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Preparation for Motherhood. Prenatal Education as seen by Female Participants of Childbirth Schools

Przygotowanie do macierzyństwa. Edukacja przedporodowa w opinii kobiet, uczestniczek szkoły rodzenia

Abstrakt:

Edukacja przedporodowa prowadzona w ramach „Szkoły rodzenia” jest coraz bardziej popularną formą przygotowania do rodzicielstwa. Oczekiwania uczestników, co do programu zajęć są zróżnicowane.

Cel. Celem pracy było poznanie opinii badanych na temat przydatności szkoły rodzenia oraz określenie najbardziej preferowanych tematów zajęć w przebiegu edukacji przedporodowej, a także zbadanie miejsca szkoły rodzenia wśród innych źródeł wiedzy o ciąży, porodzie i macierzyństwie.

Materiał i metody. Badania przeprowadzono w okresie od 10 stycznia do 10 maja 2015 roku, za pomocą autorskiego kwestionariusza ankiety, opracowanego na podstawie pięciostopniowej skali Likerta. W badaniu uczestniczyły 199 kobiety ciężarne, które wcześniej nie rodziły i aktualnie mieszkają w Warszawie.

Wyniki i wnioski. W opinii respondentek szkoła rodzenia oceniana jest jako przydatna forma edukacji przedporodowej, oraz zajmuje najwyższą pozycję w hierarchii źródeł czerpania wiedzy dotyczącej zarówno porodu, jak i wczesnego okresu poporodowego. Za najbardziej przydatne zagadnienia w toku nauczania w szkole rodzenia badane uznały wiadomości medyczne na temat ciąży, porodu i położu. Wysoko oceniły również zajęcia dotyczące sposobów radzenia sobie podczas porodu oraz zajęcia przekazujące treści dotyczące karmienia piersią. W opracowywaniu planów metodycznych zajęć należy dążyć do zaspokojenia potrzeb uczestników i kłaść nacisk na tematy wykazywane jako najbardziej przydatne.

Słowa kluczowe: szkoła rodzenia, edukacja przedporodowa, macierzyństwo, rodzicielstwo

Abstract:

Prenatal education conducted in childbirth classes is an increasingly popular form of parents' preparation for parenthood. The participants' expectations regarding the curriculum are varied.

Objective. The aim of this study was to discover the opinions of the respondents regarding the usefulness of the childbirth classes and to determine the most preferred subjects offered in prenatal education, as well as to examine the place of childbirth classes among other sources of knowledge about pregnancy, childbirth and motherhood.

Materials and methods. The research was carried out from January 10 to May 10, 2015, using a proprietary questionnaire, based on the five-point Likert scale. 199 pregnant women who had not previously given birth and currently live in Warsaw participated in the study.

Results and conclusions. In the opinion of the respondents, the childbirth classes are assessed as a useful form of prenatal education, and occupy the highest position in the hierarchy of sources of knowledge concerning both childbirth and the early postnatal period. The respondents considered medical information regarding pregnancy, delivery and the postpartum period as the most beneficial topics in the course. They also highly assessed classes on how to cope during childbirth and classes on breastfeeding. The curriculum should be developed in order to meet the needs of the participants and to put emphasis on the topics shown as the most useful.

Key words: childbirth classes, childbirth school, prenatal education, motherhood, parenthood

Introduction

Procreation is one of the most important parts of a person's life. It deeply affects their biography, plans and lifestyle. The ability to bring children into the world while passing on to the next generation one's genotype, history, culture and value system may bring the feeling of fulfilment and contentment (Ślizień-Kuczapska, 2017, p. 97-99). Motherhood and fatherhood are undeniable values which form both parents because motherhood cannot be accomplished without good fatherhood (Tataj-Puzyna, 2014).

