Spotlights



November 2023

Mental health outcomes following mistreatment during childbirth: Utah. 2020

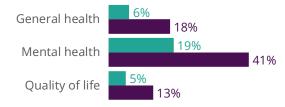
Traumatic childbirth experiences have the potential to impact the health and well-being of both mother and baby. Despite recent national attention on the issue, data on the prevalence and long-term effects of mistreatment during maternity care is still lacking. The Postpartum Assessment of Health (PAHS) survey is a collaboration between Columbia University and seven city and state health departments, including Utah. The survey asks participants about their well-being in the year following childbirth.

According to the PAHS survey, 11% of Utah participants reported they were mistreated during labor and delivery. The most common types of mistreatment included being ignored, shouted at, or scolded by a healthcare provider, having their physical privacy violated, and having providers threaten to withhold treatment or force them to accept treatment they did not want. When asked to rate their mental health since giving birth, 41% of participants who experienced mistreatment selected "poor" or "fair" compared to 19% of those who did not experience mistreatment. Chronic health issues, including anxiety, depression, and sexual dysfunction, were also more common (see figure). Additionally, 52% of those who experienced mistreatment reported delaying or not receiving necessary healthcare compared to 24% of those who did not experience mistreatment.

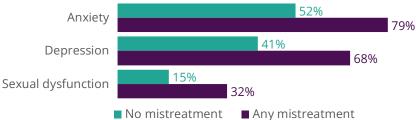
Percentage of women reporting "poor" or "fair" health and other health issues since giving birth by mistreatment experience, Utah, 2020

Figure 1. Women who experienced mistreatment were more likely to report "poor" or "fair" health as well as anxiety, depression, and sexual dysfunction since giving birth than women with no mistreatment.









Source: Utah results from the Postpartum Assessent of Health Survey (PAHS), conducted by Columbia University

This evaluation looked at births that occurred in 2020 during the onset of the COVID-19 pandemic. In addition to increased stress on the healthcare system, some survey participants may have been denied access to their preferred support people during delivery. Further research is necessary to determine if the results shown here are unique to this time period and the impact of the COVID-19 pandemic on rates of mistreatment.

Recommended strategies to combat mistreatment during birth include training healthcare staff to recognize unconscious bias and stigma, and public awareness campaigns to educate providers and families on how to advocate for respectful care.² The Utah Women and Newborns Quality Collaborative is working on respectful maternity care with two pilot hospital sites. To learn more about this project or how you can help with respectful maternity care, contact UWNQC@utah.gov.

- 1. Vedam, Saraswathi, et al. "The Giving Voice to Mothers Study: Inequity and Mistreatment during Pregnancy and Childbirth in the United States." Reproductive Health, vol. 16, no. 1, June 2019, p. 77, https://doi.org/10.1186/s12978-019-0729-2.
- 2. One in 5 Women Reported Mistreatment While Receiving Maternity Care. Centers for Disease Control, August 2023, https://www.cdc.gov/media/releases/2023/ s0822-vs-maternity-mistreatment.html.
- * "Data is from the Postpartum Assessment of Health Survey (PAHS) conducted by Columbia University." The previous name of this study, "the Postpartum Assessment of Women Study – PAWS", will be replaced by "the Postpartum Assessment of Health Survey (PAHS)" following the signing of this agreement.