



Ohio Pregnancy Assessment Survey

2019 Data Book

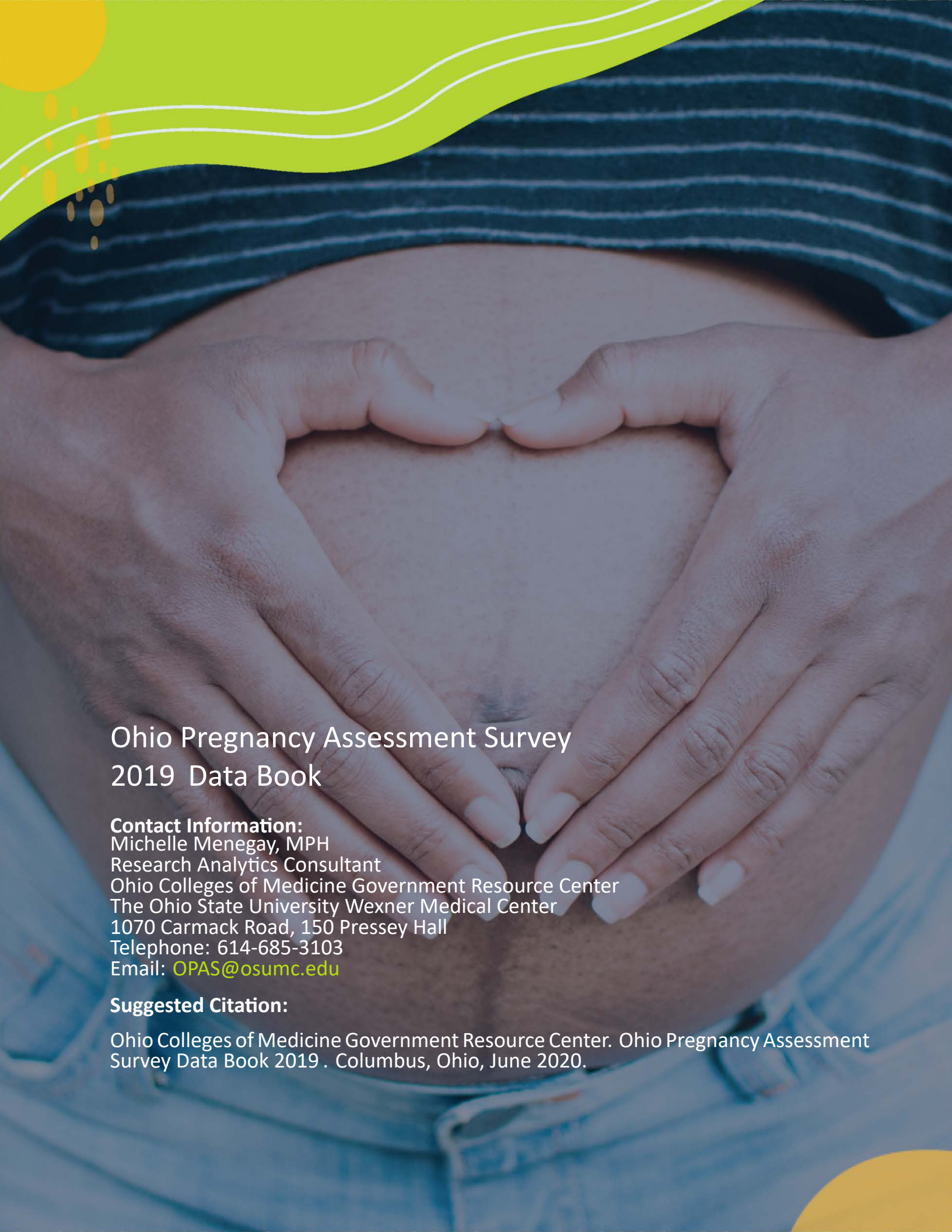


Department of Health



Department of Medicaid





Ohio Pregnancy Assessment Survey 2019 Data Book

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Introduction

The 2019 Ohio Pregnancy Assessment Survey (OPAS) measured maternal health, health behaviors, and healthcare use among resident mothers who gave birth to a live-born infant in Ohio. Sponsored by the Ohio Department of Health (ODH) and the Ohio Department of Medicaid (ODM), OPAS data are used to help develop and assess programs designed to identify high-risk pregnancies and reduce adverse pregnancy outcomes. The OPAS also provides data on maternal and infant health in the Ohio Equity Institute (OEI) counties (Butler, Cuyahoga, Franklin, Hamilton, Lucas, Mahoning, Montgomery, Summit and Stark). The 2019 OPAS instrument included questions about experiences before, during and after pregnancy, and utilized the Centers for Disease Control and Prevention's (CDC) Pregnancy Risk Assessment Monitoring System (PRAMS) core questionnaire.

Sample Design and Data Collection

The population of interest for the 2019 OPAS was resident Ohio mothers who delivered a live-born infant in Ohio during the surveillance period. Ohio's vital records birth certificate file was used as the sampling frame. By using the birth certificate file as the sampling frame, the OPAS implicitly excluded stillbirths, fetal deaths, and induced abortions. OPAS follows the same exclusions as CDC PRAMS when sampling 2019 births:

- Out-of-state births to residents
- In-state births to nonresidents

- Missing key information (such as mother’s last name)
- Delayed processing of birth certificates (>6 months after birth)
- All but one infant from twin and triplet births
- All infants from multiple-gestation births with plurality >3
- Adopted infants
- Surrogate births

Each month, the eligible birth records were stratified by birth weight (low, defined as under 2,500 grams, or normal/high/unknown, defined as larger than 2,500 grams or missing) and OEI county or county group (Cuyahoga County, Franklin County, Hamilton County, Other OEI County, and Non-OEI). One of the primary goals of the OPAS was to make county and county group estimates for the OEI counties. To that end, more sample was allocated to the OEI counties than the remainder of the state. In addition, eligible birth records in the low birth weight stratum were sampled at a higher rate than those in the normal/high/missing birth weight stratum to ensure precision for low birth weight babies.

Similar to CDC PRAMS, sampled women were contacted two to six months following a delivery. The 2019 OPAS allowed responses using three different possible modes (mail, telephone and web) and in two different languages (English and Spanish).

Push-to-Web Methodology

1. All sample members in the monthly birth cohort were mailed an initial invitation to complete the survey on the web. The initial invitation included a token incentive of \$10 and instructions for completing the computer-assisted web interview (CAWI) survey.
2. After approximately 10 to 14 days, each nonresponding sample member received a second invitation via the mail to complete the CAWI survey.
3. After another 10 to 14 days, each nonresponding sample member received a full-survey mailing packet that included the mail survey, business reply envelope, and instructions for completing the CAWI survey.
4. A final full-survey mailing was sent to all non-respondents 10 to 14 days after the initial full survey mailing, including instructions for completing the CAWI survey.
5. Computer-assisted telephone interviews (CATI) were attempted with all those who did not complete a web or mail survey beginning approximately 60 days after the initial mailing. Calls were attempted for at least 30 days.

Additional details about the methodology can be found in the OPAS methodology report. Please contact OPAS@osumc.edu to request the report.

Survey Instrument

The 2019 OPAS instrument was developed jointly by GRC, ODH, ODM, RTI International and the OPAS Executive Committee. The final instrument included the core CDC Phase 8 questionnaire and selected standard CDC Phase 8 questions identified by ODH and ODM. The 2019 OPAS also included a new supplemental questionnaire on opioid use, which was not included in prior years.

Topics included:

- Attitudes and feelings about the most recent pregnancy;
- Content and source of prenatal care;
- Maternal alcohol and tobacco consumption;

- Physical abuse before and during pregnancy;
- Pregnancy-related morbidity;
- Infant healthcare;
- Infant feeding and sleeping practices;
- Contraceptive use; and
- Mother’s knowledge of pregnancy-related health issues.

The 2019 OPAS instrument is available on the ODH website: <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/ohio-pregnancy-assessment-survey-opas/questionnaires>.

Response Rate

In 2019, 11,940 women were sampled for the OPAS. Of this sample, there were 4,376 respondents. The overall weighted response rate for the 2019 OPAS using the American Association of Public Opinion Research Response Rate 1 (RR1) is 40.5%.

Data Interpretation

The data book compiles OPAS results for chosen indicators and highlights data for births occurring in 2019. The survey design makes the data representative of residential Ohio women with a live birth. Estimates in the plots are of the estimated proportion (percentage) of residential Ohio women with a live birth, while the tables present the estimated percentage, the 95% confidence interval, and the estimated count of residential Ohio women with a live birth. Plots depict the measures in the tables stratified by prenatal care insurance (Medicaid vs non-Medicaid and non-Medicaid further stratified into income levels), race/ethnicity (non-Hispanic Black, non-Hispanic White, Hispanic, and non-Hispanic Other), and whether maternal county of residence is an Ohio Equity Institute (OEI) county (Butler, Cuyahoga, Franklin, Hamilton, Lucas, Mahoning, Montgomery, Summit and Stark).

Data Suppression

When the precision of the estimates is too low, typically because the sample size for the estimate is too small, results are not shown. For an estimate to be displayed, all of the following must be satisfied:

- The numerator of an estimate of a proportion (or estimate of a total itself) contains responses from 10 or more respondents;
- The denominator of an estimate of a proportion (or subpopulation size of an estimate of a total) contains responses from 30 or more respondents;
- The coefficient of variation (CV) of survey-weighted estimates is 30% or lower.

Stratified Variables

Selected measures have been stratified by prenatal care insurance, race/ethnicity, and OEI county.

Prenatal Care Insurance and Federal Poverty Level

The Medicaid status variable is derived from Question 10 in the 2019 OPAS (“During your most recent pregnancy, what kind of health insurance did you have to pay for your prenatal care?”). A respondent was considered to have Medicaid coverage for prenatal care if they selected the Medicaid response option or wrote-in either CareSource or Molina as an “other” option. This recoding was done to align with prior analyses of Ohio PRAMS data. Respondents who selected private, military, other insurance, or uninsured were classified as Non-Medicaid Lastly, respondents who indicated that they did not go for prenatal care were set to missing.

Non-Medicaid women were further broken down into Non-Medicaid Low-Income (likely Medicaid-eligible) and Non-Medicaid Other (non-low-income) categories. Low-income was defined as <200% Federal Poverty Level (FPL) according to the corresponding year’s FPL cutoffs, which are based on income and number of persons in the household. In 2019, for example, the 200% FPL cutoff for a two person household was \$33,820 and \$42,660 for a three person household.

The FPL variable is derived using question 65 and question 66 in the 2019 OPAS (“During the 12 months before your new baby was born, what was your yearly total household income before taxes? Include your income, your husband’s or partner’s income, and any other income you may have received. All information will be kept private and will not affect any services you are now getting”, and “During the 12 months before your new baby was born, how many people, including yourself, depended on this income?”, respectively). For question 65, respondents were required to choose from the following income categories:

- \$0 - \$16,000
- \$16,001 - \$20,000
- \$20,001 - \$24,000
- \$28,001 - \$32,000
- \$32,001 - \$40,000
- \$40,001 - \$48,000
- \$48,001 - \$57,000
- \$57,001 - \$60,000
- \$60,001 - \$73,000
- \$73,001 - \$85,000
- \$85,001 or more

The midpoint of each income response category along with the number of people depending on that income was used to categorize each respondent as <200% FPL or \geq 200% FPL. This method allows for potential mis-categorization since an income above or below the midpoint of each response category may not be categorized the same as the midpoint.

Race/Ethnicity

The race/ethnicity variable was derived from the birth certificate file.

OEI County

The Ohio Equity Institute (OEI) is a collaboration between ODH and local partners that was created to address racial disparities in birth outcomes. The OEI counties include: Butler, Cuyahoga, Franklin, Hamilton, Lucas, Mahoning, Montgomery, Summit and Stark.



Note on Quotes

Select comments from OPAS respondents were selected for inclusion in this data book. Quotes have been edited for spelling and readability and are shown at the end of each section.

Data Dashboard

The 2016-2019 OPAS dashboard is an interactive tool that provides a data-driven view of the health of women in Ohio. Users can select data to analyze, examine trends and compare key populations. The dashboard provides fast, real-time results, giving users plots and tables that can be inserted into documents and presentations. The OPAS dashboard is available here: <https://grcapps.osu.edu/opas/>.

The 2019 OPAS dataset may also be requested from ODH. More information about the process for obtaining data can be found here: <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/ohio-pregnancy-assessment-survey-opas/data-requests/>.

Trends with Ohio Pregnancy Risk Assessment Monitoring System (PRAMS) Survey Data

Select figures in the OPAS databook include data from 2009-2015 Ohio Pregnancy Risk Assessment Monitoring System (PRAMS) surveys. The CDC initiated PRAMS in 1987 in an effort to reduce infant mortality and the incidence of low birth weight. PRAMS was implemented in Ohio in 1999 and continued through 2015, then it was replaced by the Ohio Pregnancy Assessment Survey (OPAS) in 2016.

For more information about the national PRAMS program, please visit: <https://www.cdc.gov/PRAMS/index.htm>.

For more information about Ohio PRAMS, please visit: <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/pregnancy-risk-assessment-survey-prams/welcome/>.

Mother's Characteristics

Table 1. Mother's Characteristics

	Weighted N	Weighted %	95% CI
Age			
<=24 years	34,359	26.1	24.0 - 28.3
25-34 years	77,647	59.1	56.9 - 61.3
>=35 years	19,402	14.8	13.4 - 16.1
Race-Ethnicity			
Non-Hispanic Black	22,217	16.9	15.5 - 18.4
Non-Hispanic White	91,988	70.1	68.3 - 71.9
Non-Hispanic Other	9,338	7.1	6.0 - 8.2
Hispanic	7,668	5.8	4.9 - 6.8
Education			
No High School Degree	14,166	10.8	9.4 - 12.3
High School Graduate	35,920	27.4	25.3 - 29.5
Some College Credit or Degree	80,976	61.8	59.6 - 64.0
Married			
No	71,108	54.1	51.9 - 56.3
Yes	60,300	45.9	43.7 - 48.1
Previous Live Birth			
No	51,299	39.1	36.9 - 41.2
Yes	79,956	60.9	58.8 - 63.1

"Weighted N" represents the estimated total in the population.

Insurance Status

Table 2. Prevalence of insurance types prior to pregnancy (question 9)

	Weighted N	Weighted %	95% CI
Source of insurance before pregnancy			
Medicaid	41,861	32.1	30.0 - 34.3
Private/Employer	67,452	51.7	49.5 - 53.9
Other	7,085	5.4	4.5 - 6.4
Uninsured	13,962	10.7	9.3 - 12.1

Table 3. Prevalence of insurance types during pregnancy (question 10)

	Weighted N	Weighted %	95% CI
Source of insurance that paid for prenatal care			
Medicaid	54,265	42.3	40.1 - 44.6
Private/Employer	59,871	46.7	44.5 - 48.9
Other	7,945	6.2	5.1 - 7.3
Uninsured	6,106	4.8	3.8 - 5.7

Table 4. Prevalence of current health insurance types (question 11)

	Weighted N	Weighted %	95% CI
Source of postpartum insurance			
Medicaid	53,128	40.8	38.6 - 43.0
Private/Employer	61,061	46.9	44.8 - 49.1
Other	7,869	6.0	5.0 - 7.1
Uninsured	8,074	6.2	5.1 - 7.3

Preconception Health

Table 5. Maternal Body Mass Index (BMI) immediately prior to pregnancy (questions 2-Jan)

	Weighted N	Weighted %	95% CI
Maternal BMI, pre-pregnancy			
Underweight	7,204	5.5	4.5 - 6.4
Normal	51,524	39.2	37.1 - 41.3
Overweight	32,336	24.6	22.7 - 26.5
Obese	40,343	30.7	28.7 - 32.7

Table 6. Health conditions prior to pregnancy (question 4)

	Weighted N	Weighted %	95% CI
Health condition			
Diabetes (Type 1 or 2)	3,917	3.0	2.3 - 3.7
Hypertension	6,875	5.2	4.3 - 6.2
Depression	24,740	18.9	17.1 - 20.7
Anxiety	37,599	28.7	26.7 - 30.8

Figures 1-4 depict the measures in Table 6 stratified by prenatal care insurance (Medicaid vs non-Medicaid), race/ethnicity (non-Hispanic Black, non-Hispanic White, Hispanic, and non-Hispanic Other), and whether maternal county of residence is an Ohio Equity Institute (OEI) county (Butler, Cuyahoga, Franklin, Hamilton, Lucas, Mahoning, Montgomery, Summit and Stark).

