estimated N	Percent	95% CI
Total	333	19,984	40.3 ±	5.1
Age				
≤19 years	79	4,680	40.2 ±	10.8
20-29 years	178	10,683	39.8 ±	6.9
30+ years	76	4,620	41.5 ±	10.4
Race				
Black	177	3,854	31.6 ±	5.2
Non-black	156	16,130	43.1 ±	6.5
Education				
<H.S. Graduate	89	5,017	37.1 ±	9.8
H.S. Graduate	124	7,443	41.5 ±	8.5
Some College	76	3,821	37.2 ±	10.3
College Graduate	41	3,443	48.1 ±	13.9
Marital Status				
Married	121	10,256	44.8 ±	7.9
Other	212	9,728	36.4 ±	6.7
Infant's Birthweight				
Low	152	1,375	37.0 ±	5.3
Normal	175	18,515	40.5 ±	5.5
Medicaid				
Medicaid at anytime ¹	187	9,373	37.3 ±	6.9
Before pregnancy	104	3,723	34.0 ±	9.1
No Medicaid at anytime	146	10,611	43.4 ±	7.5

1. Medicaid at anytime was defined as having had Medicaid coverage just before pregnancy occurred, Medicaid-paid prenatal care, or Medicaid-paid delivery.

Table 6
Prenatal care started by demographic characteristics
1997 Michigan PRAMS

	First Trimester				Second Trimester			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	1,816	115,567	88.8	± 2.0	272	11,562	8.9	± 1.8
Age								
≤19 years	243	12,673	75.7	± 7.3	70	3,138	18.8	± 6.7
20-29 years	928	60,271	88.8	± 2.5	143	6,224	9.2	± 2.4
30+ years	645	42,624	93.8	± 2.4	59	2,200	4.8	± 2.2
Race								
Black	778	17,895	76.0	± 3.5	177	4,321	18.3	± 3.1
Non-black	1,038	97,672	91.7	± 2.2	95	7,241	6.8	± 2.0
Education								
<H.S. Graduate	336	15,722	70.5	± 6.7	117	5,115	23.0	± 6.3
H.S. Graduate	597	36,326	88.5	± 3.5	88	3,523	8.6	± 2.9
Some College	495	31,535	94.8	± 2.4	48	1,610	4.8	± 2.4
College Graduate	365	30,153	97.7	± 1.8	14	700	2.3	± 1.8
Marital Status								
Married	1,016	80,359	94.4	± 1.8	69	3,961	4.7	± 1.6
Other	800	35,208	78.3	± 4.1	203	7,601	16.9	± 3.7
Infant's Birthweight								
Low	843	8,285	82.8	± 2.5	141	1,276	12.8	± 2.2
Normal	948	107,040	89.4	± 2.0	126	10,204	8.5	± 1.8
Medicaid Paid PNC								
Yes	675	30,364	77.4	± 4.7	173	8,111	20.7	± 4.5
No	1,135	85,111	95.6	± 1.4	98	3,440	3.9	± 1.4

Table 6, cont.
Prenatal care started by demographic characteristics
1997 Michigan PRAMS

	Third Trimester				No Prenatal Care			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	35	1,381	1.1 ± 0.6		49	1,589	1.2 ± 0.6	
Age								
≤19 years	15	533	3.2 ± 2.5		12	390	2.3 ± 2.9	
20-29 years	15	657	1.0 ± 0.8		20	751	1.1 ± 0.8	
30+ years	5	190	0.4 ± 0.8		17	448	1.0 ± 0.8	
Race								
Black	24	617	2.6 ± 1.2		38	725	3.1 ± 1.4	
Non-black	11	763	0.7 ± 0.6		11	863	0.8 ± 0.8	
Education								
<H.S. Graduate	20	640	2.9 ± 1.8		24	811	3.6 ± 0.8	
H.S. Graduate	11	527	1.3 ± 1.4		19	689	1.7 ± 1.4	
Some College	3	55	0.2 ± 0.2		4	76	0.2 ± 0.4	
College Graduate	0	0	0.0 ± 0.0		0	0	0.0 ± 0.0	
Marital Status								
Married	5	564	0.7 ± 0.8		8	237	0.3 ± 0.4	
Other	30	817	1.8 ± 1.0		41	1,351	3.0 ± 1.8	
Infant's Birthweight								
Low	17	141	1.4 ± 0.8		64	307	3.1 ± 1.2	
Normal	18	1,239	1.0 ± 0.6		15	1,282	1.1 ± 0.8	
Medicaid Paid PNC								
Yes	17	735	1.9 ± 1.4		1	45	0.1 ± 0.2	
No	15	472	0.5 ± 0.4		0	0	0.0 ± 0.0	

