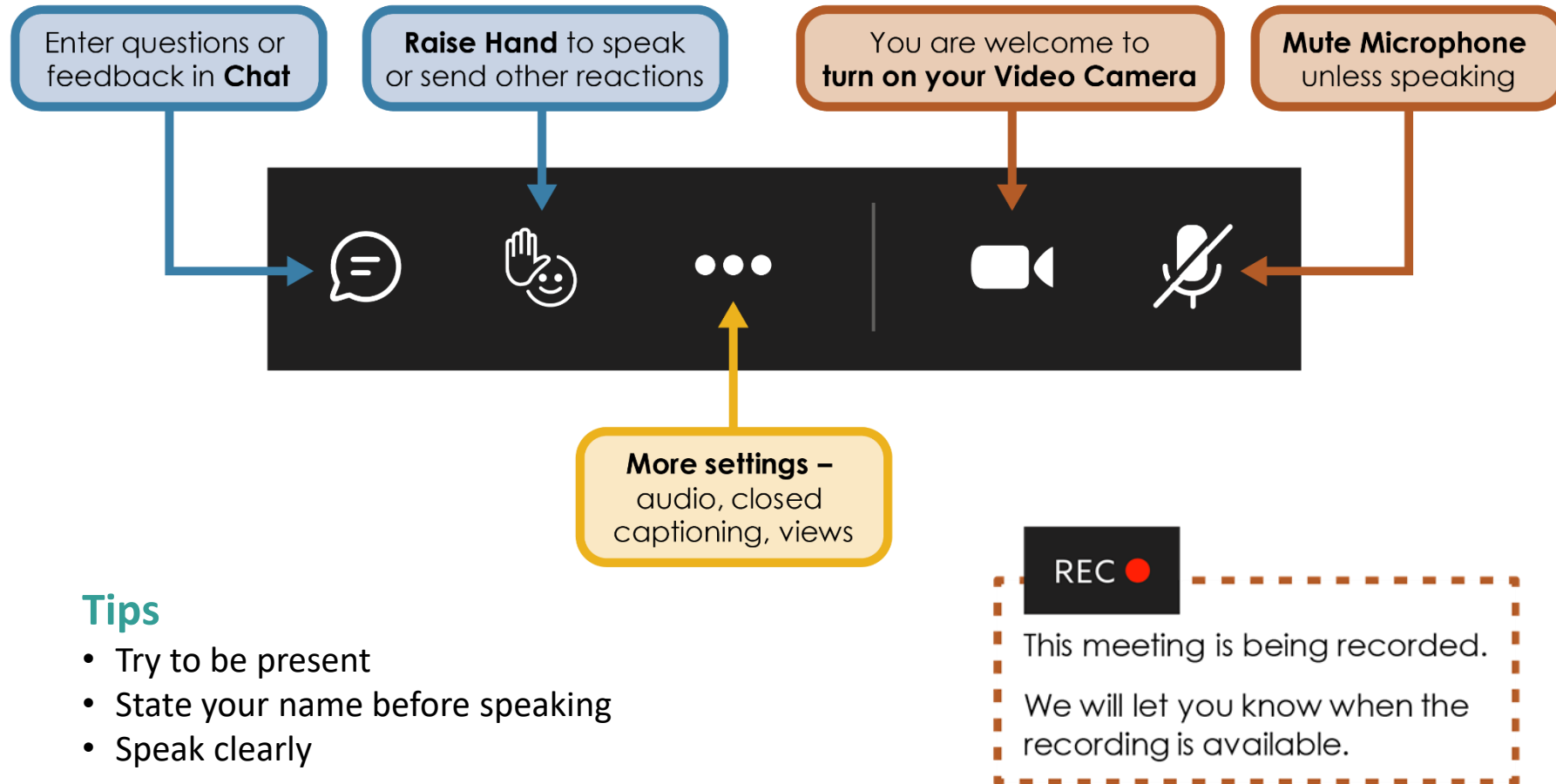




# WA PRAMS Advisory Committee

June 17, 2024

# MS Teams Features We Will Use Today





Land Acknowledgment

# Agenda

10:00 – 10:30	Welcome & Introductions
10:30 – 10:35	February Meeting Evaluation
10:35 – 10:50	AC Member Roles
10:50 – 11:00	Break
11:00 – 11:25	DOH Surveys across the Lifecourse
11:25 – 11:50	What more can we learn about pregnancy and birth experiences in Washington State?
11:50 – Noon	Announcements & Wrap-up

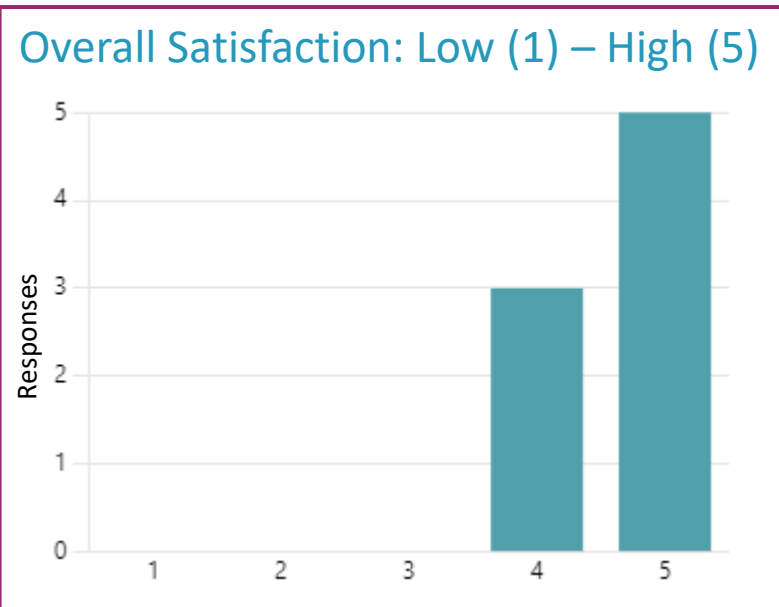


# Welcome & Introductions

- **Welcome** to the Washington Pregnancy Risk Assessment Monitoring System Advisory Committee → **WA PRAMS-AC**
- **Introductions:**
  - Name
  - Organization and/or Role
- Group Question - Join at Menti.com enter code **9566 5795**