Figure 1. Type 1 or 2 diabetes prior to pregnancy (question 4)

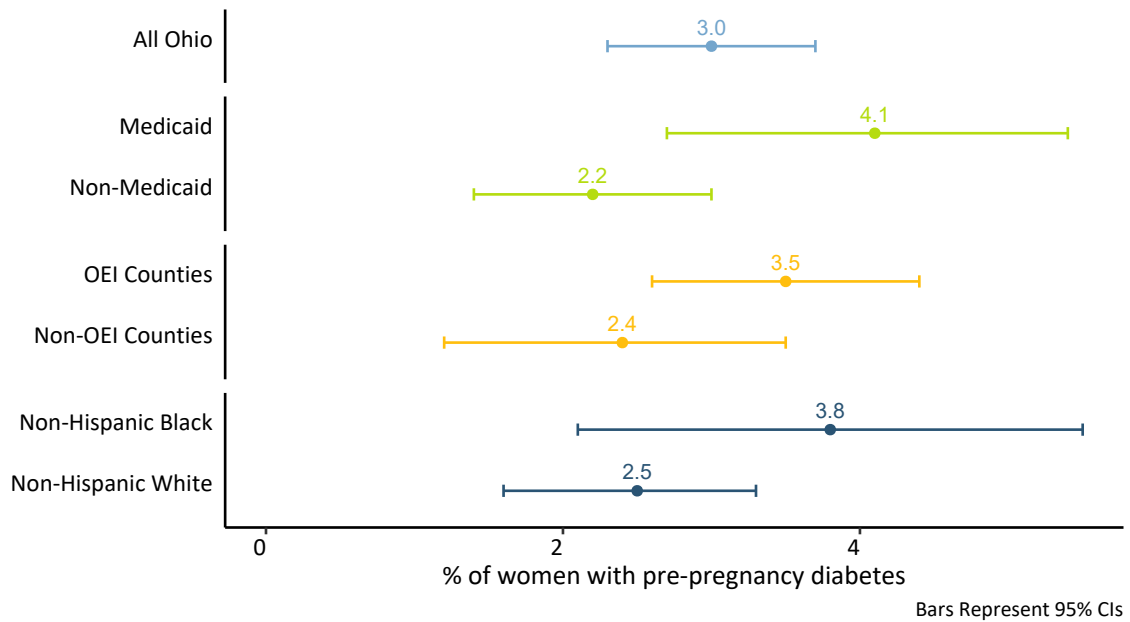


Figure 2. Hypertension prior to pregnancy (question 4)

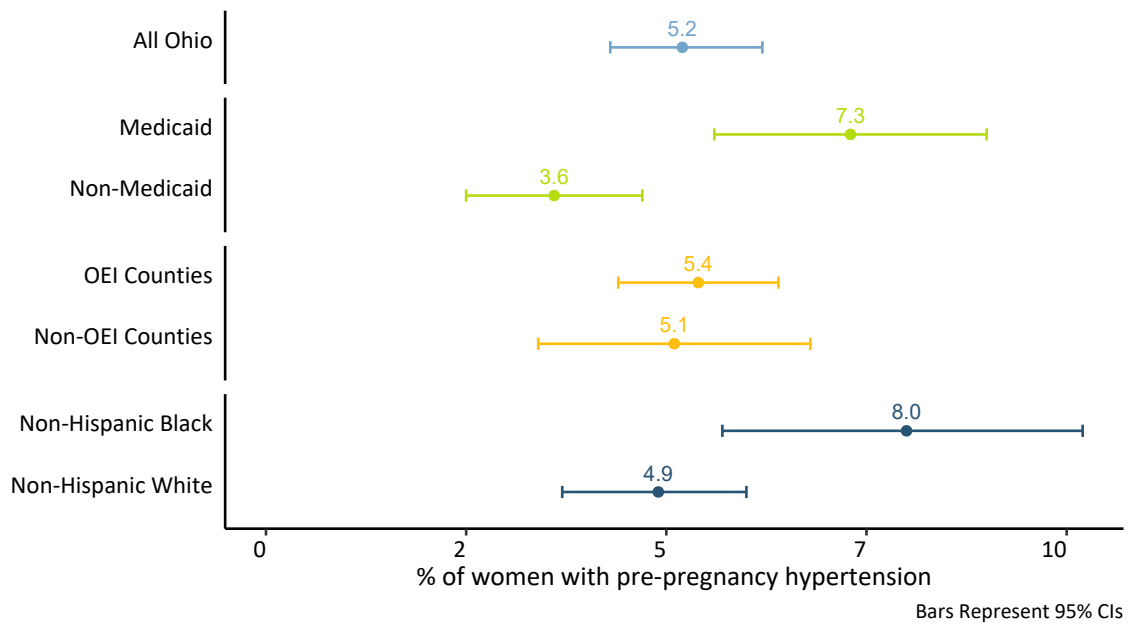


Figure 3. Depression prior to pregnancy (question 4)

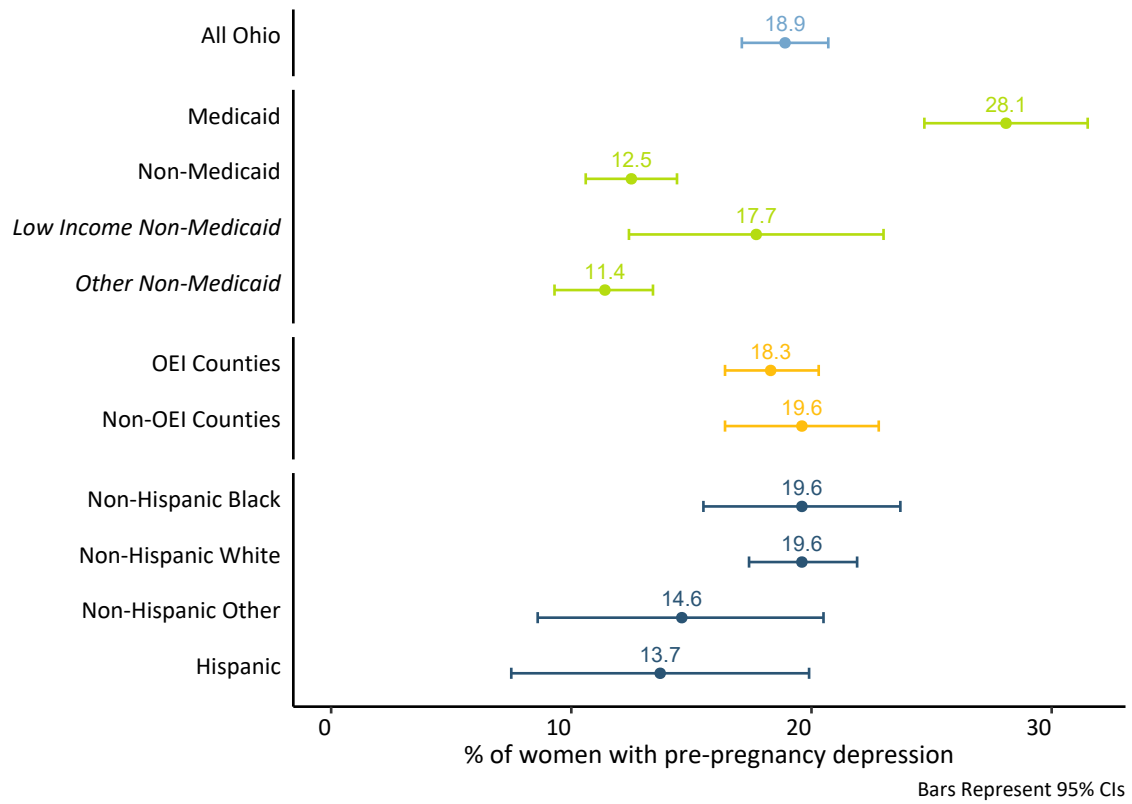


Figure 4. Anxiety prior to pregnancy (question 4)

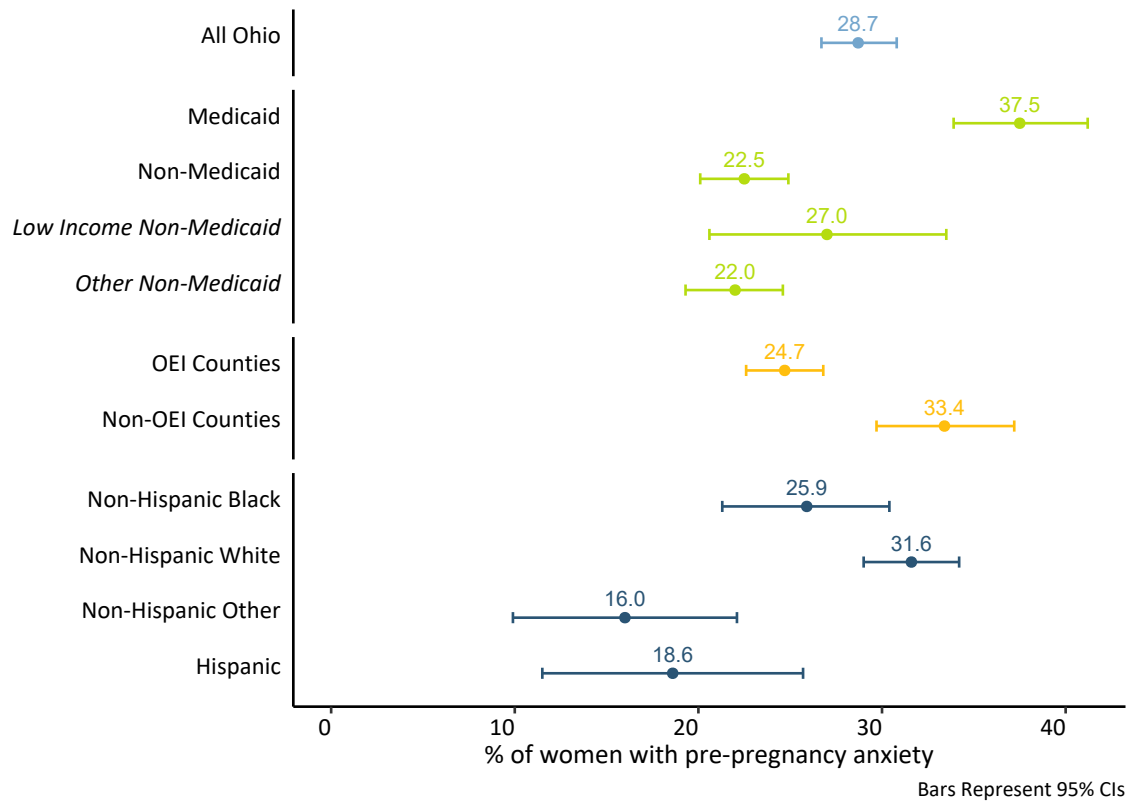


Table 7. Prevalence of daily multivitamin use in the month prior to pregnancy (question 5)

	Weighted N	Weighted %	95% CI
Prenatal vitamin use			
Never	66,369	50.7	48.5 - 52.9
1 to 3 times a week	9,665	7.4	6.2 - 8.5
4 to 6 times a week	7,424	5.7	4.8 - 6.6
Every day of the week	47,415	36.2	34.2 - 38.3

Figure 5. Prevalence of daily multivitamin use in the month prior to pregnancy: Every day of the week (question 5)

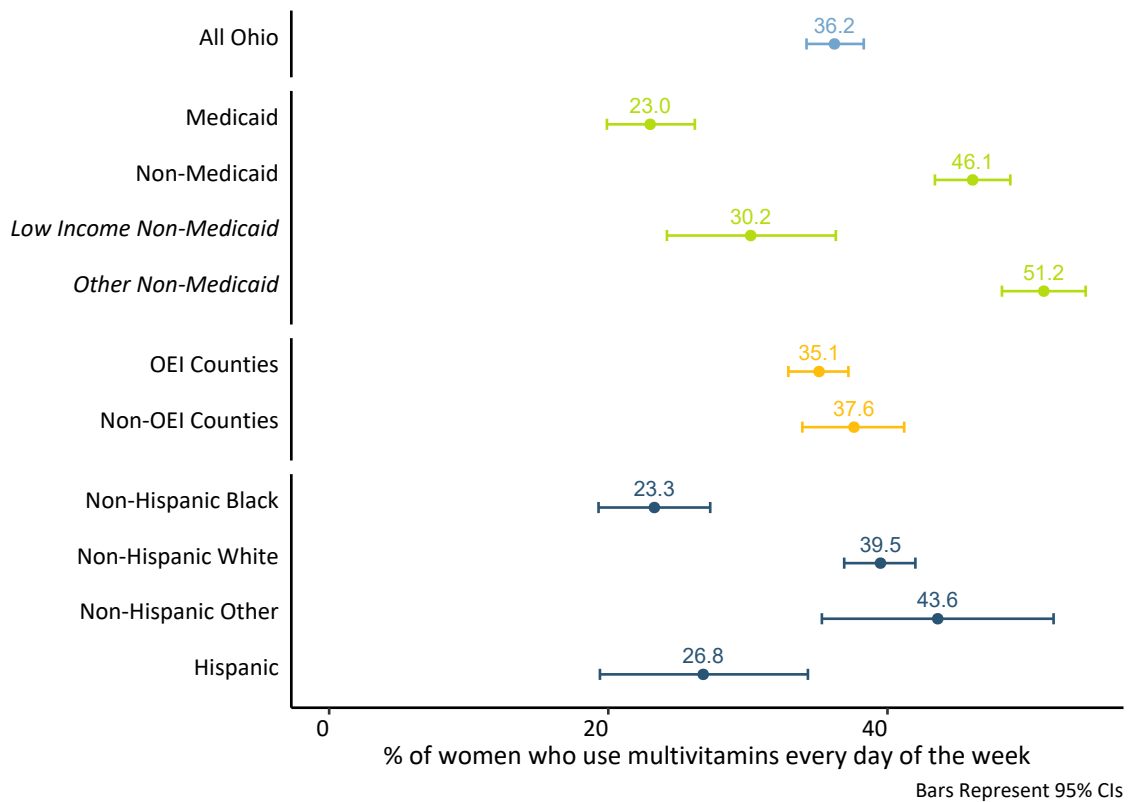


Table 8. Had any healthcare visit in the 12 months prior to pregnancy and type of healthcare visit among those with a visit (questions 7-Jun)

	Weighted N	Weighted %	95% CI
Had any healthcare visit			
No	40,281	30.8	28.8 - 32.9
Yes	90,306	69.2	67.1 - 71.2
Type of healthcare visit (% yes)			
Checkup with family doctor	48,399	53.1	50.6 - 55.6
Checkup with OB/GYN	60,060	65.9	63.4 - 68.4
Visit for an illness or chronic condition	20,199	22.2	20.0 - 24.3
Visit for an injury	5,387	5.9	4.6 - 7.2
Visit for family planning or birth control	16,806	18.4	16.4 - 20.4
Visit for depression or anxiety	14,463	15.9	13.9 - 17.9
Visit to have teeth cleaned	56,509	62.0	59.5 - 64.6
Other	9,465	10.4	8.9 - 11.9

Table 9. Discussions with healthcare worker in the 12 months prior to pregnancy among those with a healthcare visit prior to pregnancy (question 8)

	Weighted N	Weighted %	95% CI
Discussed with healthcare worker (% yes)			
Maintaining a healthy weight	30,771	34.6	32.2 - 37.0
A desire to have or not have children	37,354	41.9	39.4 - 44.4
Using birth control to prevent pregnancy	40,382	45.3	42.7 - 47.8
Improving health before pregnancy	23,352	26.2	24.1 - 28.4
Sexually transmitted infections	22,091	24.8	22.6 - 27.1
Smoking during pregnancy	70,246	78.5	76.4 - 80.6
If someone was hurting me emotionally or physically	52,990	59.4	56.8 - 61.9
Feeling down or depressed	54,216	60.7	58.2 - 63.2

Figure 6. Healthcare visit in the 12 months before pregnancy (question 6)

