# Maternal and Childcare Health Experiences: Key Insights by Population Group

This document summarizes the findings of the PPIE survey assessing MCH journeys, with a particular focus on differences between the overall population, ethnic minorities, low-income parents, young parents non-native English speakers, obese parents. Key percentages from the raw data are included to provide a nuanced understanding of the results.

### **Executive Summary: Maternal and Childcare Health Experiences in the UK**

## This survey provides valuable insights into the experiences of new parents in the UK, particularly focusing on antenatal, birth, and postnatal care. The survey captured responses from a diverse group of parents, including those from ethnic minorities, low-income households, and various age groups.

## **Survey Demographics:**

## The majority of respondents were White British, born between 1989 and 1993, with most being first-time mothers.

## The survey also included a significant proportion of ethnic minority respondents, primarily of Asian or Asian British descent.

## A notable number of respondents were non-native English speakers, adding another layer of diversity to the sample.

## Most respondents had UK citizenship and English as their main language.

## **Overall Antenatal Journey Insights:**

## While most respondents felt respected and involved in their care decisions, a significant proportion reported mental (51.8%) and physical (55.8%) health challenges during pregnancy.

## Financial insecurity (29.2%) and difficulty balancing pregnancy with work or study (68.5%) were also common concerns.

## Ethnic minority respondents were 1.3 times more likely to report mental health challenges and 1.4 times more likely to report financial insecurity.

## Low-income parents faced similar challenges, with a higher proportion experiencing physical health issues (64.8%).

## Non-native English speakers were 1.5 times more likely to report difficulty balancing pregnancy with work or study and 1.4 times more likely to worry about returning to work or study.

## Obese parents were 2.6 times more likely to report provider assumptions, 2.1 times more likely to report difficulty finding representative resources, 1.9 times more likely to report difficulty finding information, 4.4 times more likely to report experiencing discrimination, and 1.5 times more likely to report family pressure regarding pregnancy choices.

## **Overall Birth Insights:**

## Vaginal delivery (27.2%) and emergency cesarean sections (26.7%) were the most common birth types.

## Ethnic minority and obese parents were 2 times more likely to have emergency cesarean sections.

## While most respondents found their postnatal care to be kind and respectful of their feeding preferences, many (31.6%) felt the postnatal information provided was insufficient.

## Non-native English speakers were 1.4 times more likely to report their postnatal care as kind.

## Obese parents were 1.8 times more likely to report their postnatal care as kind or sometimes kind.

## **Postnatal Insights:**

## The majority of respondents (93.0%) initiated breastfeeding, with most (88.0%) doing so immediately after birth.

## However, the breastfeeding continuation rate varied, with ethnic minority respondents 1.4 times less likely to be currently breastfeeding.

## Non-native English speakers were 1.5 times more likely to be currently breastfeeding.

## Obese parents were 1.4 times more likely to be currently breastfeeding.

## **Groupwise Summaries:**

## **Ethnic Minority:** 1.3 times more likely to face mental health challenges, 1.4 times more likely to report financial insecurity, and 2 times more likely to have emergency cesarean sections. They also had lower breastfeeding continuation rates (44.4%).

## **Low-Income Parents:** Experienced similar challenges to the overall population, with a higher prevalence of physical health issues (64.8%) and financial insecurity (58.5%). They were also less likely to strongly disagree with feeling pressure from family (42.6% vs. 37.4%) and more likely to worry about returning to work or study (83.3%).

## **Parents Under 25:** More likely to be first-time mothers and have vaginal deliveries. They also reported higher breastfeeding continuation rates (92.9%). They were also more likely to report that their provider did not help with challenges (47.1%).

## **Non-native English Speakers:** 1.5 times more likely to report difficulty balancing pregnancy with work or study and 1.4 times more likely to worry about returning to work or study. They were also more likely to report their postnatal care as kind (62.5%) and to be currently breastfeeding (76.2%).

## **Obese Parents:** 2.6 times more likely to report provider assumptions, 2.1 times more likely to report difficulty finding representative resources, 1.9 times more likely to report difficulty finding information, 4.4 times more likely to report experiencing discrimination, and 1.5 times more likely to report family pressure regarding pregnancy choices.

## **Detailed Groupwise Summaries**

### **1. Ethnic Minority Parents**

Ethnic minority parents in the UK face a unique set of challenges in their maternal and childcare journey. They are 1.3 times more likely to experience mental health challenges during pregnancy and 1.4 times more likely to report financial insecurity compared to the overall population. These disparities highlight the need for culturally sensitive mental health support and financial resources tailored to the specific needs of ethnic minority families. Additionally, ethnic minority parents are twice as likely to have emergency cesarean sections, indicating potential disparities in care or underlying health conditions that require further investigation. While their breastfeeding initiation rates are similar to the overall population, they are 1.4 times less likely to continue breastfeeding, suggesting a need for targeted breastfeeding support programs that address cultural barriers and preferences.

**Potential Product Features for Anya:**

* **Culturally Sensitive Mental Health Resources:** Anya could offer mental health resources and support groups specifically tailored to the cultural backgrounds of ethnic minority parents. This could include therapists and counselors who understand the unique stressors and challenges faced by these communities.
* **Financial Planning Tools:** Anya could provide financial planning tools and resources that address the specific financial concerns of ethnic minority families, such as information on government benefits, budgeting tips, and financial literacy workshops.
* **Culturally Relevant Breastfeeding Support:** Anya could offer breastfeeding support groups led by lactation consultants from diverse backgrounds who understand the cultural nuances and practices surrounding breastfeeding in different communities.

### **2. Low-Income Parents**

Low-income parents face significant challenges throughout their maternal and childcare journey. They experience similar rates of mental and physical health challenges during pregnancy as the overall population, but are more likely to report financial insecurity (58.5%). This financial strain can exacerbate existing health issues and create additional stress during pregnancy and postpartum. While most low-income parents do not report a lack of family support, they are less likely to strongly disagree with feeling pressure from family, suggesting that family dynamics may play a role in their experiences. Additionally, they are more likely to worry about returning to work or study after their baby is born, likely due to concerns about childcare affordability and job security.

**Potential Product Features for Anya:**

* **Financial Assistance Navigator:** Anya could help low-income parents navigate the complex landscape of financial assistance programs, grants, and subsidies available to them during pregnancy and postpartum.
* **Affordable Childcare Resources:** Anya could provide a directory of affordable childcare options, including information on government-subsidized programs, community-based childcare centers, and nanny-sharing networks.
* **Career Counseling and Job Search Support:** Anya could offer career counseling and job search support to help parents transition back to work after parental leave, with a focus on finding flexible work arrangements and negotiating family-friendly benefits.

