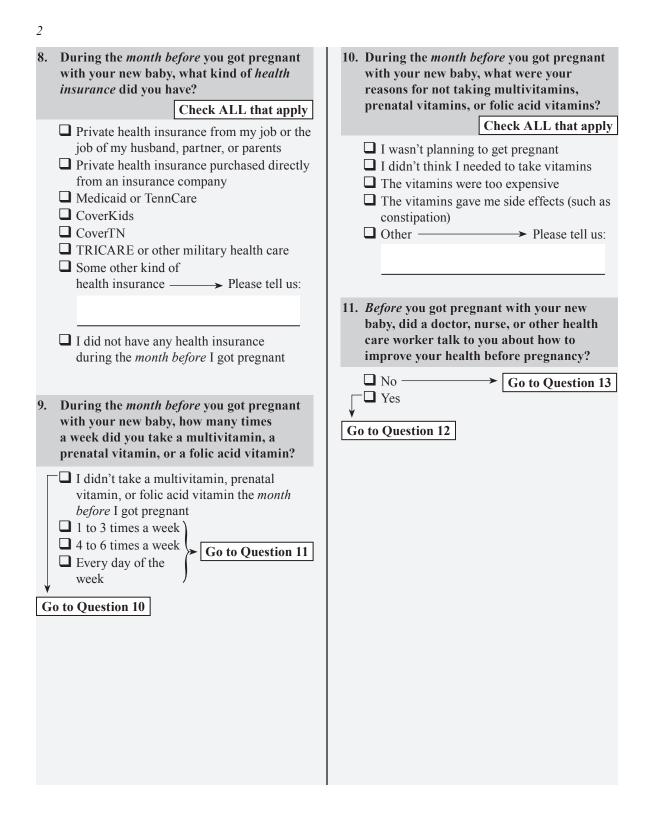
Please check the box next to your answer or follow the directions included with the question. You may be asked to skip some questions that do not apply to you.	 6. Was the baby <i>just before</i> your new one born <i>earlier</i> than 3 weeks before his or her due date? No Yes 	
BEFORE PREGNANCYThe first questions are about you.	The next questions are about the time	
1. How tall are <i>you</i> without shoes?	<i>before</i> you got pregnant with your <i>new</i> baby.	
Feet Inches OR Centimeters	7. At any time during the 12 months before you got pregnant with your new baby, did you do any of the following things? For each item, check No if you did not do it or Yes if you did it.	
 2. Just before you got pregnant with your new baby, how much did you weigh? Pounds OR Kilos 	No Yes a. I was dieting (changing my eating habits) to lose weight b. I was exercising 3 or more days of the week	
3. What is <u>your</u> date of birth?	 c. I was regularly taking prescription medicines other than birth control d. I visited a health care worker and was checked for diabetes	
 4. Before you got pregnant with your new baby, did you ever have any other babies who were born alive? □ No → Go to Question 7 ↓ Yes 	 I. I visited a health care worker and was checked for depression or anxiety g. I talked to a health care worker about my family medical history h. I had my teeth cleaned by a dentist or dental hygienist 	
 5. Did the baby born <i>just before</i> your new one weigh 5 pounds, 8 ounces (2.5 kilos) or <i>less</i> at birth? No Yes 		



12. Before you got pregnant with your new baby, did a doctor, nurse, or other health care worker talk with you about any of the things listed below? Please count only discussions, not reading materials or videos. For each item, check No if no one talked with you about it or Yes if someone talked with you about it.

