

IMAgINE EURO survey for Mothers

Did you give birth during COVID-19 pandemic?

Help us improve the quality of maternity services in your country: take part at the international research study and tell us your experience of birth.

Your participation is voluntary: It will take approximately 15 minutes.

The survey is based on WHO Standards for improving maternal and newborn hospital care.

Attention: in case you have given birth more than once after 1st March 2020 and you wish to fill in the questionnaire for each birth, please fill in a different questionnaire for each birth you have had.

Unfortunately, the questionnaire is not adjusted to bereaved families. If you have experienced the heavy loss of a child before its birth, or during infancy, it is important that you receive support.

You can access resources here: <https://www.sands.org.uk/>

The survey is anonymously: we're committed to your privacy.

To understand more about the processing of data collected and what we do with the data, refer to our privacy policy available at the link below.

[Attachment: "IMAgINE Euro_Complete privacy policy.pdf"]

Providing consent at the following question I declare that I am 18 years old or older and I voluntarily decide to participate at the research study.

CONSENT TO PARTICIPATION:

I have read and understand the above consent form, and, by selecting "Yes" below, I declare I am 18 years old or older and I indicate my willingness to voluntarily take part in the research study.

- Yes
 No

By participating, your experience of giving birth may contribute for improving the quality of maternity services in your country.

It will take approximately 15 minutes.

S1. Did you give birth in a hospital after 1st March 2020 up to now?

- Yes
 No

Thank you for your interest in our research.

To participate is necessary to have given birth after 1st March 2020. If you know someone who did it, please share the link with her.

We wish you all the best.

S2. Where did you give birth?

- Albania
- Andorra
- Armenia
- Austria
- Azerbaijan
- Belarus
- Belgium
- Bosnia Herzegovina
- Bulgaria
- Croatia
- Cyprus
- Czech Republic
- Denmark
- Estonia
- Finland
- France
- Georgia
- Germany
- Greece
- Hungary
- Iceland
- Ireland
- Israel
- Italy
- Kazakhstan
- Kyrgyzstan
- Latvia
- Lithuania
- Luxembourg
- Macedonia
- Malta
- Monaco
- Montenegro
- Netherlands
- Norway
- Poland
- Portugal
- Republic of Moldova
- Romania
- Russian Federation
- San Marino
- Serbia
- Slovakia
- Slovenia
- Spain
- Sweden
- Switzerland
- Tajikistan
- Turkey
- Turkmenistan
- Ukraine
- UK
- Uzbekistan
- I have not found my Country

S2f. Please specify the department where you gave birth.

- 01-Ain
- 02-Aisne
- 03-Allier
- 04-Alpes-de-Haute-Provence
- 05-Hautes-Alpes
- 06-Alpes-Maritimes
- 07- Ardèche
- 08-Ardenes
- 09-Ariège
- 10-Aube
- 11-Aude
- 12-Aveyron
- 13-Bouches-du-Rhône
- 14-Calvados
- 15-Cantal
- 16-Charente
- 17-Charente-Maritime
- 18-Cher
- 19-Corrèze
- 2A-Corse-du-Sud
- 2B-Haute-Corse
- 21-Côte-d'Or
- 22-Côtes d'Armor
- 23-Creuse
- 24-Dordogne
- 25-Doubs
- 26-Drôme
- 27-Eure
- 28-Eure-et-Loir
- 29-Finistère
- 30-Gard
- 31-Haute-Garonne
- 32-Gers
- 33-Gironde
- 34-Hérault
- 35-Ille-et-Vilaine
- 36-Indre
- 37-Indre-et-Loire
- 38-Isère
- 39-Jura
- 40-Landes
- 41-Loir-et-Cher
- 42-Loire
- 43-Haute-Loire
- 44-Loire-Atlantique
- 45-Loiret
- 46-Lot
- 47-Lot-et-Garonne
- 48-Lozère
- 49-Maine-et-Loire
- 50-Manche
- 51-Marne
- 52-Haute-Marne
- 53-Mayenne
- 54-Meurthe-et-Moselle
- 55-Meuse
- 56-Morbihan
- 57-Moselle
- 58-Nièvre
- 59-Nord
- 60-Oise
- 61-Orne
- 62-Pas-de-Calais
- 63-Puy-de-Dôme
- 64-Pyrénées-Atlantiques
- 65-Hautes-Pyrénées
- 66-Pyrénées-Orientales
- 67-Bas-Rhin
- 68-Haut-Rhin

