

## **Public Health Importance**

Research shows that maternal stress influences fetal growth, central nervous system development and behavior, and neonatal birth outcomes in profound and long-lasting ways.<sup>1</sup> Stress has been associated with preterm birth and low birth weight.<sup>2,3</sup> Significant relationships have been found between the severity of life events, prenatal bleeding, a prior history of delivering a low birth weight (LBW) infant, and the occurrence of preterm delivery.<sup>4</sup>

In their 1996 review of ten years of research on stress, social support, and pregnancy outcomes, Hoffman and Hatch found that intimate social support, such as that provided by a partner or close family member, is associated fairly consistently with improved fetal growth, regardless of a woman's level of stress.<sup>5</sup> Low levels of social support have been associated with late entry into prenatal care<sup>6,7</sup> and lower Apgar scores.<sup>8</sup>

Levels of stress and social support may also influence the health of a mother and her infant during the postpartum period. Women who receive more support may experience less postpartum depression.<sup>8</sup> In addition, higher levels of social support have also been shown to inhibit smoking relapse among high risk pregnant smokers.<sup>9</sup>

## **Ohio PRAMS Data Highlights**

### **Stressful Events Before Delivery**

- The majority of women (79.9%) experienced at least one stressful event during the 12 months before delivery.
- Approximately 41% of these women experienced only one or two stressful events during this period.
- Women under age 20 and with less than a high school education were more likely than their older or more educated counterparts to experience more than five stressful events during the twelve month period before they delivered.

### **Support During Pregnancy**

- Over 80% of women had access at least one type of support during their most recent pregnancy.
- The most common type of social support reported by women (93.0%) was someone to take them to the doctor's office or clinic if they needed a ride.
- The least common type of social support reported (85.1%) was having someone who would loan them money.

### **Support Since Delivery**

- During the period since delivery, over 90% of women reported having access to one or more types of social support.
- The most common type of social support reported (92.2%) was having access to someone to take care of the baby.
- The least common type of social support reported (88.2%) was someone who would loan them money.

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- <sup>1</sup> Lederman RP, Regina P. Treatment strategies for anxiety, stress, and psychosocial development to reproductive health Behav Med 1995; 21(3): 113-22.
  - <sup>2</sup> Copper RL, Goldenberg RL, Das A, et al. The preterm prediction study: maternal stress is associated with spontaneous preterm birth at less than 35 weeks' gestation Am J Obstet Gynecol. 1996; 175: 1286-92.
  - <sup>3</sup> Pagel MD, Smilkstein G, Regen H, Montano D. Psychosocial influences on newborn outcomes: a controlled prospective study Soc Sci Med 1990; 30: 597-604.
  - <sup>4</sup> Mutale T, Creed F, Maresh M, Hunt L. Life events and low birth weight-analysis by infants preterm and small for gestational age Br J Obstet Gynaecol 1991; 98: 166-72.
  - <sup>5</sup> Hoffman S, Hatch MC. Stress, social support and pregnancy outcome: a reassessment based on recent research Paediatr Perinat Epidemiol 1996; 10: 380-405.
  - <sup>6</sup> Rogers MM, et al. Impact of a social support program on teenage prenatal care use and pregnancy outcomes J Adolesc Health 1996; 19(2): 132-40.
  - <sup>7</sup> Schaffer MA and Lia-Hoagberg B. Effects of social support on prenatal care and health behaviors of low-income women J Obstet Gynecol Neonatal Nurs 1997; 26(4): 433-40.
  - <sup>8</sup> Collins NL, Dunkel-Schetter C, Lobel M, Scrimshaw CM. Social support in pregnancy: Psychosocial correlates of birth outcomes and postpartum depression J Person Soc Psychol 1993; 65: 1243-58.
  - <sup>9</sup> Donatelle RJ, Prows SL, Champeau D, Hudson D. Randomized controlled trial using social support and financial incentives for high risk pregnant smokers: significant Other Supporter (SOS)program Tob Control 2000; 9 Suppl 3: iii67-iii69.