



PRAMS ENHANCED SURVEILLANCE

Eirian Coronado, MA
Del Yazzie, MPH
Sheldwin Yazzie, PhD
Kevin English, DrPH



HOW WE STARTED- NEW MEXICO PRAMS

- *Godmothers* of PRAMS represented a cross-section of MCH and tribal health – Susan Nalder, Ssu Weng, Dorin Sisneros, Carol Leonard, Adele King, Doris McGuire, Bonnie Duran, Francine Romero, to name a few- and some men, Chris Percy, Michael Everett, Michael Kogan
- Structure was formal but consensus-based and included IHS, public health, WIC, private practice, and community health advocates
- Survey tool development was collaborative and field tested widely
- Community and chapter consultations routine in the start-up phase
- Navajo area MCH work group and Border Health work groups well represented and attended from 1997 forward



ADVENT OF TECS

Cheryl Mason, Deborah Klaus and Dornell Pete led the transition to TEC for Navajo

NM PRAMS steering committee worked with AASTEC and NEC staff to collaborate on survey design and field testing in state survey

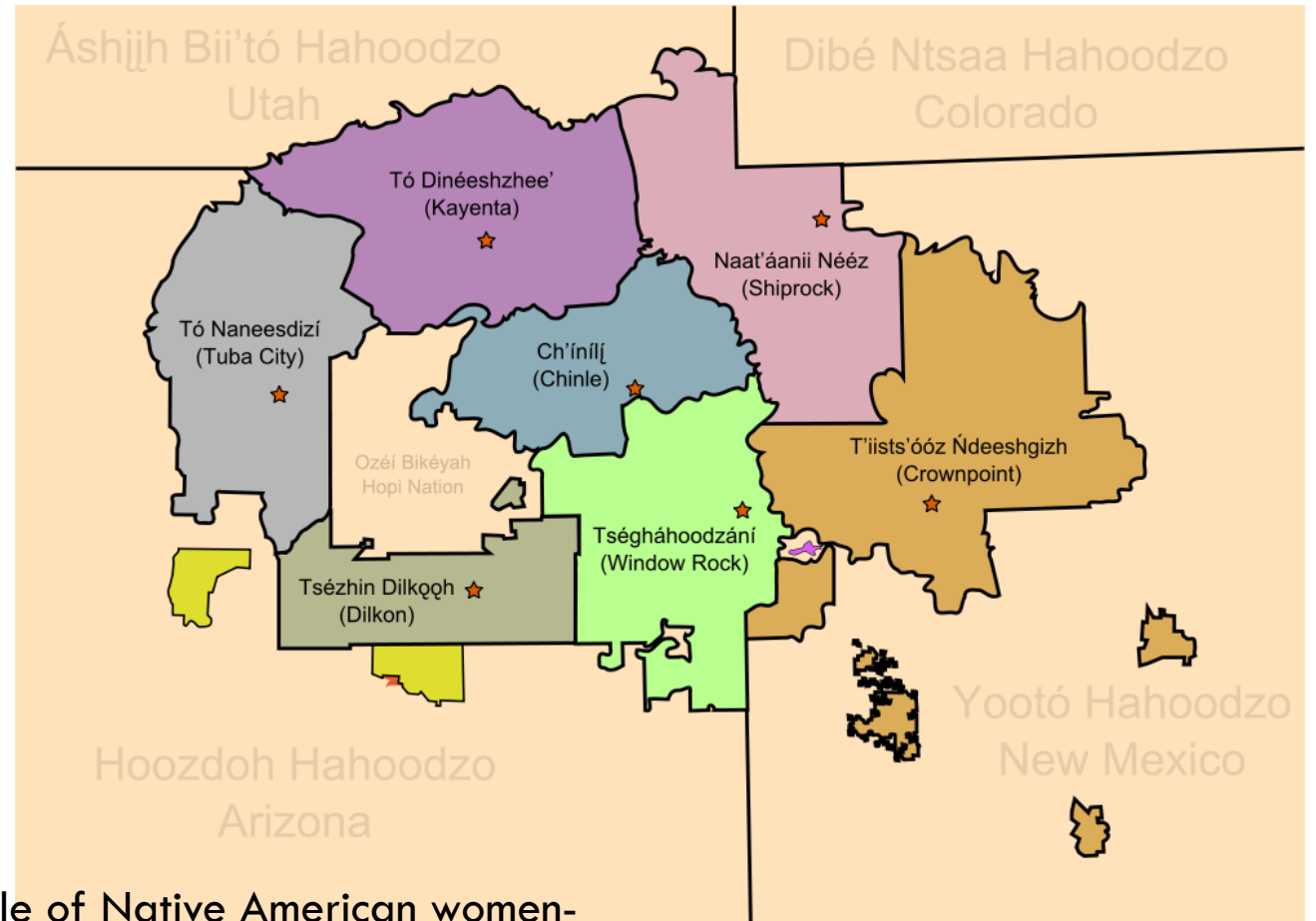
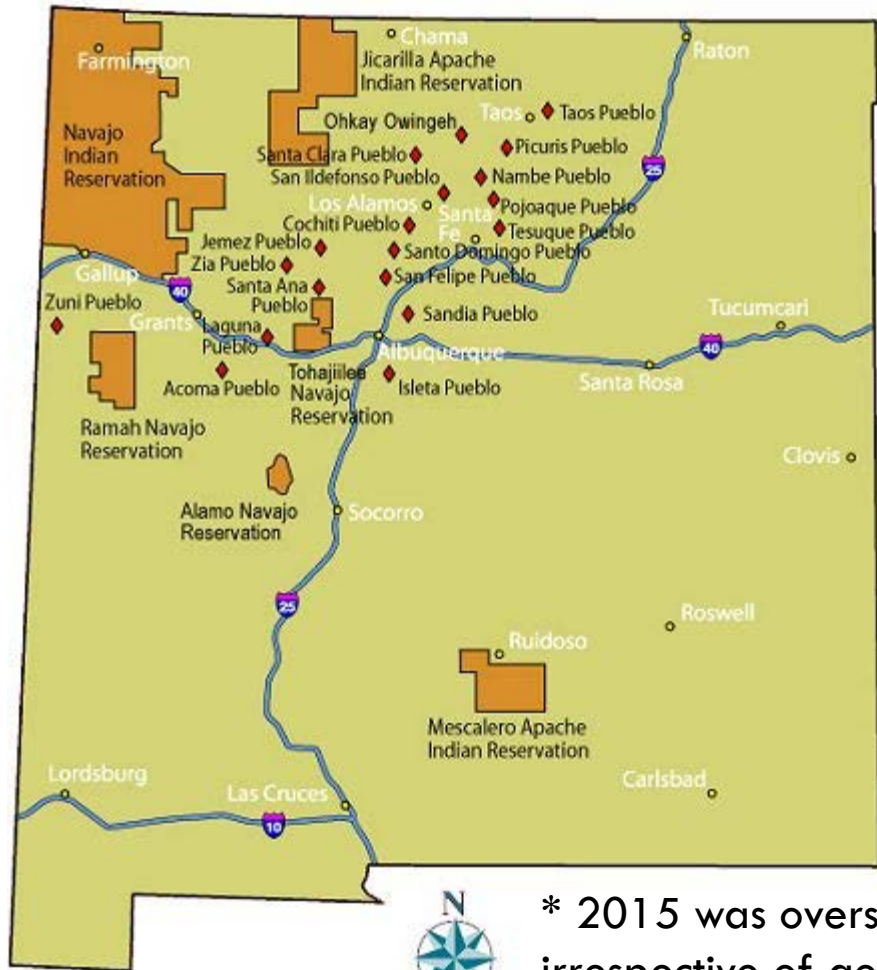
Ongoing collaboration with other MCH organizations and research partners- Tewa Women United, Eight Northern and Tribal WIC programs continued in NM Steering Committee

GOALS IN ENHANCED SURVEILLANCE



1. Increase survey representation among Native American women in NM via CDC (tribal flu) 2011 and WKKF funding-2012-2014
2. Strengthen relationships with NM Tribal Epidemiology Centers (TECs) and plan collaboratively
3. Develop media and creative outreach messaging to encourage PRAMS visibility and promote survey completion
4. Create long-term sustainability for shared surveillance methods and data applications

OVERSAMPLE OF WIC-MEDICAID ELIGIBLE WOMEN IN NM PRAMS, 2012-2014 AND 2015*



* 2015 was oversample of Native American women-irrespective of geography or poverty