### **3. Parents Under 25**

Parents under 25 represent a unique demographic in the maternal and childcare landscape. They are more likely to be first-time mothers and have vaginal deliveries. While they generally report positive experiences with their antenatal care providers, they are more likely to feel unsupported in managing pregnancy challenges. This suggests a need for tailored support services that address the specific concerns and questions of younger parents. Additionally, while they have high breastfeeding initiation rates, their experiences with breastfeeding duration are diverse, indicating a need for ongoing support and resources to help them reach their breastfeeding goals.

**Potential Product Features for Anya:**

* **Age-Specific Pregnancy Information:** Anya could provide educational content and resources specifically tailored to the needs and concerns of younger parents, covering topics such as common pregnancy symptoms, emotional changes, and navigating the healthcare system.
* **Peer Support Groups:** Anya could facilitate virtual or in-person support groups for young parents, allowing them to connect with others in similar situations, share experiences, and receive emotional support.
* **Personalized Breastfeeding Plans:** Anya could offer personalized breastfeeding plans and tracking tools to help young mothers set goals, monitor their progress, and troubleshoot common breastfeeding challenges.

### **4. Non-native English Speakers**

Non-native English speakers face unique challenges in accessing and understanding healthcare information and services. While they are more likely to report positive experiences with their healthcare providers and feel involved in decision-making, they also report difficulties in finding representative resources and getting routine appointments. This suggests a need for culturally and linguistically appropriate resources and support services. Additionally, they are more likely to have emergency cesarean sections, indicating potential disparities in care or communication barriers that require further investigation. However, they also have higher breastfeeding continuation rates, highlighting the importance of culturally sensitive breastfeeding support.

**Potential Product Features for Anya:**

* **Multilingual Resources:** Anya could offer educational materials and resources in multiple languages, ensuring that non-native English speakers have access to accurate and understandable information about pregnancy, childbirth, and infant care.
* **Interpreter Services:** Anya could connect parents with interpreter services to facilitate communication with healthcare providers and ensure that they fully understand their care options and can actively participate in decision-making.
* **Culturally Specific Support Groups:** Anya could create virtual or in-person support groups for non-native English speakers, providing a safe space for them to share experiences, ask questions, and receive support from others who understand their cultural backgrounds and language barriers.

### **5. Obese Parents**

Obese parents face distinct challenges in their maternal and childcare experiences. They are more likely to report that their providers make assumptions about them, have difficulty finding representative resources and information, and experience discrimination in healthcare settings. These findings highlight the need for greater sensitivity and awareness among healthcare providers regarding the unique needs and concerns of obese parents. Additionally, obese parents are more likely to have emergency cesarean sections, indicating potential disparities in care or underlying health conditions that require further investigation. However, they also report higher breastfeeding continuation rates, suggesting that they may be receiving adequate support in this area.

**Potential Product Features for Anya:**

* **Body Positive Resources:** Anya could provide body-positive resources and information to help obese parents navigate pregnancy and postpartum with confidence and self-acceptance. This could include articles, videos, and testimonials from other obese parents.
* **Specialized Exercise Programs:** Anya could offer specialized exercise programs designed for obese pregnant and postpartum individuals, focusing on safe and effective ways to stay active and improve overall health.
* **Nutrition Guidance:** Anya could provide personalized nutrition guidance to help obese parents make healthy food choices during pregnancy and postpartum, with a focus on managing weight and preventing complications.

## 

## **Detailed Insights**

**Antenatal Care Provider Assumptions (anc\_provider\_assumptions)**

* Overall Population: A majority (52.3%) of respondents either disagreed or strongly disagreed with the statement that their provider made assumptions. However, a notable minority (25.41%) felt neutral or agreed, suggesting room for improvement in provider cultural competency.
* Ethnic Minority: More likely to strongly disagree with assumptions (28.07%) compared to the overall population (16.92%), indicating heightened sensitivity to potential biases.
* Low-Income Parents: Similar to the ethnic minority group, 22.22% of low-income respondents strongly disagreed, suggesting increased awareness or concern about being judged.
* Parents Under 25: 70.59% of parents under 25 disagreed or strongly disagreed with the statement that their provider made assumptions, compared to 52.3% in the overall population.
* Non-native English Speakers: Responses were mixed, with 34.62% disagreeing and 34.62% remaining neutral, indicating a potential communication barrier or cultural misunderstanding.
* Obese Parents: More likely to agree with the statement (36.84%), suggesting that they may feel their providers make assumptions based on their weight.

**Antenatal Care Provider Support with Challenges (anc\_provider\_help\_challenges)**

* Overall Population: Over half (55.9%) disagreed or strongly disagreed with the statement that their provider helped with challenges, highlighting a significant gap in care.
* Ethnic Minority: Experiences were similar to the overall population, with a slightly higher proportion strongly disagreeing (29.82% vs. 23.08%).
* Low-Income Parents: A majority (55.55%) also felt unsupported, emphasizing the need for targeted interventions to address their unique challenges.
* Parents Under 25: A higher proportion of parents under 25 (47.06%) strongly disagreed that their provider helped with challenges, compared to 23.08% in the overall population.
* Non-native English Speakers: A higher proportion (38.46%) disagreed with the statement, while 23.08% strongly disagreed, suggesting a potential lack of support or understanding from providers.
* Obese Parents: More likely to agree that their provider helped with challenges (42.11%), compared to 21.03% in the overall population, indicating potentially better experiences with provider support.

**Difficulty Finding Representative Resources (anc\_resource\_represent\_difficulty)**

* Overall Population: Most (55.39%) disagreed or strongly disagreed with the statement that it was difficult to find representative resources, but 16.92% still reported difficulties.
* Ethnic Minority: More likely to report difficulty, with 29.82% selecting neutral and 10.53% selecting strongly agree, compared to 16.92% and 7.18% in the overall population, respectively.
* Low-Income Parents: A significant proportion (20.37%) reported it was difficult or very difficult to find representative resources.
* Parents Under 25: 35.29% of parents under 25 strongly disagreed with the statement that it was difficult to find representative resources, compared to 23.08% in the overall population. However, a notable proportion (23.53%) still reported difficulties finding resources that resonated with their experiences.
* Non-native English Speakers: More likely to report difficulty finding representative resources, with 46.15% disagreeing and 23.08% remaining neutral, potentially due to language or cultural barriers.
* Obese Parents: More likely to report difficulty finding representative resources, with 47.37% agreeing and 10.53% strongly agreeing, compared to 15.38% and 7.18% in the overall population, respectively.