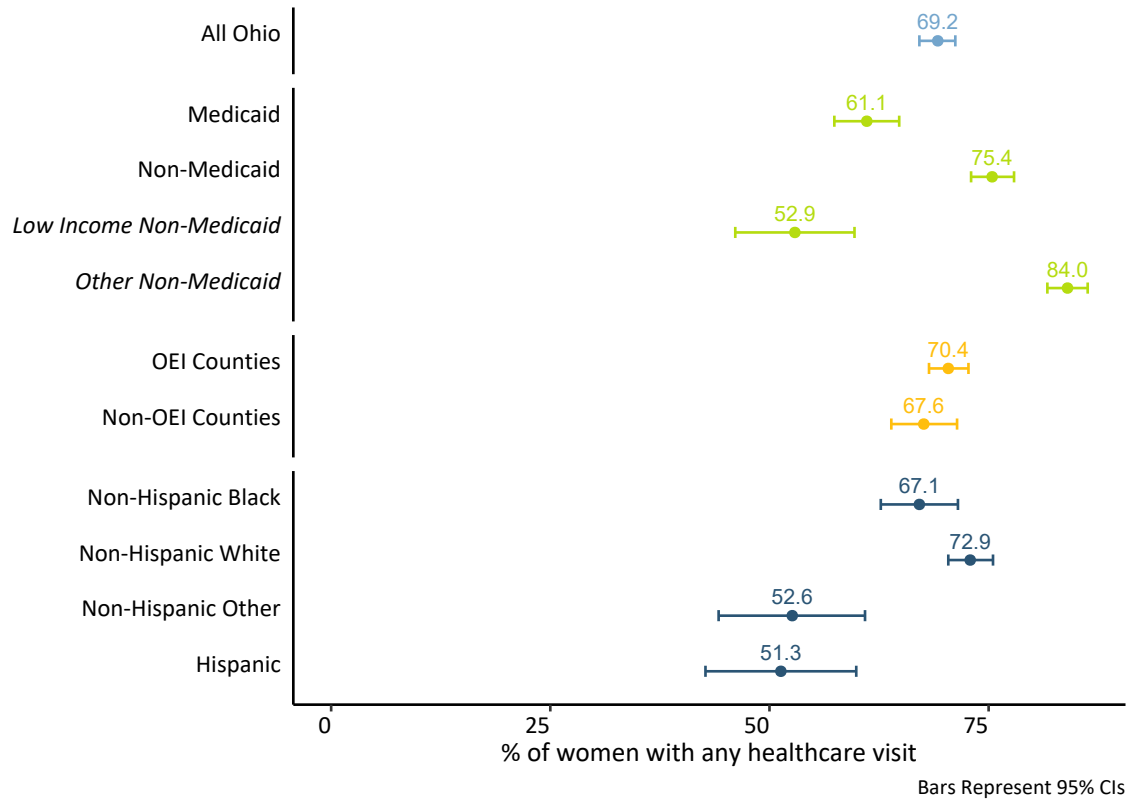
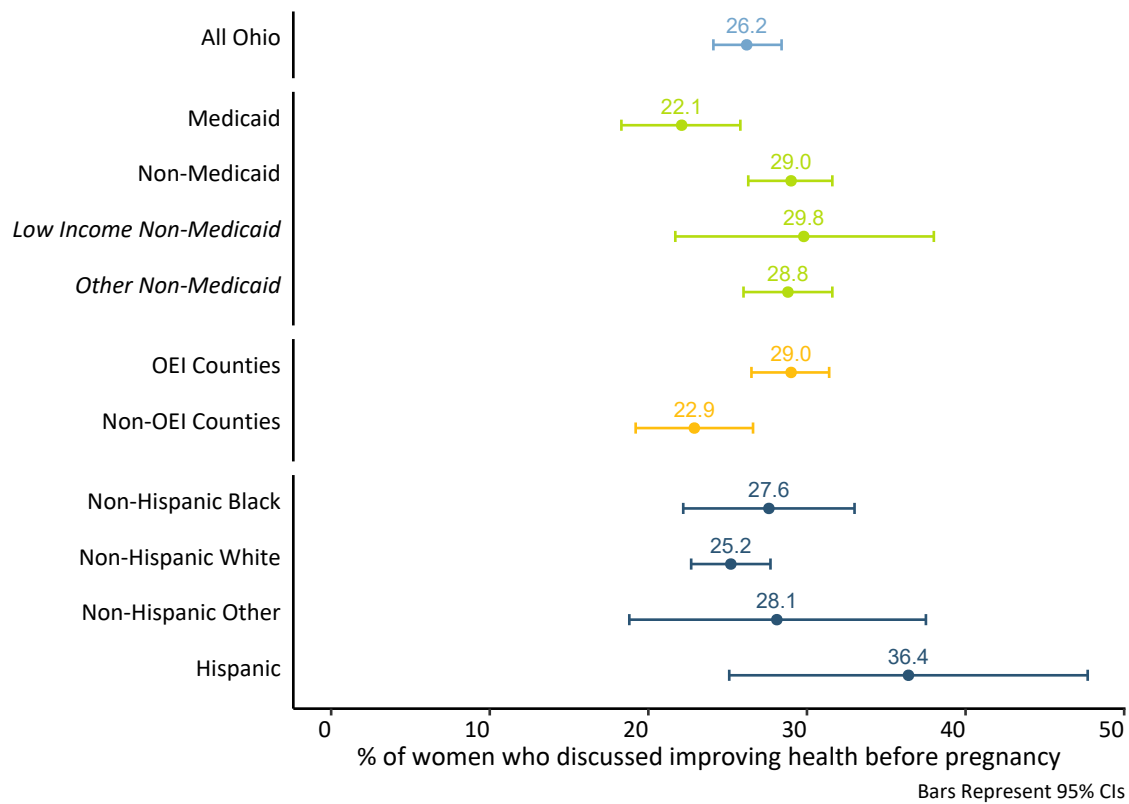


Figure 7. Discussed improving health with healthcare provider prior to pregnancy (question 8)





“

I was extremely high risk due to health conditions. I've had 17 surgeries in the past four years and have endometriosis and polycystic ovary syndrome, so we were told the chances were slim of us becoming pregnant without IVF, but luckily we conceived naturally.

”

Family Planning: Prior to Pregnancy

Table 10. Feelings about becoming pregnant prior to pregnancy (question 12)

	Weighted N	Weighted %	95% CI
Pregnancy intention			
Wanted to be pregnant later	23,268	17.8	16.1 - 19.6
Wanted to be pregnant sooner	17,654	13.5	12.2 - 14.8
Wanted to be pregnant then	57,028	43.7	41.5 - 45.8
Did not want to be pregnant then or in the future	10,583	8.1	6.8 - 9.4
Unsure	22,017	16.9	15.1 - 18.6

Table 11. Feelings about becoming pregnant prior to pregnancy, collapsed (question 12)

	Weighted N	Weighted %	95% CI
Pregnancy intention			
Unintended	33,852	25.9	23.9 - 27.9
Intended	74,683	57.2	55.0 - 59.4
Unsure	22,017	16.9	15.1 - 18.6

Table 12. Prevalence of pre-pregnancy contraceptive use among women who were not trying to become pregnant (question 13)

	Weighted N	Weighted %	95% CI
Used contraception			
No	17,516	51.8	47.1 - 56.4
Yes	16,326	48.2	43.6 - 52.9

Figure 8. Prevalence of unintended pregnancy (question 12)

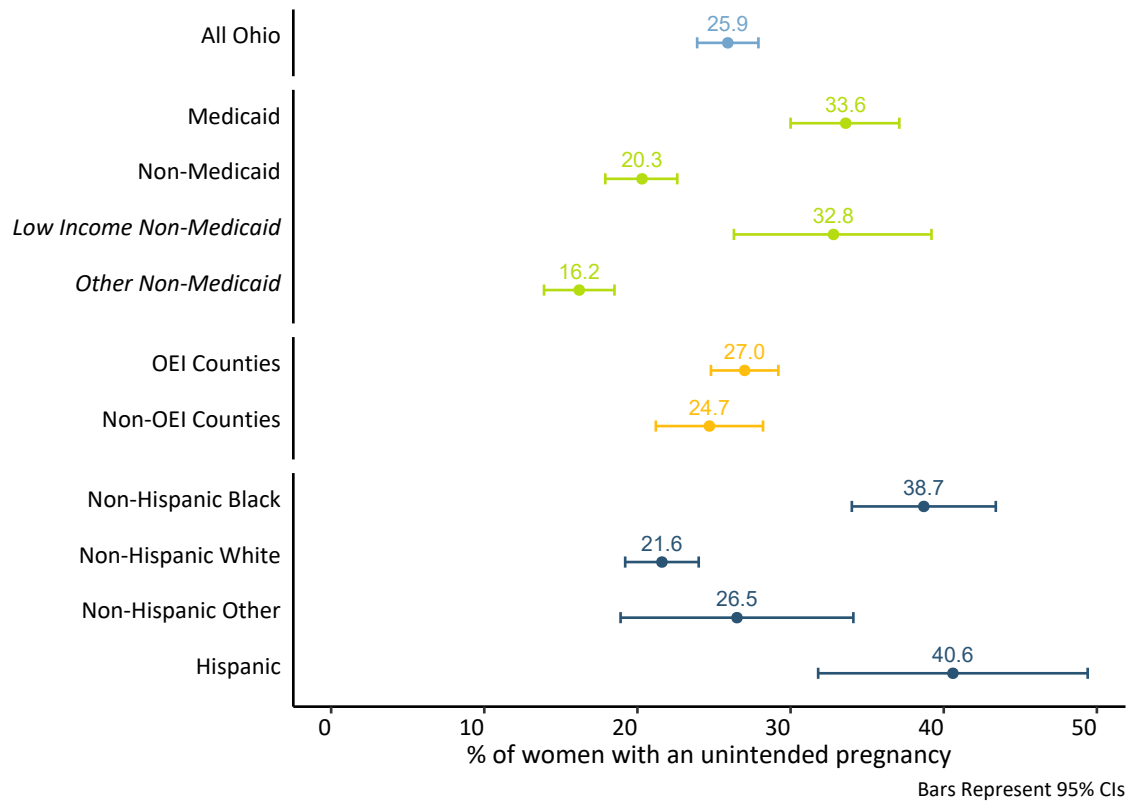
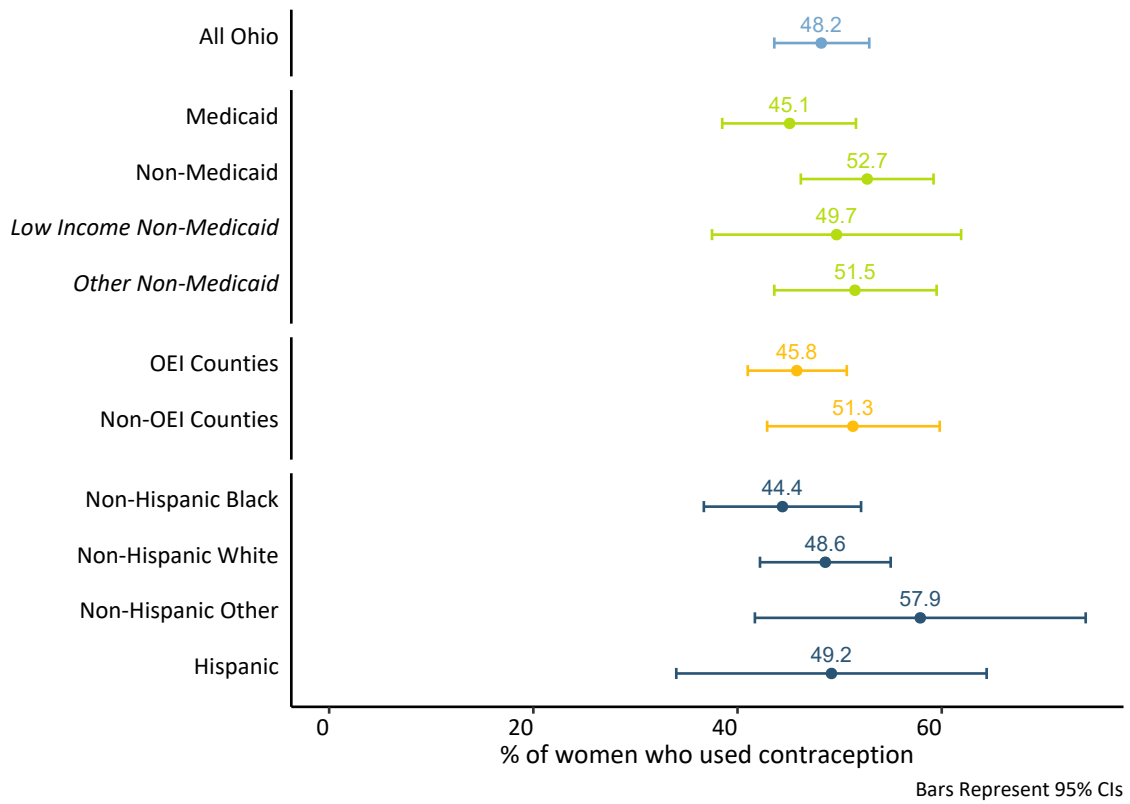


Figure 9. Pre-pregnancy contraceptive use among women who were not trying to become pregnant (question 13)



Prenatal Care

Table 13. Timing of entry to prenatal care (PNC) among women who had a prenatal care visit (question 14)

	Weighted N	Weighted %	95% CI
Trimester initiated prenatal care			
First Trimester	112,808	87.6	86.1 - 89.1
Second Trimester	14,311	11.1	9.7 - 12.5
Third Trimester	1,619	1.3	0.7 - 1.9

Figure 10. Prevalence of initiating prenatal care in the first trimester among women who had a prenatal care visit (question 14)

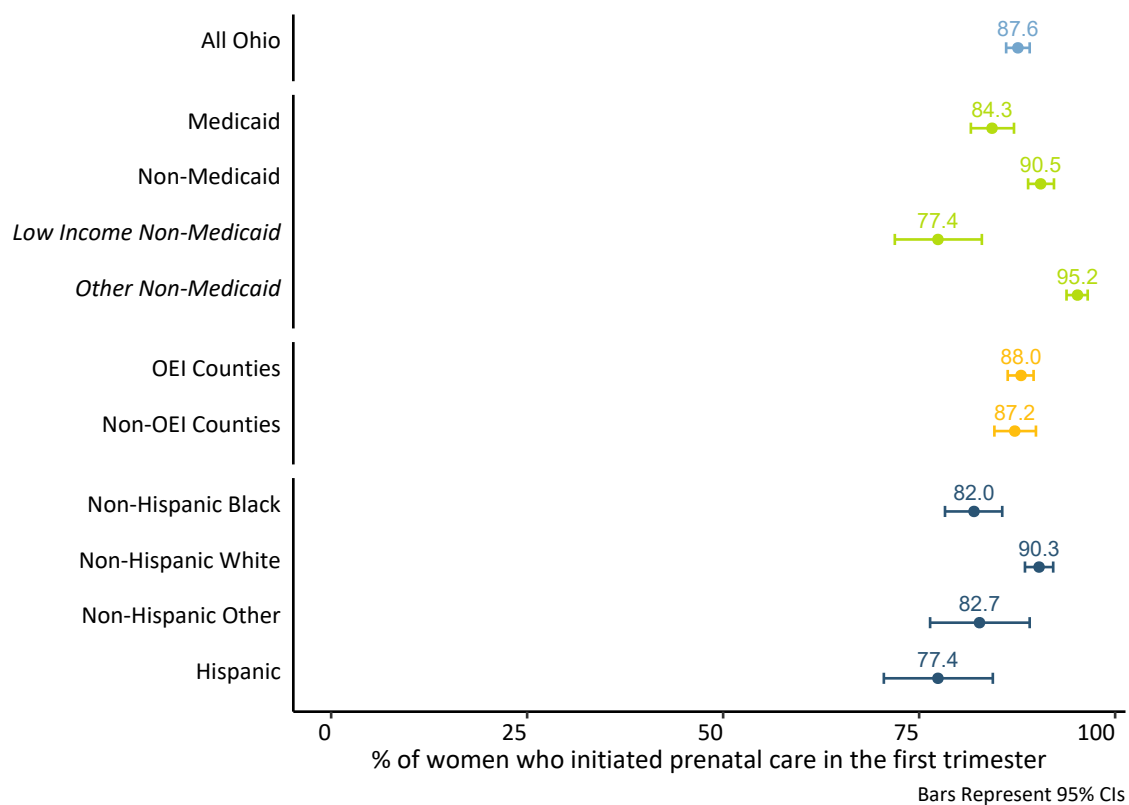


Table 14. Prenatal healthcare worker discussions among those with a prenatal care visit (question 17)

	Weighted N	Weighted %	95% CI
Topics discussed during prenatal care visits (% yes)			
Weight gain during pregnancy	71,143	55.8	53.6 - 58.0
Taking prescription medications	124,412	97.1	96.4 - 97.9
Smoking cigarettes	123,324	96.2	95.4 - 97.1
Drinking alcohol	121,711	95.0	94.0 - 96.0
Physical or emotional abuse	104,496	81.7	80.0 - 83.4
Feeling down or depressed	105,435	82.3	80.6 - 84.0
Drug use	109,045	85.2	83.7 - 86.7
HIV testing	72,973	57.4	55.2 - 59.6
Planning to breastfeed	117,715	91.9	90.7 - 93.1
Using birth control postpartum	106,493	83.3	81.6 - 84.9



“

My maternal fetal medicine specialist did an amazing job of managing my care. I had uteroid shots at 32 weeks and had a C-section at 36 weeks due to Intrauterine Growth Restriction.

