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**Postpartum Visitation Policies**

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## **Abstract**

**Background:** Continual support for the birthing person during labor improves delivery outcomes and overall childbirth experiences. How many support people are present and their relation to the birthing person varies based on individual preference, family dynamics, and sociocultural expectations. During the Covid-19 pandemic, many hospitals implemented a one-visitor policy for deliveries. With these new guidelines in place, the length of hospital stays significantly decreased, and there were a variety of opinions towards these restrictions.

**Purpose:** The purpose of this study was to explore birthing persons' overall sentiment towards visitors in the immediate postpartum period.

**Methods:** The current study analyzed comments from a photo-based social media post. The original post, which received 94,198 likes and 1557 comments, said, "Can we normalize giving mothers time to rest and recuperate after giving birth and allowing them time to bond with their baby? People are so eager to see a new baby that they forget about the mother and what she has just been through-mentally and physically." A codebook was developed to assess the overall sentiment of visitation policies enforced during the Covid-19 pandemic. Each comment was independently coded by two coders; kappa values ranged from 0.97-1. Frequencies of codes were reported.

**Results:** Of those who mentioned Covid-19 (n= 114), 99% of the commentors were in favor of the visitor restrictions. The overall sentiment towards the post was divided into neutral (14.8%), agree (74.95%), disagree (7.7%), and normalize the birthing person communicating their boundaries (1.3%).

**Discussion:** Public opinion can influence policy and practice. Based on the overall sentiment of the commentors, there was an overwhelming agreeance proving the need for further research to

be conducted to distinguish the importance of support roles in the delivery versus postpartum periods.

## **Introduction**

The Covid-19 pandemic was a highly unprecedented time that presented many challenges to the healthcare system. In these times, many policy changes were made. When the pandemic broke out, the healthcare system focused on meeting individual patient preferences to meeting the needs of the community (Arora et al., 2020). Some of these policy changes later sparked questions as to whether the way the healthcare system had been functioning and the policies that were previously placed are best for patient outcomes. One major change that was implemented in the Covid-19 pandemic was hospital visitor restriction policies. The policies were implemented in most units, including maternal/newborn units. These policies had to be implemented to try and create a balance between meeting the needs of the individual patient and fulfilling the necessary task of decreasing the exposure of Covid-19 to patients, visitors, and the healthcare team. To try and accomplish this, most maternal/newborn unit visitor policies were restricted to only allowing one visitor per birthing person (Arora et al., 2020). The labor, delivery, and postpartum periods are demanding and volatile for a birthing person including major biological, social, and psychological changes (Yan et al., 2020). Continuous support in the labor process is beneficial and leads to better outcomes (Lunda et al., 2018). The postpartum period is a crucial time for maternal recovery, newborn adaptation, and maternal/newborn bonding. According to the World Health Organization (WHO) (2020), “When a woman has access to trusted emotional, psychological and practical support during labor and childbirth, evidence shows that both her experience of childbirth and her health outcomes can improve”. (para. 1). However, it does not specify that a birthing person needs more than one support person in the delivery and immediate postpartum period. Informal conversations heard by healthcare providers confirmed that some birthing persons preferred the new Covid-19 restricted visitor policies. Panda et al. (2021) found

that being able to better bond with their baby, not having to entertain visitors, and being less distracted were all mentioned by birthing persons in favor of the visitor restriction policies. However, this same study showed that birthing persons who were not in favor of the visitor restriction policies spoke of problems receiving support for breastfeeding and feared mental health issues may be overlooked or unnoticed due to a lack of social and professional support. Elling et al. (2022) showed mixed results as well. The positive views of visitor restriction policies held by some were supported by comments that valued the intimate family bonding and being able to recover without visitors. Negative views included being saddened by sibling restrictions and visitor restrictions during unusual circumstances such as unforeseen time spent in the neonatal intensive care unit (NICU) or an extended stay. Nurses reported being able to give higher quality care due to decreased distractions in emergencies. Nurses also stated they could empathize with patients wanting support from visitors (Elling et al., 2022). Policies that restrict visitors can also cause women to choose to deliver at home, which can increase the risk of perinatal death (Arora et al., 2020). This has created a need for research on whether it is beneficial or harmful to restrict visitors in maternal/newborn units. This research can help make it clearer if policy revisions should be considered. The purpose of this study is to explore the birthing person's overall sentiment towards visitors in the immediate postpartum period.