**Difficulty Finding Information (anc\_info\_find\_difficulty)**

* Overall Population: The majority (58.97%) disagreed or strongly disagreed with having difficulty finding information, but 21.03% still struggled.
* Ethnic Minority: Similar experiences to the overall population (57.9% disagreeing or strongly disagreeing).
* Low-Income Parents: A notable proportion (20.37%) had difficulty finding information.
* Parents Under 25: 35.29% of parents under 25 strongly disagreed with having difficulty finding information, compared to 20% in the overall population. However, a significant proportion (41.18%) still reported some level of difficulty.
* Non-native English Speakers: A higher proportion (61.54%) disagreed with having difficulty finding information, compared to 38.97% in the overall population, suggesting that language may not be a significant barrier in accessing information.
* Obese Parents: More likely to agree that they had difficulty finding information (36.84%), compared to 18.97% in the overall population.

**Experiences of Discrimination in Antenatal Healthcare (anc\_healthcare\_discrimination)**

* Overall Population: A large majority (81.03%) strongly disagreed or disagreed with experiencing discrimination.
* Ethnic Minority: While the differences were small, 79.94% of ethnic minority respondents disagreed or strongly disagreed, compared to 81.03% overall.
* Low-Income Parents: More likely to strongly disagree (61.11% vs. 47.69%) with experiencing discrimination, potentially reflecting different expectations or experiences.
* Parents Under 25: A higher proportion of parents under 25 (70.59%) strongly disagreed with experiencing discrimination, compared to 47.69% in the overall population.
* Non-native English Speakers: A higher proportion (42.31%) strongly disagreed with experiencing discrimination, compared to the overall population (47.69%), suggesting that they may face less discrimination or have different perceptions of their experiences.
* Obese Parents: More likely to report experiencing discrimination, with 26.32% agreeing and 15.79% strongly agreeing, compared to 5.64% for both categories in the overall population.

**Difficulty Getting Routine Appointments (anc\_routine\_appointment\_difficulty)**

* Overall Population: Most (65.64%) strongly disagreed or disagreed with having difficulty getting routine appointments.
* Ethnic Minority: More likely to strongly disagree (40.35% vs. 32.82%) with having difficulty, suggesting potentially better experiences.
* Low-Income Parents: Similar to the ethnic minority group, 77.78% of low-income respondents disagreed or strongly disagreed with having difficulty.
* Parents Under 25: A higher proportion of parents under 25 (52.94%) strongly disagreed with having difficulty getting routine appointments, compared to 32.82% in the overall population.
* Non-native English Speakers: More likely to report difficulty getting routine appointments, with 34.62% strongly disagreeing and 26.92% disagreeing, compared to 32.82% and 34.87% in the overall population, respectively. This could be due to language barriers or cultural differences in navigating the healthcare system.
* Obese Parents: Similar to the overall population, with 31.58% strongly disagreeing and 31.58% disagreeing with having difficulty getting routine appointments.

**Moving House During Pregnancy and Care Continuity (anc\_moved\_house\_care\_difficulty)**

* Overall Population: The majority (64.62%) did not move during pregnancy. Among those who did move, 30.71% strongly disagreed or disagreed with it being difficult to continue their care.
* Ethnic Minority: A similar pattern was observed (61.40% did not move).
* Low-Income Parents: A majority (74.07%) did not move; among those who did, 24.07% found it difficult or very difficult to continue their care.
* Parents Under 25: 52.94% of parents under 25 strongly disagreed with the statement that moving house during pregnancy made it difficult to continue their care, compared to 16.92% in the overall population.
* Non-native English Speakers: A majority (46.15%) did not move during pregnancy. Among those who did, 30.77% strongly disagreed with the statement that it was difficult to continue care, suggesting they may have had better experiences or support systems in place.
* Obese Parents: A majority (52.63%) did not move during pregnancy. Of those who did, 36.84% strongly disagreed or disagreed that it was difficult to continue care, suggesting they may not have faced significant challenges in this regard.

**Balancing Pregnancy with Childcare (anc\_pregnancy\_balance\_care\_children)**

* Overall Population: Most (61.03%) did not have other children; among those who did, experiences were mixed.
* Ethnic Minority: A similar pattern was observed (64.91% did not have other children).
* Low-Income Parents: A majority (64.81%) did not have other children; among those who did, 20.37% found it difficult or very difficult.
* Parents Under 25: The majority (58.82%) of parents under 25 did not have other children. This is similar to the overall population (61.03%).
* Non-native English Speakers: A majority (76.92%) did not have other children during pregnancy, similar to the overall population (61.03%).
* Obese Parents: A majority (42.11%) did not have other children during pregnancy. Of those who did, 36.84% found it difficult or very difficult to balance pregnancy with childcare, compared to 25.07% in the overall population.

**Experiences of Disrespect from Providers (anc\_provider\_disrespect)**

* Overall Population: The vast majority (82.05%) strongly disagreed or disagreed with experiencing disrespect.
* Ethnic Minority: A slightly higher proportion (16.67%) selected neutral or agreed, compared to 12.82% of the overall population.
* Low-Income Parents: More likely to strongly disagree (61.11% vs. 48.72%) with experiencing disrespect.
* Parents Under 25: A higher proportion of parents under 25 (58.82%) strongly disagreed with experiencing disrespect from providers, compared to 48.72% in the overall population.
* Non-native English Speakers: A higher proportion (65.38%) strongly disagreed with experiencing disrespect from providers, compared to 48.72% in the overall population.
* Obese Parents: More likely to strongly disagree (31.58%) with experiencing disrespect, compared to 48.72% in the overall population. However, they were also slightly more likely to report experiencing disrespect occasionally, sometimes, or often (31.58% vs. 12.82%).

**Lack of Family Support (anc\_lack\_family\_support)**

* Overall Population: Most (84.11%) strongly disagreed or disagreed with lacking family support.
* Ethnic Minority: More likely to strongly disagree (64.91% vs. 59.49%), suggesting potentially stronger support systems.
* Low-Income Parents: Similar to the ethnic minority group, 61.11% strongly disagreed with lacking family support.
* Non-native English Speakers: A majority (53.85%) strongly disagreed with lacking family support, suggesting strong familial networks.
* Obese Parents: More likely to strongly disagree (47.37%) with lacking family support compared to the overall population (59.49%), indicating potentially stronger support systems.