Table 7
 Prevalence of starting prenatal care as early as
 mothers' desired by demographic characteristics
 1997 Michigan PRAMS

	Prenatal Care as Early as Mother Desired				
	Sample n	Estimated N	Percent	95% CI	
Total	1,625	103,870	79.7	±	2.5
Age					
<19 years	205	10,110	61.1	±	8.4
20-29 years	826	53,591	78.8	±	3.7
30+ years	594	40,169	87.7	±	3.3
Race					
Black	699	16,757	71.6	±	3.7
Non-black	926	87,113	81.5	±	2.9
Education					
<H.S. Graduate	308	14,359	65.6	±	7.1
H.S. Graduate	531	30,606	73.7	±	5.1
Some College	436	28,884	86.7	±	3.9
College Graduate	327	28,151	90.9	±	3.7
Marital Status					
Married	923	73,141	85.2	±	2.9
Other	702	30,729	69.0	±	4.7
Infant's Birthweight					
Low	749	7,563	76.3	±	2.9
Normal	854	96,091	80.0	±	2.7
Medicaid Paid PNC					
Yes	599	26,227	66.3	±	5.3
No	1,022	77,594	86.3	±	2.7

Table 8
Reasons for not getting prenatal care as early as mothers' desired
1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Reason for No Prenatal Care				
Could Not Get Earlier Appointment	149	8,607	31.9	± 6.5
Didn't Know I Was Pregnant	217	9,895	36.7	± 6.7
Lack of Money or Insurance	90	4,679	17.4	± 5.1
Too Many Other Things Going On	44	1,846	6.8	± 3.3
Couldn't Find Doctor to Take Me as a Patient	19	978	3.6	± 2.7
No Transportation	40	1,334	5.0	± 2.5
Couldn't Get Childcare for Other Children	24	1,140	4.2	± 2.5
Other	77	3,329	12.3	± 4.5

Table 9
Source of payment for prenatal care
1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Source of Payment				
Private Health Insurance	777	44,103	67.5	± 3.5
Medicaid	882	39,727	30.5	± 2.7
Personal Income	227	17,908	13.7	± 2.4
MICHCARE	60	4,023	3.1	± 1.2
Free Care	20	553	0.4	± 0.4
Other	63	3,334	2.6	± 1.0

Table 10
Prevalence of mothers with health insurance or Medicaid as source
of prenatal care payment by demographic characteristics
1997 Michigan PRAMS

	Private Health Insurance for PNC				Medicaid Coverage for PNC			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	777	44,103	67.5	± 3.5	882	39,727	30.5	± 2.7
Age								
≤19 years	76	3,285	36.7	± 10.3	218	10,392	63.1	± 8.7
20-29 years	355	19,622	61.3	± 5.3	505	23,503	34.5	± 4.1
30+ years	346	21,196	87.1	± 3.8	159	5,832	12.7	± 3.2
Race								
Black	240	3,862	32.8	± 4.7	576	14,078	60.4	± 4.0
Non-black	537	40,241	75.2	± 4.1	306	25,649	24.0	± 3.3
Education								
<H.S. Graduate	70	3,248	29.2	± 9.1	355	13,265	61.3	± 7.8
H.S. Graduate	234	11,531	56.8	± 6.7	339	18,006	43.3	± 5.7
Some College	246	14,558	81.7	± 5.3	155	6,247	18.7	± 4.4
College Graduate	219	14,113	94.3	± 3.6	20	1,180	3.8	± 2.4
Marital Status								
Married	563	35,610	82	± 3.8	193	12,139	14.1	± 2.8
Other	214	8,493	38.8	± 6.3	689	27,587	62.2	± 5.0
Infant's Birthweight								
Low	359	2,668	55.2	± 3.8	448	4,160	42.4	± 3.3
Normal	409	41,375	68.5	± 3.8	425	35,490	29.5	± 3.0