		No	Yes
a.	Taking vitamins with folic acid		
1.	before pregnancy	🖵	
b.	Being a healthy weight before pregnancy		
c.	Getting my vaccines updated		-
0.	before pregnancy		
d.	Visiting a dentist or dental		_
	hygienist before pregnancy	🗖	
e.	Getting counseling for any genetic		
	diseases that run in my family	🗖	
f.	Controlling any medical conditions		
	such as diabetes and high blood		
	pressure	🖵	
g.	Getting counseling or treatment		
h	for depression or anxiety	🖵	
h.	The safety of using prescription or over-the-counter medicines during		
	pregnancy		
i.	How smoking during pregnancy		_
	can affect a baby	🗖	
j.	How drinking alcohol during		
	pregnancy can affect a baby	🗖	
k.		_	_
	pregnancy can affect a baby	🖵	U
13.	Before you got pregnant, would yo	u saj	y

that, in general, your health was—

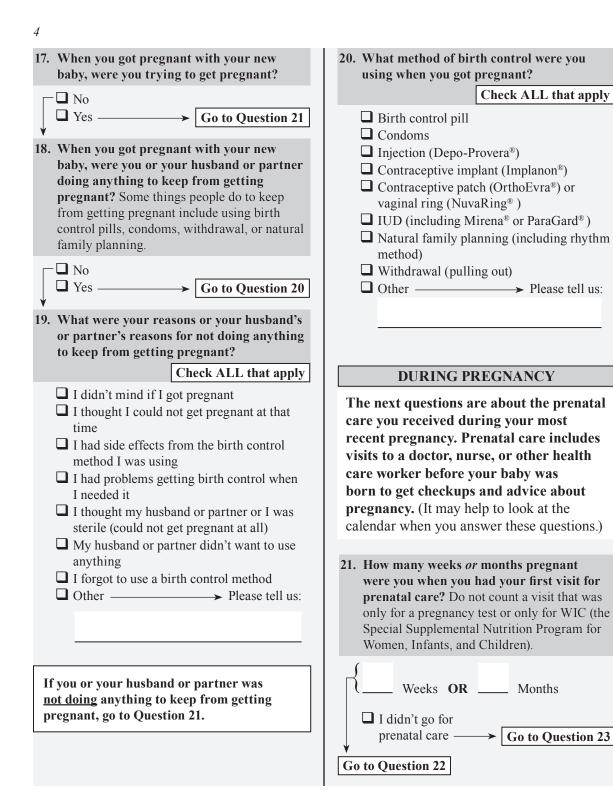
- **Excellent**
- U Very good
- Good
- 🗖 Fair
- Department Poor

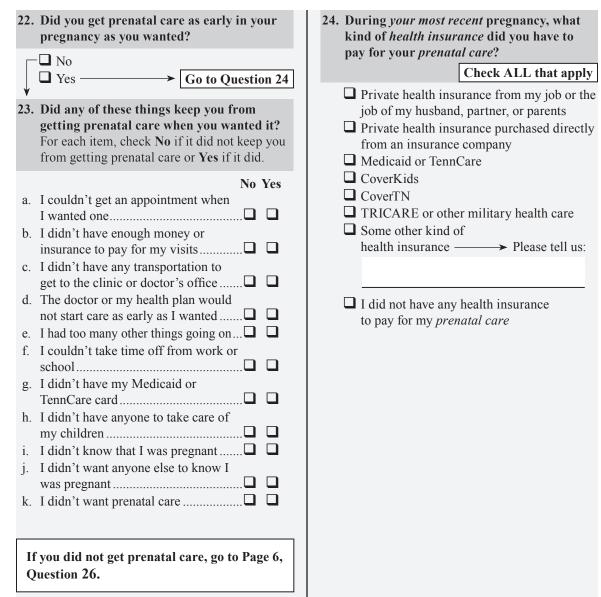
14. *Before* you got pregnant with your new baby, did a doctor, nurse, or other health care worker tell you that you had any of the following health conditions? For each one, check No if you did not have the condition or Yes if you did.

