

Women's Participation in Decision-Making in Maternity care

A Qualitative Exploration of Clients' Health Literacy Skills and Needs for Support

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Aim

- ⇒ To explore health literacy skills and needs for support regarding shared decision-making among clients in maternity care

Conclusions

- ⇒ Women with various reading, understanding and calculating levels appeared to be highly engaged in the decision-making process.
- ⇒ Not all women were able to find reliable information, understand probabilistic information, construct preferences based on benefit/harm information and to cope with changing circumstances and uncertainties.
- ⇒ Maternity care professionals could further support clients by guiding them towards reliable information. Preparing women for consultations and supporting them in a timely manner to understand benefit/harm information seem important to facilitate participation in decision-making.

Table 1. Framework for decision-making stages and health literacy skills in maternity care.

Stage 1: Understanding pregnancy stages and the procedures of labour	Stage 2: Understanding the consequences: risks, limitations, benefits and uncertainties	Stage 3: Identifying preferences and combining utilities with probabilities	Stage 4: Participate in decision-making with maternity care professional	Stage 5: Make a decision
a) Find sources of information about pregnancy and labour	a) Understand different harms and benefits of options	a) Anticipate on health states during labour or after birth	a) Understand that involvement and choice is possible	a) Self-efficacy
b) Select and appraise (online) information - Decide when to stop looking for information	b) Understand the likelihood of these occurring to mother and/or child - carry out basic calculations	b) Identify preferences for different outcomes	b) Articulate and discuss preference to maternity care professional	b) Taking responsibility for mother's and child's health
c) Interpret written or spoken pregnancy-related terminology	c) Interpret probabilities of harms occurring to mother and/or child	c) Combine preferences with probabilistic information	c) Ask questions to maternity care professional	c) Cope with practical barriers of options and costs
	d) Compare options against each other	d) Share and communicate values to: - Significant others (e.g. friends, mother) - Peers - Partner		
		e) Use own knowledge and previous pregnancy and birth experiences		

"Yeah, it's like you're, I don't know, trying to read the budget or something, really hard."

"Yes, I'm really pleased about that too, also because indeed it's my own body and my baby, who of course might be absorbing medication too. So I'm really glad to have that freedom of choice and that I could make that decision."

"That means thoroughly weighing up all sorts of things in advance, whilst of course I still haven't got a clue how things are going to work out. So to me that's very, very difficult."

Methods

- ⇒ In-depth interviews were held among women in Dutch maternity care who scored low (n= 10) and high (n= 13) on basic health literacy screening test(s).
- ⇒ Thematic analysis was conducted using the concepts of McCaffery's framework for decision-making stages and health literacy skills.

Results

- ⇒ **Stage 1:** Clients need support or advice in selecting adequate information, as well as in understanding the key messages communicated online.
- ⇒ **Stage 2:** Most women preferred to receive benefit/harm information from their professional rather than online.
- ⇒ **Stage 3:** Women seemed to construct their preferences based on pre-existing knowledge gained from previous pregnancy and labor experiences.
- ⇒ **Stage 4:** Women expressed that they found it important to be involved in decisions to create a sense of control over their pregnancy and labor.
- ⇒ **Stage 5:** Women mentioned being motivated to be involved in decisions, because of the perceived importance of taking responsibility for their own and child's health.
- ⇒ Women experienced difficulties coping with uncertainty and changing (medical) circumstances, which in turn led to emotional reactions.

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