Table 11
Prevalence of infant's birthweight by source of prenatal care payment
1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI	
Source of Payment					
Private Health Insurance	768	44,043	100		
Low Birthweight	359	2,668	6.1	±	0.6
Normal Birthweight	409	41,375	93.9	±	0.6
Medicaid	873	39,630	100		
Low Birthweight	448	4,160	10.5	±	1.4
Normal Birthweight	425	35,470	89.5	±	1.4
Personal Income	225	17,893	100		
Low Birthweight	99	990	5.5	±	1.4
Normal Birthweight	126	16,903	94.5	±	1.4
MICH CARE	58	4,009	100		
Low Birthweight	29	279	7.0	±	3.7
Normal Birthweight	29	3,730	93.1	±	3.7
Free Care	20	553	100		
Low Birthweight	11	63	11.5	±	10.2
Normal Birthweight	9	490	88.5	±	10.2
Other	62	3,327	100		
Low Birthweight	31	294	8.8	±	4.7
Normal Birthweight	31	3,033	91.2	±	4.7

Table 12
Place where prenatal care was received by demographic characteristics
1997 Michigan PRAMS

	Hospital/Clinic				Health Department			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	352	11,374	19.7 ±	2.9	58	2,078	3.6 ±	1.6
Age								
≤19 years	87	3,154	41.1 ±	11.0	20	604	7.9 ±	5.9
20-29 years	175	6,044	21.4 ±	4.5	28	1,155	4.1 ±	2.4
30+ years	90	2,175	9.9 ±	3.5	10	319	1.5 ±	1.6
Race								
Black	243	5,180	55.3 ±	5.9	39	644	6.9 ±	2.7
Non-black	109	6,193	12.8 ±	3.3	19	1,434	3.0 ±	1.8
Infant's Birthweight								
Low	189	1,299	31.2 ±	3.9	29	181	4.4 ±	1.8
Normal	162	10,068	18.8 ±	3.3	27	1,889	3.5 ±	1.8
	Doctor's Office, HMO,PPO				Other			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	689	41,173	71.2 ±	3.5	64	3,176	5.5 ±	2.0
Age								
≤19 years	72	3,424	44.7 ±	11.6	11	486	6.3 ±	5.1
20-29 years	341	19,757	70.0 ±	5.3	29	1,266	4.5 ±	2.5
30+ years	276	17,992	82.1 ±	4.9	24	1,423	6.5 ±	3.5
Race								
Non-black	512	38,236	79.0 ±	4.1	33	2,563	5.3 ±	2.4
Black	177	2,937	31.3 ±	5.3	31	613	6.5 ±	2.9
Infant's Birthweight								
Low	317	2,487	59.8 ±	4.1	28	194	4.7 ±	1.8
Normal	362	38,619	72.1 ±	3.9	34	2,967	5.5 ±	2.2

Table 13
 Topics addressed by health care professional during prenatal care
 1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Medication Use	1,885	116,732	91.2 ±	1.8
Early Labor	1,741	111,048	86.5 ±	2.2
Nutrition	1,864	113,181	88.1 ±	2.0
Baby's Development	1,830	111,314	86.8 ±	2.2
Testing for HIV	1,816	106,918	83.9 ±	2.5
Alcohol Use	1,779	102,768	80.8 ±	2.5
Smoking	1,792	104,219	81.9 ±	2.5
Breast Feeding	1,722	102,482	80.1 ±	2.5
Birth Control	1,689	102,265	79.5 ±	2.5
Illegal Drugs	1,643	92,547	72.7 ±	2.9
Preventing HIV	1,224	64,180	50.3 ±	3.3
Seatbelt Use	1,090	64,589	50.5 ±	3.3
Physical Abuse	712	35,826	28.2 ±	2.9

Table 14
 Topics addressed by health care professional during
 prenatal care by Medicaid paid for PNC
 1997 Michigan PRAMS

