

Mother ID Date / /
Day/ month/ year

ringing up about
breastfeeding

RUBY study

Exploring your views and experiences of telephone support

Thank you again for being a part of the RUBY study.

As with the other questionnaires for the study, we are interested in your views and experiences no matter what they are – there are no right or wrong answers.

If there are any questions you would prefer to not answer just skip these and move on to the next question.



1 Did you receive phone calls about breastfeeding from a volunteer mother?

- 1 Yes
 2 No

2 On average how often did you receive calls from your volunteer mother in the first three months?

- 1 Twice weekly
 2 Weekly
 3 Fortnightly
 4 Monthly
 5 It varied (please describe)

3 On average how often did you receive calls from your volunteer mother after the first three months?

- 1 Twice weekly
 2 Weekly
 3 Fortnightly
 4 Monthly
 5 It varied (please describe)

4 When did the calls from your volunteer mother stop?

- 1months after the birth
 2 Still receiving calls (Go to question 6)

5 If the calls have stopped, who decided to stop the calls?

- 1 I decided
 2 Volunteer mother decided
 3 We agreed together
 4 Don't remember

6 How did you feel about the frequency of the calls you received?

- 1 About right
 2 Too often
 3 Not often enough (I would have liked more calls)

7 On average how long did these calls last?

- 1 0-5 minutes
 2 6-10 minutes
 3 11-20 minutes
 4 Longer than 20 minutes
 5 It varied (please describe)

8 **What things did you talk about with the volunteer mother? (tick all that apply)**

- 1 Baby attaching onto the breast
- 2 Baby behaviour
- 3 Lack of sleep
- 4 She advised me where to get help
- 5 Settling my baby
- 6 My milk supply
- 7 How often to feed my baby
- 8 Nipple or breast pain
- 9 She reassured me
- 10 Baby sleep/wake patterns
- 11 Support from my family
- 12 Baby care
- 13 She gave me emotional support
- 14 My emotional wellbeing
- 15 Other (please describe)

9 **We want to know how helpful you found these calls. Overall on a scale of 1 (Not at all helpful) to 5 (very helpful) how would you describe the telephone support you received?**
(please circle option that best describes your view)

Not at all helpful 1 2 3 4 5 Very helpful

10 **Was there anything you found particularly positive (helpful) about these calls?**

- 1 No
- 2 Yes (please describe)

11 **Was there anything you found particularly negative (not helpful) about these calls?**

- 1 No
- 2 Yes (please describe)

12 **Did you ever call the volunteer mother yourself?**

1 Yes

2 No

13 **Did you ever contact the volunteer mother yourself in another way?**

1 No

2 Text message (SMS)

3 Email

4 Other (please describe)

14 **If you contacted your volunteer mother, can you recall the number of times you contacted her?**

times

15 **What was the reason/s you contacted her?**

16 **Would you recommend this type of telephone support to other new mothers?**

1 Yes

2 No

Please comment

This section of the questionnaire was developed to help you tell us more about your peer support experience. This instrument has three subscales, all of which evaluate different aspects of the support you received.

Directions:

In answering the following questions, please think about your peer support experience. The following questions ask you to pick a number which best describes your feelings. While you may not find an answer that exactly matches your feelings, please indicate the number which comes closest to how you feel.

1 Strongly disagree 2 Disagree 3 Unsure 4 Agree 5 Strongly agree

Example: My peer listened to me talk about my feelings or concerns 1 2 3 4 **5**

When answering these questions think specifically about the interactions you had with your peer volunteer.

| In general, my peer: | | <i>Strongly disagree</i> | <i>Disagree</i> | <i>Unsure</i> | <i>Agree</i> | <i>Strongly agree</i> |
|-----------------------------|---|--------------------------|-----------------|---------------|--------------|-----------------------|
| 1 | Provided me with practical information | 1 | 2 | 3 | 4 | 5 |
| 2 | Listened to me talk about my feelings or concerns | 1 | 2 | 3 | 4 | 5 |
| 3 | Helped me feel that I was not alone in my situation | 1 | 2 | 3 | 4 | 5 |
| 4 | Gave trustworthy advice | 1 | 2 | 3 | 4 | 5 |
| 5 | Helped me feel that what I was going through was "normal" | 1 | 2 | 3 | 4 | 5 |
| 6 | Expressed interest and concern about how I was doing | 1 | 2 | 3 | 4 | 5 |
| 7 | Told me that I did something well | 1 | 2 | 3 | 4 | 5 |
| 8 | Assisted me to solve my problems or concerns | 1 | 2 | 3 | 4 | 5 |
| 9 | Expressed admiration for a personal quality of mine | 1 | 2 | 3 | 4 | 5 |
| 10 | Told me what to expect in a certain situation | 1 | 2 | 3 | 4 | 5 |
| 11 | Accepted me for who I was | 1 | 2 | 3 | 4 | 5 |
| 12 | Gave me feedback on how I was doing | 1 | 2 | 3 | 4 | 5 |
| 13 | Told me what was usual for my current situation | 1 | 2 | 3 | 4 | 5 |
| 14 | Suggested other ways of doing things | 1 | 2 | 3 | 4 | 5 |
| 15 | Told me that help was available when I needed it | 1 | 2 | 3 | 4 | 5 |

Part II: Relationship Qualities

When answering these questions think specifically about the relationship you had with your peer volunteer.