No Yes

		0 105
	Type 1 or Type 2 diabetes (NOT the same as gestational diabetes or diabetes that starts during pregnancy)	
b. c.	High blood pressure or hypertension	
W	The next questions are about the tin when you got pregnant with your ne aby.	
15.	Thinking back to <i>just before</i> you got pregnant with your new baby, how difeel about becoming pregnant?	•
	Check ONE a	nswer
		Page 4 tion 17
6.	. How much longer did you want to wa become pregnant?	it to
	 Less than 1 year 1 year to less than 2 years 2 years to less than 3 years 	

- \square 3 years to 5 years
- \Box More than 5 years





did a doc worker ta things list discussion For each i	ny of your prenatal care visits, tor, nurse, or other health care alk with you about any of the ted below? <i>Please count only</i> as, not reading materials or videos. tem, check No if no one talked with it or Yes if someone did.	 27. During the 12 months before the delivery of your new baby, did a doctor, nurse, or other health care worker offer you a flu shot or tell you to get one? No Yes
 during my b. How smole could affee c. Breastfeed d. How drink pregnancy e. Using a see pregnancy f. Medicines during my g. How using affect my h. Doing test or disease i. The signs preterm la 3 weeks b j. Getting te 	No Yes h weight I should gain y pregnancy king during pregnancy ct my baby ling alcohol during y could affect my baby ling my y could affect my baby ling alcohol during y could affect my baby ling my y could affect my baby y could affect my baby	 28. During the 12 months before the delivery of your new baby, did you get a flu shot? Check ONE answer No → Go to Question 30 Yes, before my pregnancy Yes, during my pregnancy 29. During what month and year did you get the flu shot? 29. During what month and year did you get the flu shot? 20. Month Year I don't remember 30. This question is about the care of your teeth <u>during your most recent pregnancy</u>. For each item, check No if it is not true or does not apply to you or Yes if it is true
	that causes AIDS) \Box \Box o if I feel depressed	does not apply to you or Yes if it is true.
during my baby is bo l. Physical a	buse to women by their	 No Yes a. I knew it was important to care for my teeth and gums during my pregnancy. b. A dental or other health care worker talked with me about how to care for
pregnanc	ne during <i>your most recent</i> y or delivery, did you have a test the virus that causes AIDS)?	 c. I had my teeth cleaned by a dentist or dental hygienist
NoYesI don't	know	 d. I had insurance to cover dental care during my pregnancy

31. During <i>your most recent</i> pregnancy, did you take a class or classes to prepare for childbirth and learn what to expect during labor and delivery?	or cigarettes around the time of pregnan	
NoYes	36. Have you smoked any cigarettes in the <i>past 2 years</i> ?	
32. During <i>your most recent</i> pregnancy, did a home visitor come to your home to help you prepare for your new baby? A home visitor is a nurse, a health care worker, a social worker, or other person who works for a program that helps pregnant women.	 No Go to Page 8, Question 40 Yes 37. In the 3 months before you got pregnant, how many cigarettes did you smoke on an average day? A pack has 20 cigarettes. 	
 No Go to Question 34 Yes 33. What kind of home visitor came to your home during <i>your most recent</i> pregnancy? 	 41 cigarettes or more 21 to 40 cigarettes 11 to 20 cigarettes 6 to 10 cigarettes 1 to 5 cigarettes 	
 A nurse A nurse's aide A teacher or health educator A social worker Someone else> Please tell us: 	 Less than 1 cigarette I didn't smoke then 38. In the <u>last 3 months of your pregnancy, how many cigarettes did you smoke on an average day?</u> A pack has 20 cigarettes.	
 I don't know 34. During <i>your most recent</i> pregnancy, were you on WIC (the Special Supplemental Nutrition Program for Women, Infants, and Children)? 	 41 cigarettes or more 21 to 40 cigarettes 11 to 20 cigarettes 6 to 10 cigarettes 1 to 5 cigarettes Less than 1 cigarette I didn't smoke then 	
NoYes	 How many cigarettes do you smoke on an average day now? A pack has 20 cigarettes. 	
35. During <i>your most recent</i> pregnancy, were you told by a doctor, nurse, or other health care worker that you had gestational diabetes (diabetes that started during <i>this</i> pregnancy)?	 41 cigarettes or more 21 to 40 cigarettes 11 to 20 cigarettes 6 to 10 cigarettes 1 to 5 cigarettes 	
NoYes	Less than 1 cigarette	