	Medicaid Paid					No Medicaid				
	Sample n	Estimated	Percent	±	95% CI	Sample n	Estimated	Percent	±	95% CI
Medication Use	751	34,798	88.4	±	3.3	1,131	81,859	92.4	±	2.2
Early Labor	712	33,661	85.0	±	3.7	1,026	77,311	87.2	±	2.5
Nutrition	772	34,677	87.6	±	3.5	1,089	78,429	88.3	±	2.5
Baby's Development	760	35,331	89.2	±	2.9	1,067	75,908	85.7	±	2.7
Testing for HIV	784	34,688	88.2	±	3.7	1,029	72,154	82.0	±	3.1
Alcohol Use	769	33,766	85.9	±	4.1	1,007	68,926	78.5	±	3.3
Smoking	782	34,582	87.5	±	3.7	1,007	69,562	79.4	±	3.3
Breast Feeding	730	32,620	82.3	±	4.3	989	69,786	79.0	±	3.3
Birth Control	746	33,728	85.3	±	3.7	940	68,461	76.9	±	3.3
Illegal Drugs	754	32,729	83.1	±	4.3	886	59,742	67.9	±	3.7
Preventing HIV	619	25,710	65.2	±	5.3	602	38,394	43.6	±	3.9
Seatbelt Use	455	20,366	51.5	±	5.5	633	44,158	50.0	±	4.1
Physical Abuse	388	16,156	41.2	±	5.5	322	19,605	22.3	±	3.3

Table 15
Prevalence of ever breastfed by demographic characteristics
1997 Michigan PRAMS

	Ever Breast Fed			
	Sample n	Estimated N	Percent	95% CI
Total	1,030	75,717	61.7 ±	3.1
Age				
≤19 years	107	6,351	41.2 ±	9.4
20-29 years	526	39,555	62.1 ±	4.5
30+ years	397	29,811	68.2 ±	5.1
Race				
Black	335	7,346	39.8 ±	4.5
Non-black	695	68,371	65.5 ±	3.7
Education				
<H.S. Graduate	132	7,499	39.4 ±	8.4
H.S. Graduate	286	19,934	51.7 ±	6.1
Some College	310	21,631	66.9 ±	5.9
College Graduate	284	24,747	82.3 ±	5.1
Marital Status				
Married	690	59,104	70.4 ±	3.7
Other	340	16,613	42.8 ±	5.5
Infant's Birthweight				
Low	439	4,379	50.8 ±	3.7
Normal	570	71,084	62.4 ±	3.5
Medicaid				
Medicaid at anytime ¹	333	18,297	45.1 ±	5.7
Before pregnancy	149	5,697	35.4 ±	7.8
No Medicaid at anytime	697	57,420	69.8 ±	3.7

1. Medicaid at anytime w as defined as having had Medicaid coverage just before pregnancy occurred, Medicaid-paid prenatal care, or Medicaid-paid delivery.

Table 16
Reasons for stopping breastfeeding
1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Reason for Stopping Breast Feeding				
Go to Work or School	170	12,096	25.2 ±	4.7
Baby Didn't BF Very Well	183	13,550	28.3 ±	5.1
Not Enough Milk	180	12,528	26.1 ±	4.9
Felt It Was Time to Stop	90	8,042	16.8 ±	4.3
Didn't Want to	87	6,749	14.1 ±	3.7
Taking Medication	59	3,044	6.4 ±	2.5
Baby Not with Mother	21	368	0.8 ±	0.6
Other	163	11,196	23.4 ±	4.5

Table 17
Reasons for not breastfeeding among mothers who never breastfed
1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Reason for Stopping Breast Feeding				
Didn't Want to	579	30,985	66.2 ±	5.1
Go to Work or School	215	10,893	23.3 ±	4.3
Taking Medication	77	3,450	7.4 ±	2.7
Better to Bottle Feed	92	3,725	8.0 ±	2.5
Takes Too Much Time	51	2,608	5.6 ±	2.4
Baby Not with Mother	44	632	1.4 ±	0.6
Other	163	8,504	18.2 ±	4.1

Table 18
Prevalence of mothers receiving WIC by demographic characteristics
1997 Michigan PRAMS

	Mothers Receiving WIC			
	Sample n	Estimated N	Percent	95% CI
Total	1,027	50,679	38.8 ±	3.1
Age				
≤19 years	256	13,475	79.7 ±	7.1
20-29 years	588	29,350	42.9 ±	4.3
30+ years	183	7,854	17.3 ±	3.9
Race				
Black	635	15,179	63.5 ±	3.9
Non-black	392	35,500	33.2 ±	3.7
Education				
<H.S. Graduate	345	14,625	65.2 ±	7.3
H.S. Graduate	404	23,520	56.4 ±	5.7
Some College	230	10,006	29.9 ±	5.3
College Graduate	31	1,060	3.5 ±	2.0
Marital Status				
Married	279	18,060	21.2 ±	3.3
Other	748	32,620	71.8 ±	4.5
Infant's Birthweight				
Low	497	4,569	45.5 ±	3.3
Normal	515	45,962	38.2 ±	3.3

