



Preconception Health by Maternal Educational Attainment New Mexico PRAMS 2016 - 2018

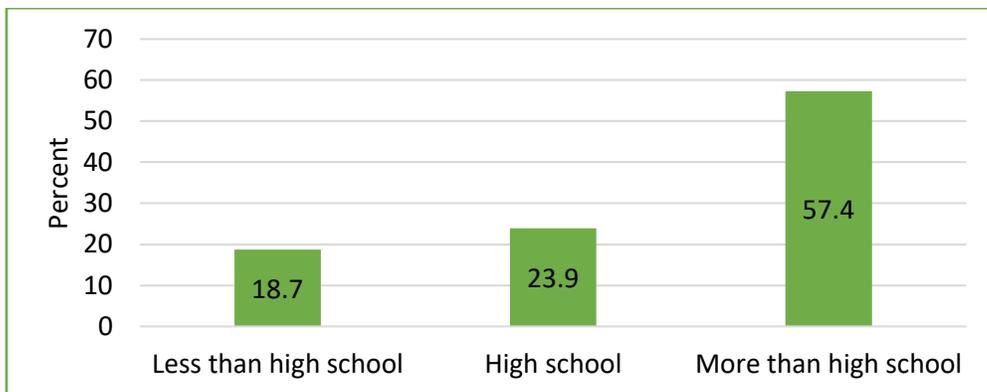


by MCH Epidemiology, Family Health Bureau, Public Health Division, NM Department of Health

Preconception health care is important to improve pregnancy and birth outcomes for both the mother and her infant. Many maternal behaviors and chronic conditions associated with unfavorable pregnancy outcomes can be addressed during doctor visits before pregnancy. These behaviors or environmental factors include smoking, drinking, and use of drugs; and unhealthy weight. Chronic conditions may include diabetes, hypertension, interpersonal violence and depression or anxiety disorders. Socioeconomic status can affect maternal health behaviors and experiences, including smoking, no or late entry to prenatal care and unintended pregnancy.¹

More than one-half of New Mexico resident women who gave birth in NM had an education beyond high school at the time of the survey (Figure 1).

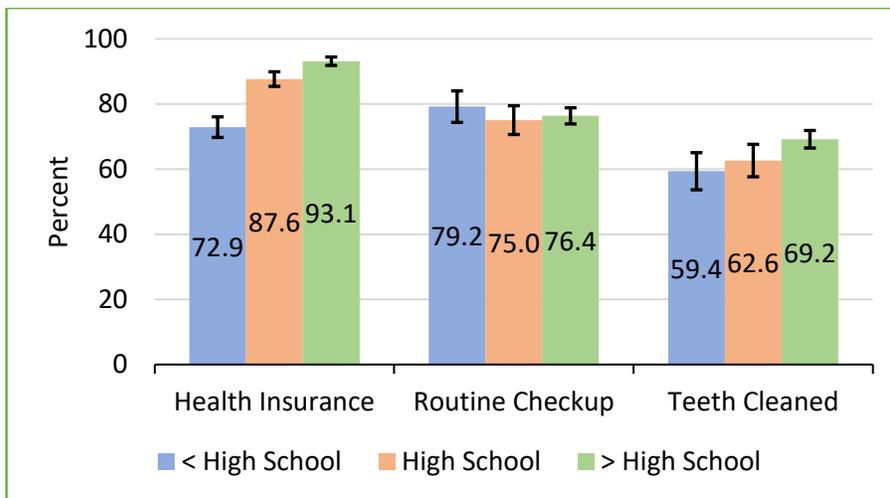
Figure 1. Maternal Educational Attainment, NM PRAMS 2016-2018



New Mexico Pregnancy Risk Assessment Monitoring System (NM PRAMS) is an ongoing public health surveillance system of maternal behaviors and experiences before, during and shortly after pregnancy. NM PRAMS provides information that is representative of NM resident women who have given live birth in NM. The surveillance system is a cooperative agreement sponsored by the Centers for Disease Control and Prevention and the NM Department of Health. PRAMS is New Mexico’s only source of representative birth population data.