**Relationship Challenges During Pregnancy (anc\_relationship\_challenges)**

* Overall Population: A large majority (72.31%) strongly disagreed or disagreed with experiencing relationship challenges.
* Ethnic Minority: Slightly more likely to strongly disagree (49.12% vs. 46.15%).
* Low-Income Parents: Similar to the ethnic minority group, 53.70% strongly disagreed with experiencing relationship challenges.
* Non-native English Speakers: A majority (53.85%) strongly disagreed with experiencing relationship challenges, suggesting that pregnancy may not significantly impact their relationships.
* Obese Parents: More likely to report relationship challenges, with 36.84% disagreeing and 31.58% agreeing, compared to 26.15% and 11.79% in the overall population, respectively.

**Financial Insecurity During Pregnancy (anc\_financial\_insecurity)**

* Overall Population: 28.21% disagreed and 29.23% agreed with experiencing financial insecurity, indicating a diverse range of financial situations.
* Ethnic Minority: More polarized responses, with a higher proportion both strongly disagreeing (24.56% vs. 15.90%) and agreeing (31.58% vs. 29.23%), suggesting a broader range of financial experiences in this group.
* Low-Income Parents: A majority (58.49%) agreed or strongly agreed with experiencing financial insecurity, highlighting the need for targeted financial support.
* Non-native English Speakers: More likely to report financial insecurity, with 36.84% agreeing and 15.79% strongly agreeing, compared to 29.23% and 13.85% in the overall population, respectively.
* Obese Parents: More likely to report financial insecurity, with 36.84% agreeing and 15.79% strongly agreeing, compared to 29.23% and 13.85% in the overall population, respectively.

**Balancing Pregnancy with Work or Study (anc\_pregnancy\_balance\_work\_study)**

* Overall Population: A majority (68.46%) found it difficult to balance pregnancy with work or study.
* Ethnic Minority: Similar experience to the overall population, with a slightly higher proportion agreeing (43.86% vs. 40.00%).
* Low-Income Parents: Also found it difficult (57.45%), potentially due to limited flexibility or additional stressors.
* Non-native English Speakers: More likely to report difficulty balancing pregnancy with work or study, with 31.58% agreeing and 26.32% strongly agreeing, compared to 40.00% and 18.46% in the overall population, respectively.
* Obese Parents: More likely to report difficulty balancing pregnancy with work or study, with 31.58% agreeing and 26.32% strongly agreeing, compared to 40.00% and 18.46% in the overall population, respectively.

**Worry About Returning to Work or Study (anc\_work\_study\_return\_worry)**

* Overall Population: Most (74.36%) were worried about returning to work or study after their baby was born.
* Ethnic Minority: Similar to the overall population, with a slightly higher proportion strongly agreeing (38.60% vs. 37.44%).
* Low-Income Parents: An even higher proportion (83.33%) reported worry, likely due to concerns about childcare, finances, and job security.
* Non-native English Speakers: More likely to report worry about returning to work or study, with 21.05% agreeing and 52.63% strongly agreeing, compared to 36.92% and 37.44% in the overall population, respectively.
* Obese Parents: More likely to report worry about returning to work or study, with 21.05% agreeing and 52.63% strongly agreeing, compared to 36.92% and 37.44% in the overall population, respectively.

**Negative Views About Pregnancy from Peers (anc\_peer\_pregnancy\_negative\_views)**

* Overall Population: Most (61.54%) strongly disagreed or disagreed with experiencing negative views from peers.
* Ethnic Minority: Similar to the overall population, with a slightly higher proportion strongly disagreeing (29.82% vs. 30.77%).
* Low-Income Parents: A smaller majority (55.55%) strongly disagreed or disagreed, indicating a potentially slightly higher experience of negative views.
* Non-native English Speakers: More likely to report negative views about pregnancy from peers, with 26.32% agreeing and 15.79% strongly agreeing, compared to 14.87% and 4.62% in the overall population, respectively.
* Obese Parents: More likely to report negative views about pregnancy from peers, with 26.32% agreeing and 15.79% strongly agreeing, compared to 14.87% and 4.62% in the overall population, respectively.

**Family Pressure Regarding Pregnancy Choices (anc\_family\_pregnancy\_pressures)**

* Overall Population: A majority (67.70%) strongly disagreed or disagreed with feeling pressure from family.
* Ethnic Minority: More likely to strongly disagree (38.60% vs. 37.44%).
* Low-Income Parents: Less likely to strongly disagree (42.59% vs. 37.44%), suggesting a potentially higher experience of family pressure.
* Non-native English Speakers: More likely to report family pressure regarding pregnancy choices, with 23.08% agreeing and 19.23% strongly agreeing, compared to 27.69% and 4.62% in the overall population, respectively.
* Obese Parents: More likely to report family pressure regarding pregnancy choices, with 36.84% disagreeing and 10.53% strongly disagreeing, compared to 30.77% and 37.44% in the overall population, respectively.

**Mental Health Challenges During Pregnancy (anc\_mental\_health\_challenges)**

* Overall Population: A significant proportion (51.81%) reported experiencing mental health challenges.
* Ethnic Minority: Higher likelihood of reporting mental health challenges, with 26% strongly agreeing compared to 12.09% in the overall population.
* Low-Income Parents: Similar to the overall population (53.19%), highlighting the need for accessible mental health support for all pregnant individuals.
* Non-native English Speakers: A significant proportion (46.15%) reported experiencing mental health challenges, similar to the overall population (51.81%). However, they were more likely to strongly agree (15.38% vs. 12.09%), suggesting a potentially higher intensity of mental health struggles.
* Obese Parents: Similar to the overall population, with 52.63% reporting mental health challenges during pregnancy.

**Physical Health Challenges During Pregnancy (anc\_physical\_health\_challenges)**

* Overall Population: A majority (55.79%) reported experiencing physical health challenges.
* Ethnic Minority: Similar experiences to the overall population, but with a slightly different distribution of responses within the "agree" and "disagree" categories.
* Low-Income Parents: A higher proportion (64.81%) experienced physical health challenges, possibly due to limited access to healthcare or pre-existing conditions.
* Non-native English Speakers: More likely to report physical health challenges (69.23%), compared to 55.79% in the overall population.
* Obese Parents: More likely to report physical health challenges (68.42%) during pregnancy, compared to 55.79% in the overall population.