”

Prenatal Risk Factors

Table 15. Healthcare worker offered or directed to get a flu shot in 12 months before delivery (question 18)

	Weighted N	Weighted %	95% CI
Offered or directed to get flu shot			
No	20,653	15.8	14.1 - 17.5
Yes	109,963	84.2	82.5 - 85.9

Table 16. Receipt of flu shot in 12 months before delivery (question 19)

	Weighted N	Weighted %	95% CI
Received flu shot			
No	55,202	42.3	40.1 - 44.4
Yes, before my pregnancy	13,144	10.1	8.9 - 11.2
Yes, during my pregnancy	62,269	47.7	45.5 - 49.9

Table 17. Teeth cleaned during pregnancy (question 20)

	Weighted N	Weighted %	95% CI
Had teeth cleaned during pregnancy			
No	72,244	55.1	53.0 - 57.3
Yes	58,758	44.9	42.7 - 47.0

Figure 11. Dental care during pregnancy (question 20)

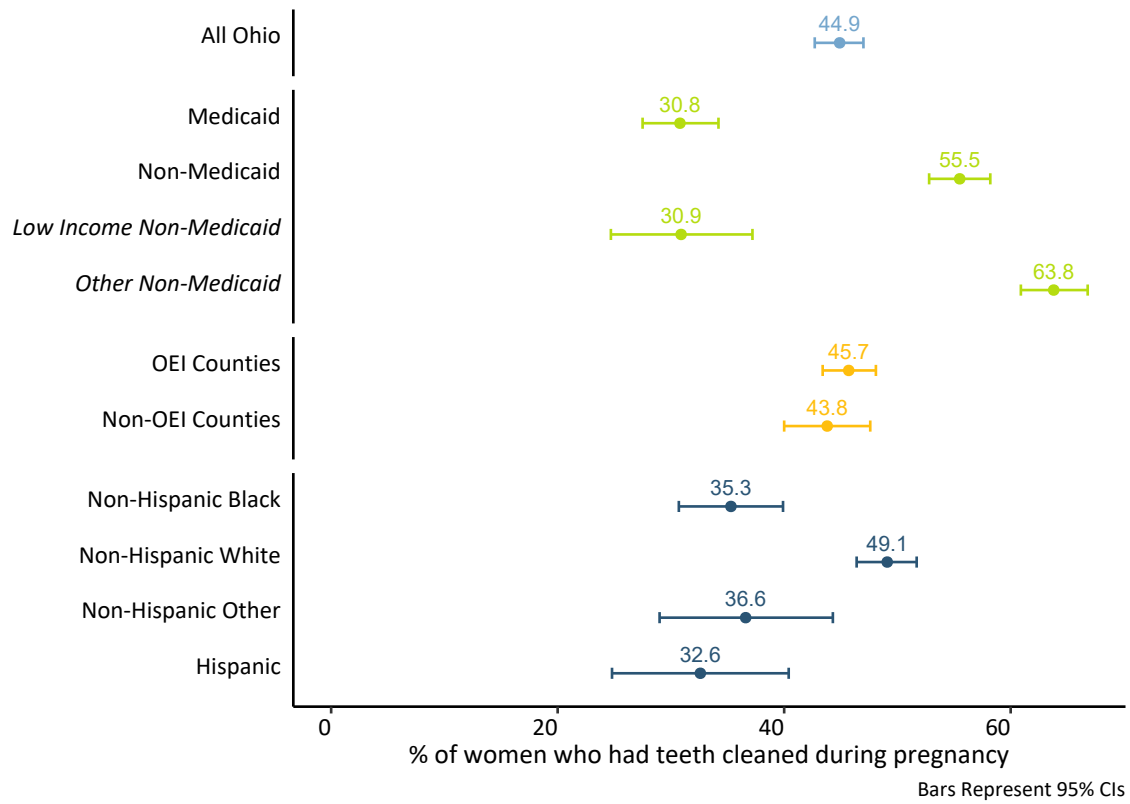


Table 18. Health conditions during pregnancy (question 22)

	Weighted N	Weighted %	95% CI
Health condition (% yes)			
Gestational diabetes (diabetes during pregnancy)	11,855	9.1	7.9 - 10.3
High blood pressure, pre-eclampsia or eclampsia	21,433	16.4	14.8 - 18.0
Depression	25,214	19.3	17.5 - 21.1

Figure 12. Gestational diabetes during pregnancy (question 22)

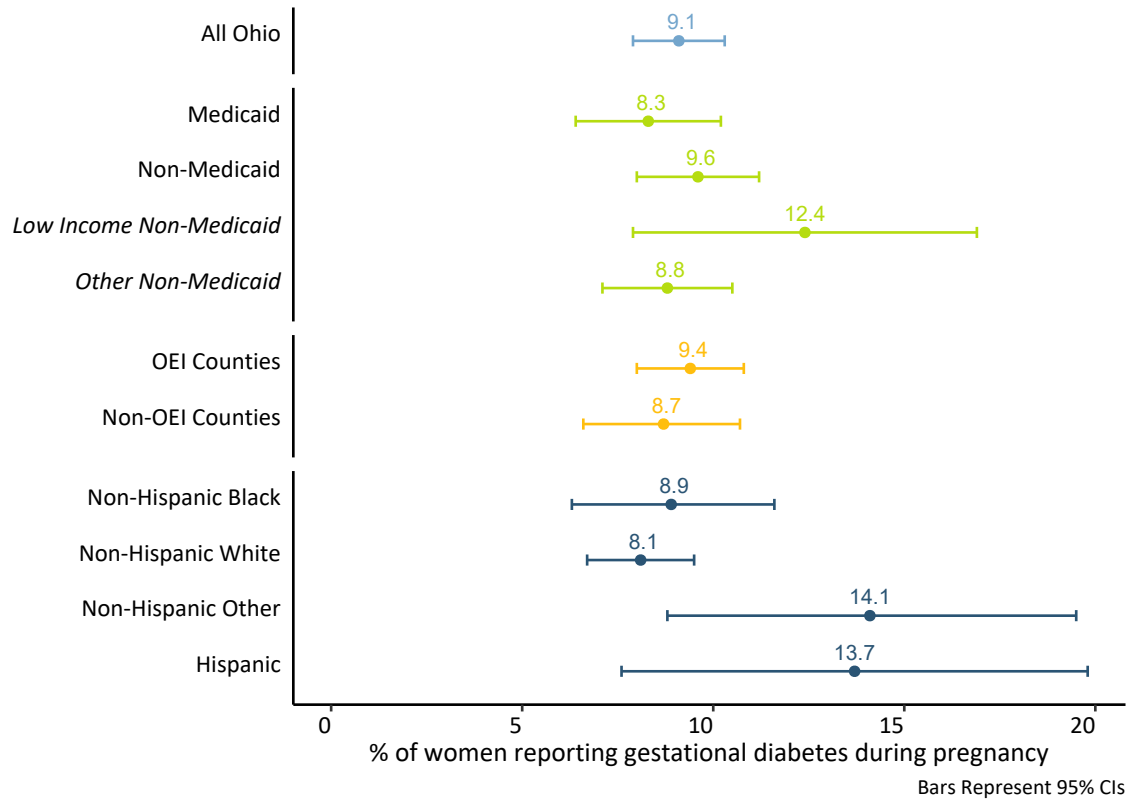


Figure 13. High blood pressure during pregnancy (question 22)

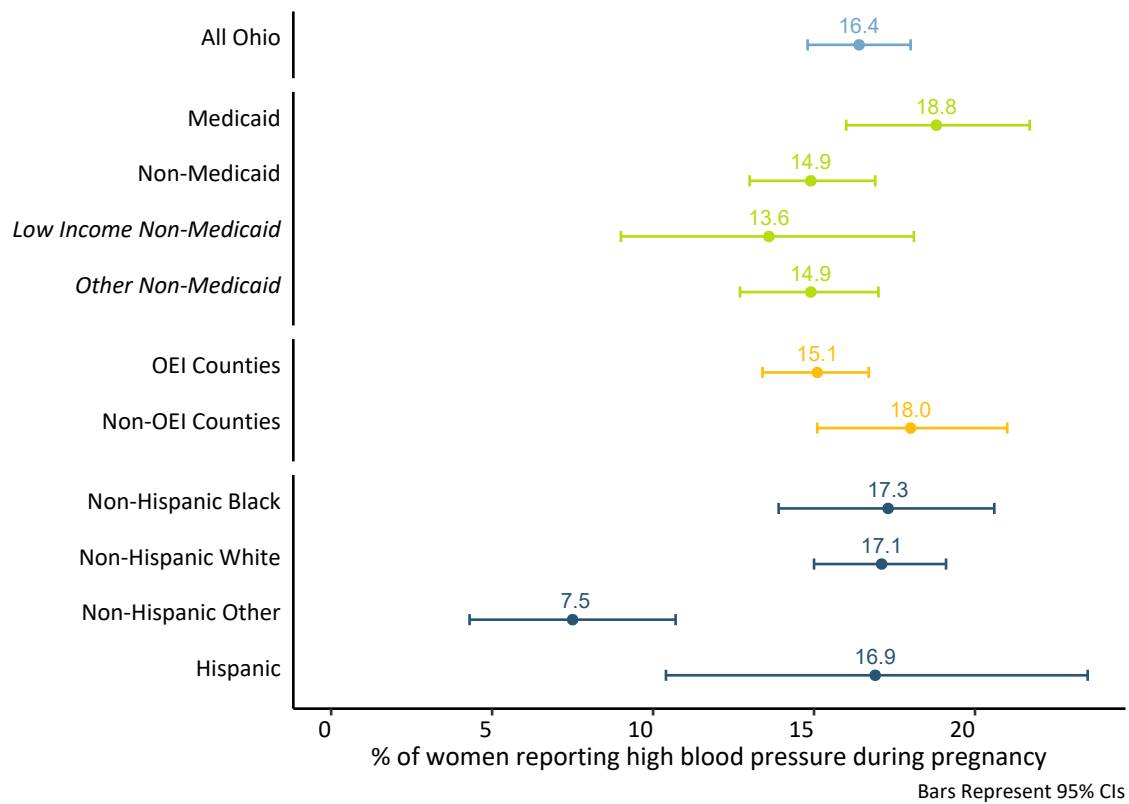
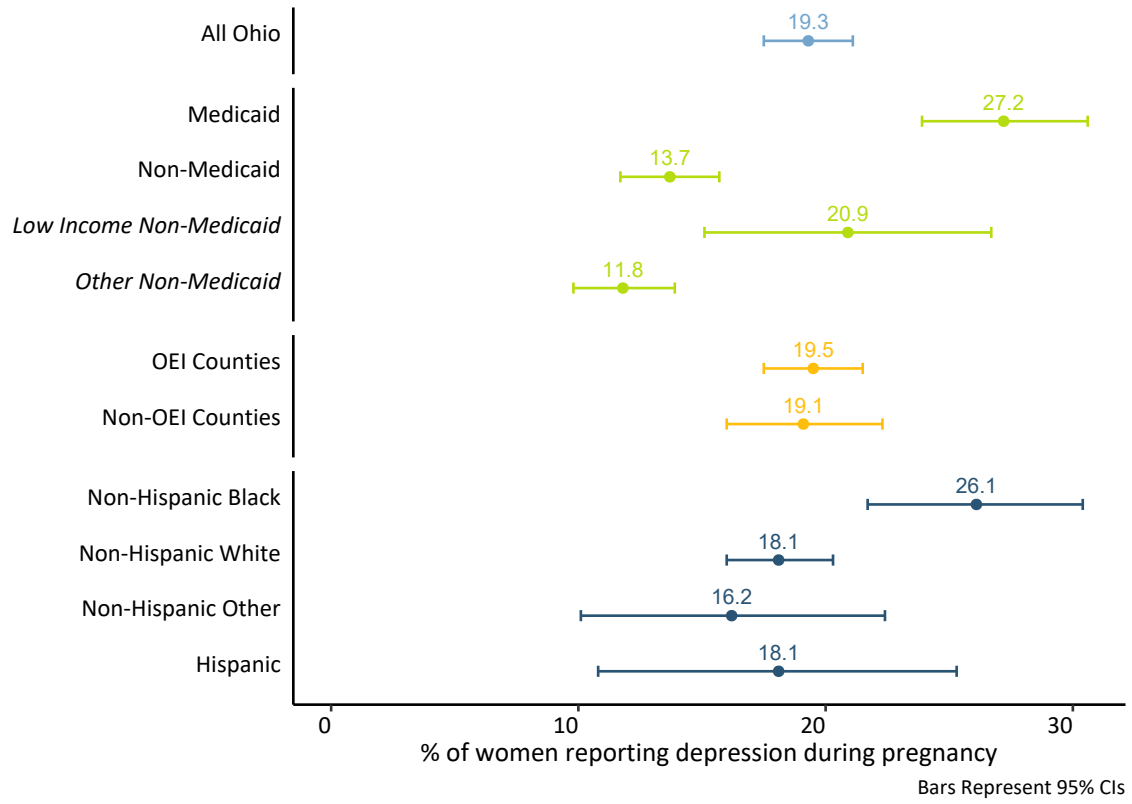


Figure 14. Depression during pregnancy (question 22)





“

My placenta ruptured with my second baby. I asked to be closely monitored because of what I've already gone through and up until one week before I had him, it was denied. My placenta ruptured again. People who know they are high risk should be given more lenience.

”

Tobacco, Alcohol, and Marijuana Use

Table 19. Prevalence of maternal cigarette use prior to, during and after pregnancy (questions 25-28)

	Weighted N	Weighted %	95% CI
Tobacco usage (% yes)			
Cigarette use during the 3 months before pregnancy	25,700	19.6	17.7 - 21.5
Cigarette use during the last 3 months of pregnancy	13,196	10.1	8.6 - 11.6
Cigarette use now	17,543	13.4	11.7 - 15.1

Figure 15. Prevalence of cigarette use during pregnancy (question 25)

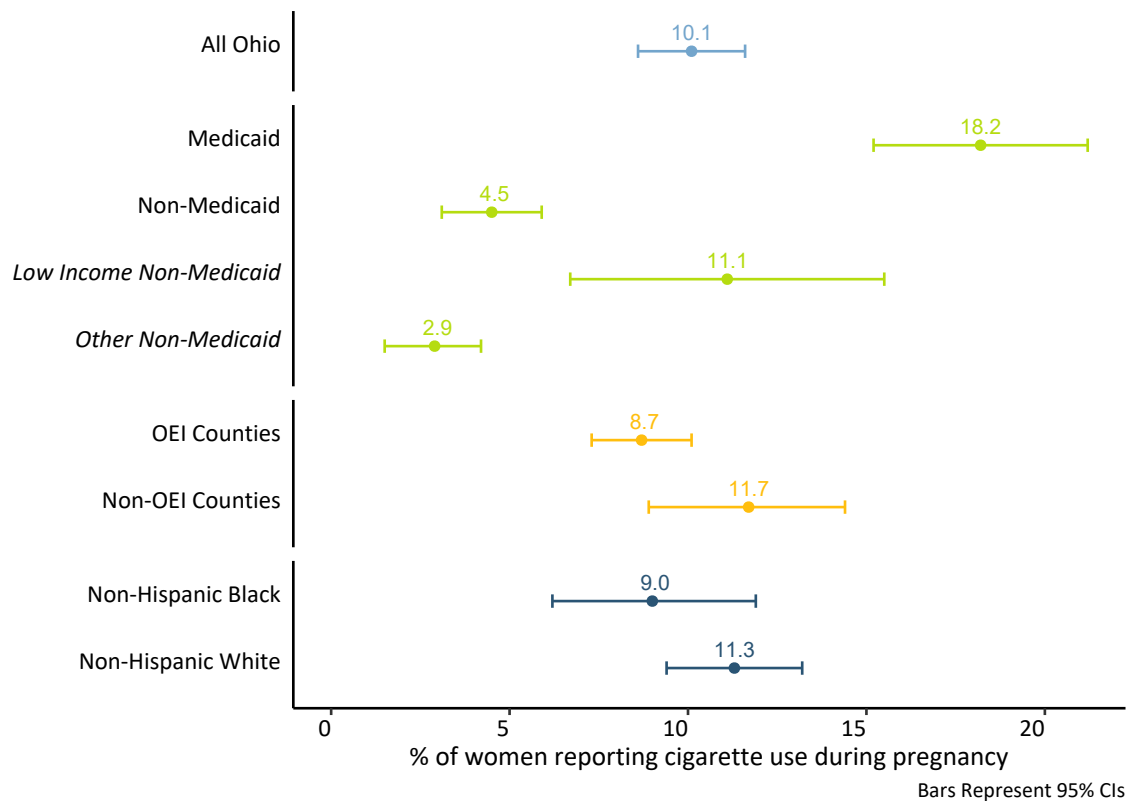


Table 20. Prevalence of maternal e-cigarette use prior to, during and after pregnancy (questions 29, 31-33)