# WA PRAMS-AC: Feb Meeting Feedback

Responses: 8 (61%)



- 100% - appropriate level of technical detail
- 100% - good meeting length
- 50/50 Split – meeting cadence 3x or 4x/yr

## Suggested Topics

- AC Roles **Today**
- PRAMS alignment with other population-based surveys in WA **Today**
- Collaborations with academic institutions
- PRAMS for Dads
- Providing context for other initiatives, e.g., Perinatal Mental Health Capacity Bldg
- PRAMS data use at county-level
- Questionnaire development

# Advisory Committee

---

## ROLES, EXPECTATIONS & OPPORTUNITIES

# Advisory Committee: Recruitment

## Representatives

### ❖ Community Voices

- Birthing support; LGBTQ, immigrant communities

### ❖ Tribal Organizations & Tribes

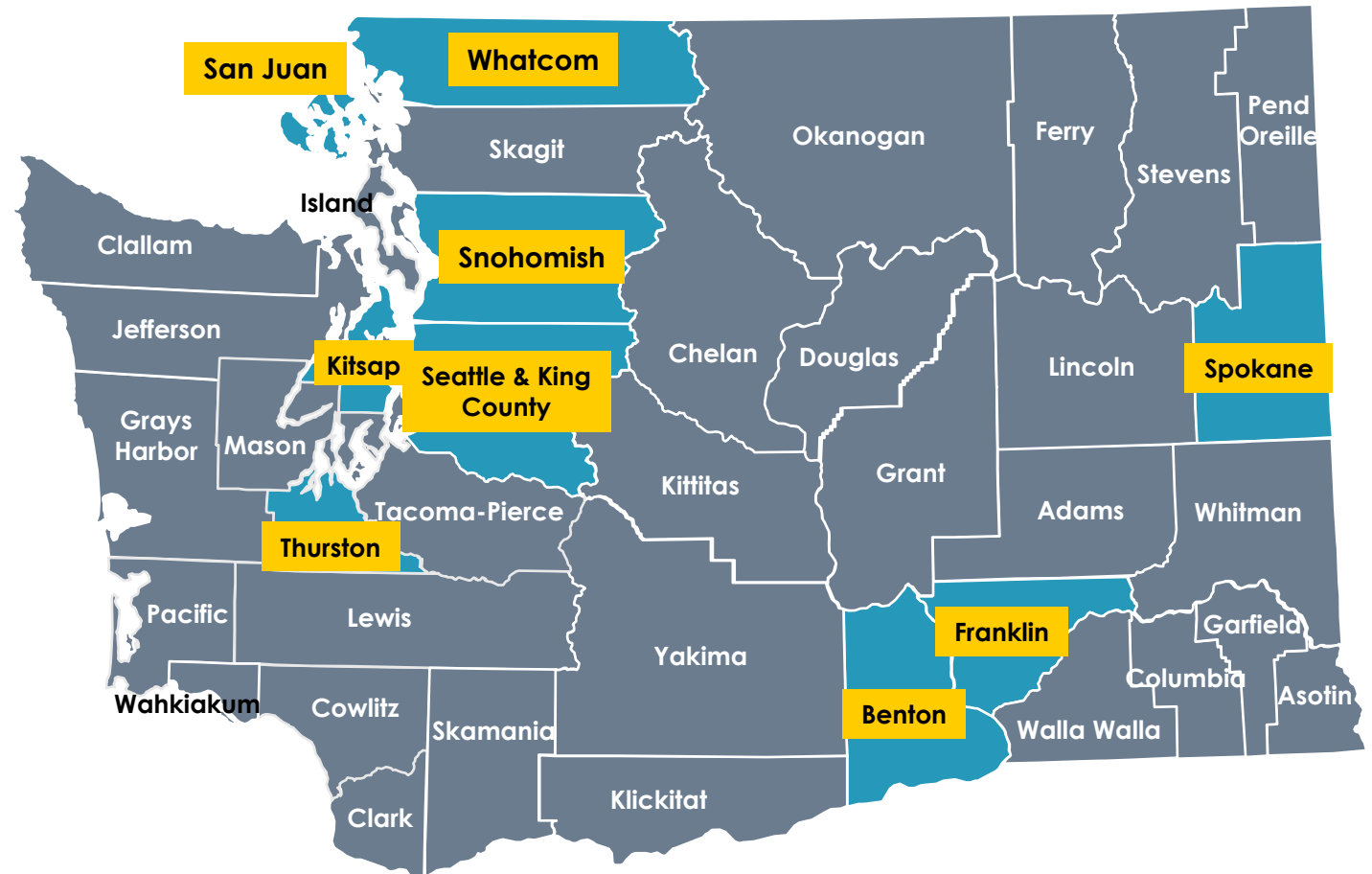
- American Indian Health Commission
- Həłmxiłp Indigenous Birth Justice
- Urban Indian Health Institute / Seattle Indian Health Board

### ❖ Local Health Jurisdictions

- Benton-Franklin
- San Juan
- Snohomish
- Whatcom

### ❖ State Agencies / Entities

- DOH – MCH, Genetics, HEZ
- DSHS – WA Fatherhood Council
- HCA – Medicaid maternity programs
- UW – MCH epi





# Advisory Committee: Charter

**Purpose:** Provide input on strategic direction and planning of the WA PRAMS survey and findings

## Scope:

- Identify priority public health topics:
  - Emerging health concerns
  - Initiatives needing monitoring or evaluation
  - Key policy issues
- Advise on questionnaire content, optional supplemental survey modules, and methodological questions as needed
- Advise on application of findings and dissemination of data and results
- Identify champions to lead data dissemination and encourage participation in the survey

## Authority & Decision Making:

- Recommendations from the Committee will be reached by consensus, backup by majority vote
- All recommendations from the Committee will be considered by the WA PRAMS team
- Decisions relating to implementation of the Committee's recommendations will rest with the PRAMS Principal Investigator

