Women’s Satisfaction with A Companion of Her Choice During Childbirth: A Cross-sectional Survey
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Introduction
Historically in maternity unit, birth companionship was not allowed and women could only receive labour support provided by hospital midwives. Growing evidence supports birth companionship could help buffer the stressors during labour, facilitate normal deliveries and reduce the chance of interventions. The benefits of birth companionship extend into the postpartum period with increase breastfeeding exclusivity rate and prevention of postpartum depression. Positive childbirth experience is enhanced as women feel feelings of control and reduction in maternal anxiety with a birth companion. Until the past 10 years, husbands were encouraged to support women during active labour but not during emergency operations. Some reviews found labour support by untrained lay women that are known by the labouring women would in fact give the best support. A recent paradigm shift in the unit’s birth companionship programme now encourage women to choose one birth companion of her choice (not only husband or birthing partner) and also allow this birth companion to stay even during emergency operations if clinical situation allows.

Objectives
To evaluate and explore women and their birth companions’ satisfaction about birth companionship and its effectiveness

Methodology
A cross-sectional study using semi-structured questionnaire with 6-point Likert scales in the first part to evaluate birth companionship programme, its benefits and overall satisfaction followed by 3 open-ended questions in the second part to explore programme’s strength, needs for improvement and reasons for not joining birth companionship programme. A convenience sample of all women who gave birth in Queen Mary Hospital in February 2016 would be invited to complete the survey by themselves irrespective of their mode of deliveries.

Result
Results will be available at the end of February. Outcomes variables (Quantitative
data) include birth companionship satisfaction, its benefits. Mean, frequency and standard deviation will be used for quantitative data. Qualitative data include feedback on service strength, needs for improvement and withdrawal reasons would be categorized into appropriate themes.