COLLECTIVE IMPACT PRINCIPLES FRAMEWORK

- Promotes collaborative and equitable partnerships in all research phases
- Relies on sharing strengths and resources within the community
- Facilitates co-learning and capacity building among all partners
- Disseminates findings and knowledge gained to the broader community and involves all partners in the dissemination process
- **Promotes a long-term process and commitment to sustainability**



ENDORSEMENTS AND TRIBAL PARTNERSHIPS

Albuquerque Area southwest tribal epidemiology center procedures:

1. Mail 1- letter from Navajo Nation or Albuquerque Area Indian Board
2. AASTEC mails 'tickler' reminder to non-responders
2. Mail 2- Deliver hardcopy surveys to women living on reservation in through Community Health Representatives (CHRs) or a field worker for women off-reservation (Albuquerque, Rio Rancho, Espanola, Taos, Gallup)
3. Mail 3- AAIHB/AASTEC follow up with CHRs
4. Telephone- Field worker help arrange phone appointments



Day 1
Monthly file from VR

Extract and load live bc file in PRAMS data management program

Send list of American Indian women to Tribal Epi Centers via secure FTP

Day 3
Pre-letter mail

All women get Mail 1
Packet : cover letter, informed consent, survey booklet and resource directory, and manicure set.

Day 10
Mail 1

AI/AN women receive an additional letter of endorsement from AAIHB or Navajo Nation

TICKLER postcard goes between Mail 1 & Mail 2

All women not responding to Mail 1 receive survey booklet in mail 2, (except AI/AN women)

All women not responding to Mail 2 receive 3rd survey booklet in mail

All women not responding So far enter phone phase (ends on day 95)

AI/AN women receive a hand delivered packet. (manicure set if not received in Mail 1)

Day 30
Mail 2

Day 44
Mail 3

Day 52
Phone Phase



HAND DELIVERY- ALBUQUERQUE AREA

Challenges:

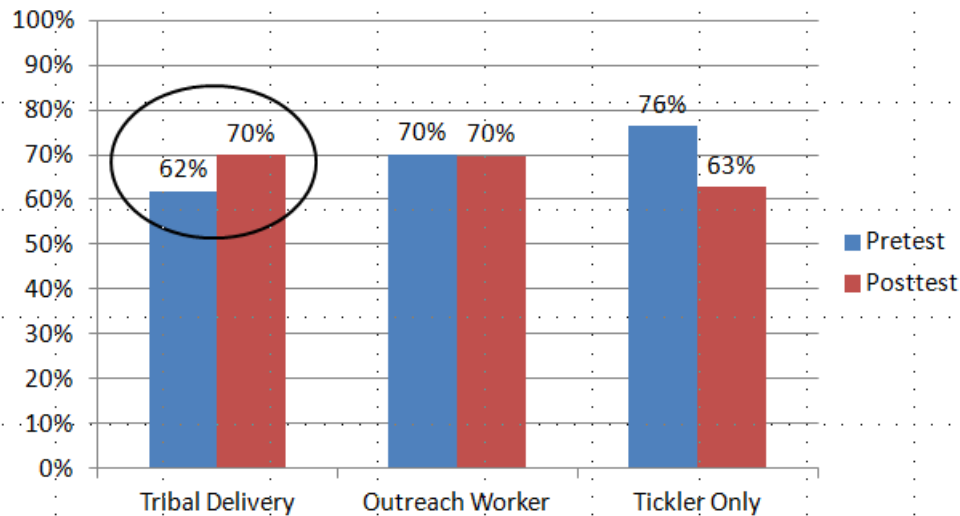
- Tracking via FTP file transfer protocol problematic
- NMDOH IT updates made it difficult to access, offsite
- Overwritten files and multiple files made tracking inefficient
- Difficult to find off-reservation respondents (field worker)

Strengths:

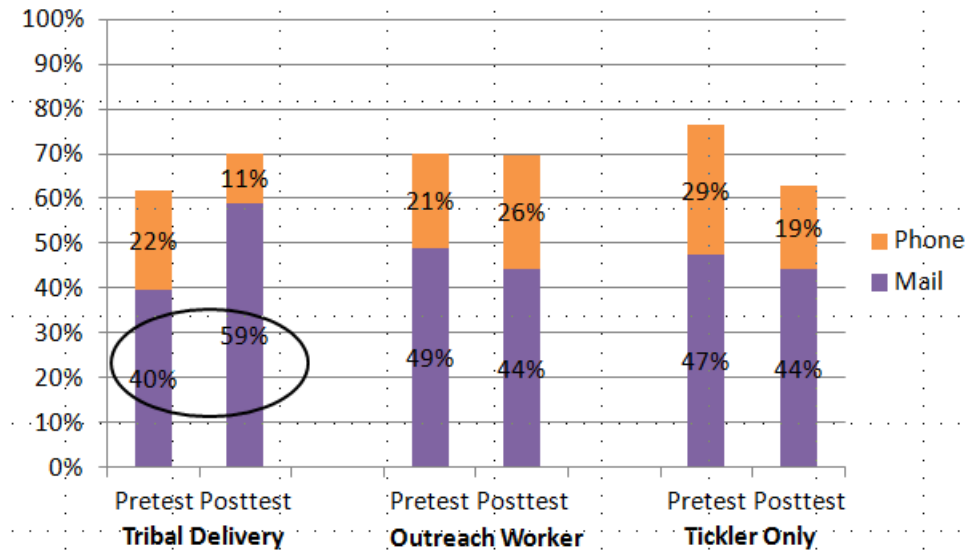
- Women were found through CHRs and PRAMS outreach worker
- Completion and response rates increased despite challenges
- Phone response potentially improved for AI women if contacted by CHR or field worker

RESPONSE RATES BEFORE AND AFTER

AASTEC Response Rate by Delivery Method



AASTEC Response Rate by Delivery Method and Mode



Pretest: Batches 159-175 (Births 8/2010-12/2011)
 Posttest: Batches 176-192 (Births 6/2012 – 10/2013)



NAVAJO AREA MEDIA

2012- Design and testing of Navajo PRAMS brochure

2013- Navajo WIC focus Groups, NEC and Wayfinder Media

2014- Radio, Hondo Louis (Wayfinder Media). Two sixty-second adds on two different genre station families, six month run. One started late August, the other mid September

2015- Rough cut of PRAMS DVD geared toward Navajo participation



**KTRA-FM, KDAG-FM, KCQL-AM, KKFG-FM,
KAZX-FM**



RADIO ADVERTISEMENTS

CAR RIDE



CLINIC VISIT



PRAMS is for Native American Mothers

On behalf of the Navajo Nation, we respectfully request your help to complete this important survey. The PRAMS survey gathers information about the pregnancy of mothers and the wellbeing of their newborn child. We know you have a busy schedule and we ask for only 10 minutes of your time to complete this confidential survey that can provide information to address health problems or risks before, during and after pregnancy. By answering the questions and returning the survey, providers and public health programs in New Mexico and the Navajo Nation can tailor their services to better address the needs of Navajo mothers.

*Martha Shelly,
First Lady
The Navajo
Nation*



Partnerships

New Mexico
PRAMS



march of dimes

Questions?

New Mexico PRAMS
Family Health Bureau
NM Department of Health
2040 S. Pacheco
Santa Fe, NM 87505