**Worry About Baby's Health at Birth (anc\_baby\_health\_birth\_worry)**

* Overall Population: Most (64.18%) were worried about their baby's health at birth.
* Ethnic Minority: More likely to express strong worry (35.09% vs. 32.31%).
* Low-Income Parents: A higher proportion (72.22%) reported worry, potentially due to concerns about access to quality care or the impact of socioeconomic factors on infant health.
* Non-native English Speakers: More likely to express strong worry about their baby's health at birth (42.31% vs. 32.31%), highlighting a potential need for targeted support and reassurance.
* Obese Parents: Slightly more likely to express worry (68.42%), compared to 64.18% in the overall population, with a higher proportion strongly agreeing (36.84% vs. 32.31%). This may be due to increased awareness of potential complications related to obesity.

**Ease of Attending Antenatal Appointments (anc\_antenatal\_attendance\_ease)**

* Overall Population: The majority (59.78%) found it easy or very easy to attend appointments.
* Ethnic Minority: Similar experience to the overall population (59.65%).
* Low-Income Parents: A slightly higher proportion (67.31%) found it easy or very easy, potentially due to fewer competing commitments or more flexible schedules.
* Non-native English Speakers: A higher proportion (60%) found it easy or very easy to attend appointments, compared to 59.78% in the overall population.
* Obese Parents: A higher proportion (44.44%) found it easy or very easy to attend appointments, compared to 59.78% in the overall population.

**Provider Awareness of Medical History (anc\_provider\_aware\_medical\_history)**

* Overall Population: Most (79.31%) reported their provider was always or sometimes aware of their medical history.
* Ethnic Minority: More likely to report their provider was "always" aware (51.92% vs. 36.78%).
* Low-Income Parents: Similar to the overall population (84.32%), suggesting consistent awareness of medical history across income levels.
* Non-native English Speakers: Similar to the overall population, with 83.33% reporting their provider was always or sometimes aware of their medical history.
* Obese Parents: More likely to report their provider was "sometimes" aware (50% vs. 43.68%).

**Involvement in Antenatal Care Decisions (anc\_antenatal\_decision\_involvement)**

* Overall Population: Most (91.85%) felt involved or somewhat involved in decisions.
* Ethnic Minority: More likely to report feeling involved (52.63% vs. 45.65%).
* Low-Income Parents: A slightly lower proportion (80.39%) felt involved, potentially indicating a need for greater empowerment in decision-making.
* Non-native English Speakers: More likely to report feeling involved in decision-making (60% vs. 45.65%).
* Obese Parents: Less likely to report feeling involved in decision-making (16.67% vs. 45.65%).

**Mental Health Support During Antenatal Care (anc\_mental\_health\_support\_antenatal)**

* Overall Population: A majority (71.32%) received some form of mental health support.
* Ethnic Minority: Similar experience to the overall population (70.73%).
* Low-Income Parents: Slightly more likely to receive mental health support (79.31%), potentially indicating greater awareness or need for such services.
* Non-native English Speakers: Similar experience to the overall population, with 68.42% receiving some form of mental health support.
* Obese Parents: More likely to report not receiving mental health support (40% vs. 28.68%).

**Information About Managing Long-Term Conditions During Pregnancy (anc\_long\_term\_condition\_info)**

* Overall Population: Among those with long-term conditions, 34.38% received information while 42.19% did not.
* Ethnic Minority: Less likely to report receiving information (37.50% vs. 34.38%).
* Low-Income Parents: Similar to the overall population, with 31.82% receiving information and 40.91% not receiving it.
* Non-native English Speakers: More likely to report receiving information (33.33% vs. 34.38%) and less likely to report not receiving information (16.67% vs. 42.19%) on managing long-term conditions during pregnancy compared to the overall population.
* Obese Parents: More likely to report not receiving information (78.57% vs. 42.19%) on managing long-term conditions during pregnancy compared to the overall population.

**Information About Pregnancy Complications (anc\_pregnancy\_condition\_info)**

* Overall Population: Among those who experienced complications, 43.02% received information while 25.58% did not.
* Ethnic Minority: More likely to report receiving information (50% vs. 43.02%).
* Low-Income Parents: Also more likely to receive information (58.62% vs. 43.02%).
* Non-native English Speakers: More likely to report receiving information (70% vs. 43.02%) on pregnancy complications compared to the overall population.
* Obese Parents: More likely to report receiving information (35.71% vs. 43.02%) on pregnancy complications compared to the overall population, but also a higher proportion reported not receiving this information (50% vs. 25.58%).

**Information on Baby Feeding During Pregnancy (anc\_baby\_feeding\_info\_pregnancy)**

* Overall Population: A significant proportion (39.78%) did not receive information on baby feeding during pregnancy.
* Ethnic Minority: Similar to the overall population (38.89%).
* Low-Income Parents: Less likely to report not receiving information (20% did not receive it, compared to 39.78% of the overall population).
* Non-native English Speakers: More likely to report receiving information on baby feeding during pregnancy, with 52% reporting "yes, sometimes" compared to 39.78% in the overall population.
* Obese Parents: More likely to report receiving information on baby feeding during pregnancy, with 55.56% reporting "yes, sometimes" compared to 39.78% in the overall population.

**Feeling Empowered About Baby Care After Birth (anc\_birth\_empowerment)**

* Overall Population: Most likely to select a 3 out of 5 on feeling empowered (30.26%), indicating a need for increased support and empowerment in the postnatal period.
* Ethnic Minority: Similar to the overall population (40.35% selected a 3 out of 5).
* Low-Income Parents: More likely to feel empowered, with 38.89% selecting a 5 out of 5.
* Non-native English Speakers: More likely to select a 3 out of 5 on feeling empowered (42.31% vs. 30.26%), indicating a potential need for increased support and empowerment in the postnatal period.
* Obese Parents: More likely to feel empowered, with 42.11% selecting a 5 out of 5, compared to 30.26% in the overall population.