Prenatal education carried out within childbirth schools is an increasingly popular form of preparation for parenthood. The experience of an entire population of women who gave birth in Polish hospitals in the second half of the twentieth century indicates the extent to which childbirth was perceived as highly medicalized (Brzeziński, 2000, pp. 148-163). Specialized medical diagnostics increasingly focus on the biological and technical aspects of pregnancy and childbirth, often neglecting their transcendent character, spiritual sphere, and rite of passage which effect how women are perceived as mothers. "Natural motherhood may be fully accomplished only when the woman understands the value of spiritual motherhood. Only then does natural motherhood have meaning" (Tataj-Puzyna, 2014, p. 52).

Women today less often perceive the experience of natural childbirth as a transcendent stage of maturity towards motherhood, as an experience that is essential to the formation of our personality. Among women it is more and more common to come across the strong conviction that they have no control over childbirth, which has led to the growing number of cesarean sections, often as a result of tokophobia - the extreme fear of childbirth (Guszkowska 2012; Bączyk et al., 2011; Cekański, 2009; Billert, 2007; Dębińska, Wichary 2016). This problem is one of the fundamental reasons why childbirth classes have become an increasingly popular

form of psycho-prophylactic labor preparation for expecting parents (Lisius, Michalik, 2008; Tataj-Puzyna, 2011).

Two physicians are considered to be the founders of childbirth classes based on psycho-prophylactic labor preparation. The first was a British obstetrician, Grantly Dick-Read (1890-1959), who at the beginning of the 1920's became a popular advocate of natural childbirth. (Dick-Read, 1933). The second was a French obstetrician, Fernand Lamaze (1891-1957), who popularized psycho-prophylactic labor preparation and methods for coping with labor pain that became known as the Lamaze Technique (Pawaleanu et al., 2017).

Grantly Dick-Read observed that the fear experienced by a woman during childbirth is due to a lack of knowledge and awareness. This leads to an increase in muscle tension, which in turn exacerbates pain thereby intensifying the woman's fear and suffering. In order to end this vicious cycle the woman in labor should replace fear with tranquility, tension with relaxation, and the pain felt during contractions with breathing. Dick-Read suggested that childbirth classes teach women about the physiological process of childbirth in order to actively engage them in the process. Passivity during childbirth increases fear and tension, which in turn escalates the pain and suffering. On the other hand, Fernand Lamaze encouraged women in labor to think of pleasant feelings and concentrate on the effort via conscious breathing and muscle relaxation. This approach is based on his belief that the liberation of the woman from a passive role will help her cope with the difficulties of labor. Lamaze proposed that a person close to the woman should be present during labor to support her (Puszczalowska-Lizis et al., 2016).

In Poland the first childbirth classes appeared in the nineteen sixties. In April 1957 Prof. Jan Lesinski organized a four-week course for obstetricians on psycho-prophylactic labor preparation. Prof. W. Fijałkowski, an inspired participant of the course, went on to found an experimental childbirth course at the II Clinic of Obstetrics and Gynecology, Łódź Academy of Medicine Łódź (Kryszk et al., 2011).

Prof. Fijałkowski founded the Polish model of psycho-prophylactic labor preparation and promoted it in the entire country (Parzyszek, 2017). He claimed that childbirth schools are medical institutions whose fundamental role is to prepare parents for an informed, active and smooth childbirth (Fijałkowski, 2003, p. 104). As a gynecologist and humanist his model of childbirth school was based on the psycho-prophylactic preparation of parents for childbirth, postpartum period and newborn care (Fijałkowski, 1988, p. 142; 1987, pp. 11-18; 1989; cf., Kornas-Biela, 2003).

Prof. Fijałkowski promoted an active role for women in labor. Informed and aware of the psycho-physiological process of childbirth the woman may actively participate in labor by consciously reacting to contractions, thereby diminishing the

pain. He came up with the term „natural perceptibility” as indispensable to natural childbirth. Professionally active for many years Fijałkowski explained to successive generations of parents that childbirth is neither an illness nor an injury. He believed that women need to be prepared for the art of giving birth so that they may harness their internal force of nature and use it during labor. Thanks to this approach, women have gained agency and may consciously prepare for labor by learning techniques just as they would for a difficult task that requires effort and knowledge. Psycho-prophylactic labor preparation developed by Fijałkowski recognizes and appreciates the personal effort made by the woman during labor. This physician and humanist believed that prenatal education of the rights of women and children in medical institutions was an effective strategy for improving the level of perinatal care in Poland (cf., e.g., Fijałkowski, 1992).