1-800-743-8548

Email: nm_prams@state.nm.us

New Mexico
PRAMS

Pregnancy
Risk
Assessment
Monitoring
System

CRYSTAL LITTLEBEN

NEW MISS NAVAJO NATION, 2017

PSA: DeI, I'M RIGHT NEXT DOOR TO YOU





NAVAJO EPIDEMIOLOGY CENTER OPERATIONS

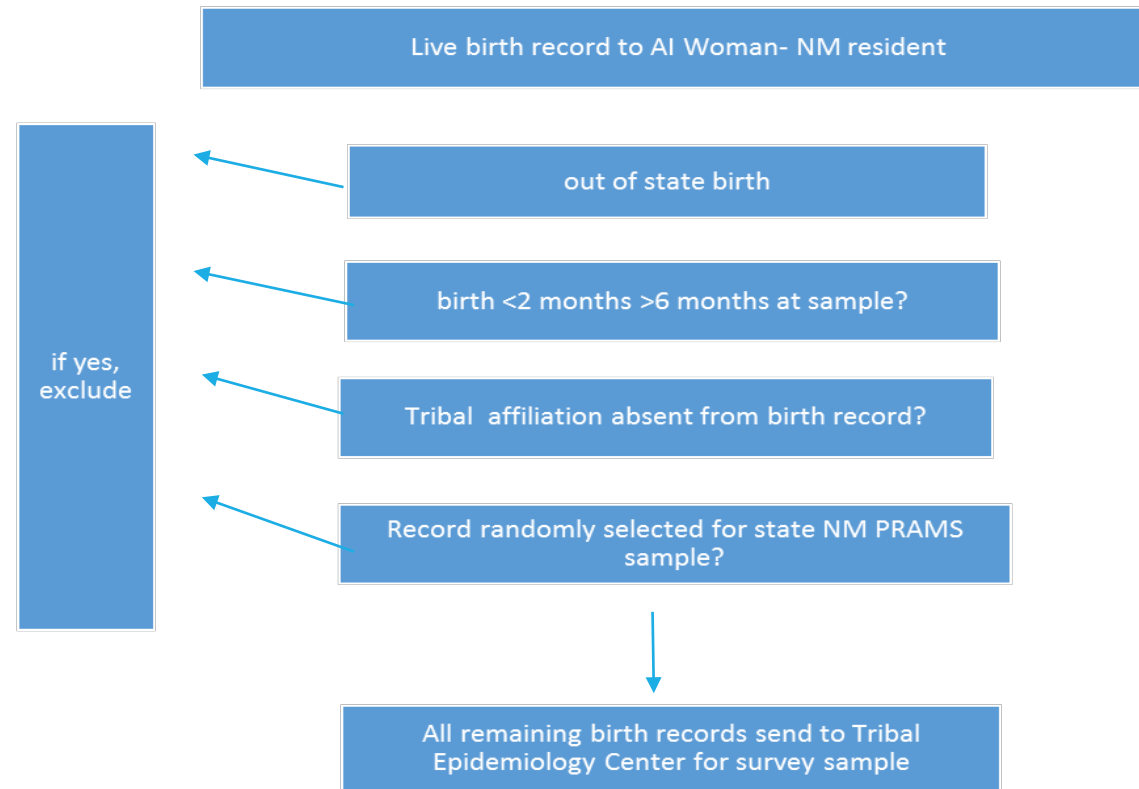
- NEC and NM PRAMS work together to define goals
- Long-term goal: NEC Nation-wide survey to include sampling from AZ , NM, UT births (Vital Records from NM, AZ, UT? assurances in place)
- Despite best efforts, 2015 CDC cooperative agreement submission not reviewed
-)



NM TRIBAL PRAMS-AASTEC, NM, NEC

- Conference calls between NM, AASTEC and NEC in February 2017, application submitted w AASTEC as lead in NM surveillance
- Sampling scheme to include census of non-Navajo and 50% of Navajo NM resident births
- Survey addendum vetted through AASTEC, NM PRAMS Steering Committee and Navajo PRAMS workgroup
- Meeting the AASTEC, NM, AZ and NEC August, 2017 to plan mutual media and marketing collaborations (emphasis on NM Tribal PRAMS)

SAMPLE SELECTION





SAMPLE DATA

PLAN FOR VALID DATA FOR COMMUNITIES

September sample (July) births	AI/AN N=241	Navajo	All Other tribes
All		141	100
San Juan or McKinley residence		113	N/A

MEDIA PLANS





ACKNOWLEDGEMENTS

Mary Shepherd, co-PI and PRAMS analyst (2010-2014), Glenda Hubbard 2014 forward

Dorin Sisneros, Data Manager since inception

Rebecca Garcia, Clerk/data collections (2006-2014), Nicole Hernandez, 2014 forward

Delrae Peterson, AASTEC, Ophelia Spencer

Sheldwin Yazzie, AASTEC, Amy Dixit, Epidemiologists

Judy Espinoza, AASTEC, Miriam Sosa

Ann Rose Ray, NM PRAMS outreach worker (2012-2015)

Kevin English, AASTEC Director

Del Yazzie, NEC Epidemiologist-Navajo PRAMS PI

Victoria Lee, NEC outreach tracking support

Katherine Jim, NM-Navajo PRAMS outreach worker

Rosie Lucero, PRAMS interviewer, Angelica Romero

Oralia Flores, PRAMS interviewer (2013-2015)

CDC – Indu Alhuwalia, Denise D’Angelo, Leslie Harrison, Martha Kapaya

WKKF- Patrick Simpson, Rebecca Rae, Jessica Coloma, Luis Velez