	Weighted N	Weighted %	95% CI
E-cigarette usage (% yes)			
E-cigarette use during the 3 months before pregnancy	6,538	5.0	3.9 - 6.1
E-cigarette use during the last 3 months of pregnancy	1,992	1.5	1.0 - 2.1
E-cigarette use now	3,927	3.0	2.1 - 3.9

Figure 16. Prevalence of e-cigarette use during the 3 months before pregnancy (question 29)

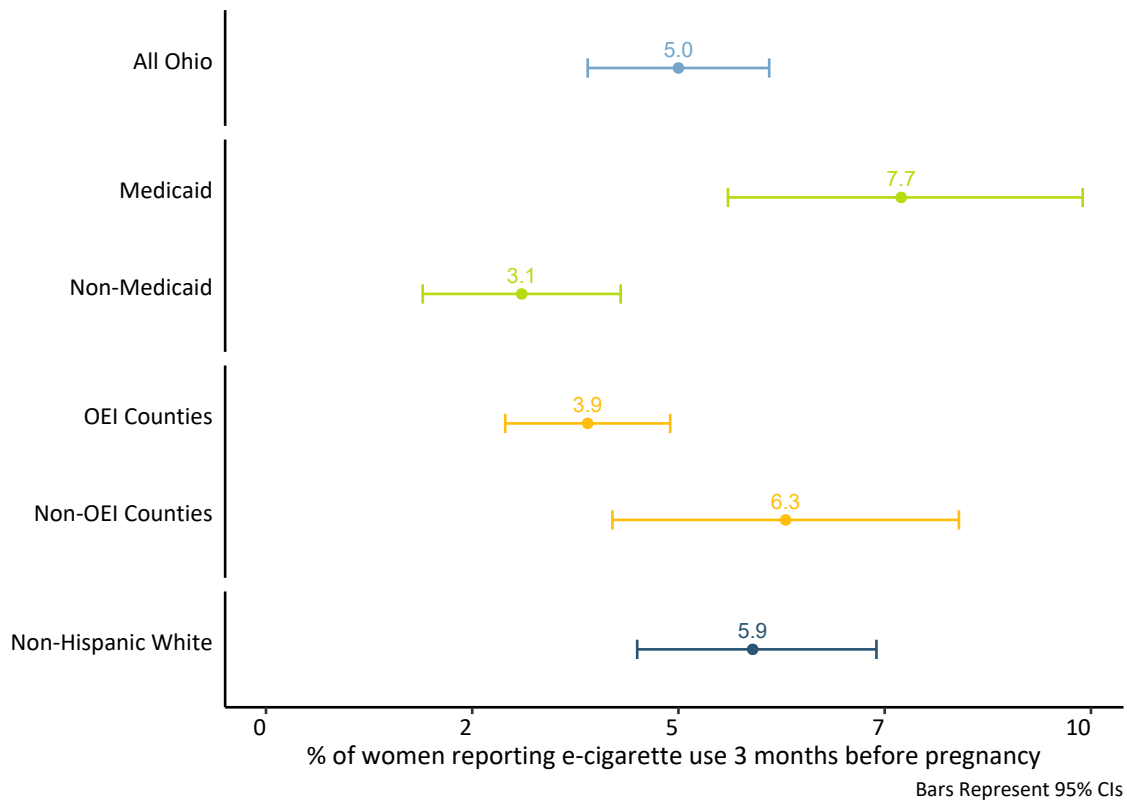


Table 21. Perception of e-cigarette use compared to traditional cigarettes among those who used e-cigarettes in the past 2 years (question 30)

	Weighted N	Weighted %	95% CI
E-cigarettes are			
More harmful than traditional cigarettes	775	6.9	3.0 - 10.8
Less harmful than traditional cigarettes	4,535	40.5	31.8 - 49.1
Equally harmful than traditional cigarettes	5,900	52.6	43.9 - 61.4

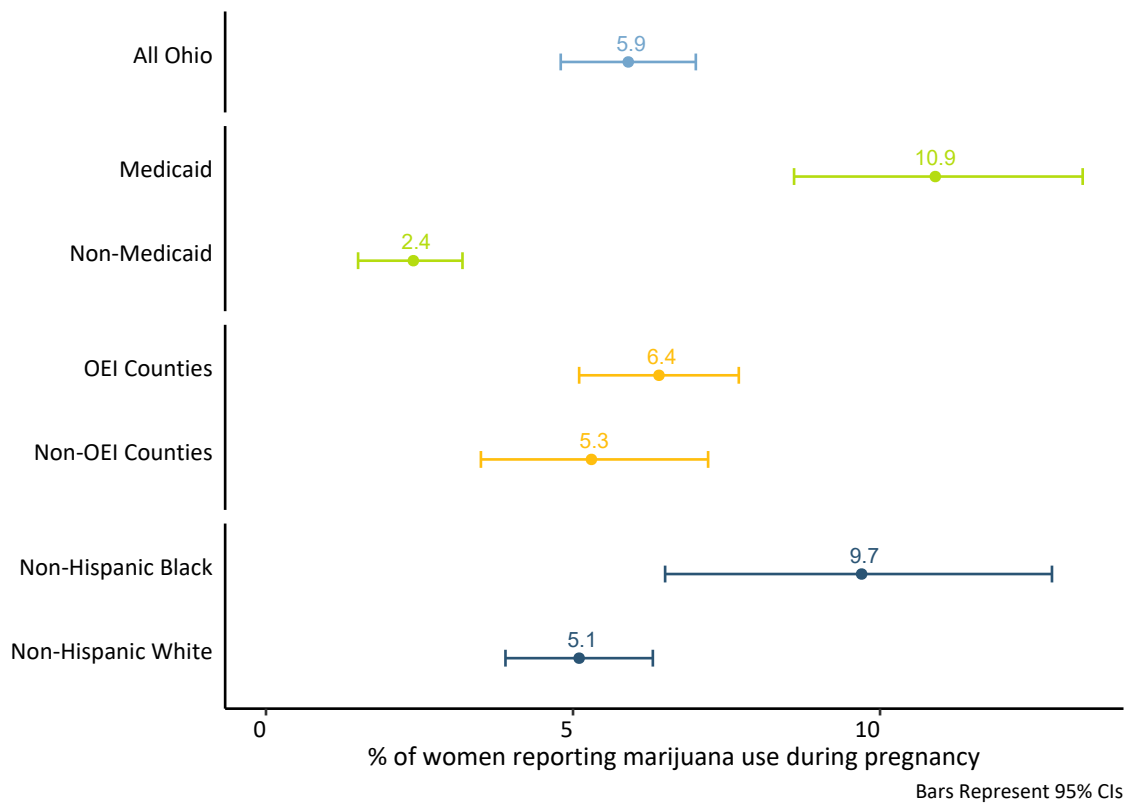
Table 22. Prevalence of alcohol consumption prior to pregnancy (questions 34-35)

	Weighted N	Weighted %	95% CI
Alcohol use in past 2 years			
No	40,957	31.3	29.2 - 33.4
Yes	89,969	68.7	66.6 - 70.8
Alcohol use 3 months prior to pregnancy			
No	51,414	39.3	37.1 - 41.5
Yes	79,439	60.7	58.5 - 62.9

Table 23. Prevalence of marijuana use (question 64)

	Weighted N	Weighted %	95% CI
Marijuana usage (% yes)			
During 12 months before pregnancy	20,464	15.7	14.0 - 17.4
During pregnancy	7,669	5.9	4.8 - 7.0
Since infant was born	9,222	7.1	5.9 - 8.3

Figure 17. Prevalence of maternal marijuana use during pregnancy (question 64)



Intimate Partner Violence

Table 24. Prevalence of intimate partner violence prior to or during pregnancy (questions 37-38)

	Weighted N	Weighted %	95% CI
Intimate partner violence, before pregnancy (% yes)			
Any abuse	6,847	5.2	4.1 - 6.3
Husband or partner	3,060	2.3	1.6 - 3.1
Ex-husband or partner	2,763	2.1	1.4 - 2.8
Family	740	0.6	0.3 - 0.9
Other	1,692	1.3	0.7 - 1.8
Intimate partner violence, during pregnancy (% yes)			
Any abuse	4,798	3.7	2.8 - 4.5
Husband or partner	1,949	1.5	0.9 - 2.1
Ex-husband or partner	1,461	1.1	0.6 - 1.6
Family	882	0.7	0.3 - 1.0
Other	1,411	1.1	0.6 - 1.5

Figure 18. Prevalence of any intimate partner violence prior to pregnancy (question 37)

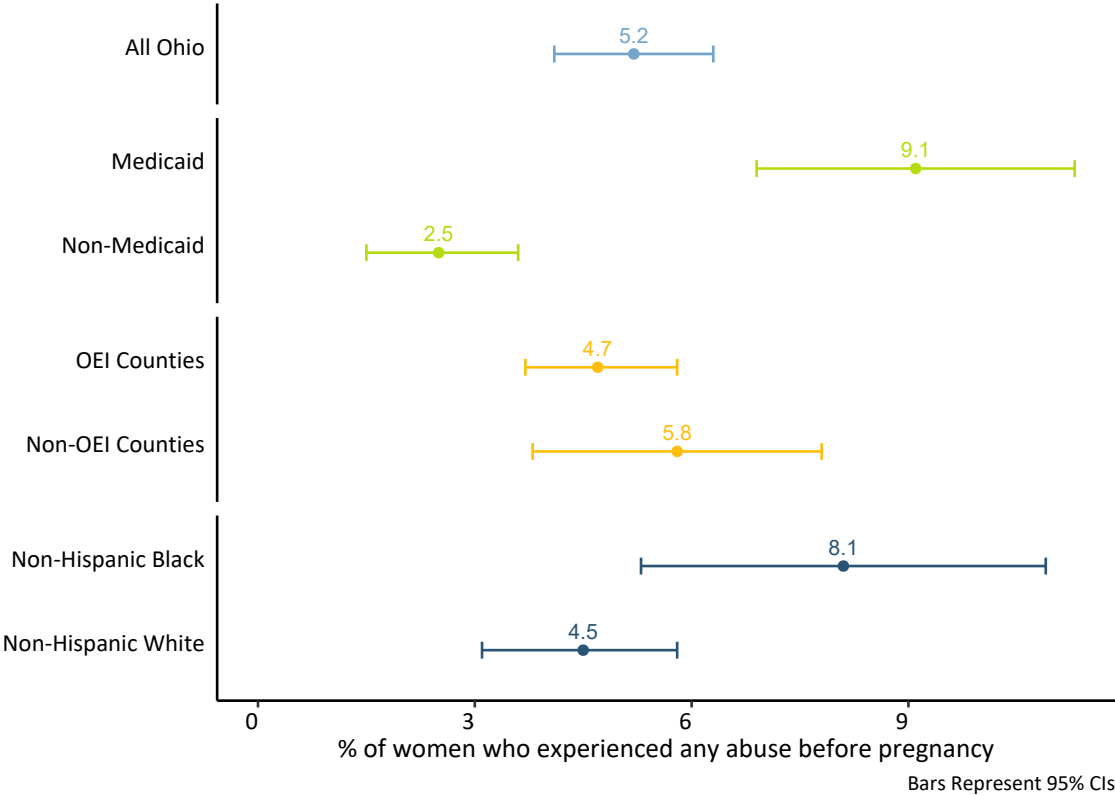


Table 25. Length of infant hospital stay at delivery (question 40)

	Weighted N	Weighted %	95% CI
Length of infant hospital stay			
Not born in a hospital	1,722	1.3	0.8 - 1.8
<1 day	1,751	1.3	0.9 - 1.8
1 to 2 days	76,171	58.1	56.0 - 60.2
3 to 5 days	40,096	30.6	28.6 - 32.6
6-14 days	5,974	4.6	3.7 - 5.4
14+ days	5,359	4.1	3.6 - 4.6

Table 26. Infant alive and infant living with mother (questions 41-42)

	Weighted N	Weighted %	95% CI
Alive and living with mother (% yes)			
Infant alive	129,665	99.4	99.1 - 99.6
Infant alive and living with mother	128,238	97.6	97.0 - 98.2



“

I got pregnant a month after I had a miscarriage. During my pregnancy I had placenta previa and my placenta gave out. I had my daughter at 27 weeks. She weighed 1lb, 0.2 oz. They didn't think she would make it past a week but here she is three months later going strong.

”

Breastfeeding

Table 27. Planned feeding methods before birth (question 43)

	Weighted N	Weighted %	95% CI
Feeding method			
Breastfeed only	80,154	62.2	60.1 - 64.4
Formula only	17,619	13.7	12.1 - 15.3
Both breast and formula	31,027	24.1	22.2 - 26.0

Table 28. Source of breastfeeding resources received among women whose infant was alive and living with them or still in the hospital (question 44)

	Weighted N	Weighted %	95% CI
Source (check all that apply)			
Doctor	94,579	74.4	72.4 - 76.3
Nurse, midwife or doula	89,693	70.5	68.4 - 72.5
Breastfeeding or lactation specialist	94,449	73.9	71.9 - 75.9
Infant's doctor or healthcare worker	78,706	62.1	59.9 - 64.3
Breastfeeding support group	27,827	22.1	20.3 - 23.9
Breastfeeding hotline or toll-free number	11,045	8.8	7.6 - 10.0
Family or friends	79,531	62.7	60.5 - 64.8

Table 29. Percentage of women who ever breastfed their infant, stopped breastfeeding (any time between birth and filling out the survey at 2-6 months postpartum), and reasons for stopping among those whose infant was alive and living with mothers or still in the hospital (questions 45-46, 48)

	Weighted N	Weighted %	95% CI
Breastfeeding (ever)			
No	18,952	14.7	13.1 - 16.4
Yes	109,560	85.3	83.6 - 86.9
Stopped Breastfeeding			
No	67,266	61.7	59.4 - 64.1
Yes	41,692	38.3	35.9 - 40.6
Reasons for stopping breastfeeding (check all that apply)			
Difficulty latching or nursing	17,109	41.0	37.0 - 45.0
Breast milk alone did not satisfy	15,481	37.1	33.2 - 41.0
Infant's weight inadequate	6,797	16.3	13.4 - 19.2
Nipples were sore, cracked or bleeding	10,607	25.4	22.0 - 28.9
Not producing enough milk	24,654	59.1	55.2 - 63.0
Too many household duties	8,782	21.1	17.6 - 24.5
Felt it was right time to stop	4,501	10.8	8.3 - 13.3
Sick or on medicine	2,756	6.6	4.9 - 8.3
Went back to work	8,979	21.5	18.0 - 25.0
Went back to school	932	2.2	1.1 - 3.4
Partner did not support breastfeeding	1,092	2.6	1.3 - 3.9
Infant had jaundice	3,458	8.3	6.0 - 10.6

Figure 19. Percentage of women who ever breastfed new infant (question 45)

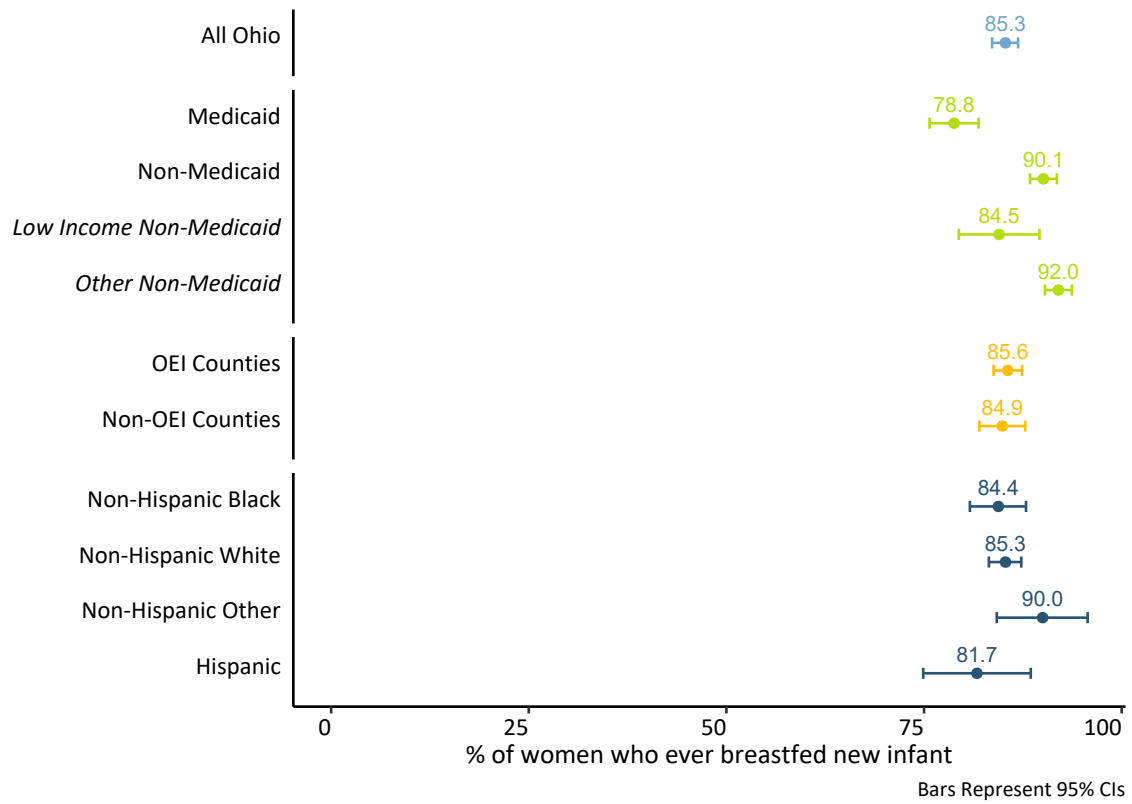


Figure 20. Percentage of all Ohio women who ever breastfed new infant (question 45)