Fijałkowski emphasized the need to develop a new cultural model called *co-parenthood* or *balanced parenthood*. He promoted harmonized parenthood in which both parents are prepared to be responsible parents. The idea of balanced parenthood from the moment of conception was meant to include the father from the very beginning of the pregnancy in the process of preparing for childbirth and newborn care, from the prenatal phase up until adulthood (Dzierżanowski, 2010).

A “dialogue” with the baby during pregnancy, active cooperation of both parents during childbirth and care of the newborn by both parents help the couple become more aware of their bond with each other as well as the world around them. According to Fijałkowski (2011), prenatal education is an important factor that influences the family’s procreative health, above and beyond the biological and medical aspects of parenthood (cf., e.g., Kornas-Biela, 2013). Prenatal education in childbirth classes today is, for the most part, based on the concept proposed by Prof. Fijałkowski, a concept that promotes a healthy lifestyle in the perinatal period and preparing both parents to care for their newborn child.

The curriculum of the childbirth class comprises various psycho-physical issues related to the perinatal period and newborn care. The aim of the course is, among others, to diminish the fear of pregnancy and childbirth, decrease both infant and maternal mortality as well as the number of premature births, through education and the development of appropriate habits and behavior. The potential benefits of childbirth classes do not only depend on the traits of the participants but also on the knowledge, philosophy and commitment of the professionals conducting the classes (cf., Krysa et al., 2016).

By attending childbirth classes parents can reduce their fear of childbirth, women can learn to harness their internal force of nature, strengthen their faith in their body and feel more empowered (Karabulut et al., 2016).

Prenatal education in childbirth classes should address the participant holistically by providing information (addressing the participant cognitively), by providing the opportunity to calm emotions and diminish fear, and by introducing techniques for relieving painful contractions during labor. An important challenge for curriculum developers is to take into consideration the diversity of the participants when selecting course content in order to guarantee the highest level of satisfaction possible.

At present there are various curricula and forms of perinatal education available. Classes, meetings and elements of e-learning should be adapted to the needs and expectations of the participants so that they feel that they have received tangible benefits (Kryszk et al., 2011; Krysa et al., 2016; Jaddoe, 2009).

Material and methods

The aim of this study was to discover the opinions of the respondents regarding the usefulness of the childbirth classes and to determine the most preferred subjects offered in prenatal education, as well as to examine the place of childbirth classes in the hierarchy of sources used to prepare for childbirth, the postpartum period and motherhood.

Research was conducted between January 10 and May 10, 2015. Diagnostic surveys were used. The research tool was a questionnaire entitled, "The Role and Significance of Motherhood in a Woman's Life," developed during a PhD seminar (Prof. Jan Kazimierz Przybyłowski) within a doctoral program of Theology at the Cardinal Stefan Wyszyński University. The validity of the questionnaire was assessed by a panel of experts. The responses were presented on a five-point Likert scale. The respondents were informed that their participation is voluntary and anonymous and that the data will be used for scientific purposes only. The group surveyed consisted of 199 pregnant participants of childbirth classes.

Tableau 1. Age of the respondents (n=199)

Age	n	%
22-25	20	10,1%
26-30	101	50,8%
31-35	66	33,2%
36-40	12	6,0%

The age range indicates that the dominant age group is 26-30 years of age (50.8%) and 31-35 years (33.2%), the least numerous age groups are 22-25 years (10.1%) and 36-40 years (6.0%). The youngest respondent was 22 years of age and the oldest 40.