## **Methods**

The current study is a content analysis that analyzed comments to a photo based social media post. The original post, which received 94,198 likes and 1557 comments, said, “Can we normalize giving mothers time to rest and recuperate after giving birth and allowing them time to bond with their baby? People are so eager to see a new baby that they forget about the mother

and what she has just been through-mentally and physically. The visits can wait.”

(@scarymommy, 2021). @scarymommy has over 2.5 million followers from around the world.

Through examining Instagram comments, we were able to determine the overall sentiment of the commentors regarding Covid-19 visitor restrictions, and in general. Social media is a growing resource for researchers to gather data. For example, one article demonstrated the use of social media, specifically Twitter, as a data source to evaluate transit rider satisfaction. They used sentiment analysis through monitoring social media to “change the way transit agencies measure rider satisfaction” (Collins et al., 2013, p. 22). This study was used as a pilot test to demonstrate the usefulness of social media data for measuring people's perceptions and opinions. By looking at tweets and searching key terms to find relevant data, they determined that 25% of the data collected on this topic was relevant and opinion based. Certain words were picked out of each tweet which revealed a positive or negative connotation. It was determined that people are more likely to express their negative sentiment rather than positive sentiment (Collins et al., 2013).

Using social media as secondary data for measuring perceptions can be helpful in determining the opinions of a large population in real time. Another example of a study that used social media to gather data was one that quantified HPV (Human Papillomavirus) vaccine communication on Twitter and developed a methodology to improve data collection and analysis from Twitter. They collected Twitter data using 10 keywords related to HPV vaccination from August 1<sup>st</sup>, 2014, to July 31<sup>st</sup>, 2015. A codebook was then created to characterize the sentiment and content. It was determined that using social media to “detect health trends as well as communicate important health information, is a growing area of research in public health” (Massey et al., 2016, p. 9). Social media is a constantly evolving resource, therefore collecting

data from these posts can be an important source for opinion mining. Opinion mining has emerged as a method to study people's opinions "in terms of views, attitudes, appraisals and emotions towards entities and issues" (Stieglitz et al., 2014, p, 92). As displayed in this study, opinion mining is the methodology used to collect commentor sentiment from the @scarymommy post.

All comments were copied and pasted into an excel spreadsheet. The comments were reviewed by three coders and duplicates were removed prior to coding. All remaining (n=1495) comments were reviewed by two coders following a code book. A codebook was developed to measure overall agreement and perception of the original post. Each comment was independently coded by two coders. The coders were trained by independently coding the first 100 comments. Kappa values were calculated after the first group of 100 comments, at 300 comments, and at 567 comments where a kappa value of .95 was reached. An initial code was developed to determine whether the keywords of 'Covid-19' or 'Pandemic' were used in reference to the visitation restrictions. If the key words were stated in the commentor's post, then the comment was coded on whether the comment was in favor or not in favor of the visitation restrictions (k=1). A second code was developed to assess the overall sentiment towards restricting visitation policies (k= .97). Emojis were included in the second code regarding overall sentiment but were utilized as 'not specified data' in the first code. These codes were coded as either not specified, in favor, not in favor, or "normalize." Only comments with the word "normalize" specifically stated were coded as normalize. See Appendix A for the code book specifics.

## **Results**

Once acceptable kappa values were reached, the coders independently completed coding the remaining comments. Frequencies were calculated based on the code book. The first code asked



if keywords ‘Covid-19’ or ‘Pandemic’ were mentioned in the post. If yes, the coders rated each code by whether the commenter was in favor of the original post or not. Only 8% (n=114) of the specific comments referred to one of these key terms. Of those 114 comments, 99% (n=113) were in favor of the visitation restrictions, and 1% were not in favor. See Figure 1 for commentator’s agreement related to the keywords.

