



**Maternal Health Network
San Bernardino County**

**Consumer Survey Results
2019**

Acknowledgements

The Maternal Health Network of San Bernardino County understands the importance of capturing the consumer voice when assessing the maternal health system. The Maternal Health Network chose to create and distribute a consumer survey to gain insight into the experience of consumers within the maternal health system of San Bernardino County, which will help inform the strategic plan of the Maternal Health Network.

Members of the Maternal Health Network were essential to the engagement of consumers in San Bernardino County through the distribution and collection of a consumer survey. Specific members of the Maternal Health Network and organizations in San Bernardino County we would like to thank include:

- ❖ First 5 San Bernardino
- ❖ Leadership Team Members of the Maternal Health Network
- ❖ Inland Empire Breastfeeding Coalition
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- ❖ San Bernardino Department of Public Health
- ❖ San Bernardino County Sherriff's Department
- ❖ Workgroup Members of the Maternal Health Network



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Introduction and Background

The Maternal Health Network (MHN, herein referred to as “Network”) of San Bernardino County is a collective of various service providers that support the maternal health system throughout San Bernardino County.

Membership includes:

- Prenatal & Post-Partum Primary Care Providers
- Community Clinics & Birthing Hospitals
- Oral Health Providers & Advocates
- San Bernardino County Public Health
- Midwives & Doulas
- Health Plans
- Law Enforcement & Detentions
- School-based Services
- Family Resource & Support Service Organizations
- Breastfeeding Support Services & Coalitions
- Behavioral Health & Substance Abuse Providers

The Network has embarked upon a strategic planning process to establish a comprehensive, coordinated and responsive support system for families who are planning to become pregnant, those that are pregnant and those that have recently delivered a child. As part of this process, the Network commissioned an asset and gaps analysis to understand and document the broad landscape of existing maternal health components within the County.

Areas of exploration included:



Maternal Health Status

To understand the maternal health status of families in San Bernardino County, maternal health indicators and other data were gathered.



Maternal Health Resources

To understand what supports are available throughout San Bernardino County related to maternal health, resources were mapped according to their type and location.



Systems Issues

To understand systems issues associated with maternal health services, stakeholders were engaged through community gatherings as well as at through provider discussions.



Consumer Experience

To understand the experience of consumers engaged in the maternal health system, surveys were issued to families who were either pregnant and those that had recently delivered a child.

This report is a summary of the information collected through surveys completed by consumers of maternal health services. It will be used in association with a variety of other data sets (both quantitative and qualitative) to finalize the focus of the Maternal Health Network over the next 5 year period of time.

Methodology

Network workgroups approved a 17-question survey tool which can be found in the appendix. Consumer surveys were distributed through the Network, offering respondents the option of completing the tool either on-line through Survey Monkey, or in hard copy form and sent back to SEI for data entry and analysis. Surveys were made available in English and Spanish.

Surveys were collected over a period of 21 days (June 18– July 8, 2019). A total of 154 surveys were completed by consumers from across the county. [The number of responses varies for each question as not all respondents answered every question on the survey. The number of respondents for each question, represented as the ‘n’ value, is listed in the title of each graph.]

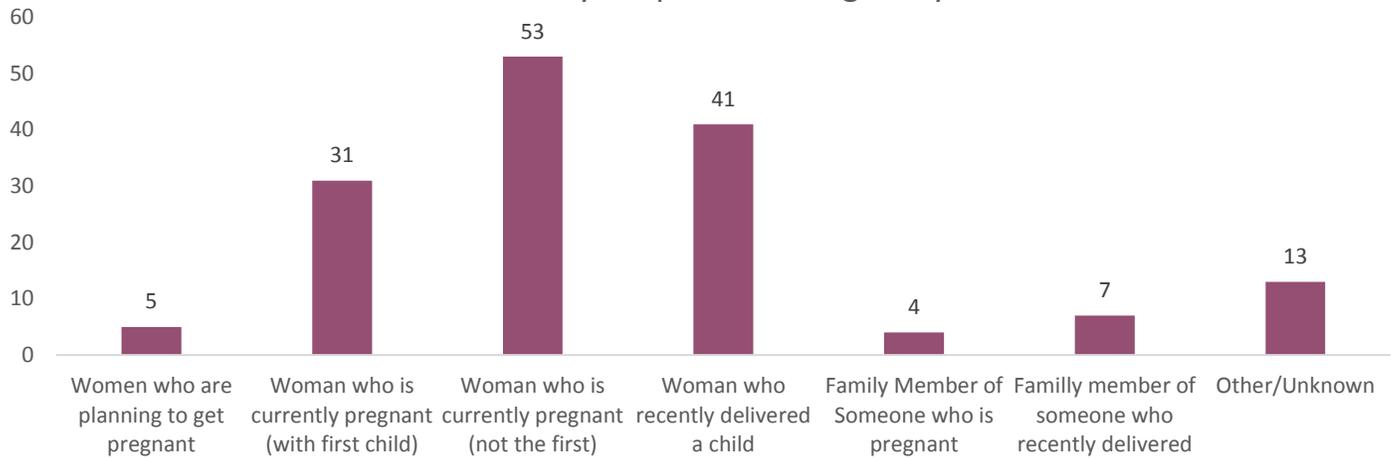


Survey Respondent Profile

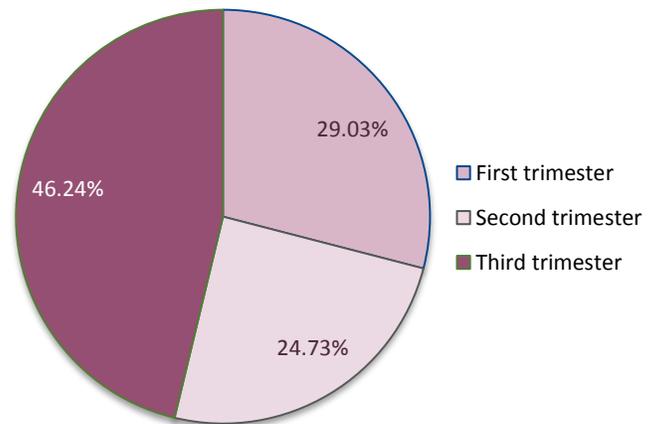
Pregnancy Related Profile

There were a total of 154 surveys collected from consumers across San Bernardino County. The survey tool asked respondents to identify a category that best described their profile/affiliation. The figure below demonstrates that the majority of the respondents were women who identified as pregnant at the time of survey completion (84 of 154 or 54.5%), closely followed by women who had delivered a child within 12 months prior to survey completion (41 of 154 or 26.62%). Of the 154 respondents, 151 were female and 3 were male.

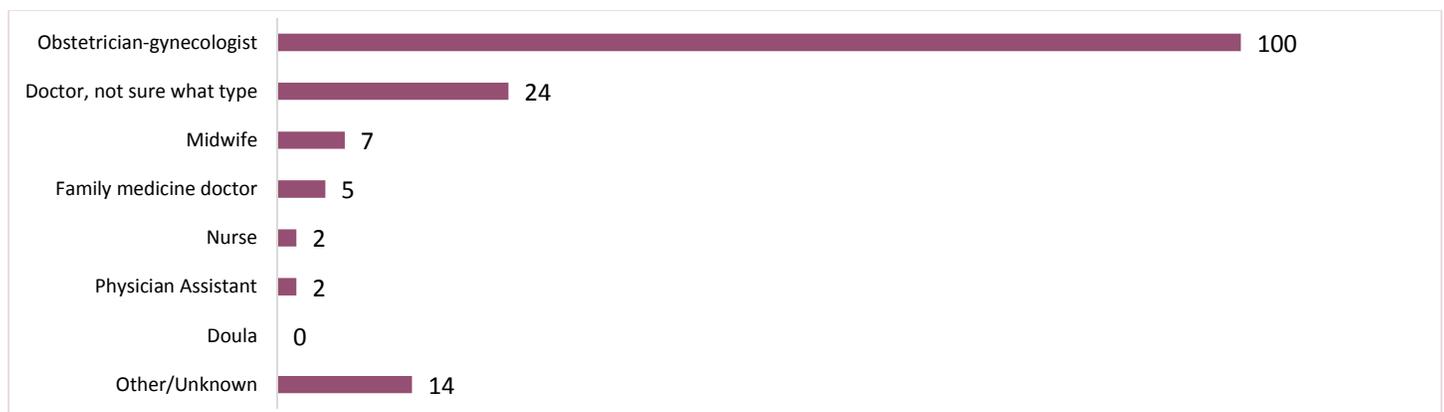
Survey Respondent Pregnancy Profile



Of those that indicated they were pregnant at the time of survey completion, the majority were in their third trimester of pregnancy.



In addition, respondents were asked to identify the type of maternity care provider that they utilized the most. Survey respondents most often utilized an Obstetrician or Gynecologist as demonstrated in the bar chart below.

