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Ascertaining Women’s Preferred Mode of Address and Preferred Choice of Title During Pregnancy and Childbirth

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Abstract

To determine how women in pregnancy would like to be addressed and to ascertain their preferred choice of title during pregnancy. A questionnaire was administered to 925 antenatal women. Midwifery and medical staff (183) were invited to respond to a similar questionnaire. The response rate was 71.2% from the survey of pregnant women. The vast majority (82.1%) preferred to be addressed by their first name. Women were in favour of being called ‘patient’ (32.8%) as their first choice. The staff survey yielded a response rate of 77%. The majority (81.8%) of health professionals preferred to address women by their first name. ‘Mother’ (28.7%) was the most popular first choice. We conclude that women in pregnancy do have a preference on how they would like to be addressed and this is predominantly by first name. Health professionals also prefer to call pregnant women by their first name. The term ‘patient’ was the most popular first choice of title of women in pregnancy but the term ‘mother’ was the preferred choice of the health professionals. Medical staff were more likely to choose ‘patient’ than midwives.

Introduction

There has been much controversy and debate over what title women should be called during pregnancy. Traditionally the term ‘patient’ has been preferred, however other terms such as ‘client / customer / consumer’ are emerging and these options are often promoted by the health professionals themselves^{1,2}. The term ‘patient’ has been criticized as being associated with ‘being sick’ and with a medical model of antenatal care³.

Perhaps in contrast to emerging trends, recent studies^{4,5,6} of pregnant women’s views found a preference for the term ‘patient’. In addition one of these studies⁴ showed many women in favour of being called by their first name. Most studies^{7,8,9,10}, (including one Irish study¹¹), of preferred mode of address in non-pregnant patients have shown a preference for the use of ‘first name’.

The aims of our study were to determine preferred choice of title among Irish pregnant women and their preferred mode of address. We also wanted to compare the views of health professionals with those of pregnant women.

Methods

Over a five-week period, a survey form was handed to all English speaking women attending the general antenatal clinics and private consultant rooms. Other than language spoken there were no exclusion criteria. Data from incomplete questionnaires was included in the analysis.

The survey form asked two questions and gave women the opportunity to state their preferred mode of address from the following options - First name, Surname or Don’t mind and to rank their preferred three choices from - Client, Consumer, Customer, Lady, Mother, Pregnant Woman, Woman, Patient or Other (specify) as title options. Additional basic demographic information was collected. Women were recruited from the public and private clinics using a proportional quota sampling method¹¹. Midwifery and medical staff were also surveyed.

Statistical analysis was performed using SPSS¹¹ software. For both women in pregnancy and health professionals, responses were investigated using preferential choice to examine the term they wished to use. Independent two-sample t-tests/chi-squared tests were conducted to determine if any of the demographic factors influenced first choice preference. Logistic regression analyses were employed to determine predictors of first choice among each group.

Results

Patient Survey

During the study 925 questionnaires were handed out to women attending for both new and review antenatal appointments. A total of 659 (71.2%) responses were received, 284 from the public group and 375 from the private group.

The response rate was 81% for the public group and 65% for the private group. The most common age group was 31-35 years (37.3%) followed by 26-30 years (29.9%). The mean gestation was 30.7 weeks with a range of 6 to 41 weeks. 36.5% of women had never been pregnant before. 31.4% of women had one child and 26.5% had two or more. Of the respondents 78% were married, 18% were single with a partner and 3% were single without a partner. 24% of the respondents were intermediate non-manual workers (e.g. clerical, sales and service workers), 20.9% were full-time at home, 17.4% from the lower professional category (e.g. teachers, nurses, computer programmers etc.), 11% were other non-manual workers (e.g. waitresses, domestic staff, hairdressers), 8.7% were self employed or managers and the remainder were divided among the other groups¹².

A preference for being addressed by first name was expressed by 82.1% (520). Only 1.7% (11) wished to be addressed by their title, and the remaining 16.1% (102) did not mind. Women attending private clinics were more likely than women attending public clinics to choose first name (90% vs. 72%, p<0.001), while women in public clinics were more likely not to mind (26% vs. 9%, p<0.001).

The most popular first choice of title for the group overall was ‘patient’ (32.8%), followed by ‘mother’ (28.9%) and then ‘lady’ (12.1%). The preferred second choices were ‘patient’ (21.6%), ‘woman’ (20.1%) and ‘mother’ (17%). The most frequent third choice was ‘patient’ (24.2%), followed by ‘lady’ (19.4%) and then ‘woman’ (14.8%). When first, second and third choices were combined, the most popular choice was ‘patient’ (27%), followed by ‘mother’ (20.9%), then ‘lady’ (15.5%) (Table 1).