Tableau 2. Level of education of the respondents (n=199)

Education	n	%
primary	0	0,0%
vocational	0	0,0%
secondary	6	3,0%
Bachelor's degree	11	5,5%
incomplete higher	17	8,5%
higher (Master's degree)	165	82,9%

The majority of respondents have a higher education (82.9%).

Tableau 3. Civil status of the respondents (n=199)

Civil status	n	%
sacramental marriage (by the Catholic church)	125	62,8
civil marriage by choice (may also be married by the Catholic church)	14	7,0
civil marriage by choice (may not be married by the Catholic church)	10	5,0
domestic partnership (without legal status)	43	21,6
separation	0	0,0
widow	0	0,0
single	5	2,5
divorced	2	1,0
married (non-Catholic religious ceremony, please specify)	0	0,0

The distribution of results according to civil status indicates that married women dominate (74.9%). 21.6% of respondents live in domestic partnerships without legal status and 3.5% of respondents were single.

Tableau 4. Responses to the question about family's model (n=199)

What is your family's model?	n	%
traditional (husband works, wife raises children)	8	4,0
egalitarian (both parents work and raise children)	125	62,8
mixed (depending on the situation, at times both models are present)	64	32,2
n/a I am a single mother	2	1,0

The distribution of results regarding family model indicates that the egalitarian model (both parents work and care for their children) dominates 63.1%, followed by the mixed model (depending on the situation, at times both the traditional and egalitarian models are present) comprising 31.7% .

Results

The participants of the study were asked to respond to several questions in the questionnaire. A detailed analysis of the responses is presented below.

Tableau 5. Responses to the question: "Do you feel that childbirth classes are necessary to properly prepare couples for their child's birth?" (n=199)

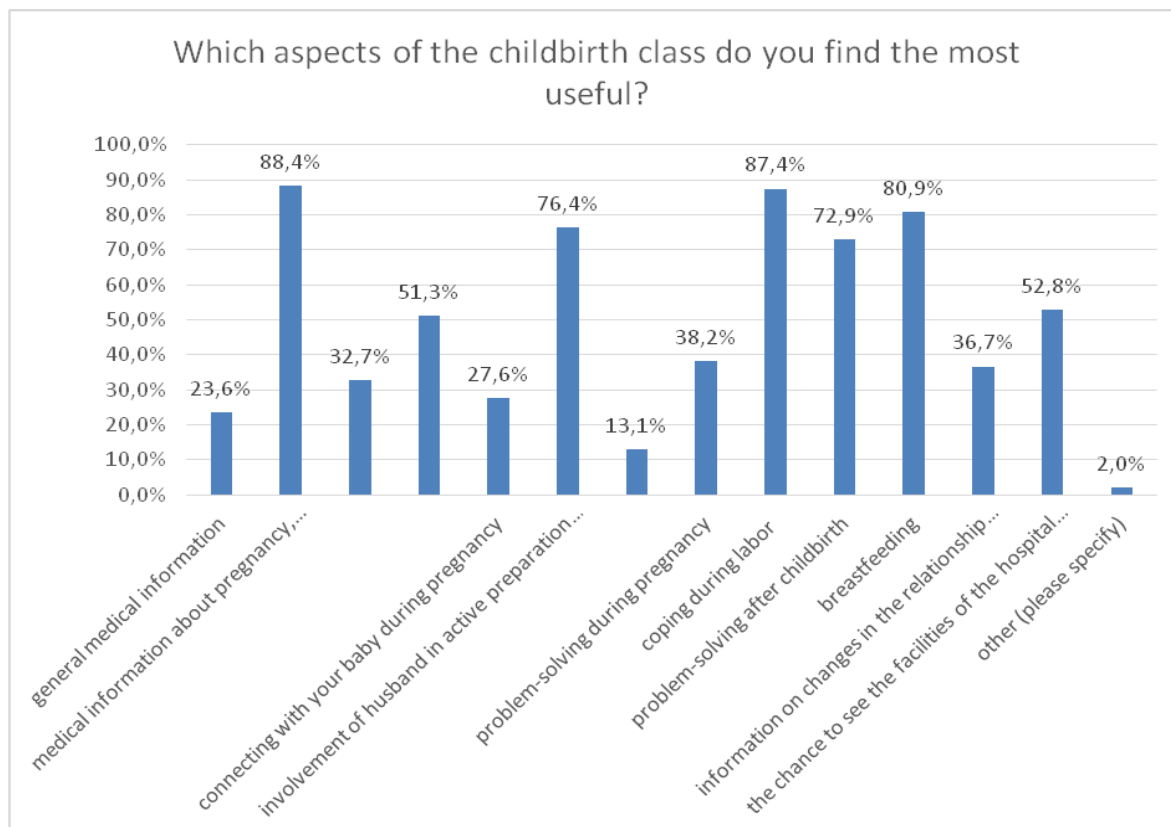
Do you feel that childbirth classes are necessary to properly prepare couples for their child's birth?				
strongly agree	agree	disagree	strongly disagree	undecided
119	80	0	0	0
59,8%	40,2%	0,0%	0,0%	0,0%