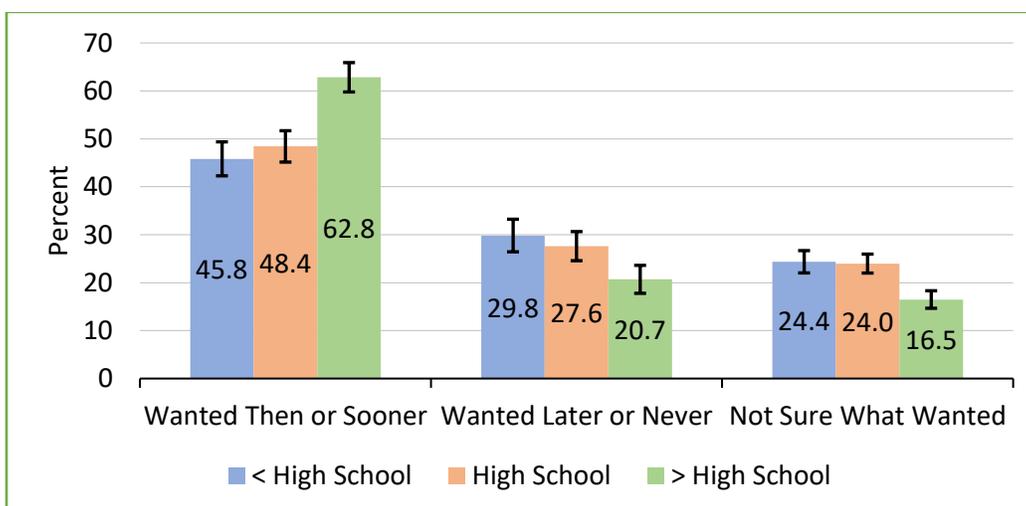
Overall, 88.0% (95% CI: 86.9-89.1) of women had health insurance during the month before pregnancy, 76.5% (95% CI: 74.5-78.5) of women had a routine medical checkup at their doctor’s or OB/GYN’s office in the twelve months before pregnancy, and 66.7% (95% CI: 64.5-68.8) of women had their teeth cleaned by a dentist or dental hygienist in the twelve months before pregnancy. Women with a high school education or greater were significantly more likely to have health insurance compared to women with less than a high school education (Figure 2). Receiving a routine check-up did not vary significantly by educational attainment level. Women with greater than a high school education, though, were significantly more likely to have their teeth cleaned than women with less than a high school education.

Figure 2. Health Care by Maternal Educational Attainment, NM PRAMS 2016-2018



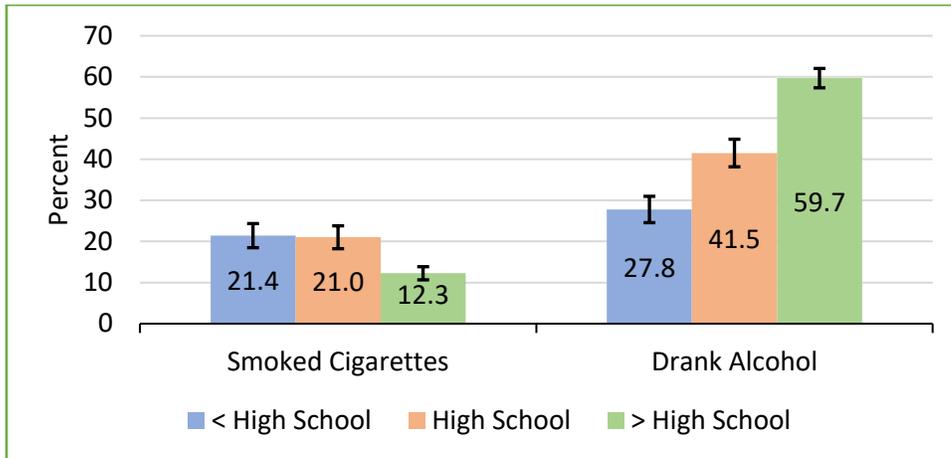
Overall, 56.2% (95% CI: 54.5-57.9) of women wanted to be pregnant at conception or sooner, 24.1% (95% CI: 22.6-25.6) wanted to be pregnant later or not at all and 19.8% (95% CI: 18.4-21.2) were not sure what they wanted. Women with greater than a high school education were significantly more likely to want the pregnancy at conception or sooner and were significantly less likely to want the pregnancy later or not at all, compared to women with a high school education or less (Figure 3).