Table 19
Prevalence of mother's hospital stay following delivery
by source of prenatal care payments
1997 Michigan PRAMS

	Private Insurance				Medicaid			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	765	43,809	100		789	36,735	100	
Mother nights in hospital								
Did Not Stay	7	292	0.7	± 0.8	10	537	1.5	± 1.4
1 night	181	13,079	29.9	± 4.7	209	11,568	31.5	± 5.5
2 nights	265	17,080	39.0	± 4.9	277	15,595	42.5	± 5.9
3 nights	310	13,190	30.1	± 4.5	283	8,676	23.6	± 4.7
4+ nights	2	168	0.4	± 0.6	3	14	0.04	± 0.0
Did Not Go	0	0	0.0	± 0.0	7	345	0.9	± 1.4
	Personal Income				Other			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	221	17,810	100		56	3,013	100	
Mother nights in hospital								
Did Not Stay	3	264	1.5	± 2.0	0	0	0.0	± 0.0
1 night	51	5,057	28.4	± 8.2	13	668	22.2	± 15.9
2 nights	76	7,743	43.5	± 8.8	19	1,331	44.2	± 21.8
3 nights	85	4,218	23.7	± 7.4	23	1,010	33.5	± 19.8
4+ nights	6	528	3.0	± 3.3	1	3	0.1	± 0.2
Did Not Go	0	0	0.0	± 0.0	0	0	0.0	± 0.0
	MICHCARE				Free Care			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	58	4,003	100		17	530	100	
Mother nights in hospital								
Did Not Stay	0	0	0.0	± 0.0	0	0	0.0	± 0.0
1 night	18	1,884	47.1	± 19.8	3	105	19.9	± 23.3
2 nights	17	947	23.7	± 15.5	7	294	55.5	± 35.5
3 nights	23	1,172	29.3	± 18.0	6	124	23.5	± 27.8
4+ nights	0	0	0.0	± 0.0	0	0	0.0	± 0.0
Did Not Go	0	0	0.0	± 0.0	1	6	0.0	± 0.0

Table 20
Prevalence of infant's hospital stay following delivery by source
of prenatal care payments
1997 Michigan PRAMS

	Private Insurance				Medicaid			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total	761	43,653	100		781	36,708	100	
Infant nights in hospital								
Did Not Stay	13	545	1.3	± 1.2	11	317	0.9	± 0.6
1 night	166	13,426	30.8	± 4.7	183	12,534	34.2	± 5.7
2 nights	211	16,320	37.4	± 4.9	204	14,223	38.8	± 5.9
3 nights	369	13,231	30.3	± 4.5	369	9,110	24.8	± 4.5
4+ nights	2	131	0.3	± 0.6	2	54	0.2	± 0.2
Did Not Go	0	0	0.0	± 0.0	12	469	1.3	± 1.4
Personal Income								
	Sample n	Estimated N	Percent	95% CI	Other			
Total	220	17,805	100		56	3,013	100	
Infant nights in hospital								
Did Not Stay	6	90	0.5	± 0.6	2	138	4.6	± 8.2
1 night	48	5,472	30.7	± 8.4	11	662	22.0	± 15.9
2 nights	66	7,611	42.8	± 8.8	16	1,190	39.5	± 21.8
3 nights	94	4,322	24.3	± 7.4	26	1,019	33.8	± 19.8
4+ nights	5	290	1.6	± 2.0	1	3	0.1	± 0.2
Did Not Go	1	20	0.1	± 0.2	0	0	0.0	± 0.0
MICH CARE								
	Sample n	Estimated N	Percent	95% CI	Free Care			
Total	57	3,992	100		17	530	100	
Mother nights in hospital								
Did Not Stay	0	0	0.0	± 0.0	0	0	0.0	± 0.0
1 night	20	2,133	53.4	± 19.6	3	105	19.9	± 23.1
2 nights	15	917	23.0	± 15.3	6	249	47.0	± 38.2
3 nights	21	923	23.1	± 16.1	8	175	33.1	± 31.8
4+ nights	0	0	0.0	± 0.0	0	0	0.0	± 0.0
Did Not Go	1	20	0.5	± 1.0	0	0	0.0	± 0.0

Table 21
Prevalence of infant's placed in intensive care units by
mother's demographic characteristics
1997 Michigan PRAMS

