

Interactional practices of decision making during childbirth in maternity units

Submission date 16/01/2018	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 13/02/2018	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 17/03/2023	Condition category Pregnancy and Childbirth	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Government policy states that women in labour should be involved in decisions about their care and treatment. It is known what is said during labour matters for how women experience birth. However, policy recommendations to staff about how to communicate with women in labour are not based on evidence about what actually happens in birth. This is because most existing research is based on interviewing or surveying women some weeks after birth, so the details of what was said in labour are lost. Research is needed that provides details of actual talk about decisions during labour. The details of talk matter because as other studies of communication in medical settings have shown, even small changes in use of words can make a difference to what happens in healthcare e.g. one study in a GP setting showed that changing from 'is there anything else?' to 'is there something else?' increased the number of reported symptoms told to the doctor. The aim of this study is to find out how decisions are reached and communication through the talk that happens between staff, women in labour and their birth partners when giving birth in maternity units. It also aims to provide staff and women with detailed information about the effects of talk during labour in order to inform and empower staff, women and birth partners.

Who can participate?

Women , their birth partners and health care practitioners.

What does the study involve?

Participants who consent to taking part in the study are video or audio recorded during labour and birth. This is to establish how decisions are made during labour and birth. Participants are also asked to complete an ante-natal and a post –natal questionnaire at 35 weeks and 6 weeks post birth respectively to assess the relationship between their expectations before birth, their birth experience and their satisfaction post-birth.

What are the possible benefits and risks of participating?

There are no direct risks or benefits to those taking part in the study.

Where is the study run from?

1. University of York (UK)

2. Calderdale Royal Hospital (UK)
3. Sheffield Royal Hallamshire Hospital (UK)

When is the study starting and how long is it expected to run for?
May 2017 to August 2020 (updated 07/04/2020, previously: March 2020)

Who is funding the study?
National Institute for Health Research (UK)

Who is the main contact?
1. Professor Ellen Annandale (Scientific)
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2. Dr Lyn Brierley-Jones (Public)
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Study website
<https://www.york.ac.uk/sociology/research/current-research/vip/>

Contact information

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Scientific

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Public

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Additional identifiers

EudraCT/CTIS number

IRAS number

211358

ClinicalTrials.gov number

Secondary identifying numbers

14/70/73, CPMS 32505, IRAS 211358

Study information

Scientific Title

Voices in Partnership/Video In Practice: Interactional practices of decision making during childbirth in maternity units

Acronym

VIP

Study objectives

The aim of this study is find out how decisions are reached and communicated through the talk that happens between staff, women in labour and their birth partners when giving birth in maternity units.

Ethics approval required

Old ethics approval format

Ethics approval(s)

South Yorkshire Research Ethics Committee, 15/05/2017, ref: 17/YH/0102

Study design

Three year observational multi centre study

Primary study design

Observational

Secondary study design

Cohort study

Study setting(s)

Hospital

Study type(s)

Other

Participant information sheet

See additional files

Health condition(s) or problem(s) studied

Maternity Services

Interventions

A pilot study precedes this study and used the Conversation Analytic method for analysing data from 'One Born Every Minute' documentary created by Channel 4. The first year of the study is also an internal pilot but this is a pilot of recruitment not of the full methodology. If four analysable recordings are obtained by the end of this internal pilot period, then the full study can proceed.

This study aims to video (or audio record if women prefer) the labours of 50 low-risk, full-term women and write down in full what was said and how it was said (e.g. laughing, sighing). Participants receive ante natal and post natal questionnaires to these women to ascertain what their expectations for birth were and whether these expectations were met during childbirth. Further, this study investigates how decisions are made during labour and how these impacted on outcomes.

Health care professionals are also interviewed: 10 at each site. In total, 12 midwives and 8 obstetricians are interviewed, all of varying professional grades.

Intervention Type

Other

Primary outcome measure

Decision making is measured using the conversation analytic technique at the time of labour and birth.

Secondary outcome measures

Satisfaction is measured using both ante-natal and post-natal questionnaires at 35 weeks gestation and at 6 weeks post birth respectively.

Overall study start date

01/05/2017

Completion date

12/08/2020

Eligibility

Key inclusion criteria

1. Women: any woman (aged 16+) attending two study two sites with a low risk, singleton pregnancy and who expects to have a vaginal birth at full-term in a midwife-led maternity unit (Sheffield) or birth centre (Calderdale).
2. Birth Partners: The women's birth partners.
3. Healthcare Practitioners (HCPs): all clinical staff involved in maternity care at study sites.

Participant type(s)

Mixed

Age group

Adult

Sex

Both

Target number of participants

50 women

Total final enrolment

37

Key exclusion criteria

1. High risk pregnancy
2. Under 16 years of age

Date of first enrolment

16/10/2017

Date of final enrolment

30/01/2019

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

University of York

Heslington

York

United Kingdom

YO10 5DD

Study participating centre

Calderdale Royal Hospital

Salterhebble

Halifax

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Study participating centre

Sheffield Royal Hallamshire Hospital

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Sponsor information

Organisation

University of York

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Sponsor type

University/education

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ROR

<https://ror.org/04m01e293>

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research

Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Publication and dissemination plan

Dissemination will be via two workshops in months 31-36 of the project and dissemination leaflets will be printed at this time. The RCM's Progress Theatre Group will assist the project team in transferring the anonymised transcripts into artistic performance. By the end of month 36 a draft final report will have been submitted to NIHR and a first article submitted to a journal. These dissemination milestones will be achieved by 28/02/2020.

Intention to publish date

28/02/2020

Individual participant data (IPD) sharing plan

We are not expecting to make our raw data publicly available in order to preserve the anonymity of women, their birth partners and health care practitioners. Anonymised data will be held by the University of York.

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	version V4	01/08/2017	01/04/2019	No	Yes
Protocol file	version V5	01/01/2018	01/04/2019	No	No
Results article		01/12/2022	17/03/2023	Yes	No
HRA research summary			28/06/2023	No	No