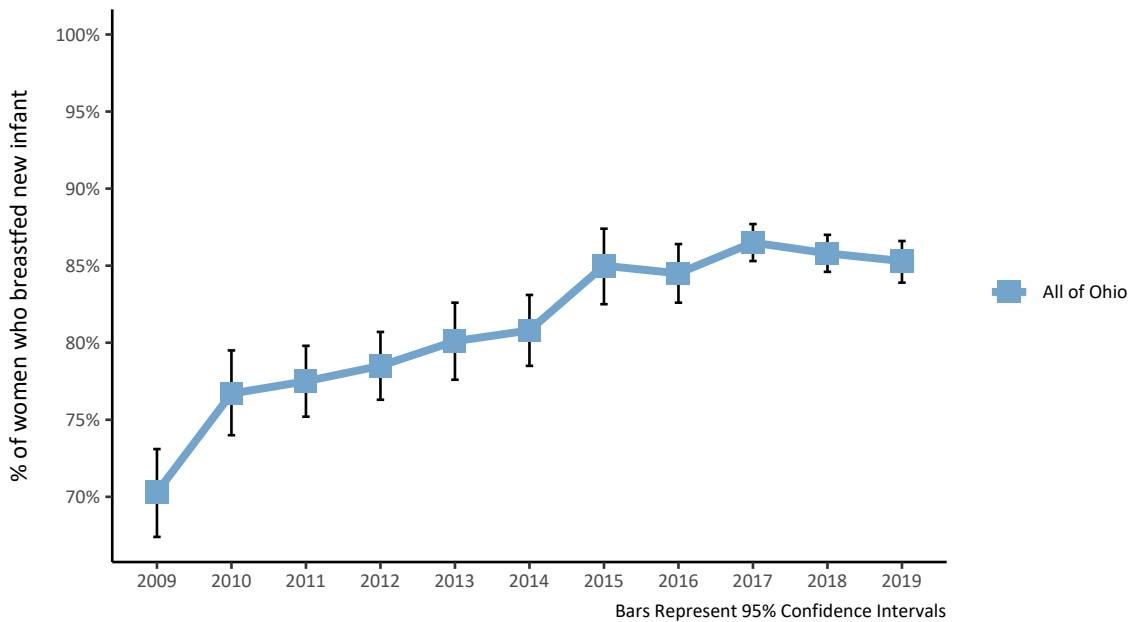


Figure 21. Percentage of all Ohio women who ever breastfed new infant stratified by Medicaid status (question 45)

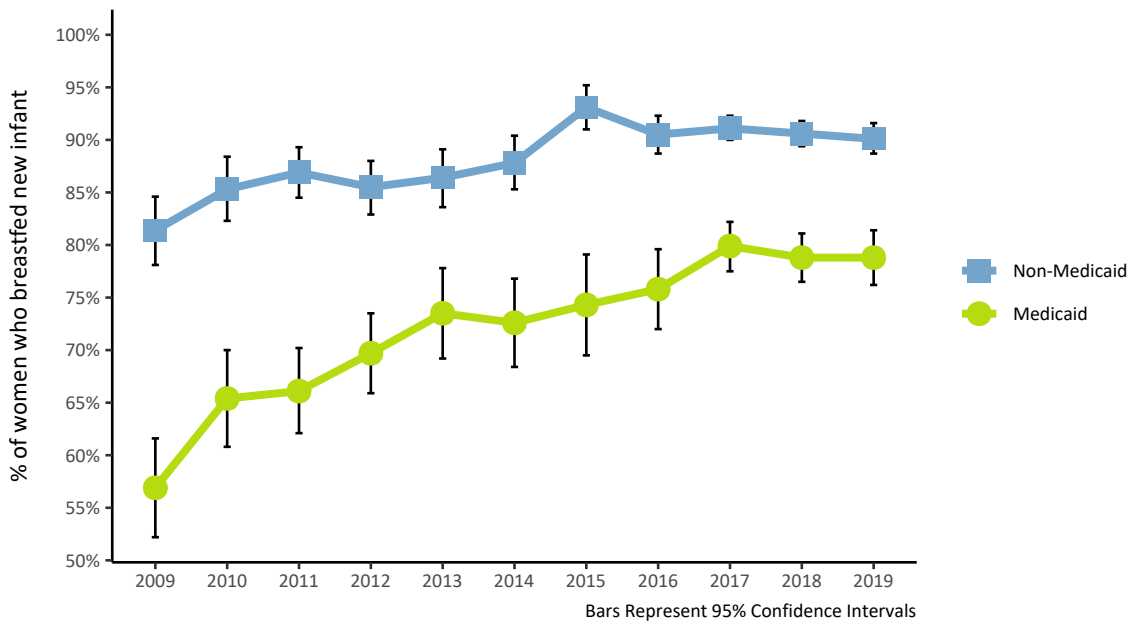


Figure 22. Percentage of all Ohio women who ever breastfed new infant stratified by race/ethnicity (question 45)

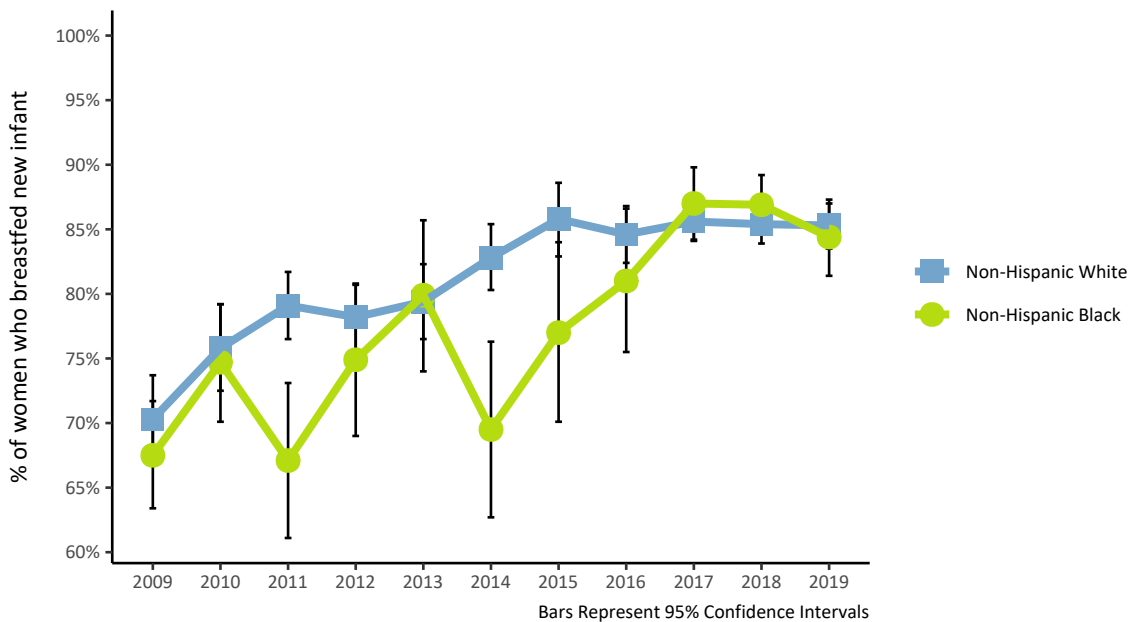


Figure 23. Percentage of women who were breastfeeding at 8 weeks stratified by Medicaid status (question 47)

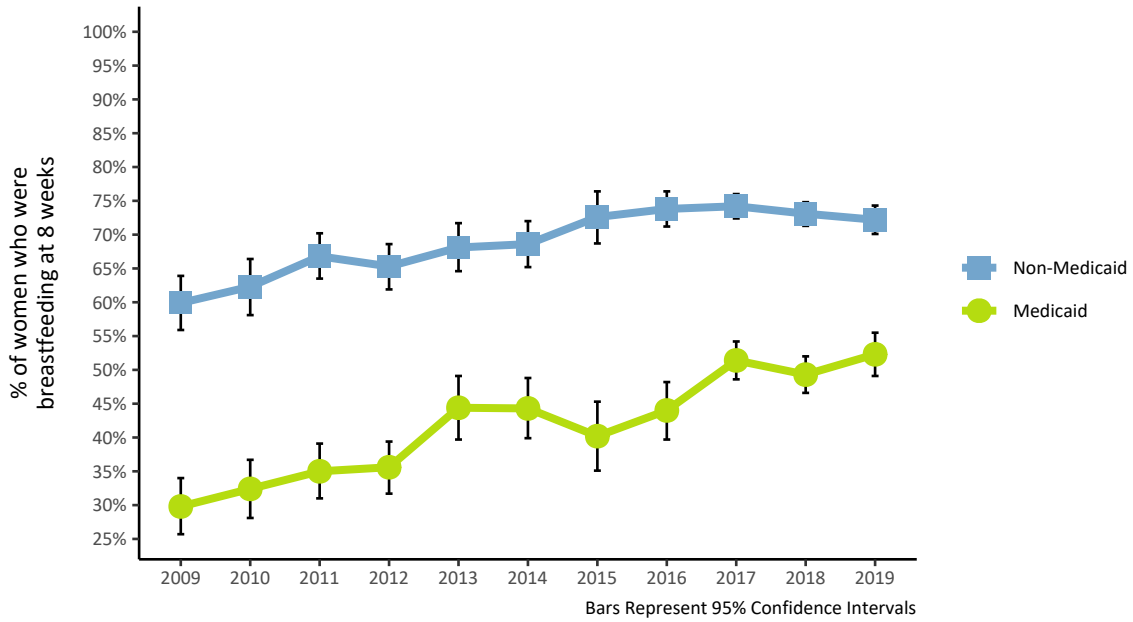
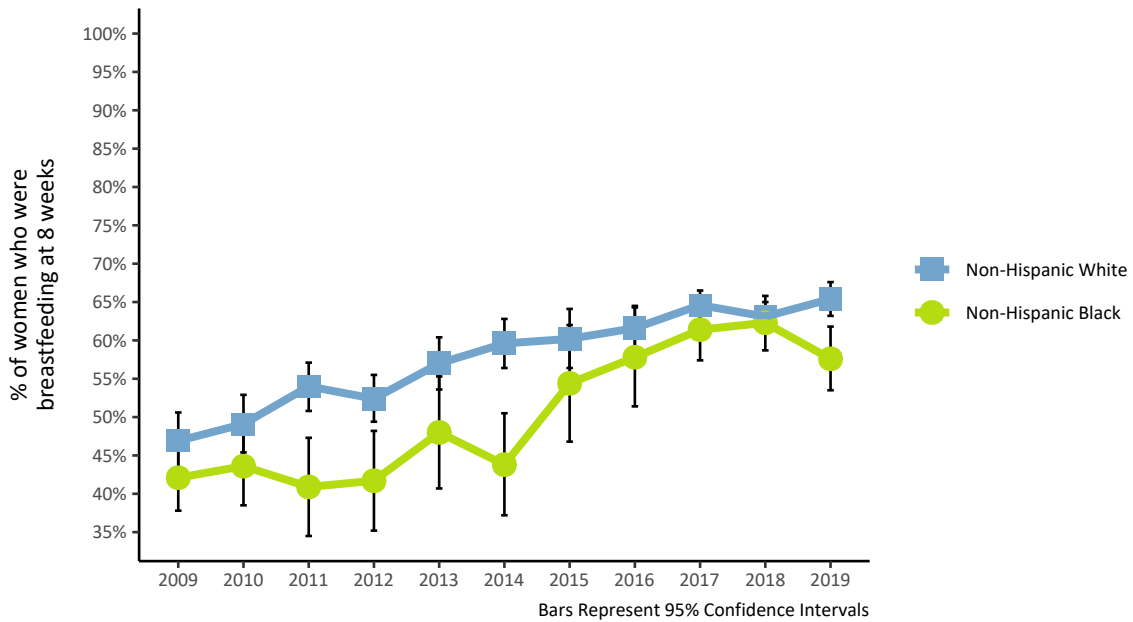


Figure 24. Percentage of women who were breastfeeding at 8 weeks stratified by race/ethnicity (question 47)



Infant Sleep Environment

Table 30. Percentage of infant sleep position and environment among those whose infant was alive and living with mothers (questions 50-51, 53)

	Weighted N	Weighted %	95% CI
Sleep environment			
Infant slept in crib	117,467	92.1	90.9 - 93.4
Infant slept alone in crib or bed	83,041	65.0	62.8 - 67.2
Infant slept on back	111,281	87.6	86.0 - 89.1

Figure 25. Percentage of infants who slept in a crib (question 53)

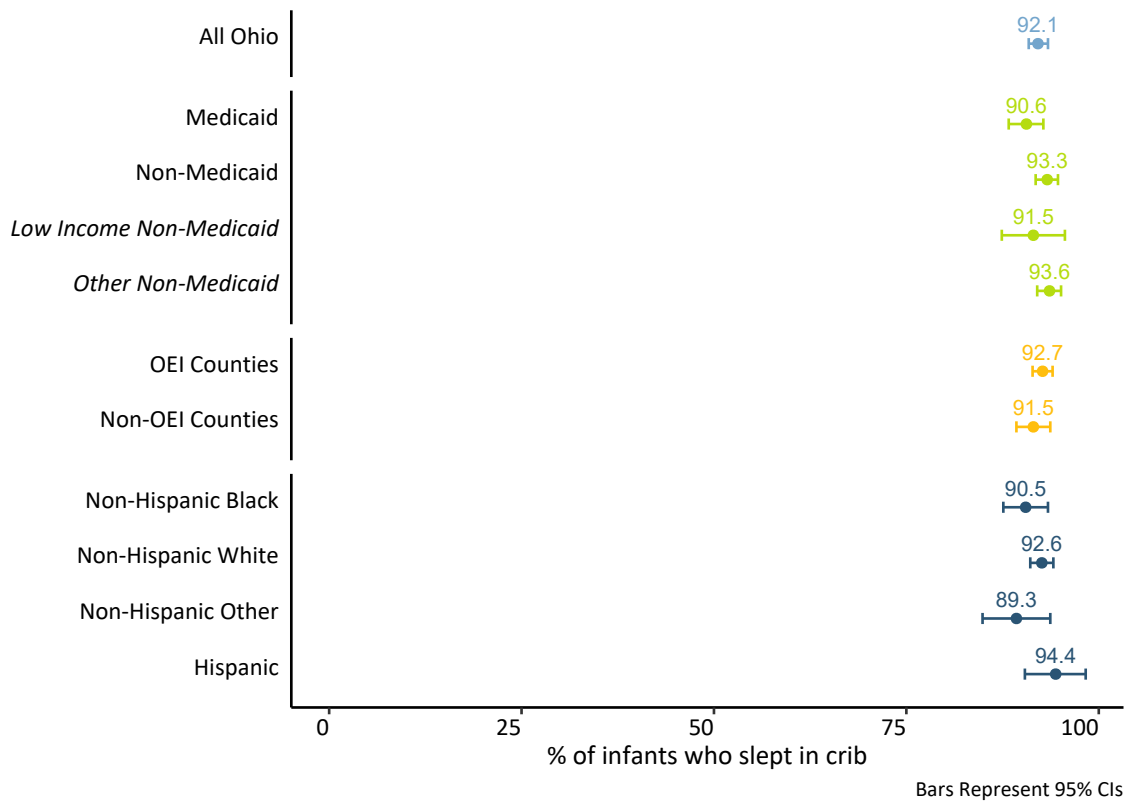


Figure 26. Percentage of infants who slept alone in a crib or bed (question 51)