- 69-Rhône
- 70-Haute-Saône
- 71-Saône-et-Loire
- 72-Sarthe
- 73-Savoie
- 74-Haute-Savoie
- 75-Paris
- 76-Seine-Maritime
- 77-Seine-et-Marne
- 78-Yvelines
- 79-Deux-Sèvres
- 80-Somme
- 81-Tarn
- 82-Tarn-et-Garonne
- 83-Var
- 84-Vaucluse
- 85-Vendée
- 86-Vienne
- 87-Haute-Vienne
- 88-Vosges
- 89-Yonne
- 90-Territoire de Belfort
- 91-Essonnes
- 92-Hauts-de-Seine
- 93-Seine-St-Denis
- 94-Val-de-Marne
- 95-Val-D'Oise
- 971-Guadeloupe
- 972-Martinique
- 973-Guyane
- 974-La Réunion
- 975-Mayotte

S2Cyp. Please specify the department where you gave birth.

- Nicosia District - urban areas
- Nicosia District - rural areas
- Limassol District - urban areas
- Limassol District - rural areas
- Larnaca District- urban areas
- Larnaca district- rural areas
- Paphos District- urban areas
- Paphos District - rural areas
- Famagusta District- urban areas
- Famagusta District - rural areas
- Areas where the Government of the Republic of Cyprus does not exercise effective control

S2p. Please specify the region where you gave birth.

- Aveiro
- Beja
- Braga
- Bragança
- Castelo Branco
- Coimbra
- Corvo
- Évora
- Faial
- Faro
- Flores
- Graciosa
- Guarda
- Leiria
- Lisboa
- Madeira
- Pico
- Portalegre
- Porto
- Porto Santo
- Santa Maria
- Santarém
- São Jorge
- São Miguel
- Setúbal
- Terceira
- Viana do Castelo
- Vila Real
- Viseu

S2i. Please specify the region where you gave birth.

- Abruzzo
- Basilicata
- Calabria
- Campania
- Emilia-Romagna
- Friuli Venezia Giulia
- Lazio
- Liguria
- Lombardia
- Marche
- Molise
- Piemonte
- Puglia
- Sardegna
- Sicilia
- Toscana
- Trentino-Alto Adige
- Umbria
- Valle d'Aosta
- Veneto

S2sp. Specify the CCAA (autonomous community) where you gave birth.

- Andalusia
- Aragon
- Asturias
- Balearic Islands
- Canary
- Cantabria
- Castile-La Mancha
- Castile and Leon
- Catalonia
- Autonomous Community of Madrid
- Valencian Community
- Extremadura
- Galicia
- La Rioja
- Murcia
- Navarre
- Basque Country

S2uk. Please specify the Home Nation of the UK where you gave birth.

- England
- Northern Ireland
- Scotland
- Wales

S2r. Please specify the region where you gave birth.

