## Father Absence at Birth: Implications for Maternal and Infant Health Texas PRAMS 2012-2014

Fathers make important contributions to their baby's development; however, their role in maternal and infant health is often overlooked. The Pregnancy Risk Assessment Monitoring System (PRAMS) is a population-based surveillance system designed by the Centers for Disease Control and Prevention. Surveillance is conducted via surveys sent on various health topics to mothers who have recently given birth. In Texas, the PRAMS survey provides the most comprehensive population-based data on maternal health before, during, and after pregnancy. Texas PRAMS data (combined for years 2012-2014) presents a unique opportunity to examine the role of the father at birth, as the absence of father's education level on the baby's birth certificate is highly correlated with father's name being missing from the birth certificate. Therefore, the absence of father's education was used as a proxy for the father being absent at birth. Father's education level is a data element provided by CDC as part of the PRAMS survey data.



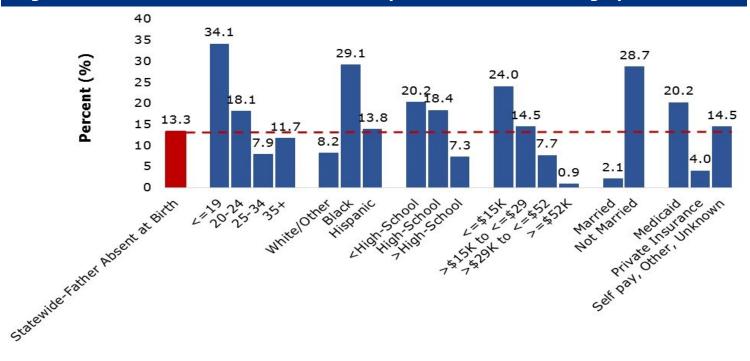


Figure 1 shows the percent of fathers absent at birth by certain maternal demographic variables. Statewide, 13.3% of mothers who participated in PRAMS (2012-2014) had a father who appeared absent at birth. Mothers who were young (under the age of 24), Black, had no more than a high school education, and had an annual income of less than \$15,000 had higher percentages of absent fathers. Father absence at birth was also more prevalent among women who were unmarried and whose deliveries were paid by Medicaid.

Figure 2. Prevalence/percent of <u>pre-pregnancy</u> health behaviors/risks, according to whether the father appeared absent or present at their baby's birth

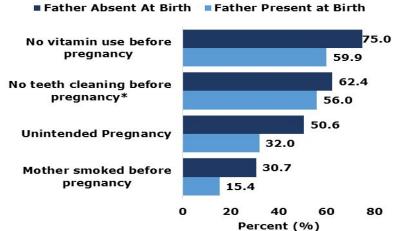


Figure 2 shows the prevalence/percent of certain maternal behaviors or risks before pregnancy (prepregnancy) according to whether the father appeared absent (dark blue) or present (light blue) at their baby's birth. Mothers with a father absent at birth were more likely not to have used vitamins or to have had their teeth cleaned before becoming pregnant. Moreover, mothers with father absent at birth were more likely to indicate that their pregnancy had been unintended, and were also more likely to have smoked before becoming pregnant.

## Figure 3. Prevalence/percent of maternal health behaviors/risks <u>during pregnancy</u>, according to whether the father appeared absent or present at their baby's birth

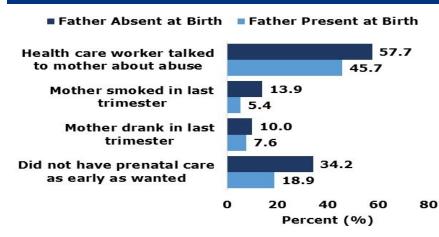


Figure 3 shows the prevalence/percent of several maternal health behaviors or risks during pregnancy, according to whether the father appeared absent (dark blue) or present (light blue) at their baby's birth. Mothers with a father absent at birth were more likely to have talked about abuse to a health care worker, and more likely to have smoked and consumed alcohol while they were pregnant. Further, mothers with a father absent at birth were more likely not to have received prenatal care as early as they wanted.

## Figure 4. Prevalence/percent of maternal health behaviors/risks <u>after pregnancy</u>, according to whether the father appeared absent or present at their baby's birth

Figure 4 shows the prevalence/percent of certain maternal health behaviors or risks after pregnancy (postpartum), according to whether the father appeared absent (dark blue) or present (light blue) at their baby's birth. Mothers with a father absent at birth were more likely to have used improper infant sleep practices and to have never breastfed. In addition, mothers with the father absent at birth were more likely to not be currently using birth control and more likely to have experienced postpartum depressive symptoms.