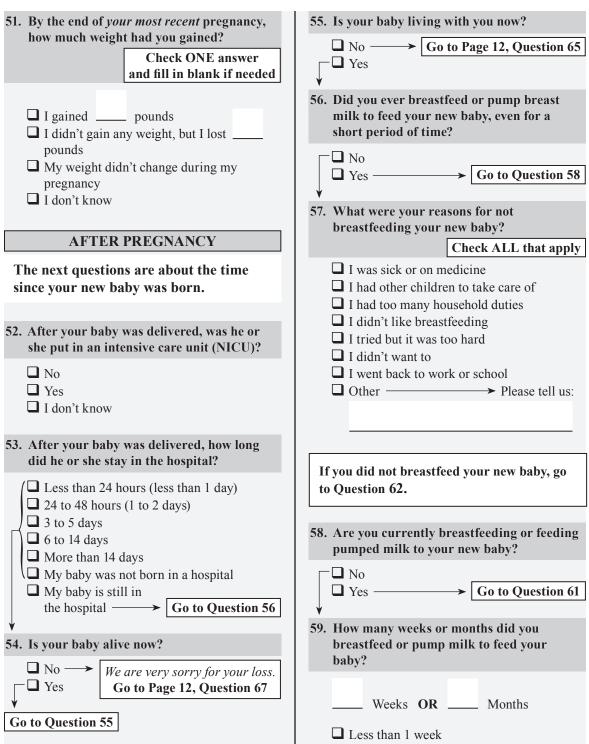
40. Which of the following statements best Pregnancy can be a difficult time for describes the rules about smoking *inside* some women. The next questions are vour home now, even if no one who lives in about things that may have happened your home is a smoker? before and during your most recent Check ONE answer pregnancy. □ No one is allowed to smoke anywhere inside my home 44. This question is about things that may Smoking is allowed in some rooms or at have happened during the 12 months some times before your new baby was born. For each Smoking is permitted anywhere inside my item, check No if it did not happen to you home or Yes if it did. (It may help to look at the calendar when you answer these questions.) The next questions are about drinking alcohol around the time of pregnancy (before and during). a. A close family member was very sick and had to go into the hospital \dots 41. Have you had any alcoholic drinks in the b. I got separated or divorced from my past 2 years? A drink is 1 glass of wine, husband or partner wine cooler, can or bottle of beer, shot of c. I moved to a new address..... liquor, or mixed drink. d. I was homeless or had to sleep outside, in a car, or in a shelter → Go to Question 44 \square No e. My husband or partner lost his job 🔲 🗖 Yes f. I lost my job even though I wanted to go on working..... 42. During the 3 months before you got g. My husband, partner, or I had a cut pregnant, how many alcoholic drinks did in work hours or pay..... vou have in an average week? h. I was apart from my husband or □ 14 drinks or more a week partner due to military deployment \Box 7 to 13 drinks a week or extended work-related travel...... 4 to 6 drinks a week i. I argued with my husband or partner □ 1 to 3 drinks a week more than usual..... Less than 1 drink a week j. My husband or partner said he □ I didn't drink then didn't want me to be pregnant k. I had problems paying the rent, 43. During the *last 3 months* of your mortgage, or other bills..... pregnancy, how many alcoholic drinks did 1. My husband, partner, or I you have in an average week? went to jail \Box m. Someone very close to me had a □ 14 drinks or more a week problem with drinking or drugs \Box **7** to 13 drinks a week n. Someone very close to me died \Box 4 to 6 drinks a week □ 1 to 3 drinks a week Less than 1 drink a week □ I didn't drink then

