Mistreatment by Care Providers in Childbirth Indicators
Mistreatment Index

The Mistreatment Index is a set of patient designed indicators of mistreatment that align with the seven dimensions of mistreatment identified by the Bohren typology.¹

These seven components are: physical abuse, sexual abuse, verbal abuse, stigma and discrimination, failure to meet professional standards of care, poor rapport between women and providers, and poor conditions and constraints presented by the health system.

This scale has been used in a national study in the US (see citation and [www.birthplacelab.org](http://www.birthplacelab.org)). Pregnant persons can use this index to identify which, if any of the dimensions of mistreatment they may have experienced in their maternity care.

For more information on the development of this index read the 2019 publication here:

[https://www.birthplacelab.org/giving-voice-to-mothers/](https://www.birthplacelab.org/giving-voice-to-mothers/)

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MISTREATMENT INDEX CITATION:


Mistreatment Index

Did you experience any of the following problems or attitudes in your care during pregnancy or birth? (Please select all applicable options)

Your private or personal information was shared without your consent

Your physical privacy was violated, for example being uncovered or having people in the delivery room without your consent

A healthcare provider shouted at or scolded you

Healthcare providers withheld treatment or forced you to accept treatment that you did not want

Healthcare providers threatened you in any other way

Healthcare providers ignored you, refused your request for help or failed to respond to requests for help in a reasonable amount of time

You experienced physical abuse, such as aggressive physical contact, inappropriate sexual conduct, a refusal to provide anesthesia for an episiotomy, etc.

None of the above
Indice de mal trato

¿Experimentó usted alguno de los siguientes problemas o comportamientos en el cuidado durante su embarazo o parto? (Por favor, seleccione todas las opciones que se apliquen)

Su información privada o personal fue compartida sin su consentimiento

Su privacidad física fue violada (Ej: fue descubierta o hubo gente en la sala de partos sin su consentimiento)

Proveedores de servicios de salud le gritó o regañó

Proveedores de servicios de salud le amenazaron con no proporcionarle tratamiento o con forzarla a aceptar tratamiento que usted no quería

Proveedores de servicios de salud le amenazaron de cualquier otra manera

Proveedores de servicios de salud le ignoraron, se negaron a proporcionarle ayuda que usted pidió, o no le proporcionaron ayuda que usted pidió en un periodo de tiempo razonable

Usted experimentó abuso físico (incluyendo contacto físico agresivo, conductas sexuales inapropiadas, negativa de proporcionarle anestesia para una episiotomía, etc.)

Ninguna de las anteriores