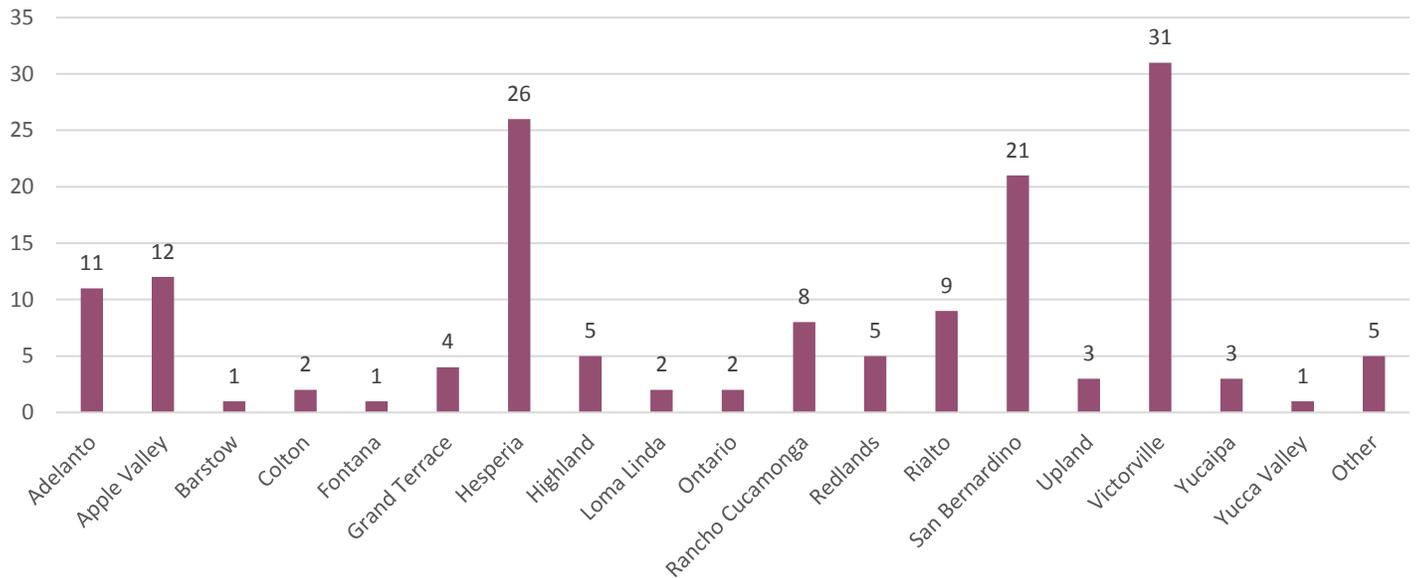




Geographical Representation

Respondents were asked to identify the city/town within San Bernardino County that they live in. The majority of respondents live in Victorville (31 of 154 or 20%) and Hesperia (26 of 154 or 17%). There were six cities/towns with no survey respondents. Those were Big Bear Lake, Chino, Chino Hills, Montclair, Needles, and Twentynine Palms.

Survey Respondent Representation by Geographical Location

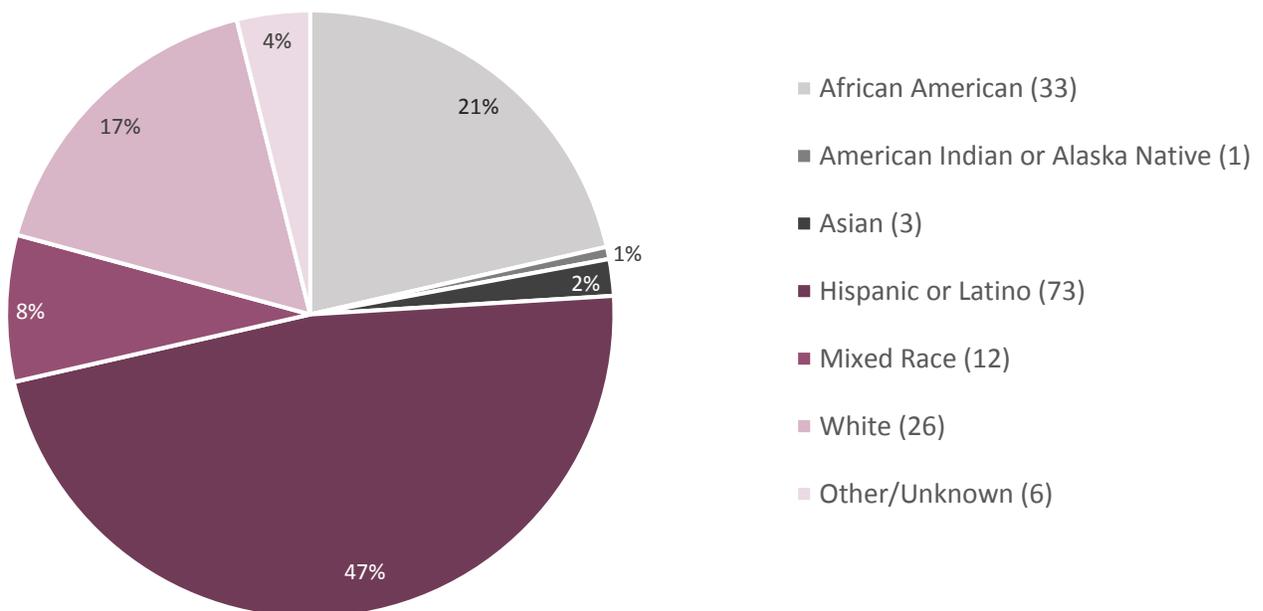


Demographic Profile

Race

Respondents were asked to identify their race/ethnicity. The majority of respondents were Hispanic or Latino (73 of 154 or 47%) followed by African Americans (33 of 154 or 21%).

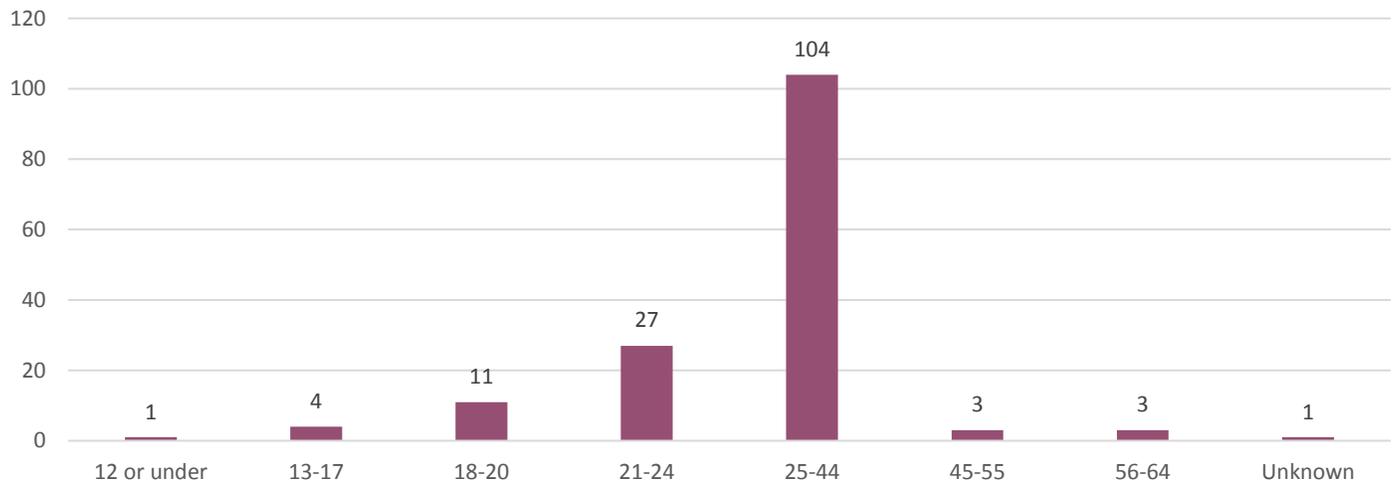
Survey Respondent Race/Ethnicity





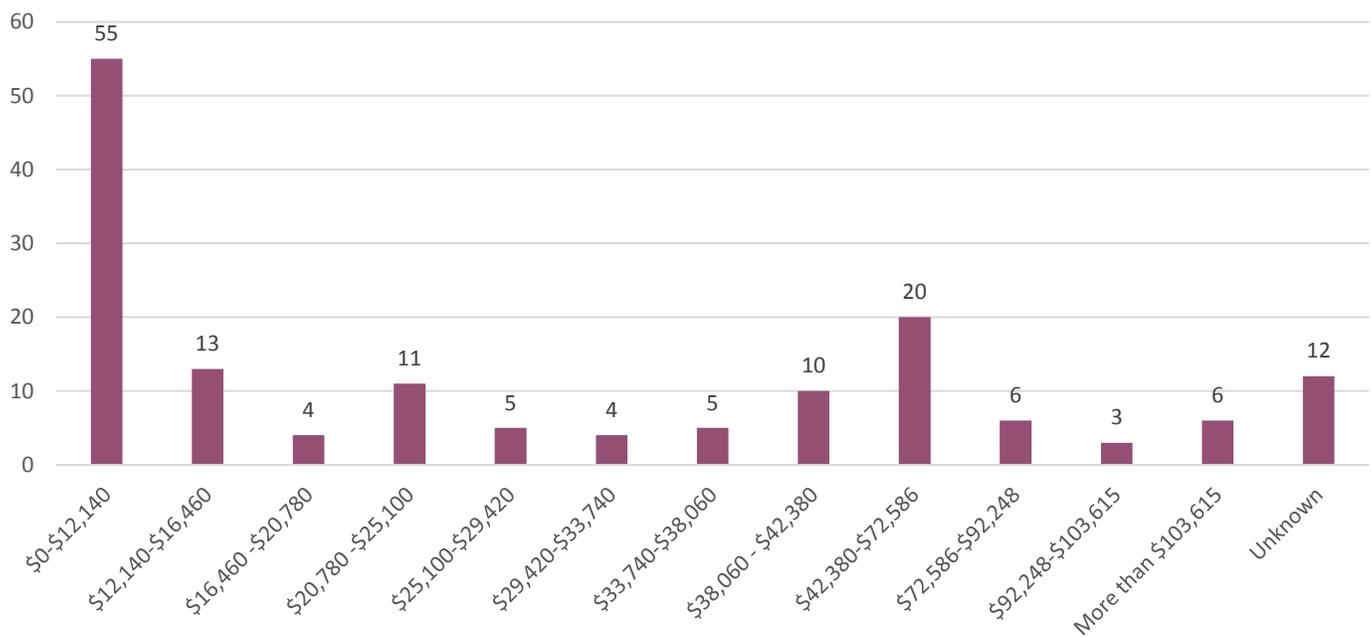
Age
Respondents were asked to identify their age. The majority of survey respondents were between the ages of 25-44 (104 of 154 or 68%). There were no survey respondents who were 65 years of age or older.

