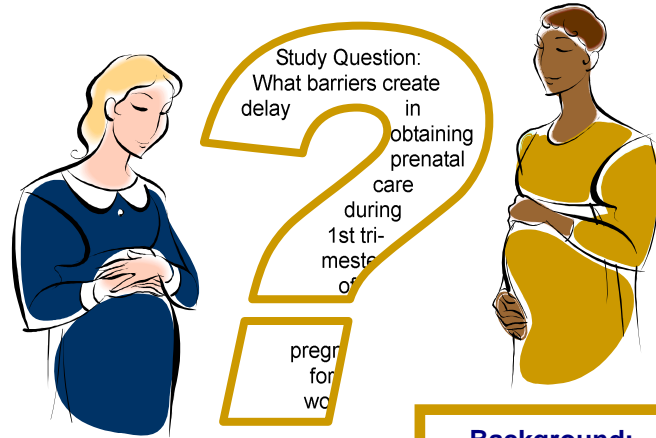


Assessing Reasons for Delay of Prenatal Care from the Pregnancy Risk Assessment Monitoring System

Authors:
Marilyn Jones MS, Larry Smith PhD, Sandra Hayes MPH,
Stephanie Ivy MPH, & Juanita Graham MSN RN

Office of Health Data and Research
Mississippi State Department of Health



METHODS:

A sample of 1,009 women from 2006 PRAMS Survey was collected, analyzed from mothers with live birth from Feb-Sept 2006. SPSS Complex samples Version 16.0 was used to obtain descriptive statistics.

Results:

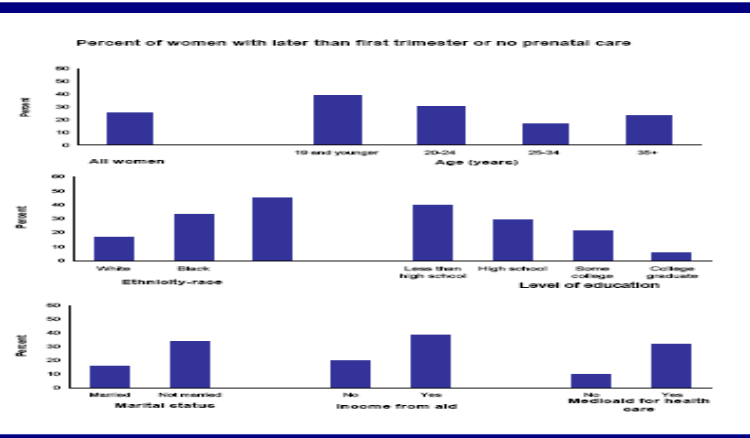
Approximately 25% of pregnant women reported they did not receive prenatal care during the 1st trimester

Conclusions:
Many adverse pregnancy outcomes can be prevented by seeking early prenatal care. Major contributors to delayed care include no insurance, poor financial resources to pay for services, or not participating in the Medicaid program.

Background:

Adverse pregnancy outcomes including preterm delivery and infant death remain high in MS. Delayed prenatal care has been identified as a major risk for adverse pregnancy outcomes.

Characteristic	%	95% CI	
		lower	upper
All women	25.4	22.0	28.9
Age (years)			
19 and younger	38.3	29.0	48.0
20-24	30.8	24.5	37.6
25-34	18.8	12.5	21.9
35+	25.2	13.1	37.7
Race-ethnicity			
White	18.7	12.9	21.5
Black	33.0	27.7	38.8
Other	44.9	33.5	55.4
Level of education			
Less than high school	40.0	31.7	49.9
High school	29.8	23.5	36.6
Some college	21.7	16.0	28.7
College graduate	8.9	2.9	11.9
Marital status			
Married	16.8	11.9	20.3
Not married	33.9	28.7	39.4
Income from aid			
No	20.0	15.4	24.1
Yes	38.4	31.3	45.0
Medicaid for prenatal care &/or delive			
No	9.8	4.2	15.1
Yes	31.9	27.5	36.6



Public Health Implications:
The development of interventions increasing early access to prenatal care among MS women could result in reducing preterm delivery and infant deaths.

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