# Advisory Committee: Charter

**Purpose:** Provide input on strategic direction and planning of the WA PRAMS survey and findings

## Membership & Expectations:

- Membership is intended to reflect the voices of maternal and child health professionals and communities across Washington. Members may be recruited from community groups, maternal and infant health advocates, universities, Tribal organizations, and local and state public health.
  - Meetings will be held annually (minimum) with in-person and virtual attendance options
  - Members will receive periodic updates from the DOH WA PRAMS Team
  - Members should prepare for meetings in advance by reading provided materials and/or consulting with experts within their own organizations and communities
- Attendance at meetings by non-members is welcome

# BREAK





## DOH SURVEYS ACROSS THE LIFE COURSE



Center for Epidemiology Practice, Equity  
& Assessment

*Anar Shah, MPH and Caryn Chalmers, MPH*





# Agenda

- WA DOH surveys across the life course
- Child Wellness Survey
  - Background
  - Survey Goals
  - Survey Topics
  - Timeline
  - Advisory Groups
- Questions



# Surveys through the life course

## **Pregnancy Risk Assessment Monitoring System (PRAMS)**

Pregnancy and  
early infancy

## **Child Wellness Survey (CWS)**

6 months -11 years

## **Healthy Youth Survey (HYS)**

12 – 18 years

## **Behavioral Risk Factor Surveillance System (BRFSS)**

Adults Over 18







## **WHY Surveys – what we love about them?**

# Surveys through the life course

## **Pregnancy Risk Assessment Monitoring System (PRAMS)**

Pregnancy and  
early infancy



## **Child Wellness Survey (CWS)**

6 months -11 years



## **Healthy Youth Survey (HYS)**

12 – 18 years

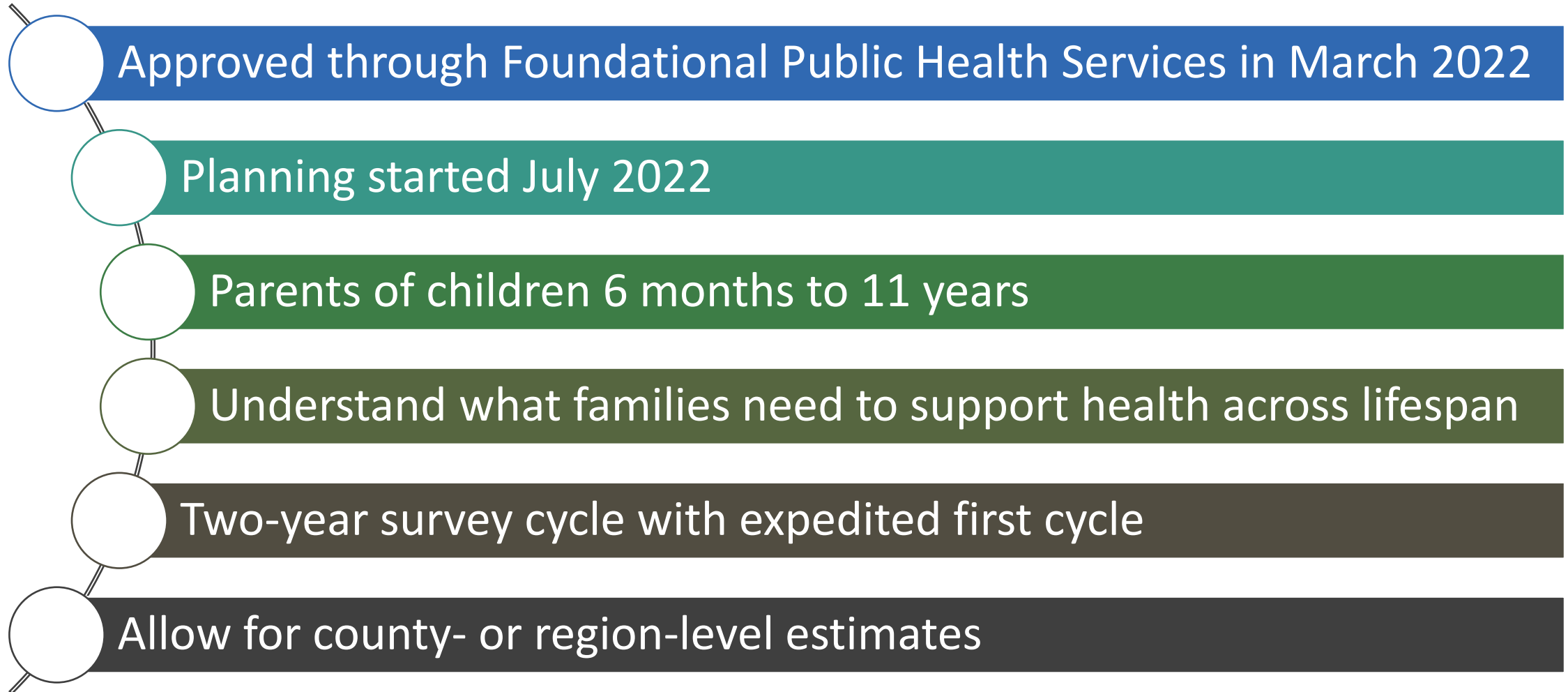


## **Behavioral Risk Factor Surveillance System (BRFSS)**

Adults Over 18



# Background: Statewide Child Wellness Survey



# Background

- CWS is modeled after **Best Starts for Kids Survey**, which is part of the evaluation component for the BSFK levy that was funded in King County in 2015.
- Most of their survey questions are from the **National Survey of Children's Health** and revised based on feedback from their advisory group. King County also added questions related to COVID-19, impacts on child and family, and challenges with childcare.



