

## **Footprints of Birth: Qualitative analysis of an innovative educational intervention highlighting women's voices to improve empathy and reflective practice in maternity care**

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**Objective:** To foster a culture of listening and responsiveness in healthcare services and improve the education and training of NHS students and staff in the areas of empathy, emotional resilience and reflective practice, through implementation of an innovative educational intervention.

**Design:** The Footprints of Birth team produced a 30-minute documentary using video feedback from women accessing local maternity services. This provided a voice for women and a means of utilising the patient narrative as a tool for transformational learning. Multi-disciplinary teaching sessions used the film to prompt group discussion about how healthcare services can best meet women's needs.

**Method:** Teaching sessions were conducted over 16 months, for 245 participants in groups of 5 to 60. These included: sessions for junior doctors, medical students, midwifery students, a mixed group of NHS staff and students, and service users; in-house training days for maternity staff; a peri-natal interdepartmental meeting; and sessions at the Royal College of Obstetricians and Gynaecologists conference and a breastfeeding conference for non-medical peer support workers;. During the sessions, participants wrote discussion points which were used to guide the conversation. These were collated to form the data set. Transcriptions were divided by participant group and subjected to thematic analysis.

**Results:** Three dominant themes emerged: reflection on the client-caregiver relationship, reflection on provision of care within the NHS, and evidence of emotional learning. All groups recognised the importance of effective communication, compassion, respect and autonomy. Participants commented on areas of current professional practice and staff behaviours, noting where improvements could be made. Participants considered whether current service provision at hospital and national level could provide the kind of care desired by their service users, and discussed the wider culture of maternity care. Emotional learning was demonstrated in response to patient narrative including expressions of empathy for the women sharing their stories.

**Conclusions:** This brief teaching intervention appeared to enable diverse participant groups to reflect on their role in providing respectful and empathic care to women accessing local maternity services. We hope that through generating a space where women's voices are heard at an emotional level, professionals will engage in transformational learning, promoting compassionate care which responds to women's needs.