- Regiunea Nord Est (județe: Suceava, Bacău, Botoșani, Iași, Neamț, Suceava și Vaslui).
- Regiunea Sud-Est (județe: Brăila, Buzău, Constanța, Galați, Tulcea și Vrancea).
- regiunea Sud - Muntenia (județe: Argeș, Călărași, Dâmbovița, Giurgiu, Ialomița, Prahova și Teleorman).
- Regiunea Sud-Vest Oltenia (județe: Dolj, Gorj, Mehedinți, Olt și Vâlcea).
- Regiunea Vest (județe: Arad, Caraș-Severin, Hunedoara și Timiș).
- Regiunea Nord-Vest (județe: Bihor, Bistrița-Năsăud, Cluj, Maramureș, Satu-Mare și Sălaj).
- Regiunea Centru (județe: Alba, Brașov, Covasna, Harghita, Mureș și Sibiu).
- Regiunea București - Ilfov

S2n. Please specify the region where you gave birth.

- Helse Nord
- Helse Midt
- Helse Vest
- Helse Sør-Øst

S2c. Please specify the region where you gave birth.

- Grad Zagreb
- Bjelovarsko-bilogorska županija
- Brodsko-posavska županija
- Dubrovačko-neretvanska županija
- Istarska županija
- Karlovačka županija
- Koprivničko-križevačka županija
- Krapinsko-zagorska županija
- Ličko-senjska županija
- Međimurska županija
- Osječko-baranjska županija
- Požeško-slavonska županija
- Primorsko-goranska županija
- Sisačko-moslavačka županija
- Splitsko-dalmatinska županija
- Šibensko-kninska županija
- Varaždinska županija
- Virovitičko-podravska županija
- Vukovarsko-srijemska županija
- Zadarska županija
- Zagrebačka županija
- Izvan Hrvatske
- Nešto drugo

S2b. Please specify the region where you gave birth.

- Tuzla Canton
- Sarajevo Canton
- Zenica-Doboj Canton
- Una-Sana Canton
- Central Bosnia Canton
- Herzegovina-Neretva Canton
- West Herzegovina Canton
- Canton 10
- Posavina Canton
- Bosnian-Podrinje Canton
- Banja Luka region
- Prijedor Region
- Doboj Region
- Bijeljina Region
- East Sarajevo Region
- Trebinje region
- Brcko District

S2g. Please specify the region where you gave birth.

- Baden-Württemberg
- Bavaria
- Berlin
- Brandenburg
- Bremen
- Hamburg
- Hesse
- Mecklenburg-Western Pomerania
- Lower Saxony
- North Rhine-Westphalia
- Rhineland-Palatinate
- Saarland
- Saxony
- Saxony-Anhalt
- Schleswig-Holstein
- Thuringia

S3. The research is exclusive to the WHO European region, which includes 53 countries, covering a vast geographical region from the Atlantic to the Pacific oceans.
If you can't find your country in the list, where are you from? Please, specify.

Section A - Hospital reception

A1. When you arrived at the hospital, did you feel you received attention within an appropriate amount of time (triage and waiting time)?

- Yes
- Just in part
- No

Section B - Labour

B1. Did healthcare providers ask your permission before performing vaginal examinations on you?

- Yes, always
- Sometimes
- No, never
- I never had vaginal examinations

B2. Did you experience active labour?

- Yes
 - No
 - I don't know
- (Active labour is the phase of labour in which you felt strong, regular and painful contractions and the dilatation was around 4cm or greater)

B3. Once strong and regular contractions began, did health care providers allow you to move freely or were you asked to stay in bed?

- Yes, I was allowed to move (e.g. get out of the bed, to walk, exercise, etc.)
- In part, only sometimes they allowed me to move
- No, they asked me to stay in the bed all the time, lying on my back or in the bed with variations to switch on my left/right thigh

B4. During labour and delivery, did you ask for and/or receive some kind of pain relief?