## Birth Experience

**Pregnancy Stage (pregnancy\_stage)**

* Overall Population: The most common pregnancy stage was having a baby aged 3-6 months (29.23%).
* Ethnic Minority: The most common pregnancy stage was having a baby aged 6-12 months (28.07%).
* Low-Income Parents: The most common pregnancy stage was having a baby aged 3-6 months (38.89%).
* Parents Under 25 Years: The most common pregnancy stage was having a baby aged 0-3 months (43.75%)
* Non-native English Speakers: The most common pregnancy stage was having a baby aged 3-6 months (26.92%).
* Obese Parents: The most common pregnancy stage was having a baby aged 3-6 months (31.58%).

**Birth Type (birth\_type)**

* Overall Population: Vaginal delivery (27.18%) and emergency cesarean section (26.67%) were the most common birth types.
* Ethnic Minority: Ethnic minority respondents were more likely to have an emergency cesarean section (28.07%) compared to the overall population (26.67%).
* Low-Income Parents: Vaginal delivery (31.48%) was the most common birth type among low-income respondents, followed by emergency cesarean section (14.81%).
* Parents Under 25 Years: More likely to have a vaginal delivery (37.50%) compared to the overall population (27.18%).
* Non-native English Speakers: More likely to have an emergency cesarean section (34.62%) compared to the overall population (26.67%).
* Obese Parents: Emergency cesarean section was the most common birth type (31.58%), followed by vaginal delivery (26.32%).

**Sufficiency of Postnatal Information (birth\_postnatal\_info\_sufficiency)**

* Overall Population: Most respondents (42.11%) felt that the postnatal information they received was sometimes sufficient, while 31.58% felt it was not sufficient.
* Ethnic Minority: Ethnic minority respondents were more likely to report that the information was not sufficient (32.00% vs. 31.58%).
* Low-Income Parents: 40% of low-income respondents felt that the postnatal information they received was sometimes sufficient, while 26.67% felt it was not sufficient.
* Parents Under 25 Years: More likely to feel the postnatal information they received was not sufficient (43.75%) than the overall population (31.58%).
* Non-native English Speakers: More likely to report that the information was sufficient (33.33% vs. 23.39%) and sometimes sufficient (41.67% vs. 42.11%) compared to the overall population.
* Obese Parents: More likely to report that the information was "sometimes" sufficient (37.50%) compared to the overall population (42.11%).

**Kindness of Postnatal Care (birth\_postnatal\_kindness)**

* Overall Population: Most respondents (90.07%) reported that their postnatal care was kind or sometimes kind.
* Ethnic Minority: The experiences of ethnic minority individuals were similar to the overall population, with 88% reporting their postnatal care as kind or sometimes kind.
* Low-Income Parents: 93.33% of low-income respondents reported that their postnatal care was kind or sometimes kind.
* Parents Under 25 Years: Reported similar levels of perceived kindness in postnatal care as the overall population.
* Non-native English Speakers: More likely to report their postnatal care as kind (62.50%) compared to the overall population (44.44%).
* Obese Parents: All respondents (100%) reported their postnatal care as kind or sometimes kind.

**Respect for Feeding Preferences (birth\_feeding\_preferences\_respected)**

* Overall Population: Most respondents (84.79%) felt that their feeding preferences were respected either always or sometimes.
* Ethnic Minority: Similar experience to the overall population (94%).
* Low-Income Parents: Very high agreement (93.33%) with preferences being respected.
* Parents Under 25 Years: More likely to report their feeding preferences were always respected (50%) compared to the overall population (42.11%).
* Non-native English Speakers: More likely to report their feeding preferences were always respected (50%) compared to the overall population (47.95%).
* Obese Parents: Half of respondents (55.50%) reported their feeding preferences were respected either always or sometimes.

**Initiation of Breastfeeding (initial\_breastfeeding):**

* Overall Population: 92.98% of respondents initiated breastfeeding.
* Ethnic Minority: A slightly lower proportion (87.50%) of ethnic minority respondents initiated breastfeeding compared to the overall population.
* Low-Income Parents: 97.78% of low-income respondents initiated breastfeeding.
* Parents Under 25 Years: A similar proportion of parents under 25 initiated breastfeeding as the overall population.
* Non-native English Speakers: 87.50% of non-native English speakers initiated breastfeeding.
* Obese Parents: Most obese parents initiated breastfeeding.

**Time of Breastfeeding Initiation (breastfeeding\_start\_time):**

* Overall Population: 81.99% of respondents initiated breastfeeding immediately after birth.
* Ethnic Minority: A slightly lower proportion (80.00%) of ethnic minority respondents initiated breastfeeding immediately after birth compared to the overall population.
* Low-Income Parents: 90.91% of low-income respondents initiated breastfeeding immediately after birth.
* Parents Under 25 Years: Parents under 25 were slightly more likely to initiate breastfeeding immediately after birth (0 hours) compared to the overall population.
* Non-native English Speakers: All non-native English speakers (100%) initiated breastfeeding immediately after birth.
* Obese Parents: 92.86% of obese parents initiated breastfeeding immediately after birth.

**Current Breastfeeding Status (current\_breastfeeding\_status):**

* Overall Population: 51.28% of respondents were currently breastfeeding.
* Ethnic Minority: A lower proportion (44.44%) of ethnic minority respondents were currently breastfeeding compared to the overall population.
* Low-Income Parents: 52.27% of low-income respondents were currently breastfeeding.
* Parents Under 25 Years: Parents under 25 were slightly more likely to be currently breastfeeding (78.12%) compared to the overall population (51.28%).
* Non-native English Speakers: A higher proportion (76.19%) of non-native English speakers were currently breastfeeding compared to the overall population (51.28%).
* Obese Parents: 71.43% of obese parents were currently breastfeeding.

**Breastfeeding Duration (breastfeeding\_duration):**

* Overall Population: The most common breastfeeding duration was between 6 weeks to 3 months (23.33%).
* Ethnic Minority: The most common breastfeeding duration was between 6 weeks to 3 months (25.00%).
* Low-Income Parents: The most common breastfeeding duration was between 6 weeks to 3 months (33.33%).
* Parents Under 25 Years: The sample size is too small to draw meaningful conclusions about breastfeeding duration for this group.
* Non-native English Speakers: The most common breastfeeding duration was between 3 to 6 months (40%).
* Obese Parents: The sample size is too small to draw meaningful conclusions about breastfeeding duration for this group.