Figure 3. Pregnancy Intention by Maternal Educational Attainment, NM PRAMS 2016-2018



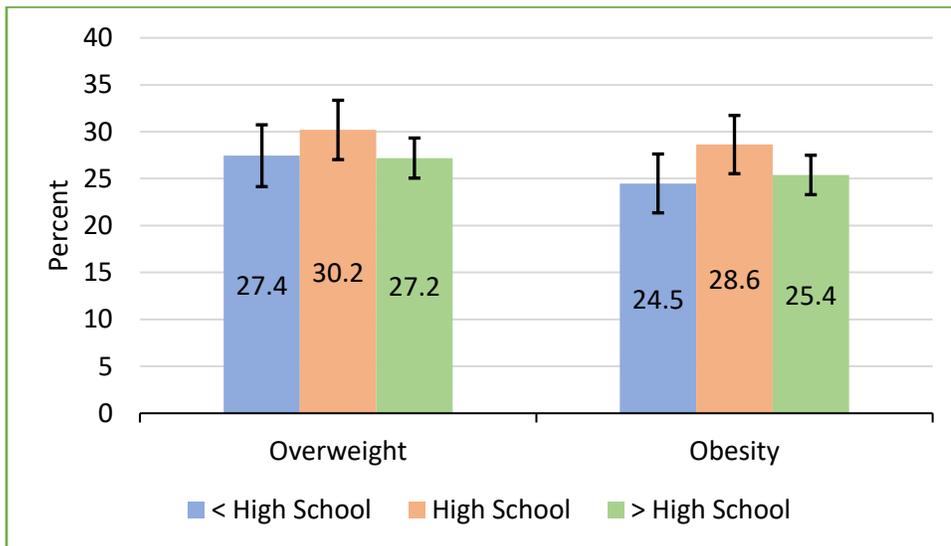
Overall, 16.1% (95% CI:14.8-17.3) of women smoked tobacco during the three months before pregnancy and 49.4% (95% CI: 47.7-51.1) drank alcohol during the three months before pregnancy. Women with greater than a high school education were significantly less likely to smoke cigarettes and significantly more likely to drink alcohol than women with a high school education or less (Figure 4).

Figure 4. Prevalence of Preconception Tobacco and Alcohol Use by Maternal Educational Attainment, NM PRAMS 2016-2018



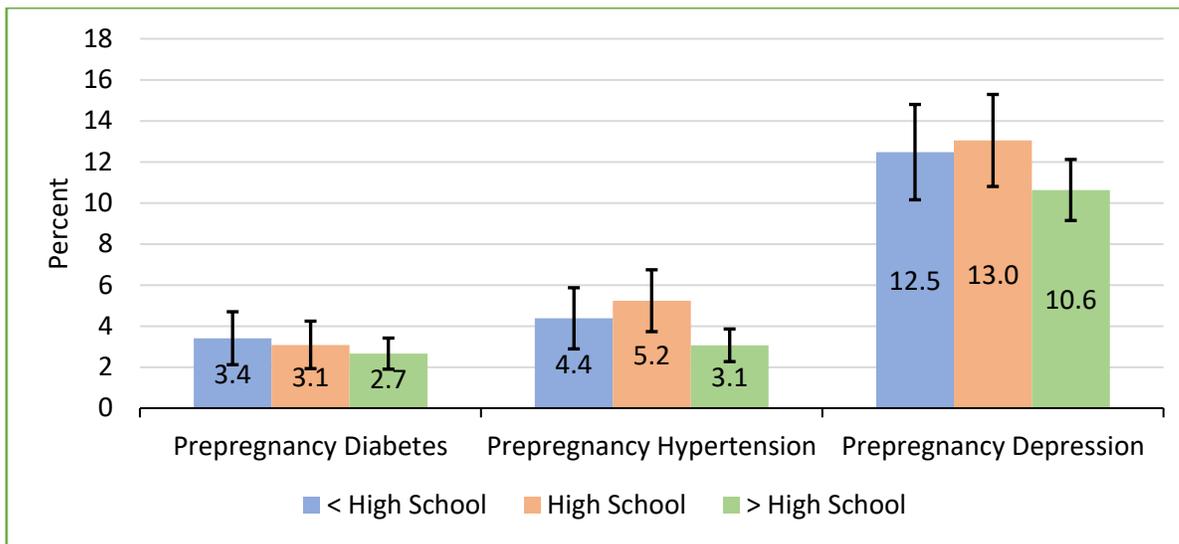
Overall, 27.9% (95% CI: 26.4-29.5) of women were overweight just prior to pregnancy and 26.0% (95% CI: 24.5-27.5) were obese just prior to pregnancy. Prevalence of overweight and obesity did not vary by educational attainment level (Figure 5).