Table 1 First, second and third choices of title for all women surveyed				
Title	1st Choicen n(^a)	2nd Choicen n(%)	3rd Choicen n(%)	Combined 1st, 2nd & 3rd Choices n(%)
Client	26(4.1)	26(5.7)	38(9.2)	90(6.0)
Consumer	-	1(0.2)	1(0.2)	2(0.1)
Customer	3(0.5)	2(0.4)	11(2.7)	16(1.1)
Lady	76(12.1)	75(16.6)	80(19.4)	231(15.5)
Mother	182(28.9)	77(17)	54(13.1)	313(20.9)
Pregnant woman	20(3.2)	72(15.9)	53(12.8)	145(9.7)
Woman	52(8.3)	91(20.1)	61(14.8)	204(13.6)
Patient	206(32.8)	98(21.6)	100(24.2)	404(27)
Other	64(10.2)	11(2.4)	15(3.6)	90(6.0)
Total responses	629	453	413	1495
No response	30(4.6b)	206(31.3)	246(37.3)	482(24.4)
^a Percentage of total responses				
^b Percentage of total number of respondents				

We then examined whether the woman’s demographic factors significantly influenced their first choice of title. Women who chose ‘patient’ as their first choice had fewer previous pregnancies (p=0.028) and fewer children (p=0.031), while women choosing ‘mother’ were more likely to have more previous pregnancies (p=0.011) and more children (p=0.007).

There was no significant difference between public and private groups in their first choice of title (Table 2). Even when the public and private groups were adjusted for number of previous pregnancies and number of children there was still no difference for those choosing ‘patient’ (OR 1.31, 95% CI 0.93-1.86, p>0.05) and ‘mother’ (OR 0.84, 95% CI 0.59-1.22, p>0.05) as their first choice of title.

Table 2 Logistic regression for first preference of title from the public group compared with the private group		
1st preference	Odds Ratio [95% CI]	p value

Patient	0.76 [0.55, 1.07]	NS
Mother	0.23 [0.87, 1.77]	NS
Lady	0.93 [0.60, 1.59]	NS
Woman	1.26 [0.70, 2.28]	NS
Client	1.64 [0.70, 3.83]	NS
Pregnant woman	0.57 [0.23, 1.41]	NS
Other	0.68 [0.58, 1.65]	NS
NS p>0.05, Consumer and customer not analysed due to insufficient numbers		

Staff Survey

One hundred and forty one staff responded to the survey. The response rate was 77%. The questionnaires were sent to staff via internal mail. Of these, 111 (78.7%) were midwives, and 30 (21.3%) were doctors. The age distribution of the staff surveyed was as follows: 43.2% were aged 35 years or less, 38.8% were aged between 36 and 45 years and 18% were aged 46 years or older. Of the total number, 87.2% were female and 12.8% male. The number of years of practice was: 0-10 years (47.5%), 11-20 (34.5%) and greater than 21 years (18%).

A preference for addressing women by their first name was expressed by 81.8% of all staff. 6.6% wished to address women by their formal title, and the remainder (11.7%) did not mind. Midwives were more likely than doctors to have a preference for use of first name (87.2% vs. 60.7%, p=0.003) and less likely to prefer use of surname (2.8% vs. 21.4%, p=0.002).

Health professional’s first choice of preferred title for women in pregnancy was ‘mother’ (28.7%), followed by ‘lady’ (21.3%) and then ‘patient’ (16.9%). Second choice was ‘mother’ (28.4%), then ‘lady’ (27.5%) and then ‘patient’ and ‘woman’ (both 13.7%). Third choice was ‘patient’ (21.3%), then ‘pregnant woman’ (20.2%) and then ‘lady’ (18.1%). When first, second and third choices were combined, the most popular choice was still ‘mother’ (23.2%), followed by ‘lady’ (22.3%) and then ‘patient’ (17.2%) (Table 3).

Table 1 First, second and third choices of title for all women surveyed				
Title	1st Choicen n(% ^a)	2nd Choicen n(%)	3rd Choicen n(%)	Combined 1st, 2nd & 3rd Choices n(%)
Client	12(8.8)	10(9.8)	7(7.4)	29(8.7)
Consumer	-	-	1(1.1)	1(0.3)
Customer	-	-	3(3.2)	3(0.9)
Lady	29(21.3)	28(27.5)	17(18.1)	74(22.3)
Mother	39(28.7)	29(28.4)	9(9.6)	77(23.2)
Pregnant woman	8(5.9)	6(5.9)	19(20.2)	33(9.9)
Woman	22(16.2)	14(13.7)	15(16.0)	51(15.4)
Patient	23(16.9)	14(13.7)	20(21.3)	57(17.2)
Other	3(2.2)	1(1.0)	3(3.2)	7(2.1)
Total responses	136	102	94	332
No response	5(3.5 ^b)	39(27.7)	47(33.3)	91(21.5)
^a Percentage of total responses ^b Percentage of total number of respondents				

