

Pregnancy Risk Assessment Monitoring System (PRAMS)

What is PRAMS?

The Pregnancy Risk Assessment Monitoring System (PRAMS) is an ongoing population-based survey of new mothers designed to monitor maternal experiences and behaviors before, during and after pregnancy. The Centers for Disease Control and Prevention (CDC) developed PRAMS in 1987 to provide data to develop and evaluate programs to reduce infant mortality and low birth weight.

As of 2012, PRAMS is conducted in 40 states and New York City, representing 75% of all births in the United States.

PRAMS in New York City

Data collection for PRAMS in New York City (NYC) began in 2001. Each month, approximately 180 NYC residents who have given birth in the previous 2-4 months in NYC are randomly selected from registered birth certificates to participate in PRAMS. The survey is mailed to women, and those who do not respond are contacted by telephone. Women are mailed an incentive to participate. The survey is in English, Spanish, and Chinese and includes about 80 items on numerous topics, including: unintended pregnancy, contraceptive use, prenatal care, breastfeeding, smoking, drinking, domestic violence, and maternal and infant health.

Findings from PRAMS are used to: enhance understanding of maternal behaviors that are important for good reproductive outcomes and infant health, such as smoking, body mass index, breastfeeding, and contraceptive use; develop and evaluate programs to improve maternal and infant health; and inform policy development in NYC.

PRAMS is approved by the Institutional Review Boards of the CDC and the NYC Department of Health and Mental Hygiene.

PRAMS Methodology

The NYC PRAMS sample is selected by stratified random sampling without replacement. Low birth weight (LBW) births (<2500 grams) are oversampled such that 30% of the PRAMS sample is LBW compared with 9% in the 2010 NYC birth cohort. PRAMS survey data are linked to selected variables from the birth certificate including maternal demographic characteristics, infant birth weight, and gestation. The final PRAMS analysis dataset is weighted for sample design, nonresponse and noncoverage. It provides city-wide estimates of the prevalence of perinatal health behaviors and experiences of NYC women delivering live infants.

The CDC recommends a 65% response rate to share data publicly. Response rates and the number of PRAMS respondents per year are below.

| Year | Response Rate | Number of Respondents |
|------------|---------------|-----------------------|
| 2004-2005* | 70% | 1,796 |
| 2006 | 70% | 1,525 |
| 2007 | 65% | 1,492 |
| 2008* | 63% | 1,034 |
| 2009 | 64% | 1,394 |
| 2010 | 67% | 1,436 |

*2004 data are limited to July-December births.
2005 data are limited to May-December births.
2008 data are limited to March-December births.

The tables were prepared using statistical software for the analysis of survey data (PROC Crosstab in SUDAAN, v 10.0.1). Results are not reported for categories where the number of actual respondents is less than 30 due to the instability of such estimates. Estimates based on 30-60 respondents may not be reliable, and are noted. Missing observations are excluded from analyses, and the percentage of missing values is noted when it equals or exceeds 10%.

For More Information:

- NYC PRAMS
 - <http://www.nyc.gov/html/doh/html/ms/ms-prams.shtml>
 - prams@health.nyc.gov
- CDC PRAMS
 - <http://www.cdc.gov/prams/>
- Bureau of Maternal, Infant, and Reproductive Health, NYC Department of Health and Mental Hygiene
 - <http://www.nyc.gov/html/doh/html/ms/ms.shtml>