Smoking before and during pregnancy is the single most preventable cause of illness and death among mothers and infants.¹

- **Women who smoke during pregnancy are more likely to have a miscarriage** than women who do not smoke.³
- **Smoking can cause problems with the placenta** (the source of the baby's food and oxygen during pregnancy).³ For example, the placenta can separate from the womb, causing bleeding, which is dangerous to the mother and baby.
- **Smoking during pregnancy can cause a baby to be born too early or to have low birth weight.**³ If this happens, it makes it more likely that the baby will be sick and have to stay in the hospital longer. Some babies may die.
- **Babies born to women who smoke are more likely to have certain birth defects** like a cleft lip or cleft palate.⁴
- **Smoking during and after pregnancy is a risk factor of Sudden Infant Death Syndrome (SIDS).**⁵ SIDS refers to deaths among babies of no immediately obvious cause.
- **Smoking is associated with reduced fertility.**²

Quitting smoking either before or at an early stage of pregnancy can reduce health risks for mother and baby.⁶

There are approximately 18,900 live births each year in Hawaii.⁷ The following facts are from the 2009-2011 Hawaii Pregnancy Risk Assessment Monitoring System (PRAMS) survey.

**Pre-pregnancy smoking**
More than one fifth (20.9%) of women who gave birth in Hawaii in 2009-2011 reported that they smoked cigarettes in the three months before they became pregnant with their most recent baby.

**Smoking in the last trimester of pregnancy**
Approximately 7.5% of women who gave birth in Hawaii in 2009-2011 reported that they smoked cigarettes in the last trimester of their most recent pregnancy.

**Postpartum smoking**
About 11.7% of women who gave birth in Hawaii in 2009-2011 reported smoking cigarettes in the early postpartum period (2-9 months after delivery).

**About the Data**
PRAMS is a self-reported survey of recent mothers conducted by mail with telephone follow-up. It is designed to monitor the health and experiences of women before, during, and just after pregnancy. Every year in Hawaii, about 2,400 women who deliver a live infant are randomly selected to participate.

**Suggested Citation**

For more information, please contact:
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- Lila Johnson, RN, MPH, CHES  Tobacco Prevention & Education Program  Telephone: 808-586-8251  Email: lila.johnson@doh.hawaii.gov
# Hawaii Perinatal Smoking Quick Facts

<table>
<thead>
<tr>
<th></th>
<th>Pre-pregnancy smoking</th>
<th>Smoking during pregnancy</th>
<th>Postpartum smoking</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% of women who reported that they smoked in the 3 months before pregnancy</td>
<td>% of women who reported that they smoked in their last trimester of pregnancy</td>
<td>% of women who reported that they smoked in the early postpartum period</td>
</tr>
<tr>
<td><strong>STATE OF HAWAII</strong></td>
<td>20.9</td>
<td>7.5</td>
<td>11.7</td>
</tr>
<tr>
<td>Island</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Big Island</td>
<td>28.5</td>
<td>11.6</td>
<td>17.5</td>
</tr>
<tr>
<td>Maui, Molokai, Lanai</td>
<td>22.3</td>
<td>7.4</td>
<td>11.5</td>
</tr>
<tr>
<td>Oahu</td>
<td>19.4</td>
<td>6.7</td>
<td>10.8</td>
</tr>
<tr>
<td>Kauai</td>
<td>19.1</td>
<td>8.3</td>
<td>11.3</td>
</tr>
<tr>
<td><strong>Mother’s race/ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>18.3</td>
<td>5.3</td>
<td>8.9</td>
</tr>
<tr>
<td>Hawaiian/Part-Hawaiian</td>
<td>27.9</td>
<td>11.6</td>
<td>17.8</td>
</tr>
<tr>
<td>Filipino</td>
<td>16.4</td>
<td>4.4</td>
<td>7.3</td>
</tr>
<tr>
<td>Japanese</td>
<td>21.9</td>
<td>6.9</td>
<td>12.7</td>
</tr>
<tr>
<td>Other Asian*</td>
<td>13.3</td>
<td>4.1</td>
<td>4.2</td>
</tr>
<tr>
<td>Other Pacific Islander^</td>
<td>16.8</td>
<td>9.2</td>
<td>10.1</td>
</tr>
<tr>
<td>Other†</td>
<td>21.8</td>
<td>7.8</td>
<td>15.3</td>
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<tr>
<td><strong>Mother’s age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 and younger</td>
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<td>15.8</td>
</tr>
<tr>
<td>20-24</td>
<td>28.9</td>
<td>10.1</td>
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<tr>
<td>25-29</td>
<td>23.0</td>
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<tr>
<td>30-34</td>
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<td>8.5</td>
</tr>
<tr>
<td>35 and older</td>
<td>12.9</td>
<td>5.0</td>
<td>6.4</td>
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<td><strong>Mother’s education</strong></td>
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</tr>
<tr>
<td>Less than high school</td>
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<td>21.1</td>
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<td>High school graduate</td>
<td>26.3</td>
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<tr>
<td>4 or more years college</td>
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<td>1.4</td>
<td>2.5</td>
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<td><strong>WIC during pregnancy‡</strong></td>
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<td></td>
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<tr>
<td>Received WIC services</td>
<td>27.5</td>
<td>10.9</td>
<td>16.5</td>
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<tr>
<td>Did not receive WIC services</td>
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<td>4.8</td>
<td>7.9</td>
</tr>
</tbody>
</table>