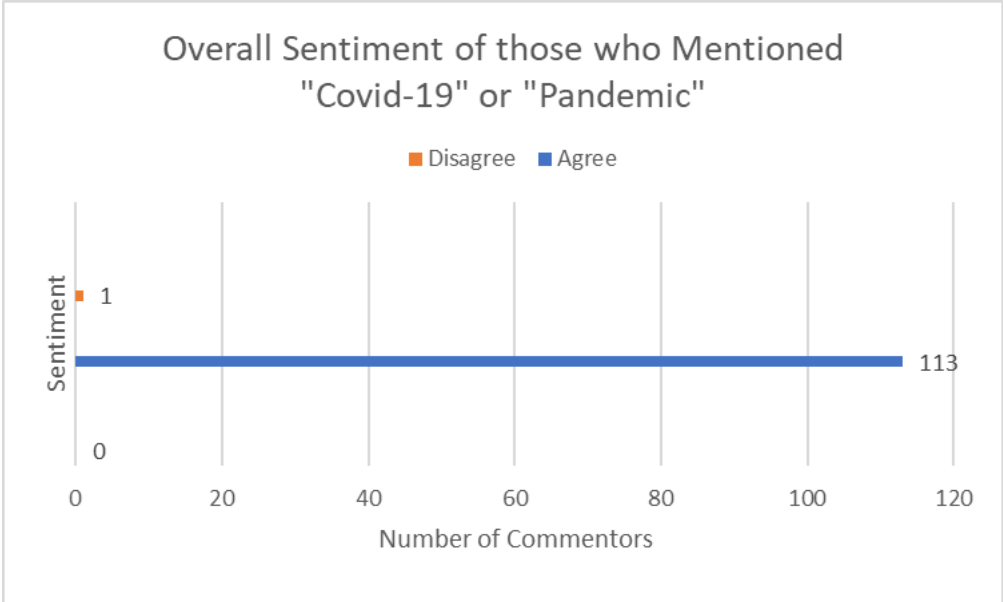


Figure 1. Commentors Overall Sentiment for those who mentioned “Covid-19” or Pandemic”

A second category was coded looking at the overall sentiment to the post 14.8% (n=222) did not have a way to determine the specific sentiment, 74.95% (n=1122) agreed with the initial post, 7.7% (n=115) disagreed with the original post, and 1.3% (n=20) specifically mentioned ‘normalize’ in reference to asking the birthing person their preferences. See Figure 2 for commentator’s overall sentiment.

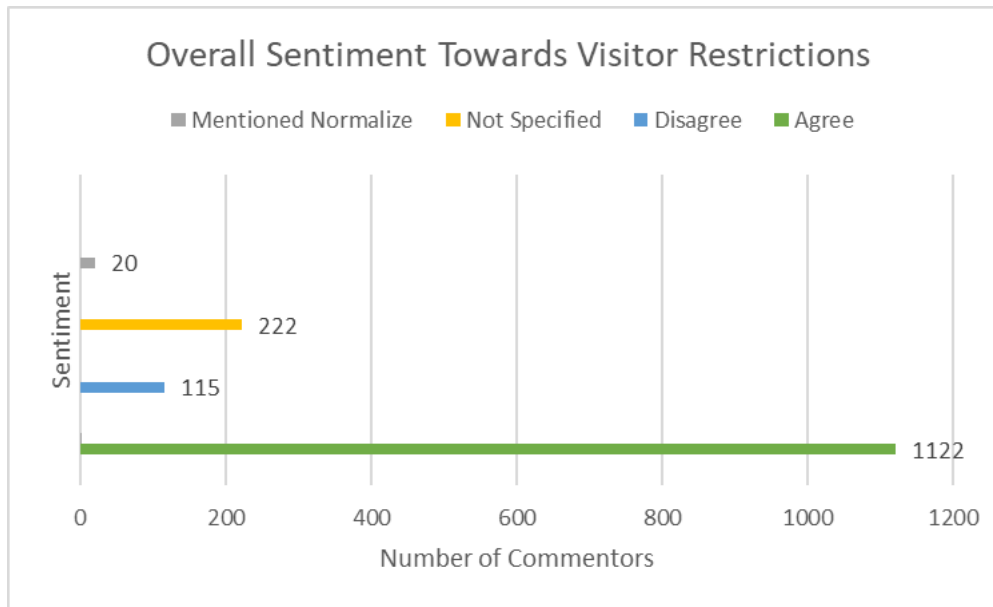


Figure 2. Commentors Overall Sentiment Towards Visitor Restrictions

An example of a comment in which the sentiment was undeterminable is “@username even special aunts deserve to be celebrated on Mother's Day! I hope you find a path to what fulfills you.” Many of the non-specifiable comments mentioned other people's usernames or stated things that were irrelevant to the post. For those that agreed with the initial post comments included “👏👏👏👏👏,” “Agree! We put off visits for several weeks this time around and it was the best decision ever!,” and “Best part of having a pandemic baby, we were able to enjoy time with just the 3 of us without a revolving door of visitors.” There was variance in the wording of people who agreed with the post including emojis and people who made it clear that visitor restrictions were a blessing. Commentors who disagreed with the original post said things like “I missed having visitors during the pandemic. I enjoy it.” and “I love visitors!! I never turn anyone away when they want to come see the new baby! Seems like I’m in the minority, though! Ha!” It was clear that those who disagreed with the original post enjoyed having visitors and felt that it enhanced their birthing experience. For the 1.3% who specifically mentioned “normalize,” said

“I loved the visitors! Normalize saying no is okay,” and “Check with the mom! Let’s normalize that. I was desperate for human interaction, and visits from friends were often the highlight of those hard days.” These commentors emphasized that it should be the birthing person’s choice regarding visitors and their preferences.