**King County**

# Sampling Goals

---

Representative sample

---

Allow county or region-level estimates and race-specific estimates

---

Reflect race and ethnic diversity across Washington

---

Identify disparities so can address inequities

---

Initial implementation focus on children 6 months to 5 years

---

Pilot approaches for identifying representative sample of school age youth, 6-11 years

---

Allow for county-, Tribal- or other region-specific oversample

---

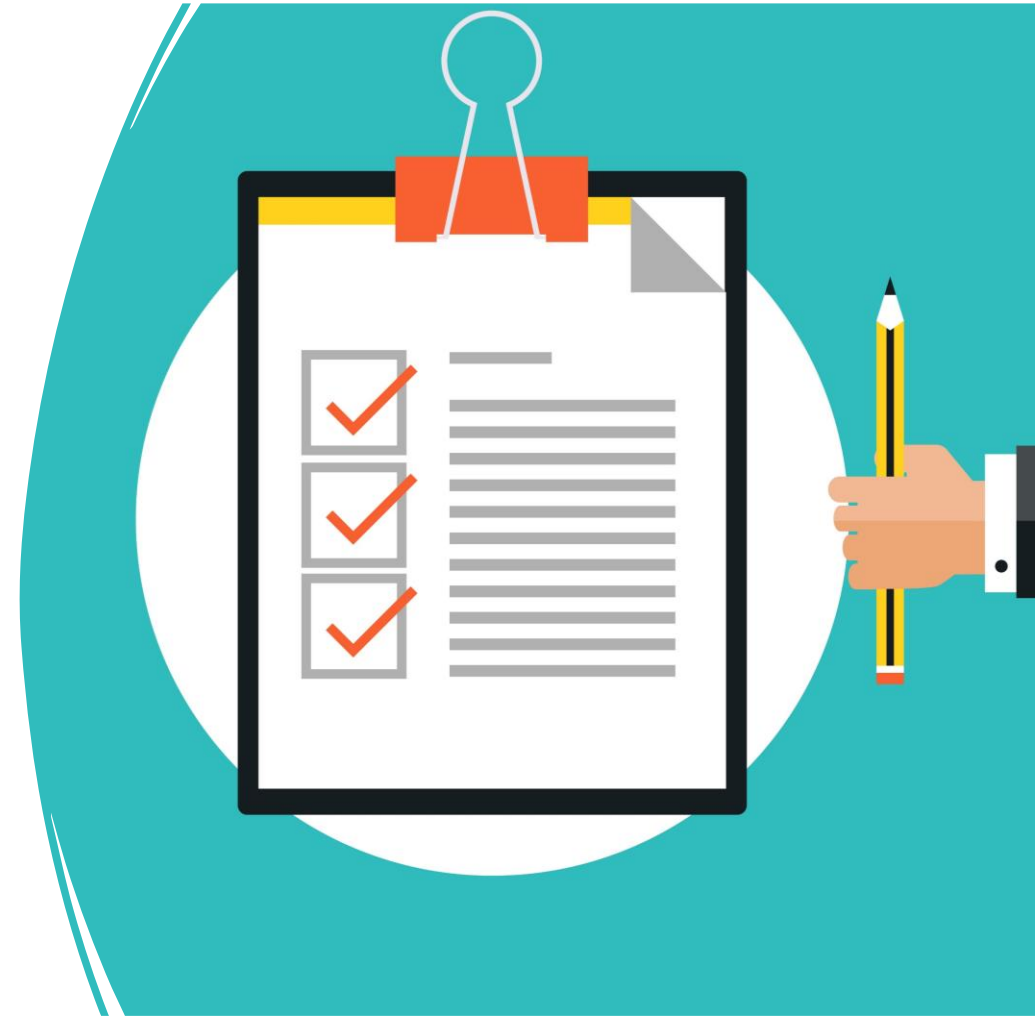
Integrate with BSKHS for statewide estimates

---

# Survey Topics

## **Same as BSKHS for first cycle:**

- Child well being
- Parent-child connection
- School experiences
- Child & after-school care
- Basic needs
- Demographics
- PLUS Immunization





# CWS 2024 TIMELINE

- Finalize survey
- Security review
- DSAs



- Data collection (3 waves)
- Pilot 6-11
- Convenience sampling

Jan-March

Apr-May

Jun-Dec

Winter 2024-25

- Accessing datasets
- Sampling frames
- Sample selection

- Data cleaning
- Data dissemination

# CWS 2026 TIMELINE

- Planning for second survey administration
- Survey revision

- Survey administered and data collection
- Convenience sampling

May-Oct 2025

Winter 2025

Jan - Sept 2026

Oct – Dec 2026

- Sample selection

- Data cleaning
- Data dissemination

# Advisory Groups





A wide-angle photograph of a large, green-painted steel arch bridge spanning a deep, forested valley. The bridge has a complex truss structure and carries a multi-lane highway. The surrounding landscape is filled with dense evergreen forests, and in the background, there are rolling hills and mountains under a cloudy sky. The text "Surveys AT work!" is overlaid in the center of the image.

**Surveys AT work!**



# Questions? Comments?

**Caryn Chalmers (she/her)**

*CWS Coordinator*

Child.Wellness@doh.wa.gov

**Anar Shah (she/her)**

*CWS Epidemiologist*

Anar.Shah@doh.wa.gov

**Maayan Simckes (she/her)**

*Population Survey Supervisor*

Maayan.Simckes@doh.wa.gov







## **WHAT MORE CAN WE LEARN ABOUT PREGNANCY AND BIRTH EXPERIENCES IN WASHINGTON STATE? PRAMS PARTICIPANTS TOLD US.**

A Qualitative Analysis of Back-Page Comments  
Washington State PRAMS, 2018-2021





# Acknowledgements

---

**Hannah Gorman**

*Healthy Youth Survey*

*Epidemiologist & Coordinator*

Center for Epidemiology Practice,  
Equity, and Assessment (CEPEA)

**Teal Bell**

*PRAMS/Perinatal  
Health Epidemiologist*

Office of Family &  
Community Health  
Improvements (OFCHI)

**Kate Meehan**

*Epidemiologist*

Office of Family &  
Community Health  
Improvements (OFCHI)

**Brynn Stopczynski**

*Epidemiologist*

Office of Family &  
Community Health  
Improvements (OFCHI)

# Presentation Purpose

---

1. Share a coding process for back-page comments that can be replicable moving forward
2. Share major themes and trends identified in back-page comments from 2018-2021
3. Discuss findings and potential future applications of analysis