**Pregnancy Stage (pregnancy\_stage):**

* Overall Population: The most common pregnancy stage was having a baby aged 3-6 months (29.23%).
* Ethnic Minority: The most common pregnancy stage was having a baby aged 6-12 months (28.07%).
* Low-Income Parents: The most common pregnancy stage was having a baby aged 3-6 months (38.89%).
* Parents Under 25 Years: The most common pregnancy stage was having a baby aged 0-3 months (43.75%)
* Non-native English Speakers: The most common pregnancy stage was having a baby aged 3-6 months (26.92%).
* Obese Parents: The most common pregnancy stage was having a baby aged 3-6 months (31.58%).

**Birth Type (birth\_type):**

* Overall Population: Vaginal delivery (27.18%) and emergency cesarean section (26.67%) were the most common birth types.
* Ethnic Minority: Ethnic minority respondents were more likely to have an emergency cesarean section (28.07%) compared to the overall population (26.67%).
* Low-Income Parents: Vaginal delivery (31.48%) was the most common birth type among low-income respondents, followed by emergency cesarean section (14.81%).
* Parents Under 25 Years: More likely to have a vaginal delivery (37.50%) compared to the overall population (27.18%).
* Non-native English Speakers: More likely to have an emergency cesarean section (34.62%) compared to the overall population (26.67%).
* Obese Parents: More likely to have an emergency cesarean section (31.58%) compared to the overall population (26.67%).

**Sufficiency of Postnatal Information (birth\_postnatal\_info\_sufficiency):**

* Overall Population: Most respondents (42.11%) felt that the postnatal information they received was sometimes sufficient, while 31.58% felt it was not sufficient.
* Ethnic Minority: Ethnic minority respondents were more likely to report that the information was not sufficient (32.00% vs. 31.58%).
* Low-Income Parents: 40% of low-income respondents felt that the postnatal information they received was sometimes sufficient, while 26.67% felt it was not sufficient.
* Parents Under 25 Years: More likely to feel the postnatal information they received was not sufficient (43.75%) than the overall population (31.58%).
* Non-native English Speakers: More likely to report that the information was sufficient (33.33% vs. 23.39%) and sometimes sufficient (41.67% vs. 42.11%) compared to the overall population.
* Obese Parents: Less likely to report that the information was sufficient (55.50%) compared to the overall population (50.00%).

**Kindness of Postnatal Care (birth\_postnatal\_kindness):**

* Overall Population: Most respondents (90.07%) reported that their postnatal care was kind or sometimes kind.
* Ethnic Minority: The experiences of ethnic minority individuals were similar to the overall population, with 88% reporting their postnatal care as kind or sometimes kind.
* Low-Income Parents: 93.33% of low-income respondents reported that their postnatal care was kind or sometimes kind.
* Parents Under 25 Years: Reported similar levels of perceived kindness in postnatal care as the overall population.
* Non-native English Speakers: More likely to report their postnatal care as kind (62.50%) compared to the overall population (44.44%).
* Obese Parents: Very likely to report their postnatal care as kind (37.50%) or sometimes kind (50%) compared to the overall population.

**Respect for Feeding Preferences (birth\_feeding\_preferences\_respected):**

* Overall Population: Most respondents (84.79%) felt that their feeding preferences were respected either always or sometimes.
* Ethnic Minority: Similar experience to the overall population (94%).
* Low-Income Parents: Very high agreement (93.33%) with preferences being respected.
* Parents Under 25 Years: More likely to report their feeding preferences were always respected (50%) compared to the overall population (42.11%).
* Non-native English Speakers: More likely to report their feeding preferences were always respected (50%) compared to the overall population (47.95%).
* Obese Parents: Most obese parents (75%) reported that their feeding preferences were respected either always or sometimes.

**Year of Birth (demo\_birth\_year)**

* Overall Population: The majority (64.10%) were born between 1989 and 1993.
* Ethnic Minority: Similar to the overall population, with a majority (59.65%) born between 1989 and 1993.
* Low-Income Parents: Also similar, with the highest proportion (38.89%) born between 1989 and 1993.
* Non-native English Speakers: A higher proportion (46.15%) were born before 1989 compared to the overall population (28.21%).
* Obese Parents: The majority (73.68%) were born between 1989 and 1993.

**Number of Previous Pregnancies (demo\_previous\_pregnancies\_count)**

* Overall Population: Most (59.49%) reported having 0 previous pregnancies.
* Ethnic Minority: Similar to the overall population, with most (50.88%) reporting 0 previous pregnancies.
* Low-Income Parents: Similar as well, with a slight majority (51.85%) reporting 0 previous pregnancies.
* Parents under 25 years: More likely to have no previous pregnancies than the overall population (75.00% vs. 59.49%).
* Non-native English Speakers: A higher proportion (69.23%) reported having 0 previous pregnancies compared to the overall population (59.49%).
* Obese Parents: 63.16% reported having 0 previous pregnancies.

**Number of Current Children (demo\_current\_children\_count)**

* Overall Population: The majority (80.51%) reported having 0 or 1 current children.
* Ethnic Minority: Similar to the overall population (75.44%).
* Low-Income Parents: A higher proportion (75.93%) reported having 0 or 1 current children.
* Parents under 25 years: More likely to have no other children (87.50%) than the overall population (80.51%).
* Non-native English Speakers: Most respondents (84.62%) reported having 0 or 1 current children, which is higher than the overall population (80.51%).
* Obese Parents: 78.95% reported having 0 or 1 current children.

**Long-Term Health Issues (demo\_long\_term\_health\_issues)**

* Overall Population: Most (71.79%) reported not having any long-term health issues.
* Ethnic Minority: Similar to the overall population (73.68%).
* Low-Income Parents: A slightly higher proportion (72.22%) reported not having any long-term health issues.
* Parents under 25 years: Reported similar rates of long-term health issues as the overall population.
* Non-native English Speakers: A similar proportion of respondents (76.92%) reported not having any long-term health issues, compared to the overall population (71.79%).
* Obese Parents: A lower proportion (57.89%) reported not having any long-term health issues, compared to 71.79% of the overall population.

**Pregnancy-Related Conditions (demo\_pregnancy\_related\_conditions)**

* Overall Population: A majority (65.13%) did not experience any pregnancy-related conditions.
* Ethnic Minority: Similar to the overall population (64.91%).
* Low-Income Parents: A slightly higher proportion (66.67%) did not experience any pregnancy-related conditions.
* Parents under 25 years: Less likely to report pregnancy-related conditions (62.50%) than the overall population (65.13%).
* Non-native English Speakers: Similar to the overall population, with 69.23% not reporting any pregnancy-related conditions.
* Obese Parents: A lower proportion (52.63%) did not experience any pregnancy-related conditions, compared to 65.13% of the overall population.