- Yes, I requested them and they were given to me
- Yes, I requested them but I was denied
- No, I didn't ask for them but they were offered by the healthcare providers
- No, I didn't ask for them and they weren't offered (Including pharmacological options such as epidural or other medicines, and non-pharmacological options such as massages, warm bath)

Section C - Childbirth

- C1. How was your baby born?
- Spontaneous vaginal delivery
 - Instrumental vaginal delivery (by vacuum extraction or forceps)
 - Emergency caesarean section during labour
 - Emergency caesarean section before going into labour
 - Planned or elective caesarean section before going into labour
-
- C2. During the last phase of your labour, when the baby moves down through the vagina and is going to be born, did you feel free to choose your position, to find the most comfortable one for you?
- Yes
 - Sometimes
 - No
-
- C3. During your delivery, did health care providers make a cut/surgical incision in the perineum, known as an episiotomy?
- Yes
 - No
-
- C2. Did healthcare providers expressly request your consent to use one or both of these instruments (vacuum extraction and/or forceps)?
- Yes
 - No
- (Verbal consent is also fine)
-
- C3. And to facilitate childbirth of your baby, did health care providers exert pressure on your belly* with hands/arms during labour to help you give birth?
- Yes
 - No
- (*this manoeuvre is called "Kristeller")
-
- C2. As soon as your child was born (while still in the operating theatre), did they give you information regarding his/her healthcare?
- Yes
 - No
-
- C3. After caesarean section, do you feel you received adequate pain relief?
- Yes
 - No

Section D - After birth

D1. In the first hour after giving birth, did you have the opportunity to have skin-to-skin contact with your baby?

- Yes
 No
 I didn't have the possibility to do it due to health-care problems (e.g. I had a post-partum hemorrhage, my baby was admitted to the NICU*, etc.)
 (*Neonatal Intensive Care Unit)

D2. In the first hour after giving birth, did you try to breastfeed your baby?

- Yes
 No
 I didn't have the possibility to do it due to health-care problems (e.g. I had a post-partum hemorrhage, my baby was admitted to the NICU*, etc.)
 (*Neonatal Intensive Care Unit)

D3. Were you appropriately supported by health care providers to breastfeed your baby?

- Yes
 No
 (e.g., they helped you to initiate and establish breastfeeding and/or explained how to manage common initial breastfeeding difficulties, etc.)

D4. When they brought you to the ward, was your baby

- Always with me in the room, also during the night (rooming in)
 Mostly with me in the room
 Mostly at the nursery*
 Always at the nursery
 Hospitalized in NICU (Neonatal Intensive Care Unit) or SCUBU (Special Care Baby Unit)
 (*The nursery is the hospital department usually dedicated to healthy newborns)

D5. While you were at the hospital after birth, were you allowed to stay with your baby as long as you wished?

- Yes
 No

D6. Did healthcare providers inform you exhaustively about possible clinical signs of alarm for you?

- Yes
 No
 (e.g., excessive vaginal bleeding, difficulty urinating, difficulty breathing)

D7. Did healthcare providers inform you exhaustively about possible clinical signs of alarm for your child?

- Yes
 No
 (e.g., breathing difficulties, excessive sweat, tremors, neonatal jaundice)

D8. How were you feeding your baby when you were discharged from the hospital

- Exclusively breastfeeding
 Exclusively with infant formula by my personal choice
 Exclusively with infant formula as prescribed by healthcare providers
 A mix between breastfeeding and infant formula by my personal choice
 A mix between breastfeeding and infant formula as prescribed by healthcare providers

Section E - Birth rights

E1. Did you feel that you received immediate attention from health care providers to be assisted when you needed?

- Yes, always/nearly always
 Sometimes
 No, never/almost never

E2. Did healthcare providers establish effective and clear communication with you?

- Yes, always/nearly always
 Sometimes
 No, never/almost never
 (e.g., did they speak clearly so that you understood/make you feel comfortable in the dialogue and in asking questions/checking that you understood)

E3. Did healthcare providers fully involve you in the choices of care/treatment that you received?

- Yes, always/nearly always
 Sometimes
 No, never/almost never
 (e.g., did they give you clear explanations, respect your autonomy, ask for your preferences or opinions)

E4. Was your companion of choice allowed to stay with you for as long as you felt the need?

