

## Rethinking Experiences of Birth in Our Operating Theatre

*Combining qualitative research and experience-based co-design to improve theatre birth experiences*

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### What do we know?

- As many as 44% of women perceive their birth as traumatic, and >4% will develop Postpartum Post-Traumatic Stress Disorder (pPTSD)<sup>i</sup>
- Births in theatre are increasingly common, with over a third of Australian women giving birth via caesarean and over a quarter via instrumental delivery;<sup>ii</sup> These modes of delivery are associated with negative birth experiences<sup>i</sup>
- Negative birth experiences are one of the strongest determinants of pPTSD<sup>i</sup>, but there is little research into women's subjective experiences of birth in theatre

### Aims

- REBOOT aims to gain a detailed understanding of women's experiences of birth in theatre at Joan Kirner Women's and Children's (JKWC) and the perspectives of the staff who care for them
- With this understanding we will collaboratively develop ways of improving theatre birth experiences

### Methods

- Ten women who gave birth in JKWC operating theatres and ten multidisciplinary theatre staff members were interviewed via Zoom to discuss their experiences of birth in theatre
- Transcribed interviews were analysed in NVivo, to identify key themes
- Using experience-based co-design (EBCD) principles, the theme data will be presented, discussed, and next steps agreed upon between patients and staff at feedback meetings

### What is Experience Based Co-design?

- EBCD is a model for service redesign that gives patients and staff equal voices and focuses on their experiences and collaborative discussion to identify areas for quality improvement<sup>iii</sup>
- Originally developed in the United Kingdom, it is widely and increasingly used in Australia, and has impressive results in terms of stakeholder engagement and increased satisfaction amongst staff and patients<sup>iii</sup>

### Results

- Preliminary analysis highlight that women valued introductions, being well informed, particularly in rapidly changing situations, a relaxed atmosphere, and early skin to skin with baby in theatre
- Staff felt improvements to communication could be made, minimising the number of people in theatre, ensuring partner involvement, and maintaining the woman's dignity

### Next Steps

- Analysed themes and key touchpoints from the interviews will be discussed at feedback meetings with patients and staff
- These discussions will find ways that work well for both patients and the staff involved in their care to improve the journey through theatre and their birth experience

### References

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