

ANONYMOUS QUESTIONNAIRE FOR MOTHERS OF NEWBORN BABIES

[Cover letter can be adapted according to researcher's needs and the research context]

You are invited to volunteer to participate in our study. We want to find out more about the treatment you received at the clinic when you gave birth to your baby/babies. This information is important for us to be able to improve the services that patients receive.

This letter gives information to help you to decide if you want to take part. We would like you to complete a questionnaire. This may take about 10 to 15 minutes. A health worker will take the questionnaire from you after you have filled it out. Please do not write your name on the questionnaire. We will keep it in a safe place to ensure confidentiality and no one at the clinic will see your answers. We will be available to help you with the questionnaire or to fill it in on your behalf.

[Information on ethics approval]

It is voluntary to take part in this study. You don't need to answer all the questions if you don't want to and you can refuse to take part or stop at any time without giving any reason. You do not write your name on the questionnaire and you give us the information anonymously. Once you have given the questionnaire back to us, we will not know it is your information and cannot give the questionnaire back to you. This means that you gave us informed consent that we may use the information. Because you give the information anonymously, you cannot be identified in any publication.

If there is anything in the questionnaire that upsets you or make you sad, we can get someone to talk to about it if you wish.

We sincerely appreciate your help.

For each question, please mark ONE box with an X or fill in a number

We would like to get a few personal details about yourself.

1. At which clinic was your baby born?

Dark City	Eersterust	Kgabo	Laudium	Stanza CHC
Boekenhout	Temba	Phedisong 4	Refentse	Soshanguve

2. How old are you?

I am _____ years old	OR	My date of birth is <u>dd / mm / yyyy</u>
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3. How many children have you given birth to?

Number of children: _____	Number of stillborn babies: _____
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4. What is the highest level of school education that you completed?

No school	Gr 0-7	Gr 8	Gr 9	Gr 10	Gr 11	Gr 12	Other (complete) _____
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5. Where were you born?

Gauteng	Mpumalanga	Limpopo
Free State	North West	Eastern Cape
KwaZulu-Natal	Northern Cape	Western Cape
In another country (complete) _____		

6. If you are living in Tshwane, for how long?

_____ months	OR	_____ years	Not living in Tshwane
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7. What is your first language?

Setswana	Sepedi	Sesotho	Afrikaans
isiZulu	isiNdebele	SiSwati	isiXhosa
Tshivenda	Xitsonga	English	
Other (complete) _____			

We also want to know more about your experience of the labour ward and the birth of the baby.

8. Did a member of staff attend to you within 15 minutes of arriving at the ward or unit?

Yes	No	Unsure
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9. Did a member of staff greet you by name when you arrived at the labour ward?

Yes	No	Unsure
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10. Did a member of staff ask you how you were doing?

Yes	No	Unsure
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11. Did any of the staff members looking after you speak to you in a language that you understand?

All staff members	Some staff members	No staff members
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12. How many hours were you in the clinic before the baby was born?

_____ hours	Don't know
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13. Were you offered or given tablets or an injection for pain while you were in labour?

Yes	No	Unsure
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14. Did the staff tell you that you may have a family member or partner with you during labour and birth of the baby?

Yes	No	Unsure
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15. Did the sister ask if it is okay to examine you?

Yes	No	Unsure
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16. Did the sister try to be gentle during physical examinations, not causing too much pain?

Yes	No	Unsure
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17. Did any member of staff offer you any food or drinks while you were at the clinic?

Yes	No	Unsure
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18. Did any of the sisters tell you how you and the baby are doing during labour and delivery?

Yes	No	Unsure
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19. Did any staff member say anything that upset you?

Yes	No	Unsure
If Yes, can you give an example? _____		

20. Did the sister who delivered your baby, introduce herself?

Yes	No	Unsure
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21. Was there any staff member with you when the baby was born?

Yes	No	Unsure
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22. Did the staff ignore you when you asked for help?

Yes	No	Unsure	Did not ask for help
If Yes, can you tell us what happened? _____			

23. Did the staff call your family member or partner to be with you during the birth of the baby?

Yes	No	Unsure
.1 Did you want someone to be with you during the birth?		
Yes	No	Unsure

24. How did the staff speak to you during labour?

Mark ONE box that best describes how the staff spoke to you

All staff spoke nicely	Some staff were rude
Some staff spoke nicely	All staff were rude
Can you give an example? _____	

25. Did you have any complications or problems during the birth of the baby?

Yes	No	Unsure
If Yes, please answer the following two questions:		
.1 What was the complication or problem? _____		

.2 Did the sister blame you for the complication or problem?		
Yes	No	Not applicable
Can you tell us what happened? _____		