# Purpose of Analysis and Creating a Qualitative Dataset

---

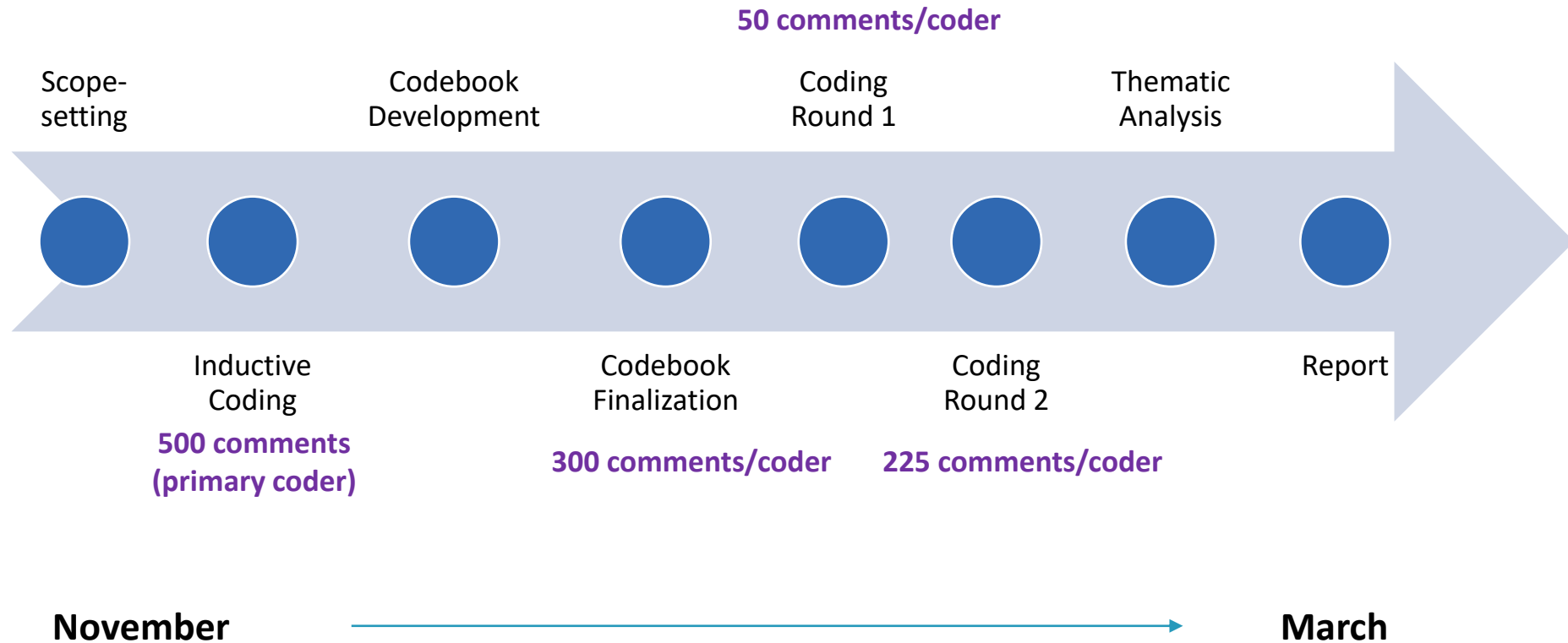
## Purpose of Analysis

- Outlining and utilizing a lean, broad codebook to identify major themes and trends from PRAMS back-page comments
- Future replicability







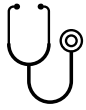


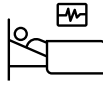





## Creation of a Qualitative Dataset

- Created PRAMS data file that includes survey data AND open-ended responses and back-page comments
- Exported back-page comments from 2018-2021 to excel file

# Coding Timeline



# Codebook

 <p>COVID-19</p>	 <p>Parental Leave</p>	 <p>Discrimination &amp; Inclusion</p>	 <p>Substance Use</p>
 <p>Survey</p>	 <p>Douglas &amp; Midwives</p>	 <p>Provider Experience</p>	 <p>Non-Birthing Person Experience</p>
 <p>Postpartum Maternal Care/Support</p>	 <p>Birth Experience</p>	 <p>Access/Barriers to Care</p>	 <p>Pregnancy Loss/ Infertility</p>
 <p>Prenatal Care/Support</p>	 <p>Maternal Mental Health</p>	 <p>Infant Care</p>	<p>Other</p>



Findings (with a caveat)