*Other Asian includes: Chinese, Korean, Vietnamese, Asian Indian, Other Asian  ^Other Pacific Islander includes: Samoan, Guamanian, Other Pacific Islander  †Other includes: Black, American Indian, Puerto Rican, Cuban, Mexican, and all others.  ‡WIC refers to the Special Supplemental Nutrition Program for Women, Infants, and Children.

Smoking before and during pregnancy is the single most preventable cause of illness and death among mothers and infants.¹

- **Women who smoke during pregnancy are more likely to have a miscarriage** than women who do not smoke.³
- **Smoking can cause problems with the placenta** (the source of the baby’s food and oxygen during pregnancy).³ For example, the placenta can separate from the womb, causing bleeding, which is dangerous to the mother and baby.
- **Smoking during pregnancy can cause a baby to be born too early or to have low birth weight.**³ If this happens, it makes it more likely that the baby will be sick and have to stay in the hospital longer. Some babies may die.
- **Babies born to women who smoke are more likely to have certain birth defects** like a cleft lip or cleft palate.⁴
- **Smoking during and after pregnancy is a risk factor of Sudden Infant Death Syndrome (SIDS).⁵ SIDS refers to deaths among babies of no immediately obvious cause.**
- **Smoking is associated with reduced fertility.²**
  - Quitting smoking either before or at an early stage of pregnancy can reduce health risks for mother and baby.⁶

There are approximately 2,300 live births each year to Hawaii County residents.⁷ The following facts are from the 2009-2011 Hawaii Pregnancy Risk Assessment Monitoring System (PRAMS) survey.

**Pre-pregnancy smoking**

Almost 3 out of 10 (28.5%) Big Island women who gave birth in 2009-2011 reported that they smoked cigarettes in the three months before they became pregnant with their most recent baby.

**Smoking in the last trimester of pregnancy**

Approximately 11.6% of Big Island women who gave birth in 2009-2011 reported that they smoked cigarettes in the last trimester of their most recent pregnancy.

**Postpartum smoking**

About 17.5% of Big Island women who gave birth in 2009-2011 reported smoking cigarettes in the early postpartum period (2-9 months after delivery).

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**About the Data**

PRAMS is a self-reported survey of recent mothers conducted by mail with telephone follow-up. It is designed to monitor the health and experiences of women before, during, and just after pregnancy. Every year in Hawaii, about 2,400 women who deliver a live infant are randomly selected to participate.

**Suggested Citation**


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Hawaii Perinatal Smoking Quick Facts: Maui County (Maui, Molokai and Lanai)

Smoking before and during pregnancy is the single most preventable cause of illness and death among mothers and infants.¹

- **Women who smoke during pregnancy are more likely to have a miscarriage** than women who do not smoke.³
- **Smoking can cause problems with the placenta** (the source of the baby's food and oxygen during pregnancy).³ For example, the placenta can separate from the womb, causing bleeding, which is dangerous to the mother and baby.
- **Smoking during pregnancy can cause a baby to be born too early or to have low birth weight**.³ If this happens, it makes it more likely that the baby will be sick and have to stay in the hospital longer. Some babies may die.
- **Babies born to women who smoke are more likely to have certain birth defects** like a cleft lip or cleft palate.⁴
- **Smoking during and after pregnancy is a risk factor of Sudden Infant Death Syndrome (SIDS).⁵** SIDS refers to deaths among babies of no immediately obvious cause.
- **Smoking is associated with reduced fertility.²**
  - Quitting smoking either before or at an early stage of pregnancy can reduce health risks for mother and baby.⁶

There are approximately 1,900 live births each year to Maui County residents.⁷ The following facts are from the 2009-2011 Hawaii Pregnancy Risk Assessment Monitoring System (PRAMS) survey.

**Pre-pregnancy smoking**
More than one fifth (22.3%) of Maui County women who gave birth in 2009-2011 reported that they smoked cigarettes in the three months before they became pregnant with their most recent baby.

**Smoking in the last trimester of pregnancy**
Approximately 7.4% of Maui County women who gave birth in 2009-2011 reported that they smoked cigarettes in the last trimester of their most recent pregnancy.