Survey Respondent Age Profile



Socio-Economic Status
Respondents were asked to identify their household income. Of those that answered the question, most indicated having an annual income between \$0 - \$12,140 per year.

Survey Respondent Socio-Economic Status





Findings

Services Accessed & Satisfaction with Services

Respondents were asked to identify, among a list of maternal health services and supports, those that they had accessed. The table below identifies the percentage of respondents that accessed services before, during and after their pregnancy. Respondents were also asked to identify their satisfaction with the services that they had accessed. The table below indicates the responses ranging from highly satisfied to highly dissatisfied.

Pre-Pregnancy Services		Highly Satisfied	Satisfied	Not Satisfied	Highly Dissatisfied
35% of survey respondents	Accessed family planning/birth control services. (n=54)	45%	43%	10%	2%
	Consumer satisfaction with these services (n=49)	(n=22)	(n=21)	(n=5)	(n=1)
Pregnancy Related Services		Highly Satisfied	Satisfied	Not Satisfied	Highly Dissatisfied
68% of survey respondents	Received prenatal care through a doctor . (n=105)	46%	44%	5%	5%
	Consumer satisfaction with these services (n=96)	(n=44)	(n=42)	(n=5)	(n=5)
13% of survey respondents	Received prenatal care through a midwife . (n=20)	68%	16%	5%	11%
	Consumer satisfaction with these services (n=19)	(n=13)	(n=3)	(n=1)	(n=2)
6% of survey respondents	Received prenatal care through a doula . (n=10)	78%	11%	0%	11%
	Consumer satisfaction with these services (n=9)	(n=7)	(n=1)	(n=0)	(n=1)
25% of survey respondents	Accessed oral health/dental care during pregnancy. (n=39)	57%	40%	3%	0%
	Consumer satisfaction with these services (n=33)	(n=19)	(n=13)	(n=1)	(n=0)
13% of survey respondents	Accessed nutrition services during pregnancy. (n=20)	31%	56%	0%	13%
	Consumer Satisfaction with these services (n=16)	(n=5)	(n=9)	(n=0)	(n=2)
23% of survey respondents	Accessed Lamaze/childbirth education services. (n=35)	42%	42%	13%	3%
	Consumer Satisfaction with these services (n=31)	(n=13)	(n=13)	(n=4)	(n=1)
12% of survey respondents	Accessed pregnancy support group services. (n=18)	50%	31%	6%	13%
	Consumer satisfaction with these services (n=16)	(n=8)	(n=5)	(n=1)	(n=2)
6% of survey respondents	Accessed home visiting services during pregnancy. (n=10)	70%	20%	0%	10%
	Consumer satisfaction with these services (n=10)	(n=7)	(n=2)	(n=0)	(n=1)
6% of survey respondents	Accessed alcohol or substance use treatment during pregnancy. (n=9)	75%	25%	0%	0%
	Consumer satisfaction with these services (n=8)	(n=6)	(n=2)	(n=0)	(n=0)
12% of survey respondents	Accessed mental health care during pregnancy. (n=19)	50%	28%	5%	17%
	Consumer satisfaction with these services (n=18)	(n=9)	(n=5)	(n=1)	(n=3)

*Some survey respondents indicated they had received services, but did not indicate their satisfaction of the services received, which accounts for the gap between number of respondents and satisfaction.



Pregnancy Related Services (Cont.)		Highly Satisfied	Satisfied	Not Satisfied	Highly Dissatisfied
50% of survey respondents	Accessed birthing/delivery supports in a hospital setting. (n=77)	44%	41%	7.5%	7.5%
	Consumer satisfaction with these services (n=68)	(n=30)	(n=28)	(n=5)	(n=5)
8% of survey respondents	Accessed birthing/delivery supports in a birthing center setting. (n=12)	50%	30%	10%	10%
	Consumer satisfaction with these services (n=10)	(n=5)	(n=3)	(n=1)	(n=1)
5% of survey respondents	Accessed birthing/delivery supports in a home delivery setting. (n=8)	71%	29%	0%	0%
	Consumer satisfaction with these services (n=7)	(n=5)	(n=2)	(n=0)	(n=0)
28% of survey respondents	Received birthing supports through a doctor . (n=43)	46%	41%	5%	8%
	Consumer satisfaction with these services (n=37)	(n=17)	(n=15)	(n=2)	(n=3)
8% of survey respondents	Received birthing supports through a midwife . (n=12)	75%	17%	0%	8%
	Consumer satisfaction with these services (n=12)	(n=9)	(n=2)	(n=0)	(n=1)
5% of survey respondents	Received birthing supports through a doula . (n=8)	71%	29%	0%	0%
	Consumer satisfaction with these services (n=7)	(n=5)	(n=2)	(n=0)	(n=0)
Post-Pregnancy Related Services		Highly Satisfied	Satisfied	Not Satisfied	Highly Dissatisfied
22% of survey respondents	Experienced an extended hospital stay after their birth/delivery. (n=34)	44%	38%	6%	12%
	Consumer satisfaction with these services (n=34)	(n=15)	(n=13)	(n=2)	(n=4)
40% of survey respondents	Accessed breastfeeding/lactation instruction and support. (n=61)	54%	30%	9%	7%
	Consumer satisfaction with these services (n=56)	(n=30)	(n=17)	(n=5)	(n=4)
33% of survey respondents	Had a post-partum doctor's visit . (n=51)	39%	45%	7%	9%
	Consumer satisfaction with these services (n=44)	(n=17)	(n=20)	(n=3)	(n=4)
6% of survey respondents	Had a post-partum visit by a midwife . (n=9)	67%	22%	0%	11%
	Consumer satisfaction with these services (n=9)	(n=6)	(n=2)	(n=0)	(n=1)
5% of survey respondents	Had a post-partum visit by a doula . (n=7)	71%	14.5%	0%	14.5%
	Consumer satisfaction with these services (n=7)	(n=5)	(n=1)	(n=0)	(n=1)
16% of survey respondents	Received post-partum depression support . (n=25)	39%	30%	22%	9%
	Consumer satisfaction with these services (n=23)	(n=9)	(n=7)	(n=5)	(n=2)

*Some survey respondents indicated they had received services, but did not indicate their satisfaction of the services received, which accounts for the gap between number of respondents and satisfaction.

Most services accessed by consumers had high satisfaction ratings, the largest of which proportionately was birthing supports through a midwife (9 of 12 or 75%). The service with the lowest satisfaction rating proportionately was mental health care during pregnancy (3 of 19 or 15.79%).



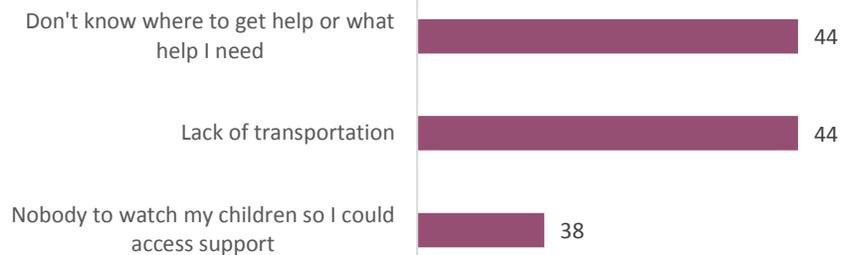
Barriers to Services

Respondents were asked to identify, among a list of issues, those they believed were barriers to services. The most significant barriers identified by survey respondents were in relationship to financial issues. Other barriers noted often included issues related to support, availability and providers.

Financial



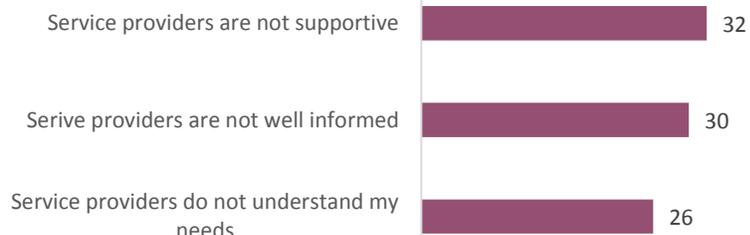
Support



Availability



Providers



In addition to the barriers listed above, 31 people indicated that the stigma associated with accessing supports needed was a barrier to getting the help they needed.