# Strengths & Limitations

---

## Strengths

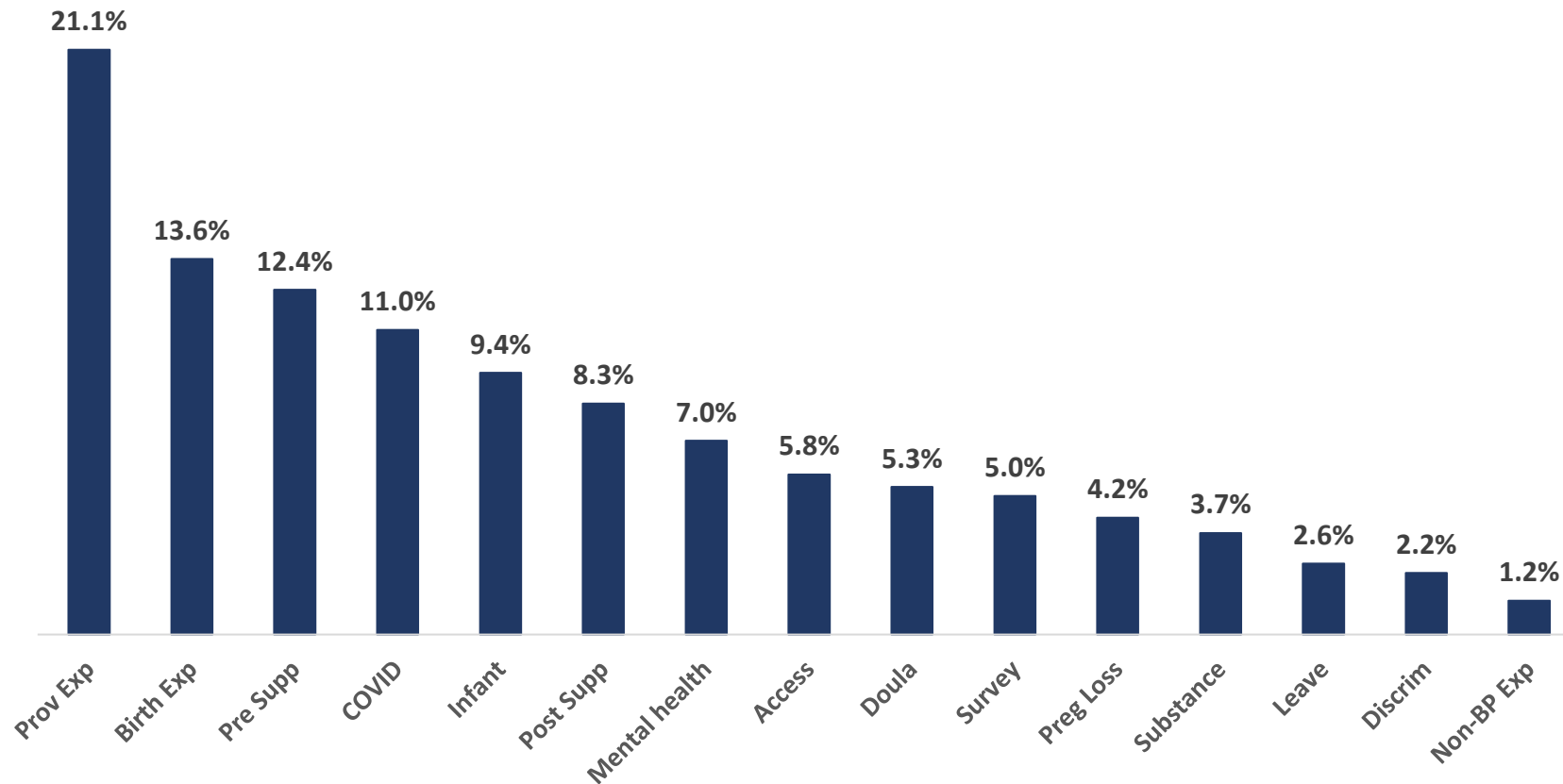
- Will capture respondents' thoughts in their own words
- Can touch on topics not included in survey or provide nuance

## Limitations

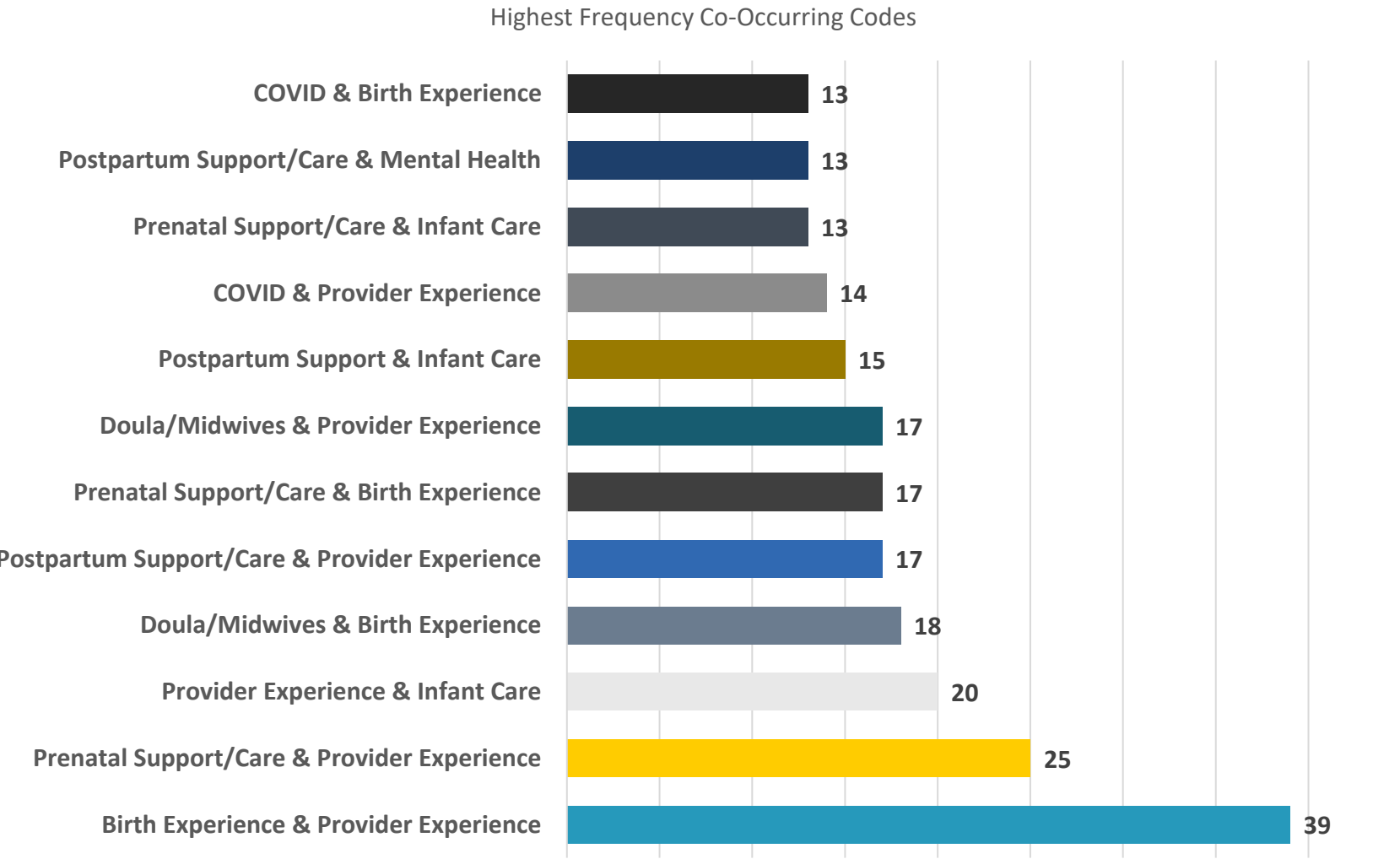
- Not representative
- Large variation in types of comments