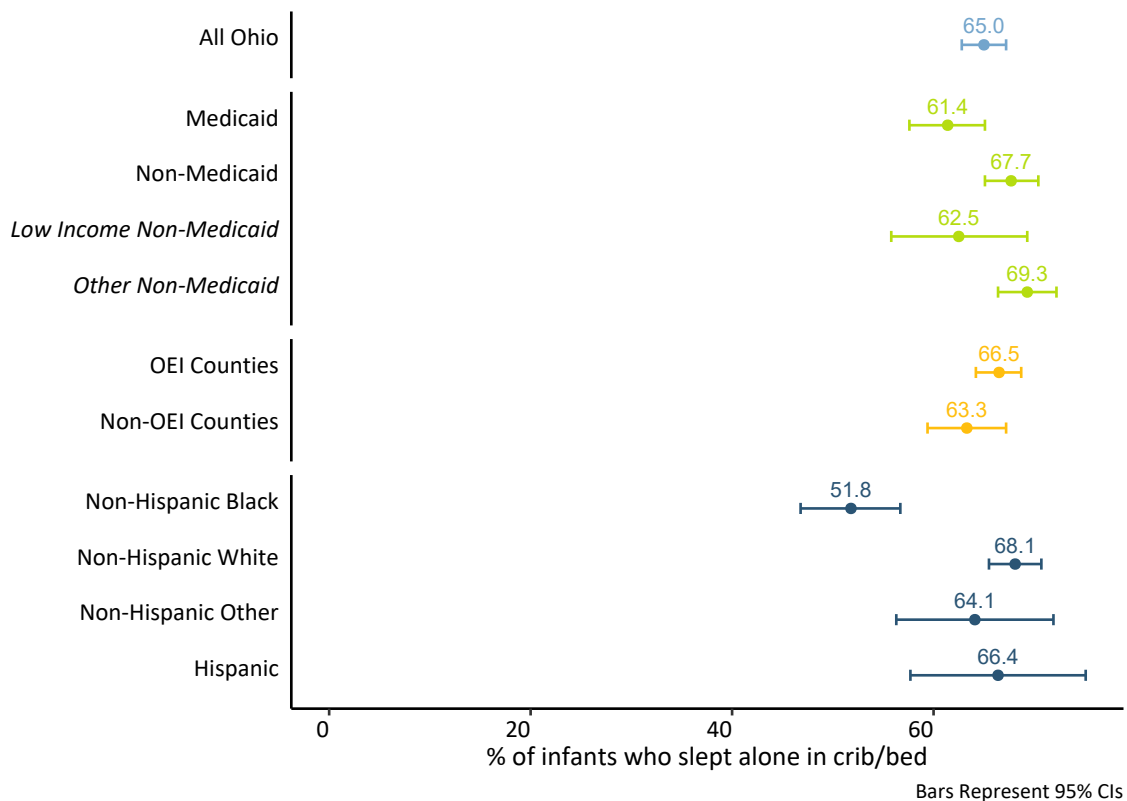


Table 31. Percentage of discussions with healthcare workers about infant safe sleep whose infant was alive and living with mothers (question 54)

	Weighted N	Weighted %	95% CI
Discussed the following			
Placing infant on his or her back to sleep	123,558	96.8	95.9 - 97.7
Placing infant to sleep in a crib	120,451	94.3	93.2 - 95.4
Placing infant's crib or bed in mother's room	77,516	61.0	58.8 - 63.2
What things should and should not go in bed with infant	118,606	93.0	91.7 - 94.3

Figure 27. Percentage of infants who slept on their back (question 50)

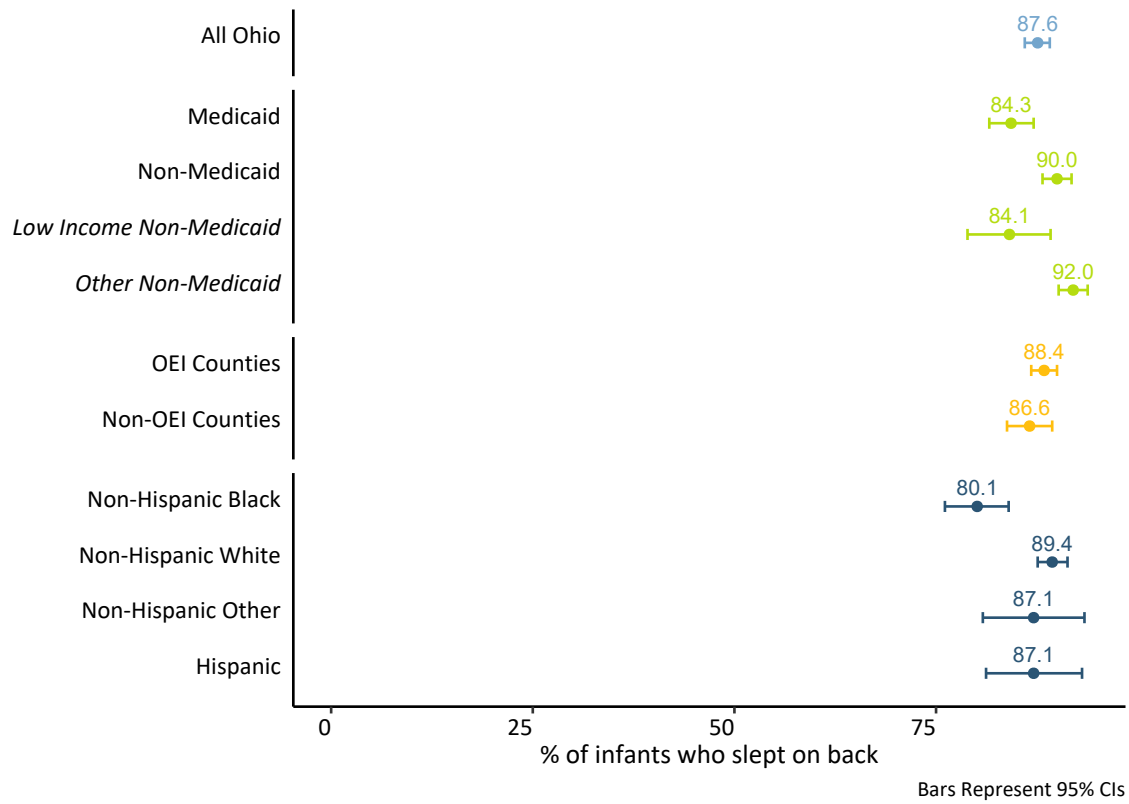


Figure 28. Percentage of all Ohio infants who were placed on their back to sleep (question 50)

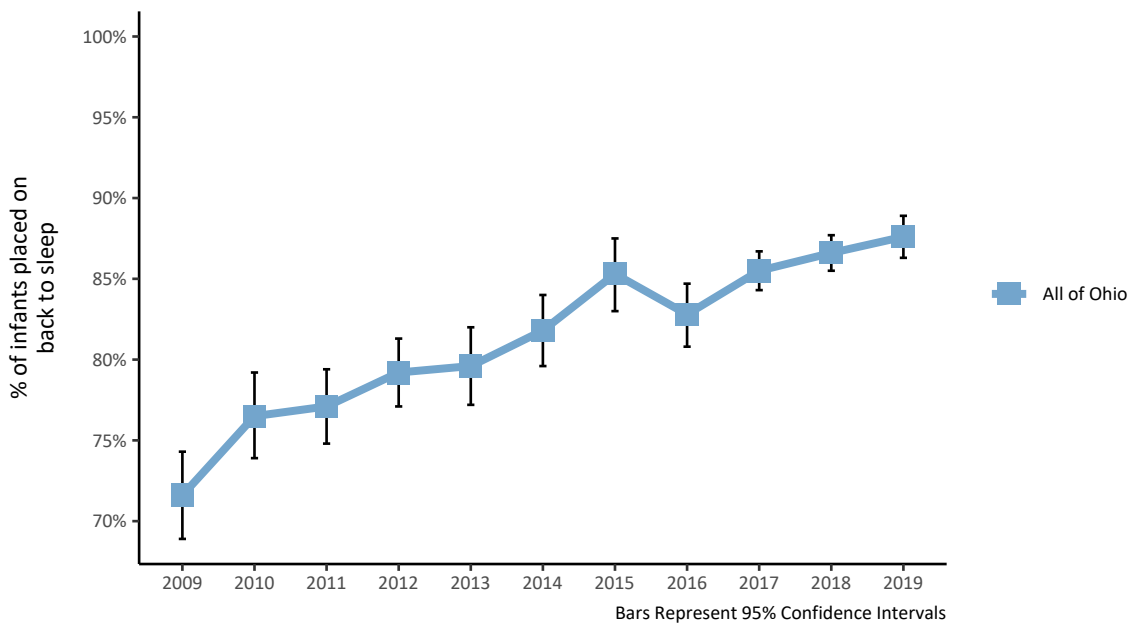


Figure 29. Percentage of all Ohio infants who were placed on their back to sleep stratified by Medicaid status (question 50)

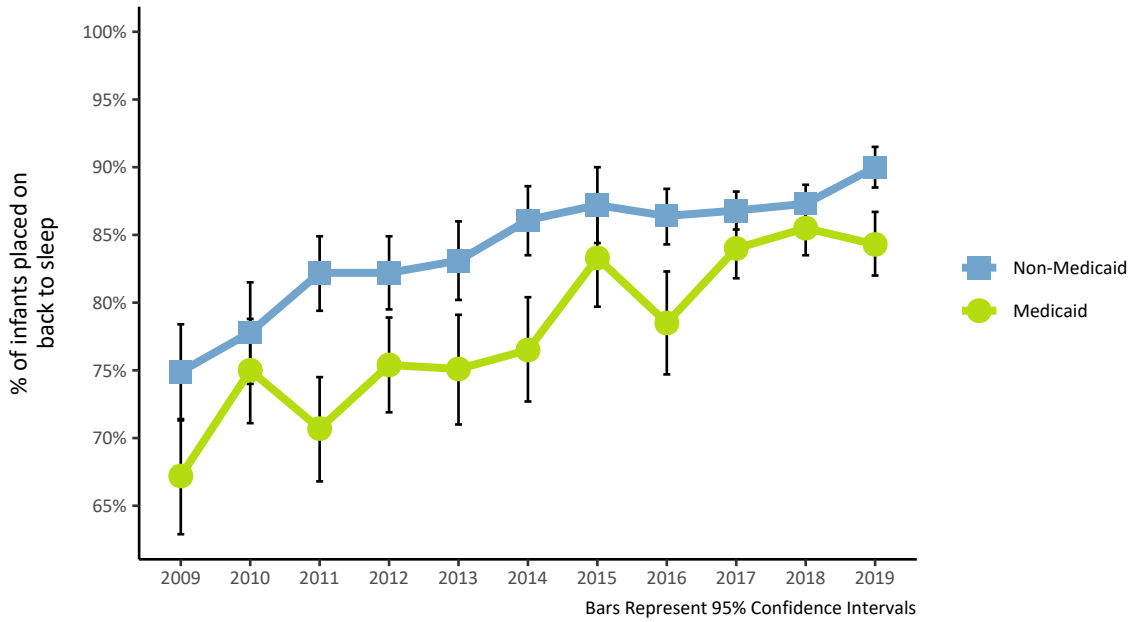
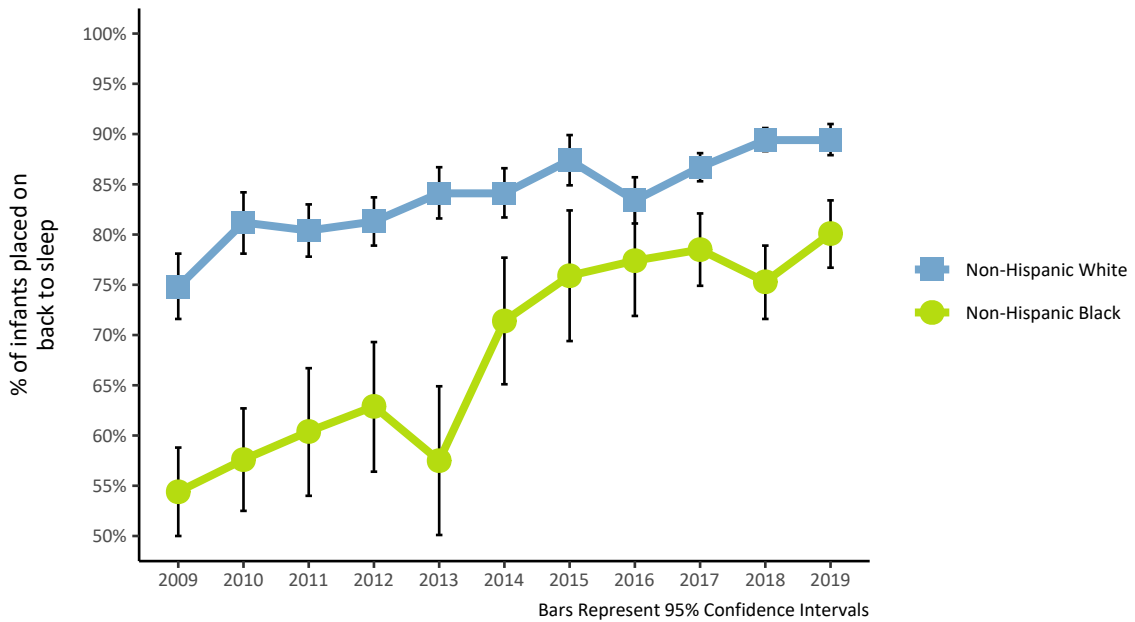


Figure 30. Percentage of all Ohio infants who were placed on their back to sleep stratified by race/ethnicity (question 50)



Postpartum Health

Table 32. Prevalence of postpartum contraception use and reason(s) for not using a contraceptive method (questions 55-56)

	Weighted N	Weighted %	95% CI
Current contraception use			
No	27,203	20.9	19.1 - 22.7
Yes	103,111	79.1	77.3 - 80.9
Reasons for not using contraception (check all that apply)			
Want to get pregnant	4,825	17.1	13.6 - 20.5
Pregnant now	871	3.1	1.4 - 4.8
Had tubes tied or blocked	**	**	**
Don't want to use birth control	12,876	45.5	40.8 - 50.2
Worried about side effects from birth control	10,116	35.7	31.2 - 40.3
Not having sex	5,911	20.9	17.2 - 24.6
Husband or partner doesn't want to	3,723	13.2	9.8 - 16.5
Problems paying for birth control	665	2.4	1.1 - 3.6
Other	5,077	17.9	14.4 - 21.5

Figure 31. Prevalence of postpartum contraception (question 55)

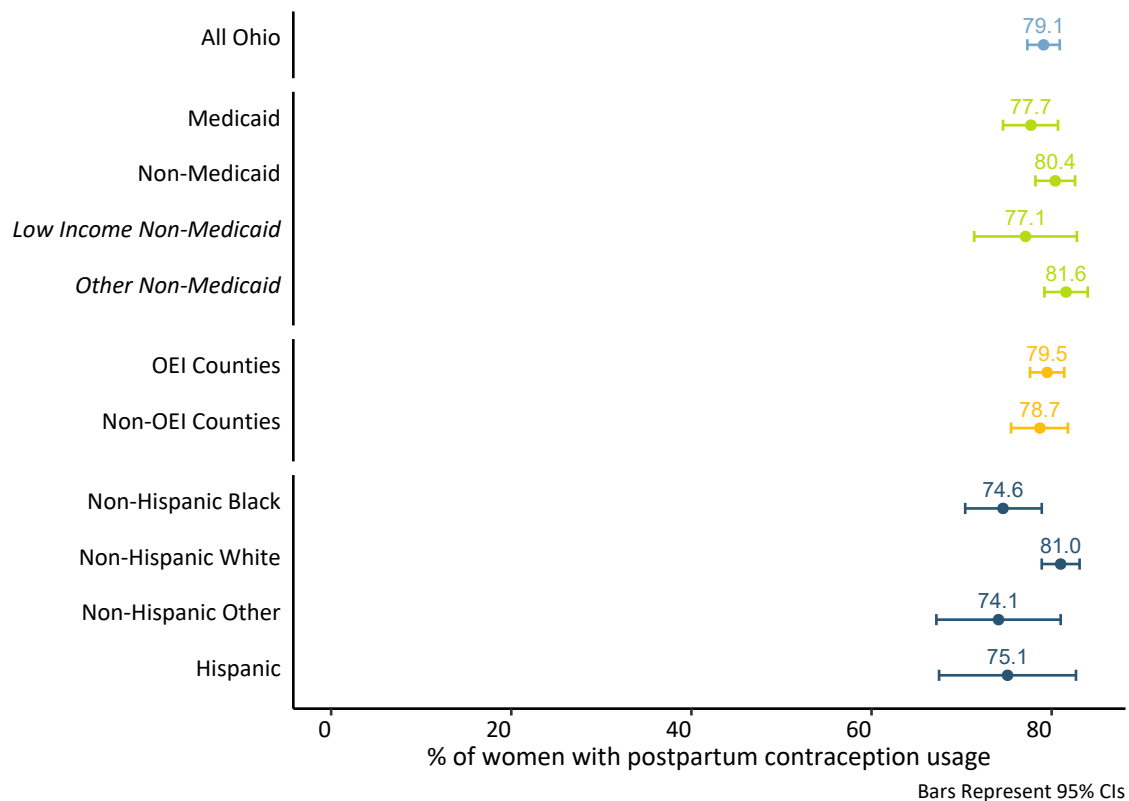


Table 33. Prevalence of having a postpartum visit and reason(s) for not having one (questions 58-59)