	Infants Placed In ICU			
	Sample n	Estimated N	Percent	95% CI
Total	640	15,883	12.5 ±	2.0
Age				
<19 years	103	2,733	16.9 ±	6.1
20-29 years	317	7,400	11.2 ±	2.5
30+ years	220	5,750	12.8 ±	3.3
Race				
Black	294	3,275	16.7 ±	2.7
Non-black	346	12,607	11.7 ±	2.2
Education				
<H.S. Graduate	152	3,106	15.2 ±	4.9
H.S. Graduate	205	5,056	12.5 ±	3.5
Some College	163	3,945	12.2 ±	3.5
College Graduate	113	3,445	11.1 ±	3.7
Marital Status				
Married	316	10,008	11.8 ±	2.4
Other	324	5,875	14 ±	3.1
Infant's Birthweight				
Low	529	5,047	53.4 ±	3.5
Normal	101	10,732	9.2 ±	2.0
Medicaid				
Medicaid at anytime ¹	305	6,335	14.8 ±	3.3
No Medicaid at anytime	335	9,548	11.4 ±	2.4

1. Medicaid at anytime was defined as having had Medicaid coverage just before pregnancy occurred, Medicaid-paid prenatal care, or Medicaid-paid delivery.

Table 22
 Number of stressors mothers encountered
 during the year preceding delivery
 1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Number of Stressors				
None	282	15,569	24.4 ±	3.5
1 Stressor	301	16,650	26.1 ±	3.5
2 Stressor	220	10,091	15.8 ±	2.9
3 Stressor	181	7,710	12.1 ±	2.5
4+ Stressor	374	13,750	21.6 ±	3.1

Table 23
 Type of stressors mothers encountered during the year preceding delivery
 1997 Michigan PRAMS

	Sample n	Estimated N	Percent	95% CI
Type of Stressors				
Moved to New Home	769	45,833	34.9 ±	3.1
Family Member Was Sick	429	21,891	33.3 ±	3.7
Arguments with Partner	754	38,487	29.3 ±	2.9
Could Not Pay Bills	648	35,052	26.7 ±	2.7
Someone Very Close Died	335	13,526	20.6 ±	3.1
Someone Very Close Has Alcohol or Drug Problem	409	20,761	15.8 ±	2.4
Divorced or Separated	224	7,171	10.9 ±	2.2
Partner Didn't Want Pregnancy	338	15,187	11.6 ±	2.0
Respondent Lost Job, Undesired	260	11,683	8.9 ±	1.8
Partner Lost Job	270	14,626	11.2 ±	2.0
Respondent in Physical Fight	175	7,066	5.4 ±	1.4
Partner Went to Jail	114	3,303	5 ±	1.4
Respondent Was Homeless	77	2,693	2.1 ±	0.8

Table 24
Prevalence of smoking by demographic characteristics
1997 Michigan PRAMS

	3 months Before Pregnancy				Last 3 months of Pregnancy			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total								
No Smoking	941	43,448	68.0 ±	3.8	1,079	51,283	79.8 ±	3.3
Smoking	412	20,450	32.0 ±	3.8	286	13,008	20.2 ±	3.3
Age								
≤19 years	65	3,507	41.8 ±	10.9	35	1,937	22.7 ±	9.7
20-29 years	211	10,359	33.1 ±	5.4	149	6,759	21.5 ±	4.7
30+ years	136	6,585	27.2 ±	5.9	102	4,312	17.8 ±	5.0
								0.0
Race								0.0
Black	136	2,565	21.9 ±	4.4	105	1,923	16.4 ±	4.0
Non-black	276	17,885	34.3 ±	4.5	181	11,085	21.1 ±	3.9
Education								
<H.S. Graduate	121	4,455	42.6 ±	9.6	94	3,610	34.0 ±	9.3
H.S. Graduate	178	8,522	42.7 ±	6.9	119	4,996	24.8 ±	6.0
Some College	81	5,104	29.1 ±	7.2	57	3,035	17.3 ±	5.9
College Graduate	28	1,959	13.3 ±	6.0	13	983	6.7 ±	4.4
Marital Status								
Married	170	10,086	23.9 ±	4.4	112	6,153	14.4 ±	3.6
Other	242	10,364	47.8 ±	6.3	174	6,854	32.0 ±	6.2
Infant's Birthweight								
Low	226	1,892	39.5 ±	3.9	171	1,421	29.3 ±	3.7
Normal	180	18,517	31.4 ±	4.1	112	11,566	19.5 ±	3.5
Medicaid								
Medicaid at anytime ¹	239	10,119	44.3 ±	6.3	183	6,880	30.2 ±	5.9
Before pregnancy	129	3,939	41.6 ±	8.7	103	3,077	32.7 ±	8.5
No Medicaid at anytime	173	10,332	25.2 ±	4.6	103	6,128	14.8 ±	3.8