**‘Provider Experience’, ‘Birth Experience’, and ‘Prenatal Support’** were the most commonly applied codes.

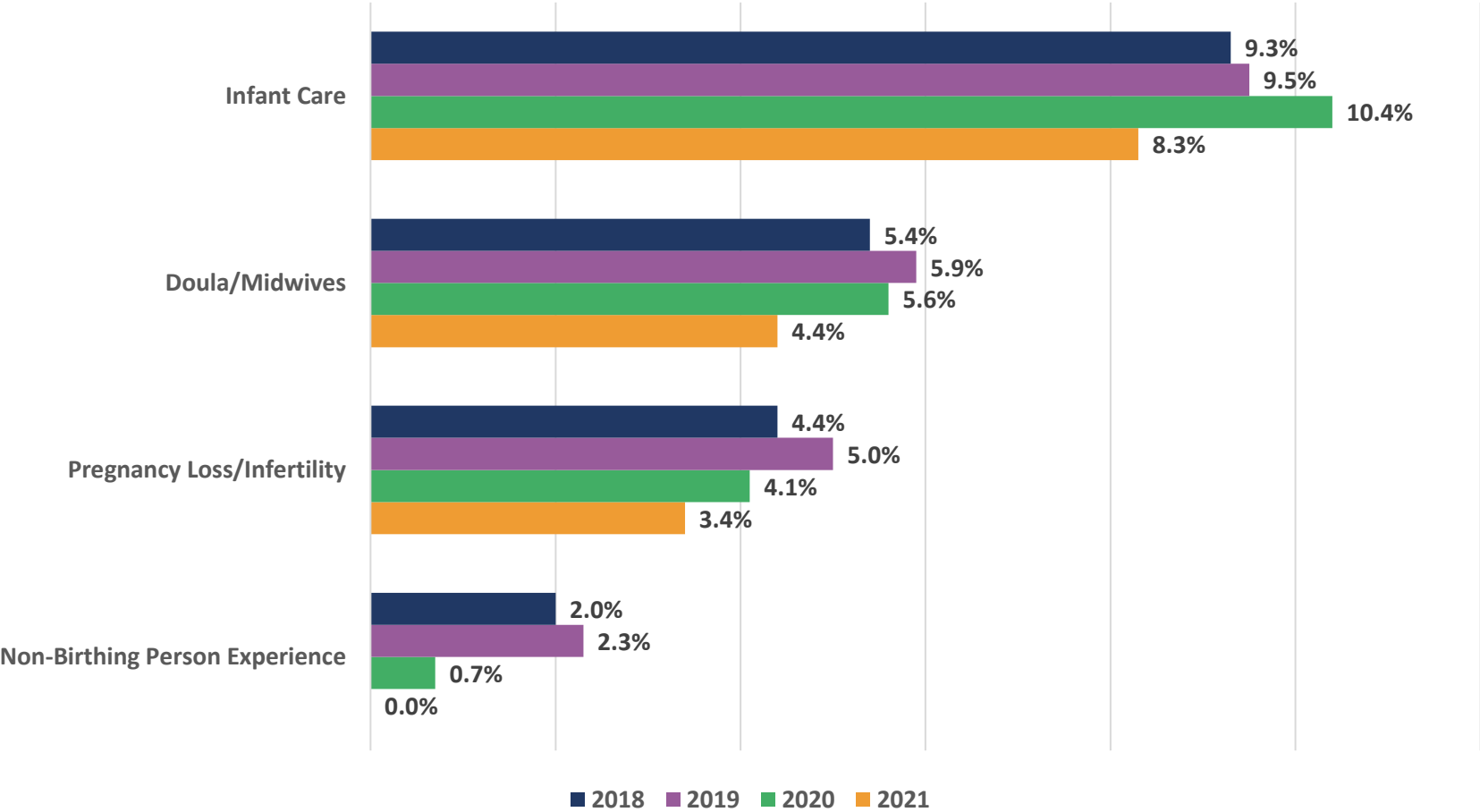
Percent of All Comments Assigned Each Code



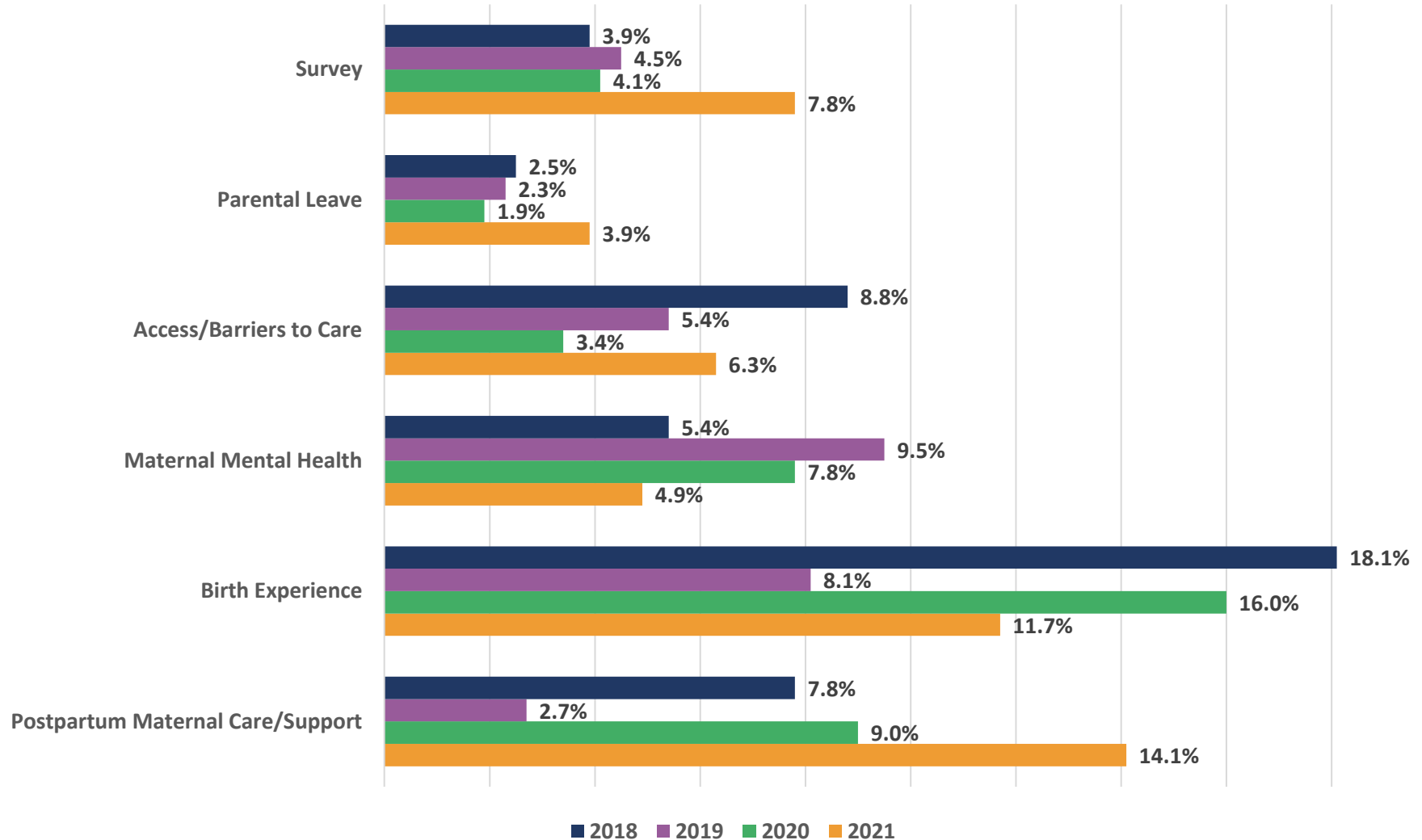
**‘Provider Experience’** tended to overlap most frequently with other codes, including ‘Birth Experience’, ‘Prenatal Support’, and ‘Infant Care’.