	Weighted N	Weighted %	95% CI
Had a postpartum visit			
No	9,230	7.1	5.9 - 8.2
Yes	121,656	92.9	91.8 - 94.1
Reasons (for no visit) (check all that apply)			
No health insurance to cover visit cost	914	9.9	4.9 - 14.9
Did not think needed a visit	3,897	42.2	33.7 - 50.8
Appointment unavailable	969	10.5	6.0 - 15.0
Issues with transportation	1,346	14.6	9.2 - 20.0
Had too many things going on	3,972	43.0	34.5 - 51.6
Did not get time off from work	**	**	**

Figure 32. Prevalence of having a postpartum visit (question 58)

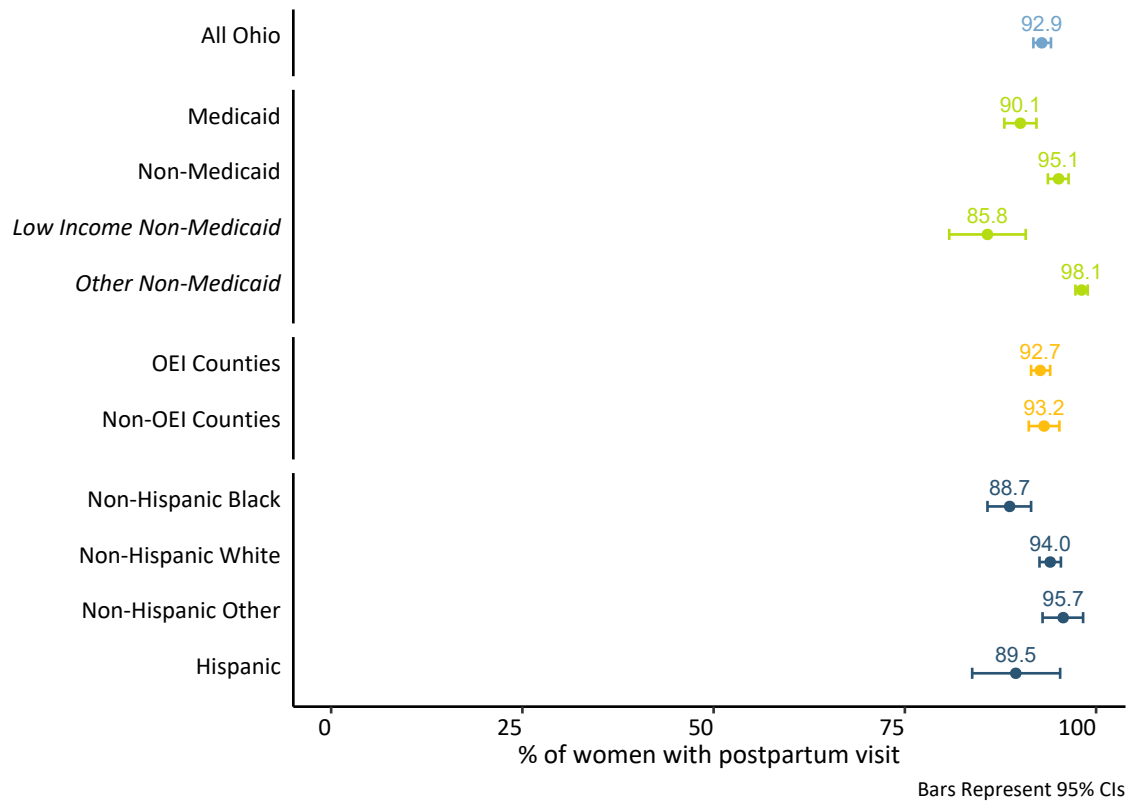


Table 34. Prevalence of postpartum depressive symptoms (questions 62)

	Weighted N	Weighted %	95% CI
Postpartum depressive symptoms			
No	120,331	92.0	90.7 - 93.2
Yes	10,480	8.0	6.8 - 9.3

Figure 33. Percentage of women with a postpartum visit stratified by Medicaid status (question 58)

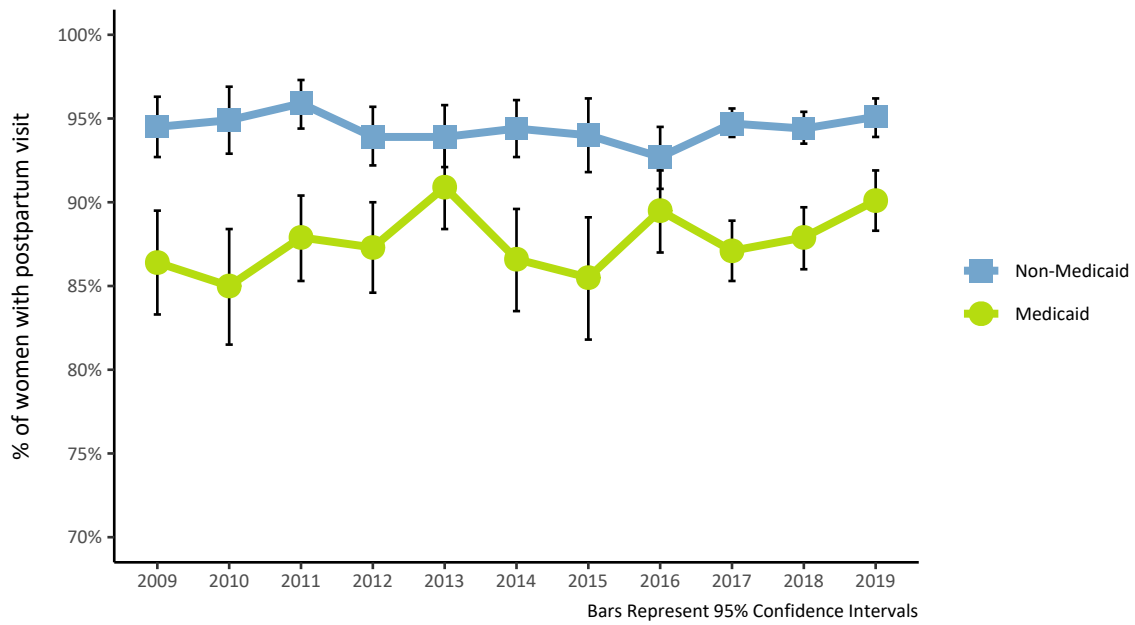


Figure 34. Percentage of women with a postpartum visit stratified by race/ethnicity (question 58)

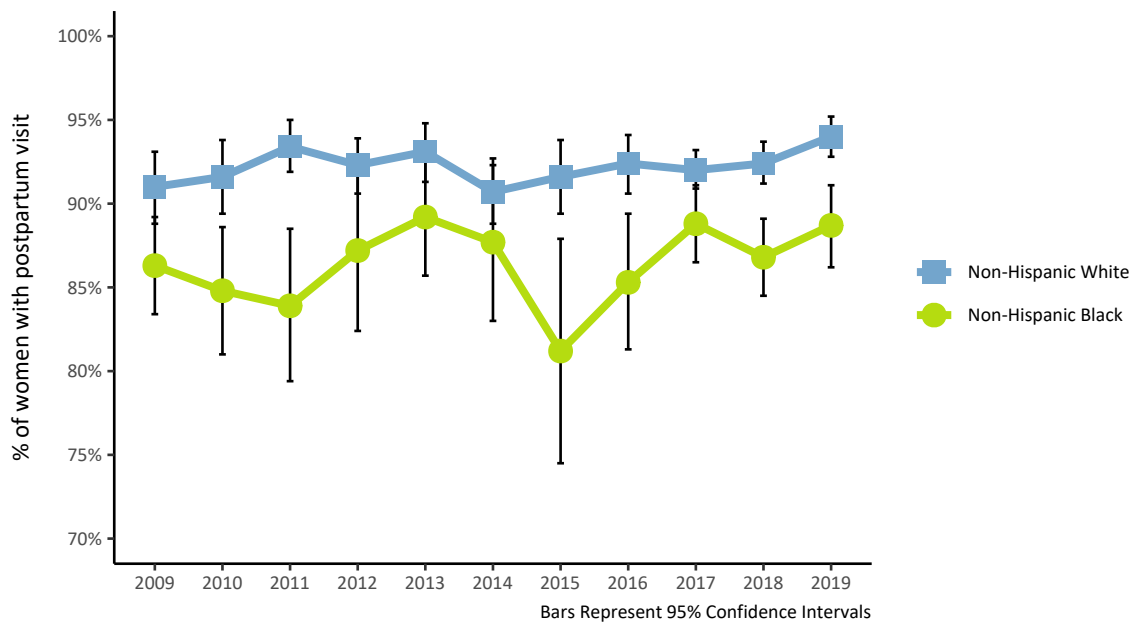


Figure 35. Prevalence of maternal postpartum depressive symptoms (question 62)

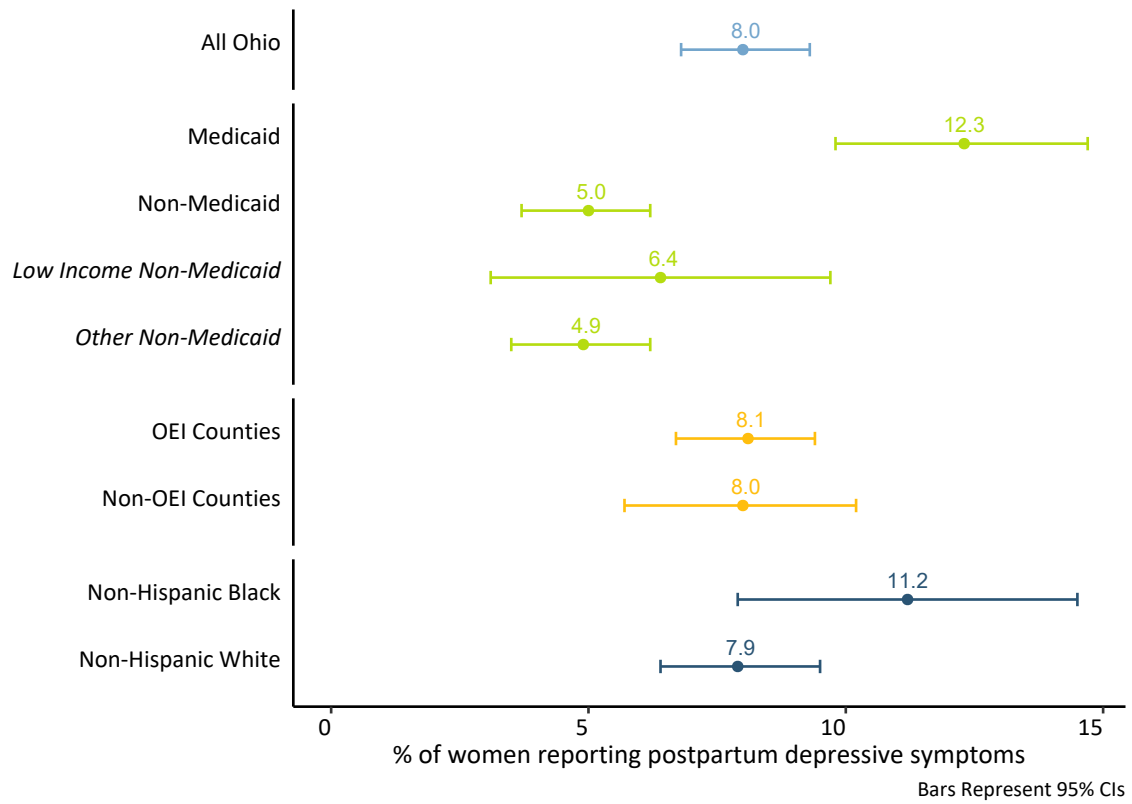
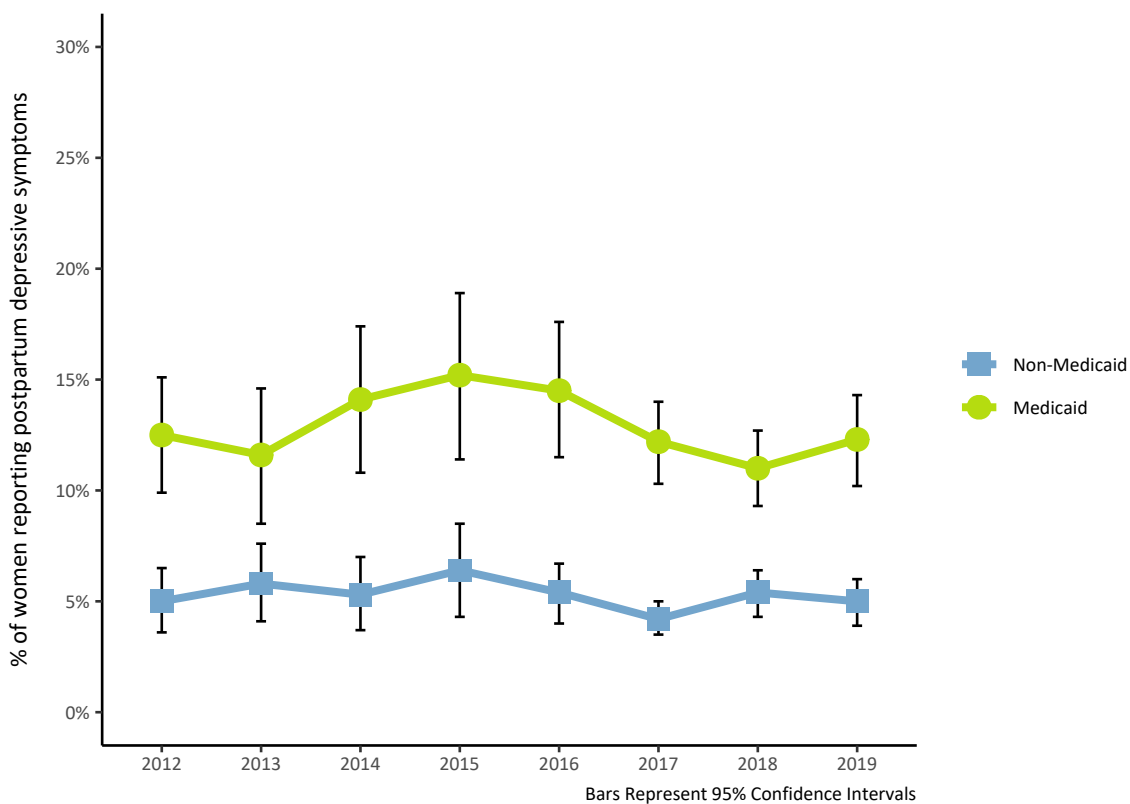


Figure 36. Prevalence of women reporting feeling down or depressed always/often since their newborn infant was born stratified by Medicaid status (question 62)





“

I suffered from postpartum depression and started taking Zoloft around six weeks postpartum with increased mood around eight weeks postpartum.

”

Household Income

Table 35. Household income during the 12 months prior to birth (question 65)

	Weighted N	Weighted %	95% CI
Household income			
\$16,000 or less	24,692	19.7	17.9 - 21.6
\$16,001 - \$20,000	9,938	7.9	6.6 - 9.3
\$20,001 - \$24,000	6,830	5.5	4.3 - 6.6
\$24,001 - \$28,000	4,494	3.6	2.8 - 4.4
\$28,001 - \$32,000	5,992	4.8	3.8 - 5.8
\$32,001 - \$40,000	9,176	7.3	6.0 - 8.6
\$40,001 - \$48,000	6,437	5.1	4.1 - 6.2
\$48,001 - \$57,000	7,932	6.3	5.2 - 7.5
\$57,001 - \$60,000	3,266	2.6	2.0 - 3.3
\$60,001 - \$73,000	7,901	6.3	5.2 - 7.4
\$73,001 - \$85,000	7,197	5.7	4.8 - 6.7
\$85,001 or more	31,395	25.1	23.4 - 26.8

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Ohio Pregnancy Assessment Survey

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