Respondents were also asked to identify the extent to which each issue listed was a barrier to services. The table below indicates the responses ranging from a big problem to an isolated problem that may have only happened to them. Not everyone who indicated that the issue was a barrier rated the significance of the problem. The percentages found in the following table uses the number of people who indicated significance as the denominator in each calculation.

Issue	n	Big Problem	Medium Problem	Little Problem	Just Happened to Me
No local services available	31	45% (n=14)	42% (n=13)	13% (n=4)	-
Lack of transportation	39	67% (n=26)	26% (n=10)	5% (n=2)	3% (n=1)
Lack of medical insurance	38	58% (n=22)	32% (n=12)	8% (n=3)	3% (n=1)
Insurance doesn't cover needed services/treatment	44	71% (n=31)	16% (n=7)	14% (n=6)	-
Cost prohibitive, or lack of money	48	67% (n=32)	25% (n=12)	8% (n=4)	-
Long wait lists	35	40% (n=14)	37% (n=13)	20% (n=7)	3% (n=1)
Not enough services/service providers available	36	58% (n=21)	19% (n=7)	22% (n=8)	-
Don't know where to get help or what help I need	38	58% (n=22)	32% (n=12)	8% (n=3)	3% (n=1)
Stigma associated with accessing support needed	29	48% (n=14)	37% (n=11)	14% (n=4)	-
Service providers are not well informed	31	45% (n=14)	42% (n=13)	13% (n=4)	-
Service providers are not supportive	32	38% (n=12)	47% (n=15)	16% (n=5)	-
Service providers do not understand my needs	26	54% (n=14)	35% (n=9)	12% (n=3)	-
Nobody to watch my children so I could access support	34	62% (n=21)	26% (n=9)	9% (n=3)	3% (n=1)
Other (please specify)	4	n/a	n/a	n/a	n/a

Most issues explored as barriers were identified as big problems, the largest of which proportionately was insurance does not cover needed services or treatments (71%).

Responses captured within the “other” category included the issue of race/colorism within the maternal health system, and health care administration red tape that prevents access to timely care. Two additional responses indicated consumers not yet needing the above services because they are either currently pregnant or planning to become pregnant.



Proactive Supports

Survey respondents were asked to identify whether their primary care providers (doctor, midwife or doula) asked them questions that would lead to the provision of proactive supports. A total of 118 of the 154

58%

*of respondents who answered
this question ...*

Were asked if they needed help with breastfeeding.

63%

*of respondents who answered
this question ...*

Were asked if they were feeling depressed.

52%

*of respondents who answered
this question ...*

Were asked if they needed help with a method of birth control.

48%

*of respondents who answered
this question...*

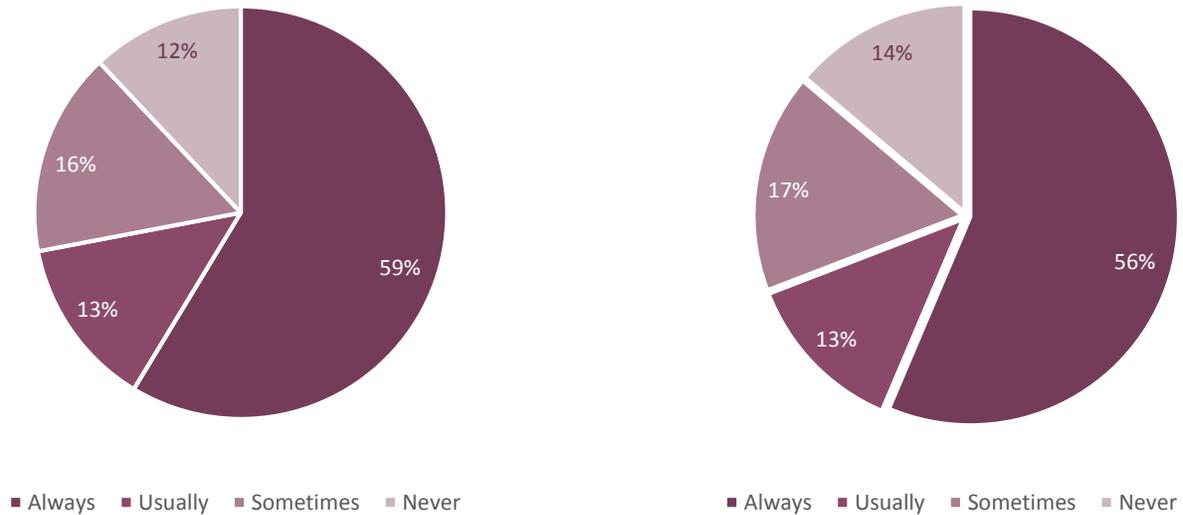
Were asked if their partner ever hurt them or made them feel afraid.



Emotional and Practical Supports

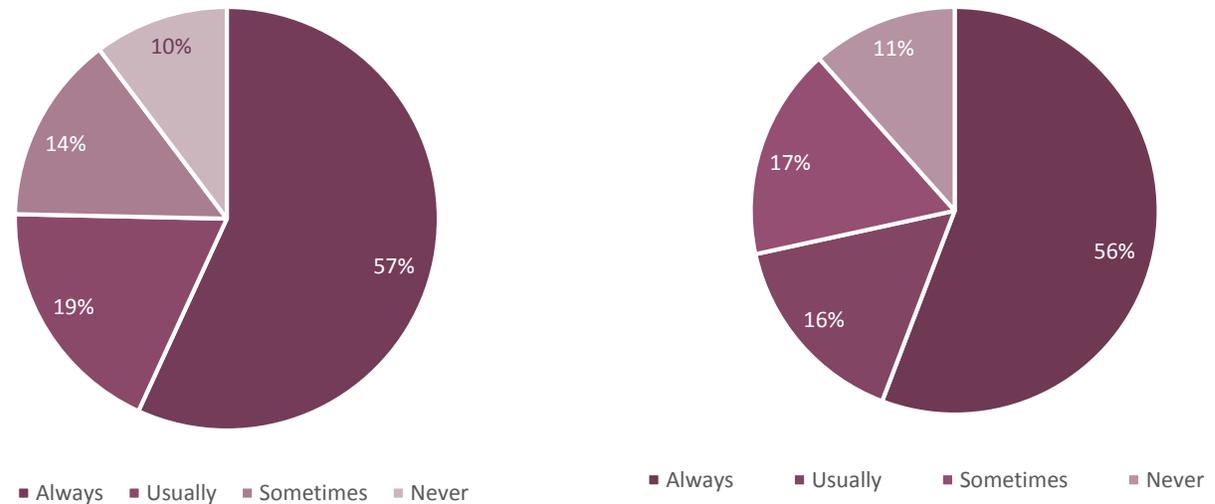
Survey respondents were asked to indicate the extent to which they had the emotional support they needed both during and after pregnancy. The majority of survey respondents indicated they had emotional support during and after pregnancy.

Emotional Support During Pregnancy (n=150) **Emotional Support After Pregnancy (n=150)**



Survey respondents were asked to indicate the extent to which they had the practical supports they needed both during and after pregnancy. The majority of survey respondents indicated they had the practical support during and after pregnancy.

Practical Support During Pregnancy (n=146) **Practical Support After Pregnancy (n=145)**





Areas of Improvement

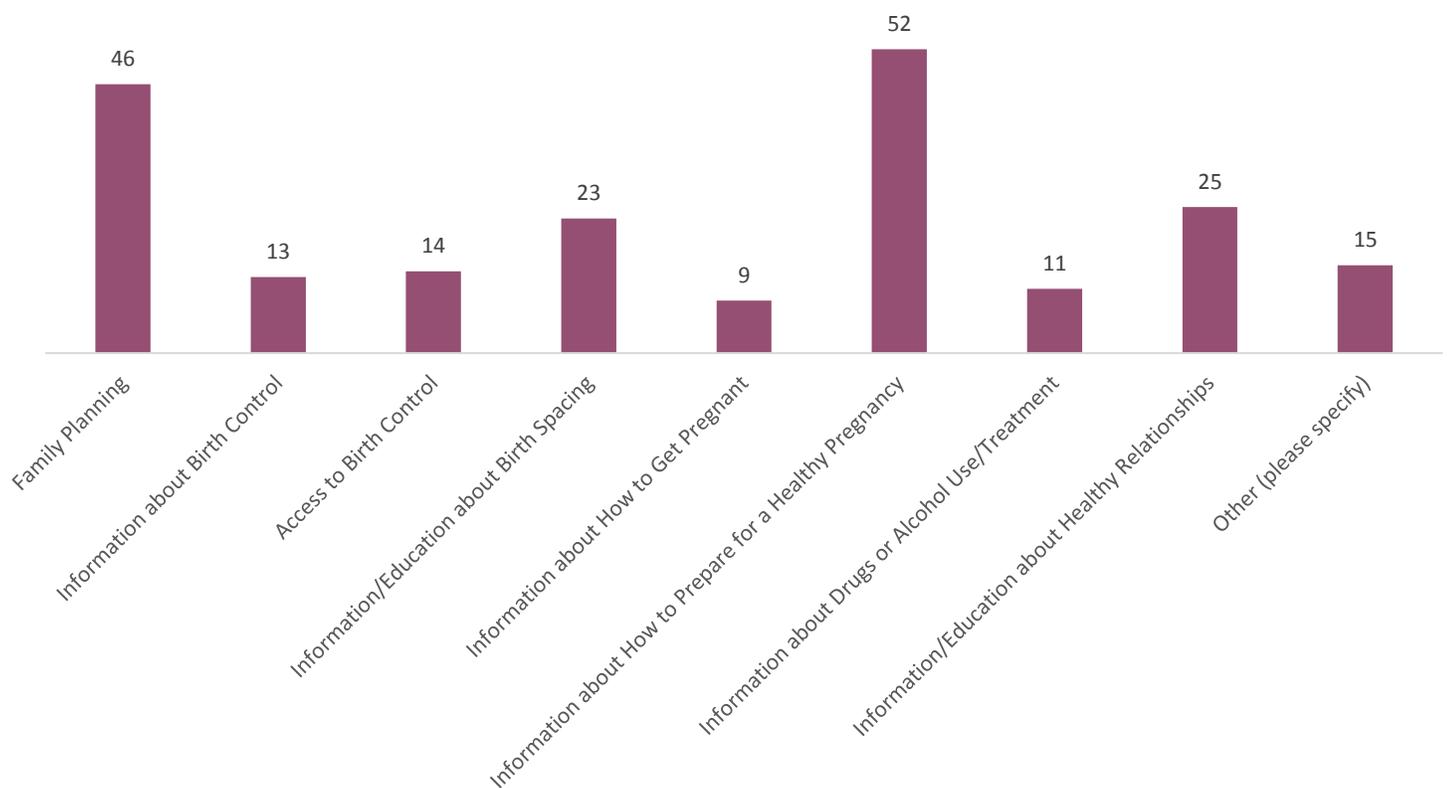
Survey respondents were asked to indicate what they believed were the most important areas for improvement within the maternal health network for women before, during, and directly after pregnancy.