All of the respondents positively assessed the general usefulness of their participation in the childbirth course. 59.8% indicated that the childbirth course was a very important element of their prenatal education and 40.2% claimed that it was important.

The issues discussed during the childbirth class that the respondents found most useful were: medical information about pregnancy, childbirth and the postpartum period (88.4%), methods of coping with labor (87.4%) and breastfeeding (80.9%). Also popular were lessons on ways to involve the baby's father in active preparation for childbirth (76.4%), followed by problem-solving after childbirth (72.9%). More than half of the respondents claimed that the chance to see the facilities of the hospital in which they planned to give birth (52.8%) as well as information regarding the involvement of the baby's father during childbirth (51.3%) were significant topics. The less useful aspects were: problem-solving during pregnancy (38.2%), information on changes in the relationship between husband and wife after childbirth (36.7%), motherhood (parenthood) in general (32.7%), connecting with baby during pregnancy (27.6%) and general medical information (23.6%). The least

significant aspect of the course was sharing experiences of married/family life with other expectant parents (13.1%) See graph 1.

Furthermore, it is worth noting that cognitive topics (an average of 114) were selected more often than emotional and behavioral topics (an average of 88).



Graph 1. Responses to the question “Which aspects of the childbirth class do you find the most useful?” (multiple-choice question) (n=199)

Tableau 6a. Responses to the question: “Which aspects of the childbirth class do you find most beneficial?” (multiple-choice question) n=199

Which aspects of the childbirth class do you find most beneficial? (you may choose more than one answer):		
	n	%
general medical information	47	23,6
medical information about pregnancy, childbirth and postpartum period	176	88,4
general information about motherhood (parenthood)	65	32,7
raising awareness regarding the involvement of baby's father during childbirth	102	51,3

Tableau 6b. Responses to the question: "Which aspects of the childbirth class do you find most beneficial?" (multiple-choice question) n=199

Which aspects of the childbirth class do you find most beneficial? (you may choose more than one answer):		
	n	%
connecting with your baby during pregnancy	55	27,6
involvement of husband in active preparation for childbirth	152	76,4
sharing experiences of married/family life with other expectant parents	26	13,1
problem-solving during pregnancy	76	38,2
coping during labor	174	87,4
problem-solving after childbirth	145	72,9
breastfeeding	161	80,9
information on changes in the relationship between husband and wife following childbirth	73	36,7
the chance to see the facilities of the hospital in which I plan to give birth/ have given birth	105	52,8
other (please specify)	4	2,0

Due to the relatively uniform character of the group regarding level of education, age and civil status the significance of the childbirth class was not measured in relation to the above-mentioned parameters.

The assessment of the role of childbirth classes in the process of preparation for motherhood was conducted with a multiple-choice question concerning the source of information on the subject of motherhood.

Only slightly more than half of the respondents (108 responses) felt that the childbirth class helped educate them about motherhood. The respondents more often pointed to their own reflections (160) and books (108).