## **Discussion**

There is limited research specifically assessing the birthing person’s perceptions of restricted visitor policies. However, a quantitative survey showed decrease family tension and increased rest and bonding when postpartum visitors are restricted to one support person (Elling et al., 2022). In agreement, a qualitative study with 19 interviews from women who delivered between October 2020-March 2021 showed consistent findings with patients in favor of visitor limitations. These findings are aligned with the majority opinion found in the comments section of the original Instagram post.

Although there was an overwhelming agreement with the original post, there were people who felt that the visitor restrictions impaired their birthing experience and was a detriment to their mental health. Those who felt this way mentioned that the restrictions attributed to feelings of loneliness, anxiety, stress, and feeling overwhelmed. They felt as though they did not have enough physical and emotional support during birth and that the restrictions of extended family not being present was difficult (Breeman et al., 2021). The birthing person also mentioned feeling scared to give birth alone and much uncertainty about the birthing experience (Panda et al., 2021).

## **Limitations**

While social media provides a large amount of data that is publicly available, there are limitations to using it as a source. Liu et al. (2016) addressed the good, bad, and ugly of social

media data analysis. This article highlighted that data collected from social media is significantly different than conventional ways of data collection. It addresses the fact that while social media has opened a large amount of data, there are complications that come with using it. However, the authors claim that if it is used appropriately, it can be a lens for new types of study.

Liu et al. (2016) found that in general, the good of social media data mining is that it is big and linked. This means that a massive amount of linked data is accessible in an instant from many different users. The review found that the limitations of social media data include it being noisy, sparse, informal, and biased. Therefore, data can be missed where it is needed. Informal writings, incomplete sentences, and gibberish are often used. The ugly of social media includes it being heterogenous, multi-sourced, partial, and asymmetrical. A user may contribute conflicting data on different platforms. However, the article looks at trying to tame the ugly side of social media data collection and use the good to overcome the bad, making social media a reliable resource of data.

For our study on the birthing persons' overall sentiment towards visitors in the immediate postpartum period, our codebook eliminated the extra noise in the data that did not add value. The big-data paradox presents the challenge of valuable data being sparse at times. Not all users of social media contribute data (Liu et al., 2016). This is evidenced by some comments being coded as "not specified." In relation to this study of the birthing persons' overall sentiment towards visitors in the immediate postpartum period, users may have viewed the @scarymommy post, but not left a comment or like. Therefore, at times there is no distinction between indifference and dislike. In addition, social media sites tend to promote positive connections between users. However, as a user's platform grows, users may not be kind to one another, and an implicit negative link can form (Liu et al., 2016). Therefore, the users who were presented

with the @scarymommy post may have been a skewed population. Content polluters, such as bots, also propose a challenge. Bots can skew data from being representative of the human population. For example, bots can work together to create noise and change the statistics found on a social media platform (Liu et al., 2016). This article suggests that for social media data mining, there needs to be an evaluation done to detect bots and rule out their data. Overall, social media data provides an unparalleled platform to gather data on human behavior, activities, and opinions on a large scale.

## **Conclusion**

Support for the birthing person before the Covid-19 pandemic was rarely questioned, considering this support led to better overall outcomes and positive experiences. When the pandemic forced many hospitals to restrict visitors, especially in the maternal units, people quickly realized the benefits of having only one support person in the labor and delivery room. Whether this support person was a significant other, friend, or family member, mothers often felt that they had a stronger opportunity to bond with their child and have a less stressful birthing experience. Providing a way for mothers to immediately have alone time with their newborn has enhanced the birthing process for many.

Through analyzing social media content and creating an individualized codebook, we determined that of those who mentioned Covid-19, 99% were in favor of the visitor restrictions. The birthing person had a more positive experience when bonding with their child without the stress or impediment of family and friends. Although there was some variance in data, most mothers agreed with the original statement from the post, that visitor restrictions were beneficial. Few studies have examined the effect of the pandemic on the birthing person, especially regarding their sentiment towards visitor restrictions. Further research should be conducted to

distinguish the importance of support in the delivery versus the postpartum periods. Throughout this study, it was determined that postpartum visitor restrictions can lead to more positive birthing experiences for the mothers.