Figure 5. Percent of Preconception Overweight or Obesity by Maternal Educational Attainment, NM PRAMS 2016-2018



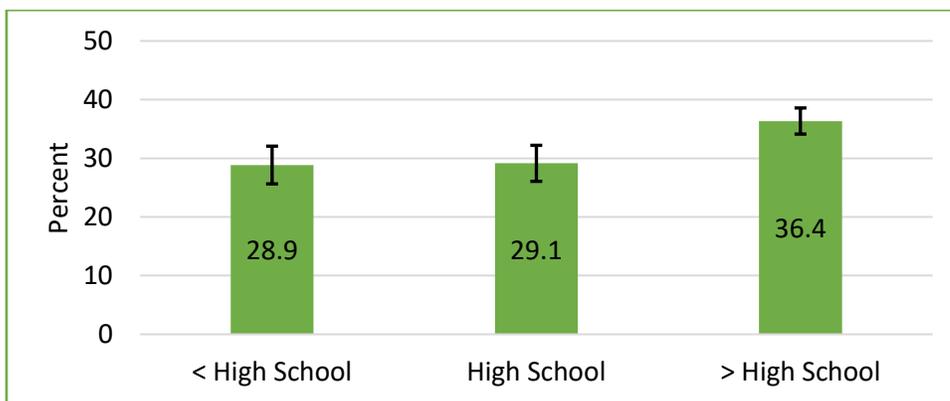
Overall, 2.9% (95% CI: 2.3-3.5) of women had diabetes starting prior to pregnancy, 3.8% (95% CI: 3.2-4.5) had hypertension during the three months before their pregnancy and 11.6% (95% CI: 10.5-12.7) had depression during the three months before their pregnancy. Pre-pregnancy diabetes, hypertension and depression did not vary by educational attainment level (Figure 6).

Figure 6. Prevalence of Pre-pregnancy Health Conditions by Maternal Educational Attainment, NM PRAMS 2016-2018



Overall, 33.2% (95% CI: 31.6-34.8) of women took a multivitamin/folic acid supplement every day of the week in the month before pregnancy. Women with greater than a high school education were significantly more likely to take a multiple vitamin/ folic acid supplement every day than women with a high school education or less (Figure 7). Folic acid helps prevent birth defects of the baby’s brain and spinal cord.

Figure 7. Prevalence of Multiple Vitamin Use by Maternal Educational Attainment, NM PRAMS 2016-2018



Summary: Women with a high school education or greater were significantly more likely to have health insurance during the month before pregnancy compared to women with less than a high school education. Women with greater than a high school education were significantly more likely to have their teeth cleaned than women with less than a high school education. Women with greater than a high school education were significantly less likely to have an unintended pregnancy and smoke cigarettes during the three months before pregnancy compared to women with a high school education or less. Women with greater than a high school education were significantly more likely to take a multiple vitamin/ folic acid supplement every day than women with a high school education or less.

Reference: [J A Gazmararian](#), [M M Adams](#), [E R Pamuk](#), Associations between measures of socioeconomic status and maternal health behavior, *Am J Prev Med*, Mar-Apr 1996;12(2):108-15.