| | In general: | <i>Strongly disagree</i> | <i>Disagree</i> | <i>Unsure</i> | <i>Agree</i> | <i>Strongly agree</i> |
|----|---|--------------------------|-----------------|---------------|--------------|-----------------------|
| 1 | With my peer I could confide my most inner feelings | 1 | 2 | 3 | 4 | 5 |
| 2 | My peer could tell when I was worried about something | 1 | 2 | 3 | 4 | 5 |
| 3 | If something important happened to me I could share the experience with my peer | 1 | 2 | 3 | 4 | 5 |
| 4 | I knew that whatever I said was just between us | 1 | 2 | 3 | 4 | 5 |
| 5 | My peer was trustworthy | 1 | 2 | 3 | 4 | 5 |
| 6 | My peer was dependable | 1 | 2 | 3 | 4 | 5 |
| 7 | I knew my peer would respond to me in a supportive way | 1 | 2 | 3 | 4 | 5 |
| 8 | I felt accepted by my peer | 1 | 2 | 3 | 4 | 5 |
| 9 | I felt comfortable 'just being myself' with my peer | 1 | 2 | 3 | 4 | 5 |
| 10 | My peer understood my point of view | 1 | 2 | 3 | 4 | 5 |
| 11 | My peer felt bad if things didn't go well for me | 1 | 2 | 3 | 4 | 5 |
| 12 | My peer influenced how I felt or acted | 1 | 2 | 3 | 4 | 5 |
| 13 | I felt close to my peer | 1 | 2 | 3 | 4 | 5 |
| 14 | I felt comfortable getting close to my peer | 1 | 2 | 3 | 4 | 5 |
| 15 | I depended on my peer | 1 | 2 | 3 | 4 | 5 |
| 16 | My peer invested time to help me | 1 | 2 | 3 | 4 | 5 |
| 17 | My peer worked at maintaining a relationship with me | 1 | 2 | 3 | 4 | 5 |
| 18 | My peer was an important source of support for me | 1 | 2 | 3 | 4 | 5 |
| 19 | I looked forward to talking with my peer | 1 | 2 | 3 | 4 | 5 |
| 20 | My peer would get over-involved in my problems | 1 | 2 | 3 | 4 | 5 |
| 21 | My peer pressured me to change | 1 | 2 | 3 | 4 | 5 |
| 22 | My peer made me feel guilty | 1 | 2 | 3 | 4 | 5 |
| 23 | My peer made me feel angry | 1 | 2 | 3 | 4 | 5 |
| 24 | My peer was critical of me | 1 | 2 | 3 | 4 | 5 |
| 25 | My peer minimised my problems | 1 | 2 | 3 | 4 | 5 |
| 26 | My peer was interesting and enjoyable to talk to | 1 | 2 | 3 | 4 | 5 |
| 27 | My peer presented a good first impression | 1 | 2 | 3 | 4 | 5 |
| 28 | My peer revealed personal information | 1 | 2 | 3 | 4 | 5 |
| 29 | My peer talked too much | 1 | 2 | 3 | 4 | 5 |
| 30 | My peer was sensitive and understanding | 1 | 2 | 3 | 4 | 5 |
| 31 | My peer seemed like she would be able to talk to anyone | 1 | 2 | 3 | 4 | 5 |

Part III: Satisfaction with Support Received

When answering these questions think specifically about how satisfied you feel about the support you received.

| | In general: | <i>Strongly disagree</i> | <i>Disagree</i> | <i>Unsure</i> | <i>Agree</i> | <i>Strongly agree</i> |
|----|---|--------------------------|-----------------|---------------|--------------|-----------------------|
| 1 | My peer provided the assistance I needed | 1 | 2 | 3 | 4 | 5 |
| 2 | My peer met my expectations | 1 | 2 | 3 | 4 | 5 |
| 3 | I liked my peer | 1 | 2 | 3 | 4 | 5 |
| 4 | My peer was respectful to me | 1 | 2 | 3 | 4 | 5 |
| 5 | Receiving support from my peer was convenient for me | 1 | 2 | 3 | 4 | 5 |
| 6 | I was able to talk to my peer when I needed to | 1 | 2 | 3 | 4 | 5 |
| 7 | My peer telephoned when planned | 1 | 2 | 3 | 4 | 5 |
| 8 | I had enough contact with my peer | 1 | 2 | 3 | 4 | 5 |
| 9 | I liked the support over the telephone | 1 | 2 | 3 | 4 | 5 |
| 10 | I had very few problems with the support I received | 1 | 2 | 3 | 4 | 5 |
| 11 | There is nothing I would have liked done differently | 1 | 2 | 3 | 4 | 5 |
| 12 | I would recommend this type of support to a friend | 1 | 2 | 3 | 4 | 5 |
| 13 | For my situation one-to-one support was better than group support | 1 | 2 | 3 | 4 | 5 |
| 14 | Overall, I am satisfied with my peer support experience | 1 | 2 | 3 | 4 | 5 |

Are there any other comments that you would like to make about telephone support from volunteer mothers, or any other comment about the study?

We are interested in conducting a small number of face to face interviews with women who have received support from a volunteer as part of the RUBY study. These interviews would take place at a time and place convenient to you. Please indicate below if you would be happy to be contacted by our research team to discuss the possibility of taking part in an interview.

Yes, I would like to take part in an interview about my experience of support during the RUBY study and am happy to be contacted.

No, I do not wish to be contacted about an interview.

Thank you very much for completing this questionnaire. We are very grateful for the time you have taken. If you misplace the reply paid envelope we would appreciate you returning this questionnaire to:

**Fiona McLardie-Hore
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Midwifery and Maternity Services Research
The Royal Women's Hospital
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