**Postpartum smoking**
About 11.5% of Maui County women who gave birth in 2009-2011 reported smoking cigarettes in the early postpartum period (2-9 months after delivery).

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**About the Data**
PRAMS is a self-reported survey of recent mothers conducted by mail with telephone follow-up. It is designed to monitor the health and experiences of women before, during, and just after pregnancy. Every year in Hawaii, about 2,400 women who deliver a live infant are randomly selected to participate.

**Suggested Citation**

Hawaii Perinatal Smoking Quick Facts: Oahu

Smoking before and during pregnancy is the single most preventable cause of illness and death among mothers and infants.¹

- **Women who smoke during pregnancy are more likely to have a miscarriage** than women who do not smoke.³
- **Smoking can cause problems with the placenta** (the source of the baby's food and oxygen during pregnancy).³ For example, the placenta can separate from the womb, causing bleeding, which is dangerous to the mother and baby.
- **Smoking during pregnancy can cause a baby to be born too early or to have low birth weight.**³ If this happens, it makes it more likely that the baby will be sick and have to stay in the hospital longer. Some babies may die.
- **Babies born to women who smoke are more likely to have certain birth defects** like a cleft lip or cleft palate.⁴
- **Smoking during and after pregnancy is a risk factor of Sudden Infant Death Syndrome (SIDS).**⁵ SIDS refers to deaths among babies of no immediately obvious cause.
- **Smoking is associated with reduced fertility.**²
  - Quitting smoking either before or at an early stage of pregnancy can reduce health risks for mother and baby.⁶

There are approximately 13,800 live births each year to Oahu residents.⁷ The following facts are from the 2009-2011 Hawaii Pregnancy Risk Assessment Monitoring System (PRAMS) survey.

**Pre-pregnancy smoking**

Almost one out of five (19.4%) Oahu women who gave birth in 2009-2011 reported that they smoked cigarettes in the three months before they became pregnant with their most recent baby.

**Smoking in the last trimester of pregnancy**

Approximately 6.7% of Oahu women who gave birth in 2009-2011 reported that they smoked cigarettes in the last trimester of their most recent pregnancy.

**Postpartum smoking**

Slightly more than one out of every ten (10.8%) Oahu women who gave birth in 2009-2011 reported smoking cigarettes in the early postpartum period (2-9 months after delivery).

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**About the Data**

PRAMS is a self-reported survey of recent mothers conducted by mail with telephone follow-up. It is designed to monitor the health and experiences of women before, during, and just after pregnancy. Every year in Hawaii, about 2,400 women who deliver a live infant are randomly selected to participate.

**Suggested Citation**


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Hawaii Perinatal Smoking Quick Facts:
Kauai County

Smoking before and during pregnancy is the single most preventable cause of illness and death among mothers and infants.¹

- Women who smoke during pregnancy are more likely to have a miscarriage than women who do not smoke.³
- Smoking can cause problems with the placenta (the source of the baby's food and oxygen during pregnancy).³ For example, the placenta can separate from the womb, causing bleeding, which is dangerous to the mother and baby.
- Smoking during pregnancy can cause a baby to be born too early or to have low birth weight.³ If this happens, it makes it more likely that the baby will be sick and have to stay in the hospital longer. Some babies may die.
- Babies born to women who smoke are more likely to have certain birth defects like a cleft lip or cleft palate.⁴
- Smoking during and after pregnancy is a risk factor of Sudden Infant Death Syndrome (SIDS).⁵ SIDS refers to deaths among babies of no immediately obvious cause.
- Smoking is associated with reduced fertility.²

- Quitting smoking either before or at an early stage of pregnancy can reduce health risks for mother and baby.⁶

There are approximately 900 live births each year to Kauai County residents.⁷ The following facts are from the 2009-2011 Hawaii Pregnancy Risk Assessment Monitoring System (PRAMS) survey.

Pre-pregnancy smoking
Just under one fifth (19.1%) of Kauai women who gave birth in 2009-2011 reported that they smoked cigarettes in the three months before they became pregnant with their most recent baby.

Smoking in the last trimester of pregnancy
About 8.3% of Kauai women who gave birth in 2009-2011 reported that they smoked cigarettes in the last trimester of their most recent pregnancy.

Postpartum smoking
Approximately 11.3% of Kauai women who gave birth in 2009-2011 reported smoking cigarettes in the early postpartum period (2-9 months after delivery).

About the Data
PRAMS is a self-reported survey of recent mothers conducted by mail with telephone follow-up. It is designed to monitor the health and experiences of women before, during, and just after pregnancy. Every year in Hawaii, about 2,400 women who deliver a live infant are randomly selected to participate.

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