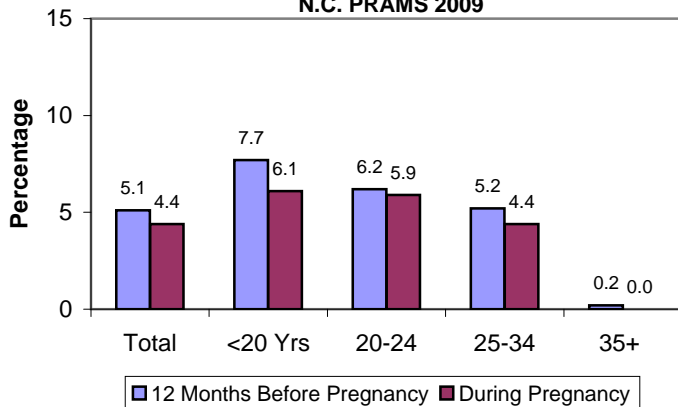


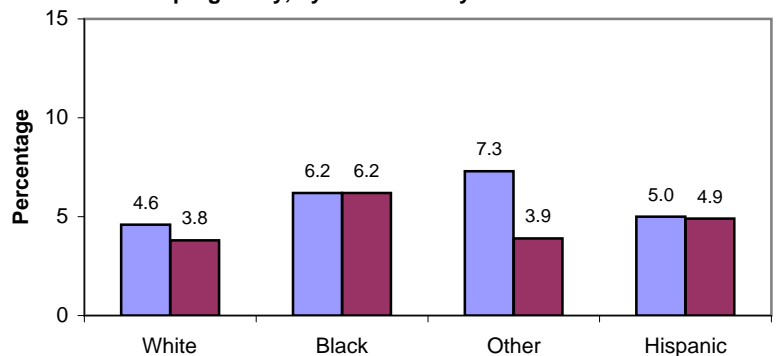
SURVEILLANCE UPDATE

Maternal Physical Abuse Before and During Pregnancy: 2009 N.C. Pregnancy Risk Assessment Monitoring System

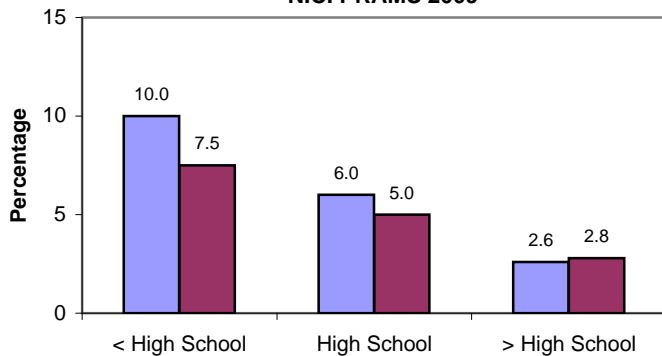
Percentage of N.C. pregnant women who were physically abused by their husband or partner both before and during their pregnancy, by age group*: N.C. PRAMS 2009



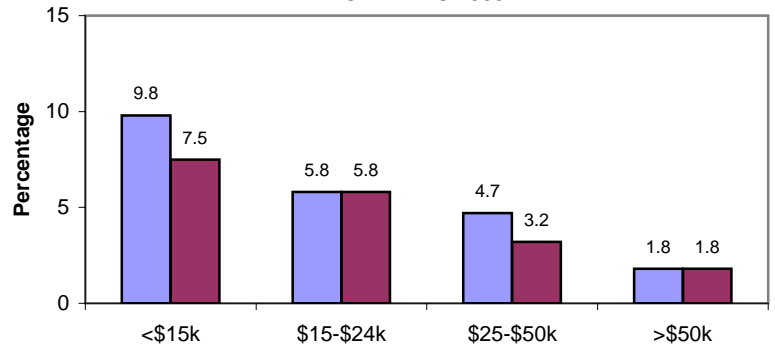
Percentage of N.C. pregnant women were physically abused by their husband or partner both before and during their pregnancy, by race/ethnicity*: N.C. PRAMS 2009



Percentage of N.C. pregnant women were physically abused by their husband or partner both before and during their pregnancy, by educational attainment*: N.C. PRAMS 2009



Percentage of N.C. pregnant women who were physically abused by their husband or partner both before and during their pregnancy, by income level*: N.C. PRAMS 2009



All estimates are weighted to reflect the entire population of N.C. women who gave birth in 2009. Excluded from the sampling frame are births to N.C. residents that took place out of state, those where the birth certificate did not contain the mother's last name, multiple births of 4 or more, and birth to mothers under the age of 13. Mothers who reported they were physically hurt in some way by their husband or partner both in the twelve months before their pregnancy and also during their pregnancy.

*Use caution when interpreting small sample sizes for some groups.

The N.C. Pregnancy Risk Assessment Monitoring System (N.C. PRAMS) is a Centers for Disease Control and Prevention (CDC) initiative to reduce infant mortality and low birth weight. N.C. PRAMS is a random, stratified, monthly mail/telephone survey of North Carolina women who recently delivered a live-born infant. Each month, a sample of approximately 200 women with recent live-born deliveries is drawn from the Provisional Birth File. Every year a core set of questions is asked of these women before, during and after pregnancy. The data that PRAMS collects strives to improve the health of infants and mothers, especially as it is used for planning and assessing health programs, can be used to identify groups of women and infants at high risk for health problems, to monitor changes in health status, and to measure progress towards goals in improving the health of mothers and infants. See the N.C. PRAMS website for more information, specific details on item responses, and data limitations: <http://www.schs.state.nc.us/SCHS/prams>.