Pre-Pregnancy

Respondents identified the areas of the maternal health system that need improvement in order to effectively support families who are *planning to get pregnant*.

A majority of respondents (52 of 136, or 38%) indicated improvement is necessary regarding the need for information about how to prepare for a healthy pregnancy.

Areas for Improvement: Pre-Pregnancy



Responses captured in the “other” category included:

- Access to affordable services
- Education and Information about:
 - Prematurity and issues that may arise during pregnancy
 - Life after the pregnancy
 - Mental health outside of post-partum depression
 - Natural birthing options

Additionally, one respondent indicated “all of the above” in text within the “other” category.

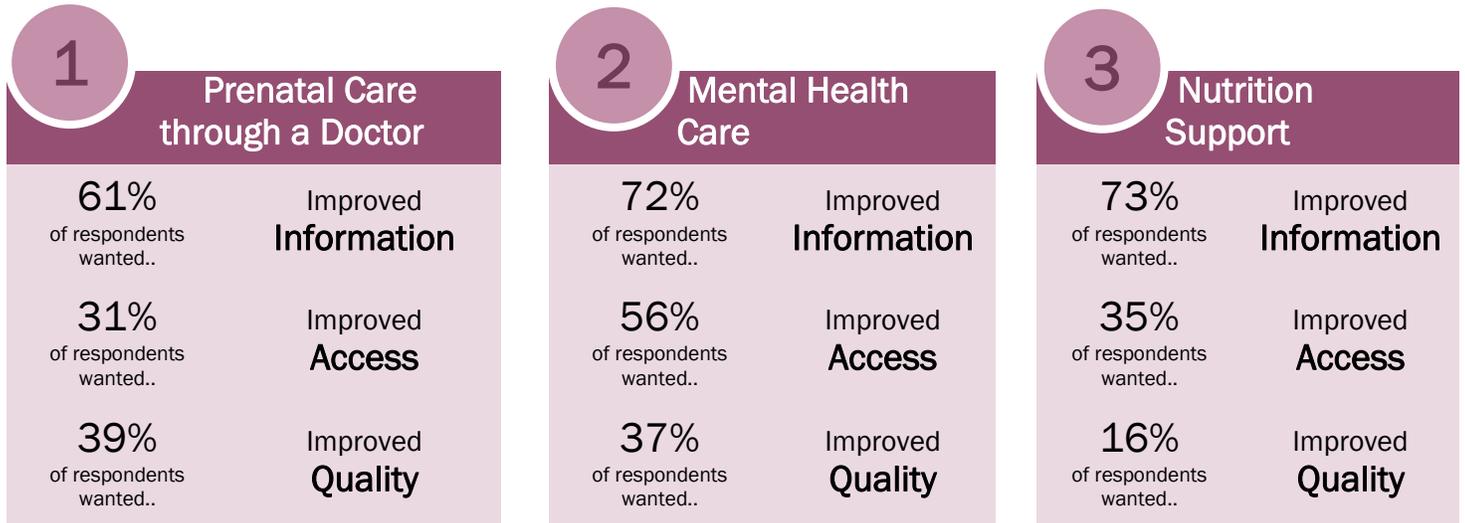
One consumer offered a potential improvement for the maternal health system in supporting families who are planning to get pregnant, suggesting the creation of a class or system that informs consumers about the services available and connects consumers to the services they need.



During Pregnancy

Respondents identified the areas of the maternal health system that need improvement in order to effectively support families *during pregnancy*. In addition to indicating the area of improvement needed, survey respondents were asked to indicate what type of improvement was needed, offering the options of improved information, improved access or improved quality.

Survey respondents in many cases indicated that multiple types of improvement were needed within a particular area. The areas identified for improvement most often included:



A comprehensive listing of the areas of improvement needed as indicated by survey respondents can be found on the following page.





Improvement Needed to Support Families who are Pregnant	n	Improved Information	Improved Access	Improved Quality
Prenatal Care Through a Doctor	67	61%(41)	31%(21)	39%(26)
Prenatal Care Through a Midwife	36	64%(23)	39%(14)	28%(10)
Prenatal Care Through a Doula	34	82%(28)	29%(10)	24%(8)
Nutrition Support	49	73%(36)	35%(17)	16%(8)
Lamaze/Child Birth Education Classes	43	65%(28)	40%(17)	9%(4)
Pregnancy Support Groups	48	75%(36)	33%(16)	17%(8)
Home Visiting Services	38	68%(26)	32%(12)	8%(3)
Oral Health/Dental Care	46	48%(22)	43%(20)	17%(8)
Alcohol or Substance Use Services During Pregnancy	37	65%(24)	30%(11)	11%(4)
Mental Health Care During Pregnancy	54	72%(39)	56%(30)	37%(20)
Birth/Delivery through a Hospital	45	76%(34)	18%(8)	11%(5)
Birth/Delivery through a Birthing Center	36	81%(29)	17%(8)	8%(3)
Birth/Delivery at Home	37	70%(26)	30%(11)	11%(24)
Birthing Support Provided by a Doctor	37	70%(26)	30%(30)	11%(24)
Birthing Support Provided by a Midwife	37	73%(27)	19%(7)	11%(24)
Birthing Support Provided by a Doula	37	76%(28)	19%(7)	11%(24)
Other (please specify)	11	n/a	n/a	n/a

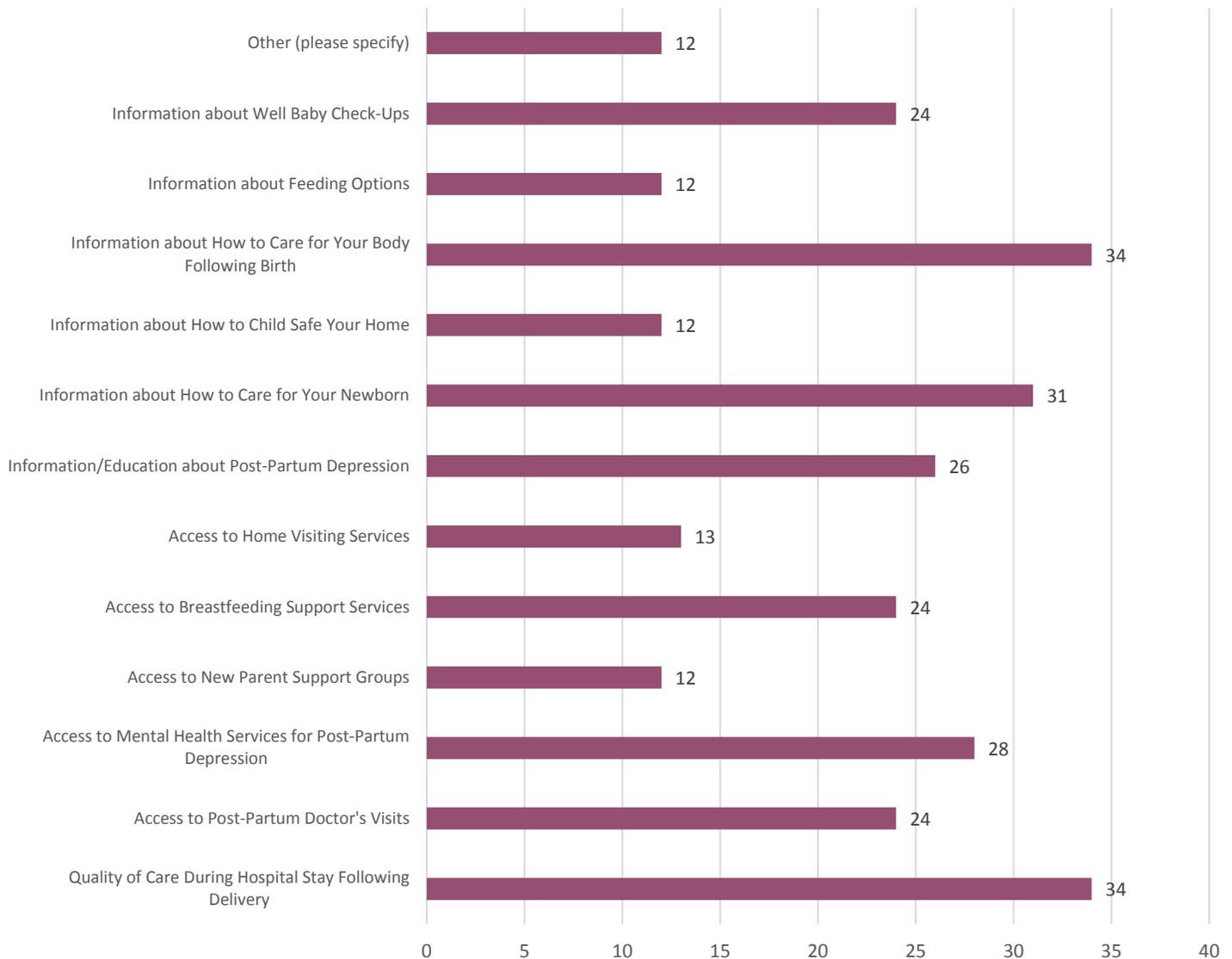
Many respondents chose multiple categories for improvement as well as multiple types of improvement for each category, indicating consumers see several areas for improvement within the maternal health system. Responses gathered in the “other” category included access to affordable services, education about prematurity and issues that may arise during pregnancy, education about life after pregnancy, mental health outside of post-partum depression, natural birthing options, and “all of the above”.