- Yes, always/nearly always
 Sometimes
 No, never/almost never

E5. Did you feel treated with dignity?

- Yes, always/nearly always
 Sometimes
 No, never/almost never

E6. During childbirth, did you feel emotionally supported?

- Yes, always/nearly always
 Sometimes
 No, never/almost never
 (e.g., did healthcare providers show attention and empathy for your emotional state and offer support to make you feel better)

E7. Did you feel that your privacy was protected by healthcare providers?

- Yes, always/nearly always
 Sometimes
 No, never/almost never
 (e.g., at least curtains were used or you were covered up during examinations, did they discuss private information in a way that others could not hear)

E8. Did you suffer any forms of physical (e.g. have you been touched improperly and / or without asking your permission, have you been pushed, beaten, slapped, pinched, physically restrained or gagged), verbal (e.g. have you been shouted at, insulted or talked rudely), or emotional abuse (e.g. have you been neglected, mocked or forgotten by healthcare providers)?

- Yes, always/nearly always
 Sometimes
 No, never

E8a. Please, specify what kind of abuse did you suffer of:

- Physical abuse (e.g. have you been touched improperly and/or without asking your permission, have you been pushed, beaten, slapped, pinched, physically restrained or gagged)
- Verbal abuse (e.g. have you been shouted at, insulted or talked rudely)
- Emotional abuse (e.g. have you been neglected, mocked or forgotten by healthcare providers)
- Other
(Choose all that apply)

E8b. Please, specify

E9. During your hospitalization, did you make any kind of informal payment to access better quality services?

- Yes, always/ nearly always
- Sometimes
- No, never/almost never
(e.g., money other than official costs, bribes or gifts)

Regarding your general satisfaction with the hospital where you gave birth, please rank the items below:

	Good/Excellent	Sufficient	Insufficient/Very bad
F1. Comfort and general equipment of the rooms for you and your baby	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F2. Number of women that you had to share the room with during recovery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F3. Appropriate and regular cleaning of rooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F4. Appropriate number of bathrooms, adequately located, furnished and cleaned	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F5. Visiting hours for partner and/or relatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F6. Adequate number of healthcare providers considering the workload	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F7. Professionalism of healthcare providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

F8. Taking into account all the previous considerations that you made, how would you evaluate your experience in the hospital when you gave birth?

- Very positive
 Positive
 Negative
 Very negative

Section G - COVID-19 pandemic

G1. Due to the COVID-19 pandemic, did you have difficulties attending routine clinical checks during pregnancy?	<input type="radio"/> Yes, always/nearly always <input type="radio"/> Sometimes <input type="radio"/> No, never/almost never (e.g., antenatal care visits, ultrasound checks, etc.)
G2. Did you face any kind of barrier to access the facility where you were assisted during pregnancy?	<input type="radio"/> Yes, always/nearly always <input type="radio"/> Sometimes <input type="radio"/> No, never/almost never (e.g., logistic, financial, due to lock-down, lack of childcare for children at home etc.)
G3. Were there adequate infographics (i.e., posters, signs, images) present in the hospital in which you gave birth to indicate the path to follow or the rules to follow to reduce the risk of infection as much as possible?	<input type="radio"/> Yes, they were present and adequate <input type="radio"/> Yes, they were present but in part adequate <input type="radio"/> No
G4. Do you think that the divisions between wards and common spaces were adequately reorganized to reduce the risk of COVID-19 infection as much as possible?	<input type="radio"/> Yes, effectively <input type="radio"/> Yes, but in part adequate <input type="radio"/> No
G5. Do you think the hospital rooms were properly reorganized to reduce the risk of COVID-19 infection as much as possible?	<input type="radio"/> Yes, adequately <input type="radio"/> Yes, but in part adequate <input type="radio"/> No (e.g., reducing the number of hospitalized mothers in each room)
G6. Did the facility where you gave birth have at least one functioning and easily accessible hand-washing station (near or inside your room) adequately supplied with water and soap or disinfectant alcohol solution?	<input type="radio"/> Yes, adequately <input type="radio"/> Yes, but in part adequate <input type="radio"/> No
G7. Were health care providers always equipped with adequate personal protective equipment (masks, gloves) at the time of the visit and did they use them correctly?	<input type="radio"/> Yes, always/nearly always <input type="radio"/> Sometimes <input type="radio"/> No, never/almost never
G8. Were health care providers always present in sufficient numbers to guarantee adequate assistance despite the COVID-19 pandemic?	<input type="radio"/> Yes, always/nearly always <input type="radio"/> Sometimes <input type="radio"/> No, never/almost never
G9. Do you think that health care providers were able to use adequate communication methods to reduce as much as possible the stress related to new procedures required by the COVID-19 pandemic?	<input type="radio"/> Yes, always/nearly always <input type="radio"/> Sometimes <input type="radio"/> No, never/almost never
G10. In your experience, did you feel that you had any limitations in the quality of hospital care received due to COVID-19 pandemic?	<input type="radio"/> Yes, always/nearly always <input type="radio"/> Sometimes <input type="radio"/> No, never/almost never
G11. If so, how did these limitations affect your satisfaction?	<input type="radio"/> Improved it a lot <input type="radio"/> Improved it a little <input type="radio"/> Made it a little worse <input type="radio"/> Made it much worse <input type="radio"/> Did not affect my satisfaction

