

# N.C. PRAMS FACT SHEET

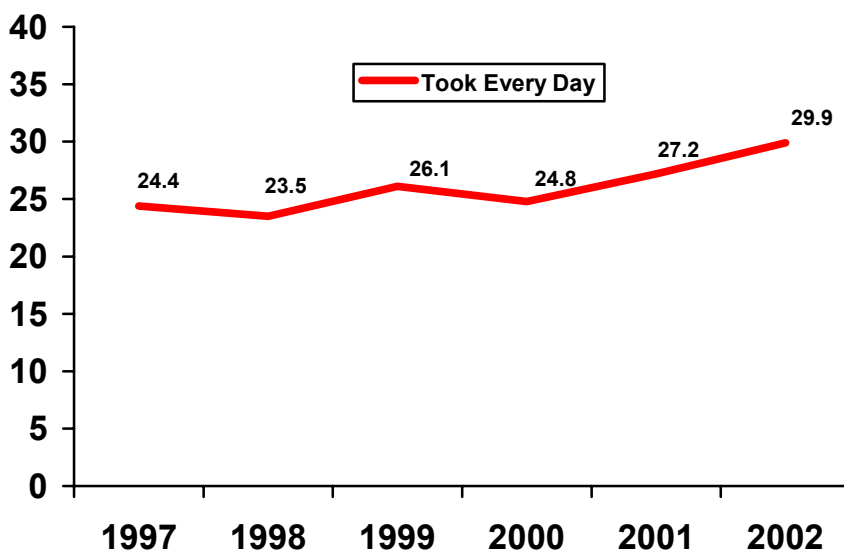
February 2005



## Folic Acid Awareness: 2002 N.C. Pregnancy Risk Assessment Monitoring System (PRAMS)

- Folic acid, a B vitamin, helps prevent birth defects of the brain and spinal cord when taken at least one month before becoming pregnant and through at least the first three months of pregnancy.
- Folic acid helps a baby's neural tube – the part of the developing baby that becomes the brain and spinal cord – develop properly.
- Nearly 2,500 children are born each year in the United States with a neural tube defect. If all women took adequate folic acid before conception and during pregnancy, the number of babies born with a neural tube defect could drop as much as 70 percent.
- The U.S. Centers for Disease Control and Prevention (CDC) recommends that all women of childbearing age consume 400 micrograms of folic acid every day.
- Because the most common neural tube defects occur during the first 28 days of pregnancy (usually *before* a woman even knows she is pregnant) it is recommended that all women of childbearing age consume a multivitamin containing 400 micrograms of folic acid.
- The national Healthy People 2010 target is to have 80 percent of non-pregnant women ages 15 to 44 years to consume at least 400 micrograms of folic acid every day from fortified foods (found most commonly in leafy green vegetables, orange juice, and enriched grains) or dietary supplements (which are more bioavailable to the body).

**Percentage of women with a recent live birth who reported taking a multivitamin containing folic acid every day (one month before became pregnant): N.C. PRAMS, 1997-2002**

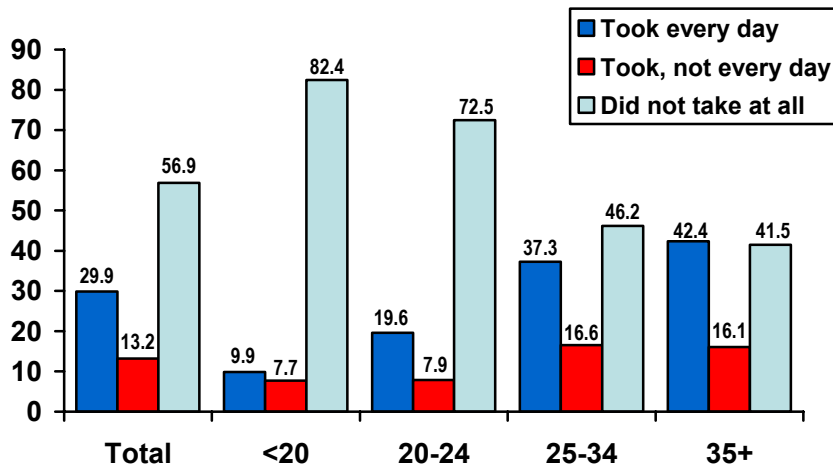


– The percentage of women with a recent live birth who reported taking a multivitamin containing folic acid every day the month before they became pregnant has increased more than 5 percentage points from 24.4 percent in 1997 to nearly 30 percent in 2002.