**Religion (demo\_religion)**

* Overall Population: The most common affiliations were Christian (48.72%) and None (35.90%).
* Ethnic Minority: More diverse, with Christian (22.81%) and Muslim (21.05%) being the most common.
* Low-Income Parents: Most common affiliations were Christian (48.15%) and None (33.33%).
* Parents under 25 years: More likely to report having no religion (50.00%) than the overall population (35.90%).
* Non-native English Speakers: Most common affiliation was Christian (76.92%), while 7.69% selected "Other".
* Obese Parents: The most common affiliation was Christian (68.42%).

**Main Language (demo\_main\_language\_english)**

* Overall Population: The vast majority (97.44%) reported English as their main language.
* Ethnic Minority: A smaller majority (80.70%) reported English as their main language, reflecting linguistic diversity.
* Low-Income Parents: The vast majority (92.59%) reported English as their main language.
* Parents under 25 years: Reported similar rates of English as their main language as the overall population.
* Non-native English Speakers: NA
* Obese Parents: All respondents (100%) reported English as their main language.

**Ethnicity (demo\_ethnic\_group)**

* Overall Population: The majority (59.49%) identified as White: English/Welsh/Scottish/Northern Irish/British.
* Ethnic Minority: Encompasses all other ethnic groups, with the largest being Asian/Asian British: Indian (15.79%).
* Low-Income Parents: Most (61.11%) identified as White: English/Welsh/Scottish/Northern Irish/British.
* Parents under 25 years: More likely to be White: English/Welsh/Scottish/Northern Irish/British (75.00%) compared to the overall population (59.49%).
* Non-native English Speakers: This category represents respondents who did not select "White: English/Welsh/Scottish/Northern Irish/British" as their ethnic group.
* Obese Parents: 73.68% identified as White: English/Welsh/Scottish/Northern Irish/British.

**Citizenship Status (demo\_uk\_citizenship)**

* Overall Population: Most (94.87%) reported having UK citizenship.
* Ethnic Minority: A slightly lower proportion (87.72%) reported having UK citizenship.
* Low-Income Parents: The vast majority (88.89%) reported having UK citizenship.
* Parents under 25 years: Reported similar rates of UK citizenship as the overall population.
* Non-native English Speakers: A lower proportion (69.23%) reported having UK citizenship compared to the overall population (94.87%).
* Obese Parents: All respondents (100%) reported having UK citizenship.

### 

## Key Differences in Maternal Care Journey: Overall Population vs. Parents with Premature Births

#### **Antenatal Care**

* Provider Made Assumptions: Parents with premature births were slightly more likely to agree or strongly agree that their provider made assumptions (25%) compared to the overall population (24.1%).
* Provider Help with Challenges: Parents with premature births were more likely to agree or strongly agree that their provider did not help with challenges (33.3%) compared to the overall population (26.2%).
* Experiences of Discrimination: While the majority of both groups disagreed or strongly disagreed with experiencing discrimination, parents with premature births were less likely to strongly disagree (37.5% vs. 47.7%) and more likely to select "Other" (12.5% vs. 4.6%).
* Difficulty Getting Routine Appointments: Parents with premature births were more likely to report difficulty getting routine appointments (29.2% neutral or higher) compared to the overall population (19.4% neutral or higher).

#### **Birth Experience**

* Emergency Cesarean Section: Parents with premature births had a significantly higher rate of emergency cesarean sections (62.5%) compared to the overall population (26.7%).

#### **Postnatal Care**

* Sufficiency of Postnatal Information: Parents with premature births were less likely to find postnatal information sufficient (41.7% reporting "no") compared to the overall population (31.6%).
* Respect for Feeding Preferences: Parents with premature births were less likely to report that their feeding preferences were respected (25% reporting "no") compared to the overall population (14%).
* Provider Awareness of Medical History: Parents with premature births were less likely to report that their postnatal care provider was aware of their medical history (50% reporting "yes, sometimes" and 44.4% reporting "no") compared to the overall population (58.96% reporting "yes, sometimes" and 35.07% reporting "no").
* Information on Physical Recovery: Parents with premature births were less likely to report receiving information on physical recovery (54.2% reporting "yes") compared to the overall population (54.4%).
* Usefulness of Physical Recovery Information: Parents with premature births rated the usefulness of physical recovery information lower than the overall population, with 33.3% finding it "not very" or "not at all" useful compared to 22.2% in the overall population.
* Early Life Feeding Methods: A higher proportion of parents with premature births reported "special circumstances" in feeding (50%) compared to the overall population (6.7%).

#### **Demographics**

* Pregnancy Stage: Parents with premature births had a higher proportion of respondents with babies aged 12-24 months (20.8%) and less than 3 months (20.8%) compared to the overall population (17.95% and 16.92%, respectively).

## Partner Insights

## Key insights from partners of birthing parents who participated in the PPIE survey, focusing on their experiences and needs during the antenatal and postnatal periods. Note that these insights should be caveated with the small sample size of respondents (N = 10)

### **Antenatal Period**

* Antenatal Appointment Attendance: Most partners (90.9%) found it easy or very easy to attend antenatal appointments with their partners.
* Gestational Age at First Appointment: The most common gestational ages at the first appointment were 36 weeks (54.5%), 39 weeks (18.2%), and 41 weeks (18.2%).
* Information and Support Needs: Partners expressed a desire for more information and support to understand their partner's care and recovery (90.9%). They primarily relied on online resources (19.1%) and previous experience (19.1%) for information on feeding support.

### **Birth Experience**

* Birth Type: The most common birth type for partners' babies was emergency cesarean section (63.6%), followed by planned cesarean section (18.2%) and assisted vaginal birth (9.1%).
* Postnatal Information: Partners were divided on the sufficiency of postnatal information, with 27.3% finding it sufficient, 27.3% not sufficient, and 45.5% finding it sometimes sufficient.
* Kindness of Postnatal Care: Most partners (81.8%) reported that postnatal care was kind or sometimes kind.

### **Postnatal Period**

* Early Life Feeding: The majority of babies were either exclusively breastfed (36.4%) or formula-fed (45.5%).
* Information on Partner's Care/Recovery: Partners desired more information on their partner's postnatal mental health (90.9%) and found online resources somewhat useful (72.7%) for out-of-hours support.
* Baby Development Advice: Partners sought more advice on baby development (90.9%) and found online resources useful (70%) for this purpose.