What are Mothers’ Views of Maternity Care Quality, the Right to Make Birth Choices, and Engagement, Information and Decision Making in Maternity Care?  
A Listening to Mothers™ III Data Brief

The Listening to Mothers III™ surveys provided a timely opportunity to contribute to the myriad initiatives aimed at improving the quality of maternity care in the United States by better understanding women’s views of many related matters. For example, these initiatives could address the survey finding that many mothers do not recognize specific concerns that quality leaders are working to address. This data brief summarizes new results about women’s views of maternity care quality and engaging in their care. These nationally representative data are from an initial survey of 2400 women, 18-45, who had given birth to a single baby in U.S. hospitals from July 2011 through June 2012 and could participate in English, as well as a follow-up survey of 1072 of the initial participants carried out several months later. Childbirth Connection’s Listening to Mothers™ III surveys were conducted by Harris Interactive and funded by the W.K. Kellogg Foundation. Learn more and access the full initial (“Pregnancy and Birth”) and follow-up (“New Mothers Speak Out”) survey reports and related resources at http://bit.ly/LTM-III.

SUMMARY OF KEY FINDINGS

Overall, women believe that the quality of maternity care in the United States is quite good, and the quality of maternity care was rated more highly than the quality of our health care system in general.

- 36% of mothers rated the U.S. maternity care system as “excellent,” and nearly half (49%) rated it as “good.”
- 19% of the mothers rated the U.S. health care system as “excellent,” while 43% rated it as “good.”

Women rated patient safety and attentive, caring nursing care as the most important domains of quality. Mothers assessed how 8 different factors influenced their rating of maternity care quality. “Protects mothers and newborns from getting infections in the hospital,” “Has attentive, caring maternity nurses,” and “Has a low rate of medical mistakes,” were the factors rated as most important.

Many women felt that more, more expensive, and newer tests and treatments were markers of better quality of care. We asked mothers whether they agreed or disagreed with a series of statements concerning appropriate use of maternity care tests and treatments. They expressed considerable confidence that newer tests marked an improvement in care (74% agree), that their provider’s recommendations are reliable (82% agree), that more tests meant better quality care (63% agree) and that more expensive tests were better (52% agree).

Many women thought there were differences in the quality of maternity care at local hospitals:

- 35% thought there were big differences
- 37% thought there were small differences
- 15% felt there were no differences, and 13% were not sure
Some women are concerned about errors in the course of maternity or pediatric care leading to injury, especially during the hospital stay. Mothers were asked about their levels of concern with serious medical errors during prenatal visits, birth in the hospital, their own postpartum visit(s), or their baby’s office visits:

- 30% were somewhat or very concerned about an error during prenatal care
- 43% were somewhat or very concerned about an error in the hospital while giving birth
- 30% were somewhat or very concerned about an error during postpartum office visits
- 35% were somewhat or very concerned about an error during pediatric visits

Many women are open to considering birth center or home birth settings for a future birth. Among mothers who intended to have more children, two-thirds would consider a birth center that is separate from a hospital, and about one-fourth would consider a home birth. Mothers were asked about a woman’s right to give birth at home, and they strongly affirmed that right, with 66% thinking mothers should be able to choose a home birth and 11% disagreeing.

Mothers showed strong support for the right of a woman to choose a mode of birth. Mothers were asked to agree or disagree with statements about women’s right to choose a vaginal birth, a cesarean birth, and a vaginal birth after cesarean (VBAC) if they wished:

- 76% agreed that a women who has never had a cesarean should have the opportunity to have a vaginal birth; 9% disagreed
- 69% agreed that a women with a previous cesarean should have the opportunity to have a VBAC; 7% disagreed
- 40%, a smaller but still substantial proportion, agreed that a woman should have the right to choose an elective cesarean; 38% disagreed

Women want information from their providers about risks associated with maternity care tests, treatments, or procedures; the option of not intervening; and the cost of each option. We gave mothers four statements about information they would like to receive and their role in making decisions about their maternity care:

- 91% wanted their provider to tell them about risks associated with each birth option
- 88% would prefer their provider to always discuss the option of not receiving a test or treatment
- 86% want information on costs to themselves of each option
- 65% however, said they preferred “to rely on their maternity care provider to make the best decisions for me.”

In general, women feel activated and ready to participate in their maternity care. We asked women a series of questions that might indicate their level of activation:

- 89% agreed with the statement, “I was confident I could tell my maternity care provider concerns I had even when he or she did not ask.”
- 89% agreed that, “When all is said and done, I am the person who is in charge of my pregnancy”
- 86% expressed confidence they could take an active role in their maternity care.
- 87% expressed confidence they would know when they needed to check with their maternity care providers and when they could handle things themselves
- 86% said they had been able to stay with healthy lifestyle behaviors throughout pregnancy