– This is still well below the Healthy People 2010 target of 80 percent.

– Data from the 2001 NC BRFSS (telephone survey of the general population of adults 18+) show a higher percentage of women (ages 18-44) reporting daily consumption of a multivitamin containing folic acid (42.2%). This difference could be due in part to the younger respondents in the PRAMS survey (many of whom are under the age of 25). Younger women are less likely to take folic acid.

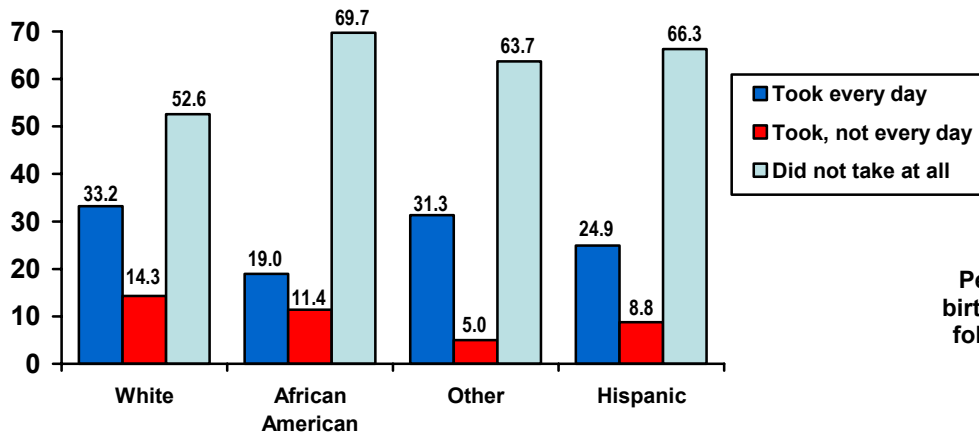
**Percentage of women with a recent live birth who reported taking a multivitamin before pregnancy, by age group: N.C. PRAMS, 2002**



– Older mothers are more likely than younger mothers to report taking a multivitamin containing folic acid before pregnancy.

– Compared to mothers ages 25-34 (37.3%) and mothers age 35 and older (42.4%), mothers under age 20 are substantially less likely to report taking a multivitamin containing folic acid every day before pregnancy (9.9%).

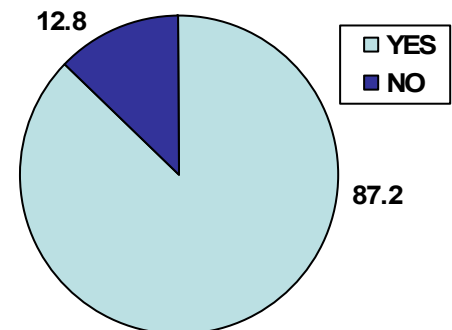
**Percentage of women with a recent live birth who reported taking a multivitamin before pregnancy, by race/ethnicity: N.C. PRAMS, 2002**



– White mothers were significantly more likely to report taking a multivitamin containing folic acid every day before pregnancy (33.2%), compared to African American mothers (19%).

– Hispanic mothers and African American mothers were the most likely to report not taking a multivitamin at all.

**Percentage of women with a recent live birth who have ever heard that the vitamin folic acid can help prevent birth defects: N.C. PRAMS, 2002**



– Nearly 90 percent of mothers have heard that folic acid can help prevent birth defects, however only a third of these mothers report taking a multivitamin containing folic acid every day one month before becoming pregnant.

– Most mothers (70.8%) reported receiving information on folic acid from their health care provider. Smaller percentages reported receiving this information from other sources.

**What is PRAMS?**

The Pregnancy Risk Assessment Monitoring System (PRAMS), funded by the Centers for Disease Control and Prevention, is an ongoing, state-specific, population-based surveillance system of maternal behaviors and experiences before, during, and after pregnancy. Developed in 1987, PRAMS was designed to supplement vital records by providing state-specific data on maternal behaviors and experiences to be used for planning and assessing perinatal health programs. Currently conducted in 31 states and New York City, PRAMS collects data representative of 60% of U.S. births.

NC PRAMS is a random, stratified, monthly mail/telephone survey of North Carolina women who recently delivered a live-born infant. Data collection began in North Carolina on July 1, 1997, providing us with 6 months of data for 1997. Since 1997, PRAMS data have been collected every year. Each month around 200 women are selected from the Provisional Live Birth File and are interviewed approximately 3-6 months after giving birth. All estimates are weighted to reflect the entire population of North Carolina women who gave birth in each year.