Health professionals overall chose ‘mother’ as their first choice, but midwives were significantly more likely to select ‘mother’ as first choice (34.9%) than were doctors (6.7%), while doctors were significantly more likely to select ‘patient’ as first choice (63.3%) compared to midwives (3.8%). None of the demographic factors were associated with choosing ‘mother’ as first choice. Male medical staff were significantly more likely to choose ‘patient’ but after adjusting for gender, doctors were still significantly more likely to select ‘patient’ (OR 35.7, 95% CI 7.8-163.5, p<0.001) (Table 4).

Table 4 Univariate logistic regression analyses: predictors of staff choosing (a) â motherâ and (b) â patientâ as first choice of title		
â Motherâ as first choice of title	Odds Ratio	p value
Profession		
Midwife	1	
Doctor	0.13 [0.03, 0.59]	0.008
Gender		
Female	1	
Male	0.12 [0.02, 0.97]	0.05 ^a
Age		
d 35	1.76 [0.57, 5.41]	NS
36-45	1.88 [0.60, 5.92]	NS
46+	1	
Years of Practice		
10	1.27 [0.44, 3.69]	NS
11-20	1.53 [0.51, 4.63]	NS
21+	1	
Number of Children		
0 0.89	[0.36, 2.17]	NS
1 0.35	[0.09, 1.46]	NS
2 0.22	[0.12, 1.61]	NS
3+	1	
â Patientâ as first choice of title	Odds Ratio	p value
Profession		
Midwife	1	
Doctor	44.05 [12.69, 152.93]	<0.001
Gender		
Female	1	
Male	19.45 [6.10, 62.06]	<0.001
Age		
35	0.82 [0.22, 3.03]	NS
36-45	1.48 [0.42, 5.23]	NS
46+	1	
Years of Practice		
10	0.99 [0.28, 3.51]	NS
11-20	1.28 [0.35, 4.66]	NS
21+	1	
Number of Children		
0	0.99 [0.29, 3.40]	NS
1	1.77 [0.41, 7.62]	NS
2	2.07 [0.52, 8.25]	NS
3	+ 1	
NS p>0.05, 95% CI for OR presented in brackets Referent group is identified by an OR=1 ^a Borderline significance, taken as NS		

Discussion

To our knowledge this is the first study that examines the preferred mode of address for pregnant women. First name

was the popular choice of both pregnant women and health professionals. This result is consistent with those of other studies^{7,8,9,10}, which have shown a preference for use of first name in a non-pregnant population, but a wide range exists (45 - 96%). An Irish study⁴ showed that 57.5% of patients preferred to be called by their first name but this was in an elderly population based in a Geriatric Unit.

In relation to preferred choice of title, our study showed that ‘patient’ was the preferred choice overall among pregnant women. This confirms the findings of a recent Australian and British study. While the Australian study also showed that ‘patient’ was the preferred choice among health professionals, in our study ‘mother’ was the preferred choice among health professionals with ‘patient’ being the third choice overall. Midwives were significantly more likely to choose ‘mother’ while doctors were significantly more likely to choose ‘patient’.

Findings show that ‘customer’ and ‘consumer’ were the least popular choice overall. Only 4.1% of women chose ‘client’ as their first choice of title, this was similar to the British study but less than the Australian study (7.8%)⁴.

Both private and public women predominantly wished to be called by their first name. There was no significant difference between public and private groups in their first choice of title. ‘Patient’ (36.3%) was the most popular choice among the public group followed by ‘mother’ (26.3%) while ‘mother’ (30.8%) was the most popular choice among the private group followed by ‘patient’ (30.2%). A breakdown into public and private groups has not been done in previous studies.

In the health professional survey the overall preferred choice for mode of address was ‘first name’. The percentage choosing ‘first name’ was similar for women (82.1%) and health professionals (81.8%). The overall preference of title was ‘mother’. This is different from the study by Denning et al where ‘patient’ was the preferred first choice. Midwives preferred the term ‘mother’. Doctors were greatly in favour of the term ‘patient’, but as the number surveyed was small caution is required in drawing a conclusion on this. However it is in agreement with previous research findings. Gender was also a significant predictor of health professionals choosing ‘patient’. Having adjusted for this, doctors remained more likely to select ‘patient’ compared to midwives.

Even in their second choice doctors still chose ‘patient’ and midwives still chose ‘mother’. None of the doctors selected the term ‘client’, while 11.3% of midwives chose this title as their first choice. This may reflect a different perception of pregnant women or the current orthodoxy on what has been a hotly debated issue.

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