Conversations with friends (121) and their mothers (111) were also indicated as more significant sources of information on motherhood. Over one-third of respondents indicated that an important source of knowledge about motherhood was the media (73), and close to 20% considers their faith as an important factor. See Graph 2.

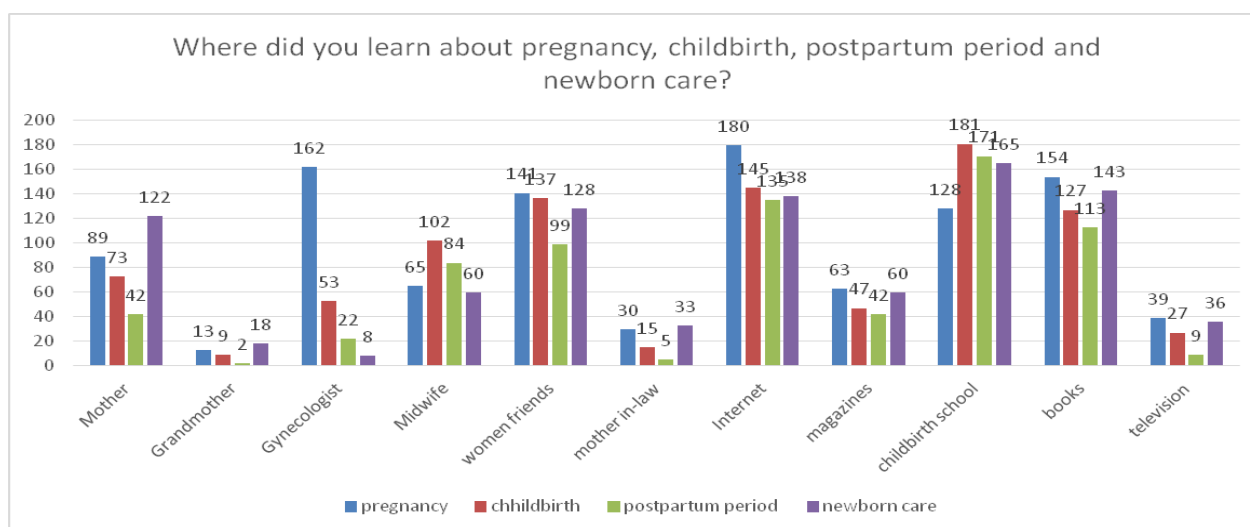


Graph 2. Responses to the question: "What helped you learn about motherhood" (multiple-choice question) n=199

Tableau 7. Responses to the question: "What helped you learn about motherhood?" (multiple-choice question) n=199

What helped you learn about motherhood? (you may choose more than one answer)		
	n	%
conversations with my mother	111	55,8%
religion in my family's life	23	11,6%
media (television, the internet, magazines)	73	36,7%
childbirth class	108	54,3%
my faith	38	19,1%
conversations with friends	121	60,8%
conversations with religious leaders (of my faith)	3	1,5%
being a part of my religious community	10	5,0%
books	129	64,8%
my own reflections	160	80,4%
Catechism classes	0	0,0%
premarital courses (Catholic)	18	9,0%
family counseling	3	1,5%
multimedia programs	1	0,5%
cultural background	26	13,1%
other (please specify)	15	7,5%

Detailed questions in this area produced differing results. The respondents were asked about their sources of knowledge on: pregnancy, childbirth, the postpartum period and newborn care. For each they were allowed to choose multiple sources (see Graph #3). The most frequently selected response was childbirth class, followed by the internet, books and women friends. When asked about the source of information about childbirth, postpartum period and newborn care most respondents indicated childbirth class, however when asked about the top source of information on pregnancy, the internet dominates, followed by gynecologist, books, and women friends. Childbirth class is in fifth place.



