Informed choice in maternity care: an evaluation of evidence based leaflets

NHS Centre for Reviews and Dissemination

Record Status
This is a bibliographic record of a published health technology assessment from a member of INAHTA. No evaluation of the quality of this assessment has been made for the HTA database.

Citation

Authors' objectives
This publication reports the results of a large scale evaluation of a series of patient information leaflets used to promote informed choice during pregnancy and childbirth.

Authors' conclusions
The leaflets, originally produced by the Midwives Information and Resource Service (MIDIRS) together with the NHS CRD, have been in use throughout the UK since 1996, and this study was commissioned to assess their effectiveness in promoting informed choice. The research found that whilst nearly all of the women who received each leaflet reported that it was helpful or very helpful, there was no evidence that the leaflets were effective in increasing the proportion of women who reported having exercised informed choice.

The report outlines several reasons why the leaflets did not promote informed decision making including:

- The lack of a coherent strategy for leaflet distribution or for the promotion of informed decision making.
- A number of working practices hindered the distribution of leaflets and rendered them invisible to most women.
- 'Informed choice' was simply equated with having the leaflets.
- Different, and often incompatible understandings of the concept of informed choice were articulated by midwives, childbearing women and obstetricians.

In all the units researched, midwives articulated a strong commitment to giving information but opportunities were rarely maximised. Organisational imperatives within the maternity care system restricted opportunities for decision making and usually resulted in women's compliance with 'right' choices that mirrored normal patterns of care. These assumptions had significant implications for decision making, either masking opportunities for choice or making it difficult for women to challenge practice norms.

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