No Yes

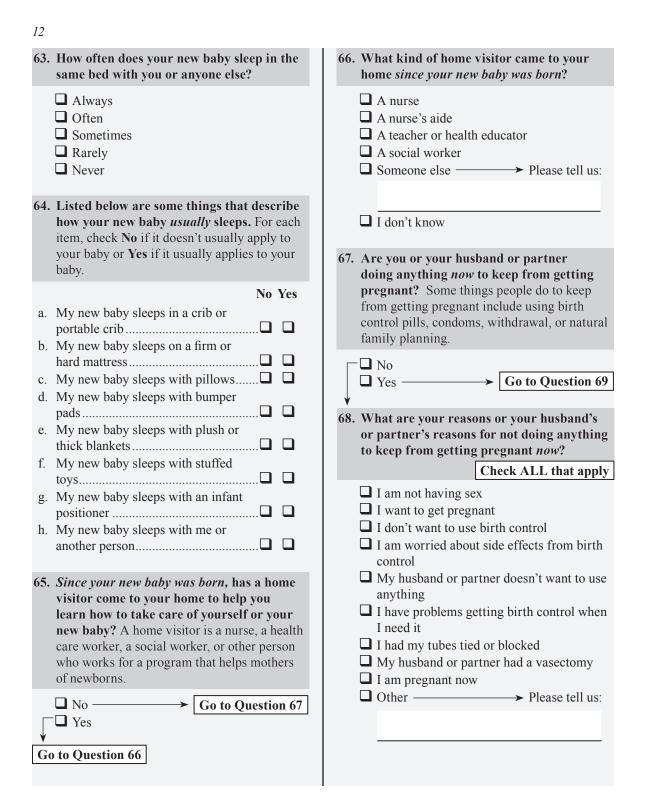
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45. During the <i>12 months before you got</i> <i>pregnant</i> with your new baby, did your husband or partner push, hit, slap, kick,	49. What was the reason that your new baby was born by cesarean delivery (c-section)? Check ALL that apply
choke, or physically hurt you in any other way?	☐ I had a previous cesarean delivery
□ No □ Yes	 (c-section) My baby was in the wrong position (such as breech) I was past my due date
46. During <i>your most recent</i> pregnancy, did your husband or partner push, hit, slap, kick, choke, or physically hurt you in any other way?	 My health care provider worried that my baby was too big I had a medical condition that made labor dangerous for me (such as heart condition,
 No Yes 	 physical disability) I had a complication in my pregnancy (such as preeclampsia, placental problems, infection, preterm labor) My health care provider tried to induce my
The next questions are about your labor and delivery.	 labor, but it didn't work Labor was taking too long The fetal monitor showed that my baby
47. When was your new baby born?	was having problems before or during labor (fetal distress)
$\frac{1}{Month} / \frac{1}{Day} / \frac{20}{Year}$	 □ I wanted to schedule my delivery □ I didn't want to have my baby vaginally □ Other → Please tell us:
48. How was your new baby delivered?	
□ Vaginally → Go to Page 10, Question 51 □ Cesarean delivery (c-section)	50. Which statement best describes whose idea it was for you to have a cesarean delivery (c-section)?
Go to Question 49	 Check ONE answer My health care provider recommended a cesarean delivery <i>before</i> I went into labor My health care provider recommended a cesarean delivery while I was in labor I asked for the cesarean delivery

9



What were your reasons for stopping breastfeeding? Check ALL that apply
 My baby had difficulty latching or nursing Breast milk alone did not satisfy my baby I thought my baby was not gaining enough weight My nipples were sore, cracked, or bleeding It was too hard, painful, or too time consuming I thought I was not producing enough milk, or my milk dried up I had too many other household duties I felt it was the right time to stop breastfeeding I got sick or I had to stop for medical reasons I went back to work or school My baby was jaundiced (yellowing of the skin or whites of the eyes) Other