1. Medicaid at anytime was defined as having had Medicaid coverage just before pregnancy occurred, Medicaid-paid prenatal care, or Medicaid-paid delivery.

Table 24, continued
Prevalence of smoking by demographic characteristics
1997 Michigan PRAMS

	Currently Smoking			
	Sample n	Estimated	Percent	95% CI
Total				
No Smoking	996	47,109	73.8 ±	3.6
Smoking	352	16,704	26.2 ±	3.6
Age				
≤19 years	62	2,990	34.7 ±	10.7
20-29 years	181	8,533	27.3 ±	5.2
30+ years	109	5,181	21.6 ±	5.5
Race				
Black	113	1,627	14.9 ±	3.5
Non-black	239	15,077	28.5 ±	4.3
Education				
<H.S. Graduate	118	4,267	39.9 ±	9.7
H.S. Graduate	144	6,637	33.7 ±	6.7
Some College	69	4,121	23.5 ±	6.7
College Graduate	17	1,268	8.6 ±	4.9
Marital Status				
Married	141	8,103	19.0 ±	4.0
Other	211	8,602	40.7 ±	6.5
Infant's Birthweight				
Low	203	1,632	34.3 ±	3.8
Normal	144	15,038	25.5 ±	3.9
Medicaid				
Medicaid at anytime ¹	207	8,186	36.7 ±	6.3
Before pregnancy	114	3,249	36.0 ±	8.9
No Medicaid at anytime	145	8,518	20.5 ±	4.3

Table 25
Prevalence of drinking by demographic characteristics
1997 Michigan PRAMS

	3 months Before Pregnancy				Last 3 months of Pregnancy			
	Sample n	Estimated N	Percent	95% CI	Sample n	Estimated N	Percent	95% CI
Total								
No Drinking	1,160	61,906	47.4 ±	3.1	2,043	123,311	93.8 ±	1.6
Drinking	986	67,078	51.4 ±	3.1	132	7,729	5.9 ±	1.6
Age								
<19 years	122	7,063	42.0 ±	8.8	8	214	1.3 ±	1.2
20-29 years	498	34,848	51.4 ±	4.5	51	2,861	4.2 ±	1.8
30+ years	366	25,167	54.8 ±	5.3	73	4,655	10.0 ±	3.3
Race								
Black	356	7,668	32.4 ±	3.7	67	1,297	5.4 ±	1.8
Non-black	630	59,410	55.6 ±	3.7	65	6,431	6.0 ±	1.8
Education								
<H.S. Graduate	180	9,109	41.1 ±	7.6	32	923	4.1 ±	2.4
H.S. Graduate	330	20,991	50.4 ±	5.9	49	2,322	5.5 ±	2.5
Some College	249	16,889	50.8 ±	6.1	22	1,610	4.8 ±	2.7
College Graduate	214	18,778	61.4 ±	0.7	26	2,376	7.7 ±	3.7
Marital Status								
Married	514	44,703	52.4 ±	4.1	63	5,474	6.4 ±	2.0
Other	472	22,376	49.6 ±	5.1	69	2,255	5.0 ±	2.0
Infant's Birthweight								
Low	467	4,705	47.0 ±	3.3	69	623	6.2 ±	1.6
Normal	505	62,230	51.8 ±	3.5	61	7,078	5.8 ±	1.6
Medicaid								
Medicaid at anytime ¹	405	21,061	44.9 ±	5.1	60	2,063	4.3 ±	2.0
Before pregnancy	175	6,976	36.7 ±	7.3	35	1,035	5.3 ±	3.1
No Medicaid at anytime	581	46,018	55.1 ±	4.1	72	5,666	6.8 ±	2.2

1. Medicaid at anytime was defined as having had Medicaid coverage just before pregnancy occurred, Medicaid-paid prenatal care, or Medicaid-paid delivery.