Post-Pregnancy

Respondents identified the areas of the maternal health system that need improvement in order to effectively support families *directly following the birth of a baby*. Of the responses, 34 respondents chose improved information about how to care for your body after pregnancy (34 of 132 or 26%), and 34 respondents chose improved quality of care during hospital stay following delivery (34 of 132 or 26%).

Areas for Improvement: Post-Pregnancy



6 of the 12 responses captured in the “other” category described consumers not having information about what services need improvement because they are either currently pregnant or planning to become pregnant. The additional 6 responses captured in the “other” category included:

- ❖ Quality lactation follow-up before discharge
- ❖ Breastfeeding supports that accommodate rural areas
- ❖ Quality of birthing experience in hospital
- ❖ Information and support services for adverse birthing outcomes
- ❖ All of the above (2 respondents)



Conclusion

Consumer Surveys provided useful insight for the Maternal Health Network to consider as they finalize the 2020-2025 Strategic Plan. The most important issues to address as identified through the survey include:

Pre-Pregnancy

Consumers indicated that in order to support families who are planning to get pregnant, there is a need for improved *information about how to prepare for a healthy pregnancy.*

During Pregnancy

Consumers indicated that in order to effectively support families who are pregnant, there is a need for improvement in the areas of *prenatal care, mental health services and nutritional supports.*

Post-Pregnancy

Consumers indicated that in order to support families immediately following the birth of a baby, there is a need for *improved information about how to care for your body after pregnancy and improved quality of care during hospital stay following delivery.*

Throughout the survey, respondents offered comments specific to the interconnectedness of services within the maternal health system, in which respondents stated they do not believe only one of the issues can be addressed in isolation and that multiple areas within the maternal health system will need to be addressed in order to effectively address the care of families before, during, and after pregnancy.

Next Steps

The information provided by the consumers of the maternal health system should be utilized in conjunction with the other data to include the Maternal Health Snapshot, and the Maternal Health Network Asset & Gaps Briefs and Summary Report. These combined should equip the Maternal Health Network with the information needed to develop a thoughtful, and responsive strategic plan for their future.



Appendix

The consumer engagement survey was issued in English and Spanish, through an online survey link as well as a paper document. A total of 127 surveys were collected in English and 27 surveys were collected in Spanish. The survey document is available in English and Spanish in the following pages.



Consumer Survey – English

We are collecting information from individuals across San Bernardino who are pregnant or who recently delivered a baby to understand what kind of services are needed to support the health and well-being of mothers and their newborns. We are also trying to identify what components of the system could work better in the pregnancy and postpartum process. All responses will remain anonymous.

If you would like to take this survey online, please go to: [INSERT SURVEY MONKEY LINK](#)

You can complete the survey by:

1. Completing it online at the link provided.
2. Completing the survey in the interactive PDF provided, saving it and emailing it to: kpowell@socialent.com
3. Completing the survey in hard copy and mailing it to:
Social Entrepreneurs, Inc.
Attn: Katie Powell
6548 South McCarran Blvd., Suite B
Reno, NV 89509

RESPONDENT PROFILE QUESTIONS

<p>1. Which of the following best describes you?</p> <p><input type="checkbox"/> Planning to get pregnant (within the next 3 months)</p> <p><input type="checkbox"/> Woman who is currently pregnant (with first child) </p> <p><input type="checkbox"/> Woman who is currently pregnant (not the first)</p> <p><input type="checkbox"/> Recently delivered a child (within a year)</p> <p><input type="checkbox"/> Family member of someone who is pregnant</p> <p><input type="checkbox"/> Family member of someone who recently delivered a child (within a year)</p>				<p><input type="checkbox"/> First Trimester</p> <p><input type="checkbox"/> Second Trimester</p> <p><input type="checkbox"/> Third Trimester</p>	
<p>2. What is your gender?</p> <p><input type="checkbox"/> Male <input type="checkbox"/> Female</p>		<p>3. What is your age?</p> <p><input type="checkbox"/> 13-17 <input type="checkbox"/> 45-55</p> <p><input type="checkbox"/> 18-20 <input type="checkbox"/> 56-64</p> <p><input type="checkbox"/> 21-24 <input type="checkbox"/> 65+</p> <p><input type="checkbox"/> 25-44</p>			
<p>4. What is your race/ethnicity?</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> Hispanic</p> <p><input type="checkbox"/> Black/African American</p> <p><input type="checkbox"/> American Indian/Alaskan</p> <p><input type="checkbox"/> Pacific Islander</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Mixed Race</p> <p><input type="checkbox"/> Other</p>		<p>5. What City/Town do you live in?</p> <p><input type="checkbox"/> Adelanto <input type="checkbox"/> Grand Terrace <input type="checkbox"/> Redlands</p> <p><input type="checkbox"/> Apple Valley <input type="checkbox"/> Hesperia <input type="checkbox"/> Rialto</p> <p><input type="checkbox"/> Barstow <input type="checkbox"/> Highland <input type="checkbox"/> San Bernardino</p> <p><input type="checkbox"/> Big Bear Lake <input type="checkbox"/> Loma Linda <input type="checkbox"/> Twentynine Palms</p> <p><input type="checkbox"/> Chino <input type="checkbox"/> Montclair <input type="checkbox"/> Upland</p> <p><input type="checkbox"/> Chino Hills <input type="checkbox"/> Needles <input type="checkbox"/> Victorville</p> <p><input type="checkbox"/> Colton <input type="checkbox"/> Ontario <input type="checkbox"/> Yucaipa</p> <p><input type="checkbox"/> Fontana <input type="checkbox"/> Rancho Cucamonga <input type="checkbox"/> Yucca Valley</p>			
<p>6. What is your annual household income?</p> <p><input type="checkbox"/> \$0 - \$12,140 per year <input type="checkbox"/> \$20,780 - \$25,100 <input type="checkbox"/> \$33,740 - \$38,060 <input type="checkbox"/> \$72,586 – \$92,248</p> <p><input type="checkbox"/> \$12,140 - \$16,460 <input type="checkbox"/> \$25,100 - \$29,420 <input type="checkbox"/> \$38,060 - \$42,380 <input type="checkbox"/> \$92,248 - \$103,615</p> <p><input type="checkbox"/> \$16,460 - \$20,780 <input type="checkbox"/> \$29,420 - \$33,740 <input type="checkbox"/> \$42,380 – \$72,586 <input type="checkbox"/> More than \$103,615</p>					
<p>7. During your pregnancy, which type of maternity care provider did you utilize most often?</p> <p><input type="checkbox"/> Obstetrician-gynecologist <input type="checkbox"/> Midwife <input type="checkbox"/> Physician Assistant</p> <p><input type="checkbox"/> Family medicine doctor <input type="checkbox"/> Doula <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Doctor, not sure what type <input type="checkbox"/> Nurse</p>					



SURVEY QUESTIONS

8. There are a variety of services and supports that individuals who are pregnant, planning to get pregnant or those that have recently delivered need and want. Can you please indicate in the table below which of these services and supports you accessed and your satisfaction with those services? *(Please check all that apply)*