Graph 3. Responses to the question about sources of knowledge (multiple-choice question) n=199

Discussion

Childbirth classes are recommended by the Polish Association of Gynecologist as a form of perinatal and newborn care preparation for parents (Drews, Spaczyński, 2006). Despite this recommendation there are no national data regarding the number of these classes nor their curricula. Krzysk and associates (2011) claim that childbirth classes educate tens of thousands of parents annually. Detailed information concerning the education provided by childbirth classes as well as data concerning the childbirth classes are gathered only when the classes are financed by public funds (e.g. city or local government funding). In 2015 Warsaw City Hall's Office of Health Policy implemented a program in the area of prenatal health entitled "Childbirth School". The Office of Health Policy's accreditation and the public funding of prenatal education allowed for the monitoring of the number of childbirth schools in Warsaw as well as quality control of the classes offered. The Office of Health Policy's

statistics indicate that in 2015, 7600 pregnant women (couples) in 14 schools attended publically funded childbirth classes, in 2016 10,210 women (couples) residing in Warsaw attended classes in 32 schools. In the years 2016-2019 39 schools offer publically funded classes which are attended by approximately 11,000 women annually¹.

In 2009 the city of Wrocław implemented a publically funded program entitled, "How to Give Birth to a Healthy Baby." This program has specific norms that need to be met by childbirth schools in order to qualify for public funding (Iwanowicz-Palus, Jędrzejewska, 2016). Despite the convenience provided by internet sources and the prevalence of online parenting fora, childbirth classes remain an attractive form of education. Studies conducted by Krysa and associates (2016) indicate that each year new childbirth schools are founded and the number currently registered is over 400 (ibid.).

The research presented in this article indicates that education provided by childbirth schools is one of the most popular sources of information on pregnancy, childbirth, postpartum period and infant care. Almost 60% of respondents highly assessed the usefulness of childbirth schools. These findings, in large part, correspond with the results of Kamiński and associates' study (2012) in which the respondents agreed that childbirth schools should exist and that childbirth schools provide significant preparation for childbirth.

Research conducted by Małecka i Nowak (2014) produced contrary results. Only 25% of the respondents believe that pregnant women should attend childbirth schools, 20% that they should not attend, and over half were undecided. It is worthy to note that 27% of the respondents did not participate in birthing classes because they were not available. Despite the fact that childbirth classes all function according to the same guidelines, the quality of the education provided differs. Brzozowska-Magoń and Walicka-Cupryś (2007) postulate that a well-designed study to assess the quality of childbirth schools would lead to the standardization of the curriculum for prenatal education.

Iwanowicz-Palus and Jędrzejewska (2016) also argue that supervision of the birthing classes would allow for standardization of curricula, maintain a high standard of education, and quality control of the classes. The authors believe that national standards should be developed. Such requirements would reduce the number of childbirth schools that do not meet national standards because they

¹ The City Hall of Warsaw. Prenatal health program "Childbirth School" 2017, Urząd Miasta Stołecznego Warszawy. Program edukacji przedporodowej "Szkoła rodzenia" 2017, <http://www.um.warszawa.pl/dla-mieszkancow/zdrowie/programy-zdrowotne/program-edukacji-predporodowej-szkola-rodzenia> (05.12.2017).

would not be granted accreditation. This would lead to an increase in satisfaction of the participants.

The curricula of the birthing schools differ depending on the preferences of the educators. The research for this study was conducted in Warsaw childbirth schools that have a standardized curriculum and were financed and supervised by the Warsaw City Hall's Office of Health Policy.

Bearing this in mind, one should not assume that similar results would arise from a national study on prenatal education in Poland. Some of the schools may have their own curriculum. The Warsaw City Hall's Office of Health Policy guidelines do not include specific qualifications or credentials for the educators, a factor that can affect the quality of education provided aside from the content of the curriculum. Most often the educators are midwives since their professional role is to promote the health of the expectant mother and her family. (Iwanowicz-Palus et al., 2012a).

Iwanowicz-Palus and associates' (2012b) research indicates that midwives are considered qualified to independently carry out prenatal education in the areas of: the labor process, breathing and physical exercises, parenting education, providing information regarding choice of place to give birth, promotion of breastfeeding, postpartum period and newborn care.