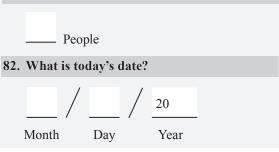
	13	
If you or your husband or partner is <u>not doing</u> anything to keep from getting pregnant <i>now</i> , go to Question 70.	72. <i>Since your new baby was born</i> , how often have you had little interest or little pleasure in doing things?	
69. What kind of birth control are you or your husband or partner using <i>now</i> to keep from getting pregnant? Check ALL that apply	 Always Often Sometimes Rarely Never 	
 Tubes tied or blocked (female sterilization, Essure[®], Adiana[®]) Vasectomy (male sterilization) 	73. What kind of <i>health insurance</i> do <u>you</u> have now? Check ALL that apply	
 Birth control pill Condoms Injection (Depo-Provera[®]) Contraceptive implant (Implanon[®]) Contraceptive patch (OrthoEvra[®]) or vaginal ring (NuvaRing[®]) IUD (including Mirena[®] or ParaGard[®]) Natural family planning (including rhythm method) Withdrawal (pulling out) Not having sex (abstinence) Other ->> Please tell us: 	 Provera[®]) Provera[®]) Private health insurance from my job or job of my husband, partner, or parents Private health insurance purchased direct from an insurance company Medicaid or TennCare CoverKids CoverTN TRICARE or other military health care Some other kind of health insurance Private health insurance purchased direct from an insurance company 	
70. Since your new baby was born, have you had a postpartum checkup for yourself? A postpartum checkup is the regular checkup a woman has about 4-6 weeks after she gives birth.	OTHER EXPERIENCES The next questions are on a variety of topics.	
NoYes	74. During the <i>12 months before</i> you got pregnant with your new baby, did you have a miscarriage, fetal death (baby died	
71. <i>Since your new baby was born</i> , how often have you felt down, depressed, or hopeless?	before being born), or stillbirth?	
 Always Often Sometimes 	 No Yes 	
 Rarely Never 	If your baby is not alive or is not living with you, go to Page 14, Question 80.	

- 14
- **75.** Listed below are some statements about safety. For each one, check No if it does not apply to you or Yes if it does.
- No Yes a. I always used a seatbelt during my most recent pregnancy b. My home has a working smoke alarm c. There are loaded guns, rifles, or other firearms in my home..... d. I have received information about infant products that should be taken off the market (product recalls) since my new baby was born If your baby is still in the hospital, go to **Ouestion 80.** 76. About how many hours a day, on average, is your new baby in the same room or vehicle with someone who is smoking? Hours □ 1 hour a day or less □ My baby is never in the same room or vehicle with someone who is smoking 77. When your new baby rides in a car, truck, or van, how often does he or she ride in an infant car seat? □ Always **O**ften □ Sometimes Rarely Go to Question 80 Never -78. When your new baby rides in an infant car seat, is he or she usually in the front or back seat of the car, truck, or van? Front seat Back seat
- 79. When your new baby rides in an infant car seat, is he or she *usually* facing forward or facing the rear of the car, truck, or van?

Facing forwardFacing the rear

The last questions are about the time during the *12 months before* your new baby was born.

- 80. 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.
 - **\$**0 to \$10,000
 - □ \$10,001 to \$15,000
 - □ \$15,001 to \$19,000
 - □ \$19,001 to \$22,000
 - \$22,001 to \$26,000 ■ \$26,001 to \$29,000
 - \$29,001 to \$29,000
 - □ \$37,001 to \$44,000
 - □ \$44,001 to \$52,000
 - □ \$52,001 to \$56,000
 - □ \$56,001 to \$67,000
 - **\$67,001 to \$79,000**
 - □ \$79,001 or more
- 81. During the *12 months before* your new baby was born, how many people, *including yourself*, depended on this income?



Please use this space for any additional comments you would like to make about your experiences around the time of your pregnancy or the health of mothers and babies in Tennessee.

Thanks for answering our questions!

Your answers will help us work to make Tennessee mothers and babies healthier.