Services and Supports	Did you access this support?		If you answered yes, please indicate how satisfied you were with the services/support?			
	No	Yes	Highly Satisfied	Satisfied	Not Satisfied	Highly Dissatisfied
Family Planning/Birth Control						
Prenatal Care through a Doctor's Office						
Prenatal Care through a Midwife						
Prenatal Care through a Doula						
Nutritionist						
Lamaze/Childbirth Education Class						
Pregnancy Support Group						
Home Visiting Services						
Oral Health / Dental Care						
Alcohol or Substance Use Treatment During Pregnancy						
Mental Health Care During Pregnancy						
Birth/Delivery through a Hospital						
Birth/Delivery through a Birthing Center						
Birth/Delivery in a Home Setting						
Birthing Supports through a Doctor						
Birthing Supports through a Midwife						
Birthing Supports through a Doula						
Extended Hospital Stay after the Birth/Delivery						
Post-partum Doctor's Visit						
Breastfeeding/Lactation Instruction/Support						
Post-partum Visit by a Midwife						
Post-partum Visit by a Doula						
Post-partum Depression Support						

9. There are a number of reasons why people may not receive the support they need when they are pregnant or just after delivering a baby. We want to understand why people who need support may not be able to get it. Please indicate which of the following you believe prevents you or other people from accessing services, treatments and/or supports; and then select the severity of the issue. *(Please check all that apply)*

Barriers to Services	Is this an issue?		If you answered yes, please indicate to what extent you believe this issue prevents you/others from accessing care.			
	No	Yes	Big Problem	Medium Problem	Little Problem	Just Happened to Me
No local services available						
Lack of transportation						
Lack of medical insurance						
Insurance doesn't cover needed services/treatment						
Cost prohibitive, or lack of money						
Long wait lists						
Not enough services/service providers available						
Don't know where to get help or what help I need						
Stigma associated with accessing support needed						
Service providers are not well informed						
Service providers are not supportive						
Service providers do not understand my needs						
Nobody to watch my children so I could access support						
Other (please describe):						



SURVEY QUESTIONS

<p>10. During your pregnancy, did your doctor, nurse, midwife or doula ask any of the following:</p> <p><input type="checkbox"/> Do you need help with breastfeeding? <input type="checkbox"/> Do you need help with a method of birth control?</p> <p><input type="checkbox"/> Are you feeling depressed? <input type="checkbox"/> Has your partner ever hurt you or made you feel afraid?</p>			
<p>11. During your pregnancy how often did you have the emotional support you needed (someone who you could turn to and who would listen to your concerns, give you advice)?</p> <p><input type="checkbox"/> Always <input type="checkbox"/> Sometimes</p> <p><input type="checkbox"/> Usually <input type="checkbox"/> Never</p>			
<p>12. After your pregnancy how often did you have emotional support you needed (someone who you could turn to and who would listen to your concerns, give you advice)?</p> <p><input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> NA – Haven't delivered yet</p> <p><input type="checkbox"/> Usually <input type="checkbox"/> Never</p>			
<p>13. During your pregnancy how often did you have the practical support you needed (someone who you could turn to for information, financial assistance, or transportation to support your pregnancy)?</p> <p><input type="checkbox"/> Always <input type="checkbox"/> Sometimes</p> <p><input type="checkbox"/> Usually <input type="checkbox"/> Never</p>			
<p>14. After your pregnancy how often did you have the practical support you needed (someone who you could turn to for information, financial assistance, or transportation to support your pregnancy)?</p> <p><input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> NA – Haven't delivered yet</p> <p><input type="checkbox"/> Usually <input type="checkbox"/> Never</p>			
<p>15. What is the one thing that you think should be improved to support families who are planning to get pregnant? (Please check only the one thing you think is most important)</p>			
<input type="checkbox"/> Family Planning		<input type="checkbox"/> Information about How to Get Pregnant	
<input type="checkbox"/> Information about Birth Control		<input type="checkbox"/> Information about How to Prepare for a Healthy Pregnancy	
<input type="checkbox"/> Access to Birth Control		<input type="checkbox"/> Information about Drugs or Alcohol Use/Treatment	
<input type="checkbox"/> Information/Education about Birth Spacing		<input type="checkbox"/> Information/Education about Healthy Relationships	
Other (Please Describe):			
<p>16. What is the one thing that you think should be improved to support families who are pregnant? (Please check only the one thing you think is most important)</p>			
Area for Improvement	Type of Improvement		
	<u>Improved Information</u> Additional information about your options or resources available	<u>Improved Access</u> Your ability to get the help you need	<u>Improved Quality</u> Improvements in the quality of care you are provided
Prenatal Care Through a Doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prenatal Care Through a Midwife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prenatal Care Through a Doula	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nutrition Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Lamaze/Child Birth Education Classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pregnancy Support Groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Visiting Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Health/Dental Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol or Substance Use Services During Pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Care During Pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birth/Delivery through a Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birth/Delivery through a Birthing Center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birth/Delivery at Home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birthing Support Provided by a Doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birthing Support Provided by a Midwife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Birthing Support Provided by a Doula	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please Describe):			
<p>17. What is the one thing that you think should be improved to support families directly following the birth of a baby? <i>(Please check only the one thing you think is most important)</i></p>			
<input type="checkbox"/> Quality of Care during Hospital Stay following Delivery	<input type="checkbox"/> Information/Education about Post-Partum Depression		
<input type="checkbox"/> Access to Post-partum doctor's visits	<input type="checkbox"/> Information about How to Care for Your Newborn		
<input type="checkbox"/> Access to Mental Health Services for Post-Partum Depression	<input type="checkbox"/> Information about How to Child Safe Your Home		
<input type="checkbox"/> Access to New Parent Support Groups	<input type="checkbox"/> Information about How to Care for Your Body Following Birth		
<input type="checkbox"/> Access to Breastfeeding Support Services	<input type="checkbox"/> Information about Feeding Options		
<input type="checkbox"/> Access to Home Visiting Services	<input type="checkbox"/> Information about Well Baby Check-ups		
Other (Please Describe):			

Thank you for taking the time to complete this survey. Your input is valuable and appreciated!



Consumer Survey - Spanish

En San Bernardino, estamos recolectando información de mujeres embarazadas, de mujeres que recientemente dieron a luz, o de sus parejas o familiares; con el fin de comprender qué tipo de servicios son necesarios para apoyar la salud y el bienestar de las madres y sus recién nacidos. También buscamos identificar los componentes del sistema que podrían funcionar mejor durante el embarazo y el periodo de posparto. Todas sus respuestas serán anónimas.

Si desea responder la encuesta en línea (online), por favor, ingrese a: https://www.surveymonkey.com/r/salud_materna

Hay tres opciones para completar la encuesta:

1. En línea a través del enlace (link) provisto.
2. En su versión interactiva en PDF. Guárdela y envíela vía email a: kpowell@socialent.com
3. En su versión impresa. Envíela por correo a:
Social Entrepreneurs, Inc.
Attn: Katie Powell
6548 South McCarran Blvd., Suite B
Reno, NV 89509

PREGUNTAS SOBRE EL PERFIL DEL PARTICIPANTE

1. ¿Cuál de las siguientes afirmaciones describen mejor su situación? <input type="checkbox"/> Estoy planificando un embarazo (en los próximos tres meses) <input type="checkbox"/> Actualmente, estoy embarazada (es mi primer embarazo)  <input type="checkbox"/> Actualmente, estoy embarazada (no es mi primer embarazo) <input type="checkbox"/> Di a luz recientemente (hace menos de un año) <input type="checkbox"/> Soy un familiar de alguien que está embarazada <input type="checkbox"/> Soy un familiar de alguien que dio a luz recientemente (hace menos de un año)		<input type="checkbox"/> Primer trimestre <input type="checkbox"/> Segundo trimestre <input type="checkbox"/> Tercer trimestre	
2. ¿Cuál es su sexo? <input type="checkbox"/> Masculino <input type="checkbox"/> Femenino	3. ¿Qué edad tiene? <input type="checkbox"/> 13-17 <input type="checkbox"/> 45-55 <input type="checkbox"/> 18-20 <input type="checkbox"/> 56-64 <input type="checkbox"/> 21-24 <input type="checkbox"/> 65+ <input type="checkbox"/> 25-44		
4. ¿Con qué raza o etnia se identifica? <input type="checkbox"/> Blanco <input type="checkbox"/> Hispano <input type="checkbox"/> Afroamericano <input type="checkbox"/> Indio americano o nativo de Alaska <input type="checkbox"/> Nativo de las islas del Pacífico <input type="checkbox"/> Asiático <input type="checkbox"/> Raza mixta <input type="checkbox"/> Otra	5. ¿En qué ciudad/pueblo vive usted? <input type="checkbox"/> Adelanto <input type="checkbox"/> Grand Terrace <input type="checkbox"/> Redlands <input type="checkbox"/> Apple Valley <input type="checkbox"/> Hesperia <input type="checkbox"/> Rialto <input type="checkbox"/> Barstow <input type="checkbox"/> Highland <input type="checkbox"/> San Bernardino <input type="checkbox"/> Big Bear Lake <input type="checkbox"/> Loma Linda <input type="checkbox"/> Twentynine Palms <input type="checkbox"/> Chino <input type="checkbox"/> Montclair <input type="checkbox"/> Upland <input type="checkbox"/> Chino Hills <input type="checkbox"/> Needles <input type="checkbox"/> Victorville <input type="checkbox"/> Colton <input type="checkbox"/> Ontario <input type="checkbox"/> Yucaipa <input type="checkbox"/> Fontana <input type="checkbox"/> Rancho Cucamonga <input type="checkbox"/> Yucca Valley		
6. ¿Cuál es el ingreso anual en su hogar? <input type="checkbox"/> \$0 - \$12,140 por año <input type="checkbox"/> \$20,780 - \$25,100 <input type="checkbox"/> \$33,740 - \$38,060 <input type="checkbox"/> \$72,586 - \$92,248 <input type="checkbox"/> \$12,140 - \$16,460 <input type="checkbox"/> \$25,100 - \$29,420 <input type="checkbox"/> \$38,060 - \$42,380 <input type="checkbox"/> \$92,248 - \$103,615 <input type="checkbox"/> \$16,460 - \$20,780 <input type="checkbox"/> \$29,420 - \$33,740 <input type="checkbox"/> \$42,380 - \$72,586 <input type="checkbox"/> Más de \$103,615			
7. Durante el embarazo, ¿qué tipo de proveedor de cuidados de maternidad utilizó con más frecuencia? <input type="checkbox"/> Ginecólogo-obstetra <input type="checkbox"/> Comadrona <input type="checkbox"/> Asistente médico <input type="checkbox"/> Médico de familia <input type="checkbox"/> Partera <input type="checkbox"/> Otro <input type="checkbox"/> Médico, no estoy seguro(a) de qué tipo <input type="checkbox"/> Enfermera			