Section H-Socio demographic data

H1. When did you give birth?

H2. Is this your first-born child?

- Yes
 No

H3. Did you give birth in the same country where you were born?

- Yes
 No

H4. What is your age?

- 18-24
 25-30
 31-35
 36-39
 >=40
(Please select a range)

H5. What is the highest level of education you have attained?

- None
 Elementary school
 Junior high school
 High school
 University degree
 Post-graduate degree/master/doctorate or higher

H5a. Who helped you to answer this questionnaire?

- My partner
 A family member or friend
 A healthcare provider
 Other

H6. Have you experienced the following situations during your pregnancy, birth or postpartum (please, for postpartum consider only the period after birth when you were hospitalized)?

- I was tested for COVID-19 and the result was positive
 I was tested for COVID-19 and the result was negative
 I was tested for COVID-19 but I do not know the result yet or the result was inconclusive
 Although I had respiratory symptoms, I was not tested for COVID-19 but I was clinically managed as a positive case
 My baby was admitted to NICU (Neonatal Intensive Care Unit)
 I was admitted to ICU (Intensive Care Unit)
 I had a stillbirth
 I had twins (or other multiple birth)
 I was sent from one hospital to another during labour due to lack of beds or complications
 Other, specify
 No, I did not experience any of those situations.
(Choose all that apply)

H6a. Please, specify

H7. In what type of hospital did you give birth?

- Public hospital
 Private hospital/clinic

H7a. Who made the payment?

- By public insurance/State or other non-private insurance (e.g. insurance covered by the company where you work)
 - By my private insurance
 - By me (or my family) without insurance
- (Choose all that apply)

H8. Which kinds of health professionals directly assisted your birth?

- Midwife
 - Nurse
 - A student (i.g before graduation)
 - Obstetrics registrar/medical resident (under post-graduation training)
 - Obstetrics and gynaecology doctor
 - I don't know (healthcare providers did not introduce themselves)
 - Other
- (Choose all that apply)

H8a. What kind of student?

- Midwife student
- Nurse Student
- Medical student

H9. How did you hear about this study?
(Choose all that apply)

- Social media platform you engage in (Facebook/Instagram)
- Internet search (e.g., Google)
- Received email from friend/family
- Word of mouth
- Press (e.g., radio, print media, TV)
- Other

H10. Do you have any suggestions to improve quality of care provided at the facility where you gave birth or to improve this questionnaire?