

For Immediate Release
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Kansas Department of Health and Environment Reports on Third Year of Statewide Survey of Mothers

Topeka – The Kansas Department of Health and Environment (KDHE) has released its third annual report from the Kansas Pregnancy Risk Assessment Monitoring System (PRAMS). The *2019 PRAMS Surveillance Report* provides insight from women who were interviewed in the months following the birth of their infant, about their health and experiences around the time of pregnancy. Forty-seven states participate in the PRAMS survey, covering about 83% of all live births in the United States.

Kansas joined the PRAMS project in 2016 and began data collection in 2017. The PRAMS survey helps shed light on issues that affect the well-being of mothers and infants. Some of these issues, such as postpartum depression and stressors experienced around the time of pregnancy, had never been studied at the statewide level in Kansas before the PRAMS study.

Some notable findings from the 2019 Kansas PRAMS survey include:

- Nearly 1 in 8 mothers who went for prenatal care (12.1%) reported not receiving prenatal care when they wanted it. Among those who either did not get prenatal care when they wanted it, or did not have any prenatal care, the most frequently reported barriers were that they couldn't get an appointment when they wanted one (36.4%), and that they didn't know they were pregnant (32.5%).
- More than 1 in 6 mothers (16.9%) had smoked cigarettes in the 3 months before pregnancy. Among those who smoked 3 months before pregnancy and went for prenatal care, 79.4% reported that a healthcare worker had advised during a prenatal care visit that they quit smoking.
- More than 1 in 8 mothers (13.8%) reported that there was a time after their infant was born that they thought they needed treatment or counseling for depression, but did not get it.
- Nearly 3 in 4 mothers (72.1%) reported breastfeeding their infants for at least 8 weeks.
- More than 1 in 17 women (6.1%) reported having at least "a lot" of difficulty with at least one of six tasks (seeing, hearing, walking, remembering or concentrating, self care, or communicating).

This report also includes information on trends and demographic disparities for some outcomes, from survey years 2017 through 2019. For instance, the prevalence of reporting that prenatal care started in the first trimester increased, from 85.7% among women with a live birth in 2017, to 90.0% among women with a live birth in 2019. However, racial/ethnic and socioeconomic disparities were observed. For instance, non-Hispanic Black women and Hispanic women with a live birth in 2017-2019 had a lower prevalence of self-reported first-trimester prenatal care, compared to non-Hispanic White women.

“This report reveals many gaps that still need to be addressed,” said Dr. Farah Ahmed, Environmental Health Officer and State Epidemiologist with KDHE. “For instance, we continue to see many women reporting needing counseling for depression after having a baby and not receiving it. We also see missed opportunities to advise all pregnant women who smoke to quit smoking during prenatal care visits.”

“Current data validates the collaborative work underway to support mothers in accessing the care they need at a time that’s right for them,” said Rachel Sisson, Director of the KDHE Bureau of Family Health. “Mothers reported they did not receive prenatal care when they wanted it. For some, a contributing factor to timely prenatal care was not knowing they were pregnant. It’s critical that community providers caring for women of childbearing age conduct comprehensive assessments at every visit to determine their goals and needs.”

The report is available online at:

[www.kdheks.gov/prams/downloads/Kansas PRAMS 2019 Surveillance Report.pdf](http://www.kdheks.gov/prams/downloads/Kansas_PRAMS_2019_Surveillance_Report.pdf). For more information about the PRAMS project in Kansas, visit: www.kdheks.gov/prams.

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