PREGUNTAS DE LA ENCUESTA

8. Hay una variedad de servicios y ayudas que necesitan o desean las personas que están embarazadas, que planifican un embarazo, que recientemente han dado a luz, o sus parejas o familiares. Por favor, indique cuales son los servicios o ayudas a los que ha accedido así como cuál ha sido su nivel de satisfacción con estos servicios. (Por favor, marque todos los aplicables)

Servicios y ayudas	¿Utilizó este servicio?		Si respondió que sí, por favor indique su nivel de satisfacción con el servicio o ayuda:			
	No	Sí	Muy Satisfecho	Satisfecho	Insatisfecho	Muy insatisfecho
Planeamiento familiar/método anticonceptivo						
Cuidado prenatal brindado por un doctor						
Cuidado prenatal brindado por una comadrona						
Cuidado prenatal brindado por una partera						
Nutricionista (dietista)						
Clases de preparación para el parto (Lamaze)						
Grupos de apoyo durante el embarazo						
Servicio de visitas a domicilio						
Salud oral / Cuidado dental						
Tratamiento por el uso de alcohol o drogas durante el embarazo						
Cuidado de la salud mental durante el embarazo						
Alumbramiento en un hospital						
Alumbramiento en un centro de maternidad						
Alumbramiento en el hogar						
Asistencia de un doctor durante el parto						
Asistencia de una comadrona durante el parto						
Asistencia de una partera durante el parto						
Hospitalización prolongada luego del nacimiento						
Visita del doctor luego del parto						
Ayuda/instrucciones sobre la lactancia/amamantamiento						
Visita de la comadrona luego del parto						
Visita de la partera luego del parto						
Asistencia por depresión post-parto						

9. Hay varias razones por las cuales las personas pueden no recibir el apoyo que necesitan cuando están embarazadas o justo después de dar a luz. Queremos entender porqué las personas que necesitan apoyo no pueden obtenerlo. Por favor, indique cuál cree usted que sea la razón por la cual usted u otras personas no pueden acceder a servicios, tratamientos y/o ayudas; y luego seleccione la gravedad del problema. (Por favor, marque todas las aplicables)

Barreras para acceder a los servicios	¿Es éste un problema?		Si respondió que sí, por favor indique en qué medida cree usted que ese problema impide a usted u otras personas acceder al cuidado que necesita:			
	No	Sí	Problema grande	Problema mediano	Problema pequeño	Sólo me pasó a mí
No hay servicios disponibles en mi localidad						
Falta de transporte						
Falta de seguro médico						
El seguro no cubre los servicios/tratamiento que se necesitan						
Alto costo o falta de dinero						
Largas listas de espera						
No hay suficientes servicios/proveedores de servicios disponibles						



Barreras para acceder a los servicios	¿Es éste un problema?		Si respondió que sí, por favor indique en qué medida cree usted que ese problema impide a usted u otras personas acceder al cuidado que necesita:			
	No	Sí	Problema grande	Problema mediano	Problema pequeño	Sólo me pasó a mí
No sé adónde ir por ayuda o no sé el tipo de ayuda que necesito						
Estigma que se asocia a la ayuda que se necesita						
Los proveedores de servicio no están bien informados						
Los proveedores del servicio no son comprensivos						
Los proveedores del servicio no entienden mis necesidades						
No tengo a nadie que cuide a mis hijos y por eso no puedo acceder a la ayuda						
Otra (por favor, describa):						

10. **Durante** su embarazo, ¿el doctor, la enfermera, la comadrona, o la partera le hicieron alguna de las siguientes preguntas?:

¿Necesita ayuda con la lactancia? ¿Necesita ayuda con un método anticonceptivo?

¿Se siente deprimida? ¿Alguna vez le hizo su pareja algún daño o hizo que sintiera miedo?

11. **Durante** su embarazo, ¿con qué frecuencia tuvo el apoyo emocional que necesitó (por ejemplo: alguien a quién podía acudir o alguien que escuchara sus preocupaciones o le diera un consejo)?

Siempre A veces

Generalmente Nunca

12. **Luego** de su embarazo, ¿con qué frecuencia tuvo el apoyo emocional que necesitó (por ejemplo: alguien a quién podía acudir o alguien que escuchara sus preocupaciones o le diera un consejo)?

Siempre A veces N/A – No he dado a luz todavía

Generalmente Nunca

13. **Durante** su embarazo, ¿con qué frecuencia tuvo el apoyo práctico que necesitó (por ejemplo: alguien a quién podía acudir para conseguir información, asistencia financiera, o transporte para que la ayude)?

Siempre A veces

Generalmente Nunca

14. **Luego** de su embarazo, ¿con qué frecuencia tuvo el apoyo práctico que necesitó (por ejemplo: alguien a quién podía acudir para conseguir información, asistencia financiera, o transporte para que la ayude)?

Siempre A veces N/A – No he dado a luz todavía

Generalmente Nunca

15. ¿Qué cree usted que debería mejorar para ayudar a las familias que están planificando un embarazo?
(Por favor, seleccione la respuesta (una sola) que crea es la más importante)

<input type="checkbox"/> Planificación familiar	<input type="checkbox"/> Información sobre cómo salir embarazada
<input type="checkbox"/> Información sobre métodos anticonceptivos	<input type="checkbox"/> Información sobre cómo prepararse para un embarazo saludable
<input type="checkbox"/> Acceso a métodos anticonceptivos	<input type="checkbox"/> Información sobre tratamiento por el uso de drogas y alcohol
<input type="checkbox"/> Información/educación sobre el tiempo que debe existir entre un embarazo y el siguiente	<input type="checkbox"/> Información/educación sobre relaciones saludables

Otro (Por favor, describa):



16. ¿Qué cree usted que debería mejorar para ayudar a las familias que están esperando un bebé? (Por favor, seleccione la respuesta (una sola) que crea es la más importante)			
Áreas que pueden mejorar	Tipo de mejora		
	Mejor Información Información adicional sobre las opciones o recursos disponibles	Mejor Acceso Su habilidad de conseguir la ayuda que necesita	Mejor Calidad Mejora en la calidad del cuidado que recibe
Cuidado prenatal brindado por un doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cuidado prenatal brindado por una comadrona	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cuidado prenatal brindado por una partera	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ayuda en nutrición	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clases de preparación para el parto (Lamaze)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grupos de apoyo durante el embarazo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios de visitas a domicilio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salud oral / Cuidado dental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Servicios por el uso de alcohol o drogas durante el embarazo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cuidado de la salud mental durante el embarazo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alumbramiento en un hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alumbramiento en un centro de maternidad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alumbramiento en el hogar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asistencia de un doctor durante el parto	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asistencia de una comadrona durante el parto	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asistencia de una partera durante el parto	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Otro (por favor, describa):			
17. ¿Qué cree usted que debería mejorar para ayudar directamente a las familias luego del nacimiento de un bebé? (Por favor, seleccione la respuesta (una sola) que crea es la más importante)			
<input type="checkbox"/> Calidad en el cuidado brindado durante la hospitalización luego del parto	<input type="checkbox"/> Información/educación sobre la depresión post parto		
<input type="checkbox"/> Acceso a visitas médicas luego del parto	<input type="checkbox"/> Información sobre cómo cuidar al recién nacido		
<input type="checkbox"/> Acceso a servicios para la salud mental para la depresión post parto	<input type="checkbox"/> Información sobre cómo tener una casa segura para los niños		
<input type="checkbox"/> Acceso a grupos de apoyo para padres primerizos (por primera vez)	<input type="checkbox"/> Información sobre cómo cuidar su cuerpo luego de dar a luz		
<input type="checkbox"/> Acceso a servicios de ayuda en la lactancia	<input type="checkbox"/> Información sobre opciones de alimentación		
<input type="checkbox"/> Acceso a servicios de visitas a domicilio	<input type="checkbox"/> Información sobre exámenes médicos periódicos para la salud de su bebé		
Otro (por favor, describa):			

¡Gracias por el tiempo que se tomó para llenar esta encuesta! ¡Sus comentarios son valiosos y apreciados!