

# MatHER-ch.ch: Piloting the Maternal Experiences Survey (MES) questionnaire for surveying women's experiences of maternity care in Switzerland



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**Introduction:** Quality of care during pregnancy, childbirth and the postnatal period has both short- term and long- term effects on the health of women, their children and families<sup>1,2</sup>. Although epidemiological and biomedical data are collected in Switzerland<sup>3,4</sup>, little is known about women's experiences of their health and professional care during childbirth<sup>5,6</sup>. The aim of this pilot study was to develop a questionnaire for data collection in a German-speaking country and subsequently survey the experiences of women.

**Material and Methods:** Study in 2 stages;

1. Translation, review and adaption of the questionnaire of the „Maternal Experiences Surveys“ (Canada):  
327 questions on 26 topics during pregnancy, childbirth and postnatal period.
2. Pilot study in 3 cantons; Bern; Graubünden and Zug.
  - ▶ Ethical approval: obtained from 3 cantons.
  - ▶ Data collection: questionnaire survey and qualitative one-to-one interviews with healthy women 8 to 12 months after the birth of their child.
  - ▶ Descriptive data analysis : SPSS 18 for the quantitative data and thematic content analysis for the qualitative data.

**Table II.**  
Physical and psychological complications after childbirth in % (N=61)

Topic	First 3 months- small problems	First 3 months- big problems	Problems at 1 year after birth
Pain in pubic area and/or scar tissue	50.8%	16.4%	11.5%
Back pains	16.4%	11.5%	14.8%
Haemorrhoids	21.3%	6.6%	9.8%
Urine incontinence	29.5%	1.6%	9.8%
Heavy headaches	3.3%	1.6%	1.6%
Coital pains	36.1%	6.6%	11.5%
Edinburgh Postnatal Depression Score (≥ 10)	n/a	n/a	14.6%

**Results:** Sixty-one women between 20 and 45 years of age took part in the study; 65% reported about having their first, 25% their second and 8% their third child. In general, women were satisfied with the professional care provided during pregnancy. They emphasised however lacking psychosocial and informational support before and after childbirth. Therefore usually 2 to 3 additional professionals were consulted, often midwives or complementary therapists. Women themselves collected information from a variety of different sources; about 20% of this information was contradictory (Table I).

54% of the women experienced pregnancy as a strenuous time, 28% reported health problems.

During childbirth, a lack of continuity of care by a person known from pregnancy and high intervention rates in regard to epidural anaesthesia (48%), labour induction (33%) and augmentation (32%) were reported. Many women complained about being induced. The most effective sources of pain relief during labour were epidural anaesthesia (95%) and the presence of a known person (85%).

87% of the women stated that they had a positive birth experience; more than 50% however said that they wanted to change something about their birth experience. Ten to 20% of the women experienced physical and psychological complications up to 1 year after childbirth (Table II). The partner was the most important source of support at home during the postnatal period.

**Table I. Women's search for information and sources in pregnancy (Examples)**

Topics women searched for	Sufficient information received	Sources of information	Contradicting information (%)
Physical changes	93.4%	Books (23.2%) Internet (19.6%)	23.2%
Labour and birth	86.9%	Courses (21%) Books (18%)	21.1%
Effects of medical drugs in pregnancy	70%	Doctor (37.3%) Internet (16.9%)	29.7%
Effects of medical pain relief in labour	60.7%	Courses (28.2%) Midwife (23.0%)	18.7%
Symptoms pregnancy complications	78.7%	Doctor (23.2%) Books (20.9%)	16.3%

## Discussion and Conclusions:

- ▶ This study involved a small sample only and therefore its representativeness is limited.
- ▶ Some reported health problems caution warning and might relate to inadequate care provision.
- ▶ The results demonstrate important areas for optimising health care provision before, during and after childbirth.
- ▶ Routine national monitoring of the experiences of women up to a year after childbirth is advised.

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