The positive assessment of childbirth schools by the respondents (tableau nr 5) corresponds with the theoretical assumptions regarding the positive influence of prenatal education on parents at many levels. According to Stangret and associates (2008) women who have attended preparation classes feel that they have a greater knowledge of childbirth, are more aware of the significance of physical exercise during pregnancy. They are more self-confident and lead a healthier lifestyle (ibid.) Soet and associates (2003) claim that theoretical preparation for childbirth strengthens women's confidence in their ability and skills which in turn reduces stress and fear related to the perinatal period. Piziak's research (2009) has shown that participants of birthing classes were better prepared for the process of pregnancy and childbirth, had greater knowledge, empowering them to the extent that they more frequently chose natural childbirth than women who had not attended birthing classes.

There are also studies that show a limited influence of prenatal education on the reduction of fear of childbirth (e.g. Karabulut, et al., 2016). The study presented in this article indicates that the most useful aspect of birthing classes is the medical information concerning pregnancy, childbirth and the postpartum period (tableau nr 6). 88.4% of respondents were interested in this topic. The next most valued topic was how to cope during labor (87.4%) This study shows that the respondents were only slightly interested in problem-solving after childbirth. The lack of appreciation

of information concerning postpartum issues may be connected to the women's focus on, and fear of childbirth. Expectant mothers are capable of imagining the moment of delivery, however this image is colored with so much emotion that they put aside thoughts of life after childbirth. Research shows that participation in birthing classes alone will indirectly, positively influence women's experience following childbirth (tableau nr 6).

Suet and associates (2003) claim that theoretical preparation for childbirth strengthens women's confidence in their ability and skills which in turn effectively reduces stress and fear related to the perinatal period. At the same time one could hypothesize that the emotional state of the expectant mother during the postpartum period is indirectly dependent on the level of knowledge regarding the stress experienced during labor and the postpartum period.

The respondents believe that the topic of involving the baby's father in active preparation for childbirth is significant (tableau nr 6). 76.4% of respondents consider this to be a highly useful element of a childbirth class. This corresponds with Fijałkowski's assumptions, namely that when both parents prepare to give birth together they are given the chance to experience an event that is an important stage in their life, an event which may bring them closer to each other. Preparing together for the birth of their child may bring the parents together from the moment of conception, to a "dialogue" with the baby during pregnancy, involvement of the father during delivery, breastfeeding by the mother, as well as raising the child together. Engaging the father at the earliest stage of the baby's life helps him grown into fatherhood (Dzierżanowski, 2010).

By including topics preferred by women in the curriculum of birthing classes, supervision of the classes and guidelines for this form of prenatal education should lead to a rise in awareness amongst expectant mothers, an improvement in perinatal care, and in the long run, the empowerment of both mother and fathers. Childbirth schools are also an important place for the professional development of midwives as well as a way to raise societal awareness of the role of a midwife in the life of an expectant mother.

Conclusions

To conclude, childbirth schools are considered by respondents to be a beneficial form of prenatal education, and are at the top of the hierarchy of sources of information for expectant mothers regarding childbirth and the early postnatal period.

1. The aspect of childbirth classes that the respondents found most useful was medical information concerning pregnancy, childbirth and the postpartum period.
2. The curriculum along with quality implementation in childbirth schools depends on the educators of a given school, who not only pass on childbirth “techniques”, but also raise awareness of the importance of co-parenting from the moment of conception.
3. The preparation of parents to experience childbirth together as a couple they are given the chance to experience an event that is an important stage in their life, an event which may enrich their relationship.
4. The respondents considered the active engagement of the baby’s father during pregnancy to be an important issue for a birthing class.
5. Engaging the father at the earliest stage of the baby’s life helps him grow into fatherhood.
6. Research indicates that not all topics selected for the curriculum of birthing schools are equally valued by participants, hence the need to adapt the prenatal education curriculum to the expectations of parents.

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