The results of this study exploring the birthing persons' overall sentiment towards visitors in the immediate postpartum period has shown that there is a need for more research in this area to determine if new policies should be implemented in hospitals. With patient safety at the center of care, further research should be done on the physical, mental, and emotional effects of visitors in the immediate postpartum period. While it was found that most birthing persons supported restricting visitors, some were in favor of visitors and spoke of the benefits of having support from others. Policies should have the patient's best interest in mind, so the effects, whether positive or negative, need to be determined before policies can be created and implemented.

## References

- Arora, K. S., Mauch, J. T., & Gibson, K. S. (2020). Labor and delivery visitor policies during the covid-19 pandemic. *JAMA*, 323(24), 2468. <https://doi.org/10.1001/jama.2020.7563>
- Breman, RB, Neerland, C, Bradley, D, Burgess, A, Barr, E, Burcher, P. Giving birth during the COVID-19 pandemic, perspectives from a sample of the United States birthing persons during the first wave: March-June 2020. *Birth*. 2021; 48: 524– 533. <https://doi.org/10.1111/birt.12559>
- Collins, C., Hasan, S., & Ukkusuri, S. (2013). A Novel Transit Rider Satisfaction Metric: Rider Sentiments Measured from Online Social Media Data. *Journal of Public Transportation*, 16(2), 21–45. <https://doi.org/10.5038/2375-0901.16.2.2>
- Elling, C., Sleutel, M. R., Wells, J., Newcomb, P., Valdez, E., Walker, K., & Nguyen, T. (2022). Women’s and Nurses’ Perceptions of Visitor Restrictions After Childbirth During the COVID-19 Pandemic. *Nursing for Women’s Health*, 26(4), 278–287. <https://doi.org/10.1016/j.nwh.2022.05.002>
- Liu, H., Morstatter, F., Tang, J., & Zafarani, R. (2016). The good, the bad, and the ugly: Uncovering novel research opportunities in social media mining. *International Journal of Data Science and Analytics*, 1(3-4), 137–143. <https://doi.org/10.1007/s41060-016-0023-0>
- Lunda, P., Minnie, C. S., & Benadé, P. (2018). Women’s experiences of continuous support during childbirth: A meta-synthesis. *BMC Pregnancy and Childbirth*, 18(1). <https://doi.org/10.1186/s12884-018-1755-8>
- Massey, P. M., Leader, A., Yom-Tov, E., Budenz, A., Fisher, K., & Klassen, A. C. (2016). Applying Multiple Data Collection Tools to Quantify Human Papillomavirus Vaccine Communication on Twitter. *Journal of Medical Internet Research*, 18(12), e318. <https://doi.org/10.2196/jmir.6670>
- Panda, S., O’Malley, D., Barry, P., Vallejo, N., & Smith, V. (2021). Women’s views and experiences of maternity care during COVID-19 in Ireland: A qualitative descriptive study. *Midwifery*, 103(103092), 103092. <https://doi.org/10.1016/j.midw.2021.103092>
- @scarymommy (2021, June 16). *Can we normalize baby that they forget about the mother and what she has just been through-mentally and physically* [Photograph]. Instagram.
- Stieglitz, S., Dang-Xuan, L., Bruns, A., & Neuberger, C. (2014). Social Media Analytics. *Business & Information Systems Engineering*, 6(2), 89–96. <https://doi.org/10.1007/s12599-014-0315-7>
- World Health Organization. (2020, September 9). *Every woman’s right to a companion of choice during childbirth*. <https://www.who.int/news/item/09-09-2020-every-woman-s-right-to-a-companion-of-choice-during-childbirth>
- Yan, H., Ding, Y., & Guo, W. (2020). Mental health of pregnant and postpartum women during the coronavirus disease 2019 pandemic: A systematic review and meta-analysis. *Frontiers in Psychology*, 11. <https://doi.org/10.3389/fpsyg.2020.617001>

**Appendix A: Codebook Specifics**

Were visitation restrictions related to Covid-19 mentioned? (Covid-19 or Pandemic)

0: Not specified

1: Yes, in favor of restrictions

2: Yes, were not in favor of restrictions

Overall perception of comment (emojis or one-word comments included)

0: Not specified

1: Agree

2: Disagree

3: Normalize communicating pt's desires