‘Infant Care’, ‘Doula/Midwives’, ‘Pregnancy Loss/Infertility’, and ‘Non-Birthing Person Experience’ were themes that remained constant across the study period.



Several themes, including ‘**Maternal Mental Health**’ and ‘**Birth Experience**’ fluctuated across the study period.



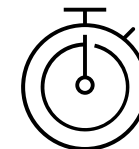
There was a marked change in comments on ‘parental leave’ before and after legislative changes in Washington in 2020.

**2018**

...I took unpaid FMLA and we planned for it as best we could. Not having pay for 3 months was very difficult in many ways. It would benefit everyone to support families.

**2020**

...the new FMLA program in WA is a lifesaver! Gave me time to bond with my baby that I would have not had otherwise.



5% of all comments focused on **'survey' implementation.**

I think this is a great survey and I am happy to help! Thank you for the opportunity!

Mom stated during interview during the opioid questions that she had a few kidney infections and UTI's during pregnancy that is why she was prescribed prescription medications during pregnancy.

This survey was alienating and off-putting to fill out as a queer person married to a same sex spouse because of the language used. I would recommend revisiting the terminology used in the questions to make all terms gender neutral. (2019)

for a lot of the questions like, "did your provider asked if you smoke cigarettes?" or "did your provider ask about your emotional status?" the answer was "no" because I see my health care provider on a regular basis and they didnt need to ask.



# A lean, broad codebook was successful in identifying major themes and trends

## Requests for additional support and information

- Additional support during prenatal and postpartum periods, especially in terms of **interactions with providers** and support for **maternal mental health**
- More information on **infant care, birthing options, postpartum care for birthing people**, and **safe medications during pregnancy**

## Barriers to good care and wellbeing during pregnancy

- Health insurance and healthcare costs
- Discrimination
- Lack of resources for non-birthing people

## Emerging topics

- Comments reflected that the **COVID-19** pandemic really influenced every aspect of pregnancy.
- There was also a marked change in comments on **parental leave** before and after legislative changes in Washington in 2020.

# Next Steps

---

- **2022 back-page comments available**
  - Add to 2018-2021 dataset
  - Code and update general themes that have emerged
- **Discussion prompts:**
  - How do these themes resonate with you?
  - What else would you be interested in related to the back page comments?
  - How do you think the comments can be used to support the WA PRAMS program?

# Topics of Interest

## Mental health and breastfeeding

Pregnancy is a blessing and so is breastfeeding, providers should not make you feel guilty for not being able to do either one.

## Prior experiences with pregnancy

I experienced a miscarriage in April of 2017. This was a very difficult time. I felt that healthcare providers were not very sensitive to the emotional needs of a mother during this time. I would like to see that change through education for doctors, nurses and front desk staff.

## Explanatory-like reasoning for substance use during pregnancy

I drank alcohol daily (3-5 drinks) throughout my entire pregnancy. Mostly malt liquor that I could afford. I used marijuana the first 3 months of pregnancy daily. I prayed a lot. My son was born 2 weeks "late" perfectly healthy. 7 lb 10 oz baby # 5 for me and # 9 for dad. I exercised daily, walking and aerobics 2x per week 40 min. , weight training 2x weekly 15 min."



QUESTIONS?

# Announcements

---

- **2022 WA PRAMS data now available:** *Request on DOH WA PRAMS website*
- **WA PRAMS Spring 2024 Newsletter:** *Available on DOH WA PRAMS website*
- **CityMatCH Conference**
  - September 9-11<sup>th</sup>, Seattle
  - Registration now open: [Conference – CityMatCH](#)
- **Next Meeting:**
  - October 17, 10:00-Noon
  - Tentative Agenda: share WA presentations and meetings learnings from the PRAMS Grantee meeting in September



## WA PRAMS Team

Coordinator	Linda Lohdefinck
Survey Operations	Kevin Beck Silbia Moreno Karen Kirk Julie Latham
Epidemiologist	Teal Bell
Principal Investigator	Martha Skiles

Contact: [martha.skiles@doh.wa.gov](mailto:martha.skiles@doh.wa.gov)  
[WAPRAMS@doh.wa.gov](mailto:WAPRAMS@doh.wa.gov)





To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email [civil.rights@doh.wa.gov](mailto:civil.rights@doh.wa.gov).