

## Technical Notes

### Collection of Data

The Division of Health Data and Policy, Illinois Department of Public Health collected the 2016 Illinois Pregnancy Risk Assessment Monitoring System (PRAMS) data. Illinois uses the standardized data collection methods developed by the U.S. Centers for Disease Control and Prevention (CDC). These methods are also used by the 47 states and New York City, Puerto Rico, the District of Columbia, and the Great Plains Tribal Chairmen's Health Board (GPTCHB) participating in PRAMS. Data are collected through mailed surveys with telephone follow-up for non-respondents. A systematic stratified random sample of approximately 200 mothers is selected monthly from a frame of eligible birth certificates. At two to six months after delivery, each sampled mother is mailed an introductory letter and a survey. A reminder letter and a second and third mailing of the survey are sent to those who do not initially respond. PRAMS interviewers telephone mothers who do not respond to any of the mailed surveys to administer the survey by telephone. Surveys are available in both English and Spanish, and telephone interviews are conducted in both languages.

In 2016, a total of 2,307 women were selected to participate in the study; 1,382 women completed the survey. Data were weighted and are representative of the 12 month PRAMS-eligible population of 146,451 recent mothers. Data collection during 2016 marks the first year using the Phase 8 PRAMS survey. Data analysis reports include the survey questions so data users are aware of what was asked on the survey.

### Sampling Design

A systematic stratified random sampling design is used to oversample low birthweight (less than 2,500 grams) births. The sample is stratified by low birthweight (less than 2,500 grams) and normal birthweight (2,500 grams or greater). The 2016 overall weighted response rate was 59.9%. The weighted response rates by birthweight are low birth weight 59.9% and normal birth weight 59.9%.

### Weighting and Interpretation of Results

Statistics in this report are based on weighted data. The weights were developed by CDC to adjust for sample design, non-response patterns, and omissions from the sampling frame. The final sampling weight used in the analysis of the survey data is the product of these three elements. Weighting is necessary to give unbiased estimates of population parameters.

The percentages, 95 percent confidence intervals, and total estimated population affected were calculated using Survey Data Analysis (SUDAAN®\*) software. Estimates for response categories with small sample size (i.e., fewer than 30 respondents in the denominator) are not reported due to possible imprecision and bias.

PRAMS data are representative of Illinois resident women, age 14 years or older, who gave birth in Illinois to live infants. The sampling design is valid at the state level and not intended or developed to represent sub-state geographies or their populations without further evaluation. The data are not applicable to all pregnant women. At the direction of IDPH legal counsel, women younger than 18 years of age were not asked questions about physical abuse.

### Acknowledgements

The Illinois PRAMS project would like to thank all the mothers who took the time to participate in our survey. These women provided valuable information to improve the understanding of why some babies are born healthy and some are not. The Illinois PRAMS project also would like to thank the CDC PRAMS team for their on-going operational and technical support.

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Please call 1-866-643-7194 with any questions about Illinois PRAMS or email us at [dph.pramtrac@illinois.gov](mailto:dph.pramtrac@illinois.gov).

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