

Table 1: Key practice changes in thirty-two European countries

Key practice change	Number of countries with a practice change	Comments	International Guidance WHO or RCOG/RCM	Countries aligned with International guidance
Companionship	32/32 All countries had some limitations on antenatal visits, attending ultrasound, companionship for birth and postnatally.	<i>'we have good protocols that align with WHO- but no one follows them'</i> Cyprus <i>'partners are only allowed in (to birthing suite) during established labour and must have had a swab in the last 48 hours'</i> Malta <i>'no visitors are permitted in the postpartum period'</i> Estonia	All women have the right to a safe and positive childbirth experience, whether or not they have C-19- this includes 'a companion of choice' (WHO)	Iceland was most closely aligned with WHO guidance- the significant practice change was the exclusion of the partner from the ultrasound examination to protect staff with specialised skills. 31/32 countries had an increase in virtual visits and women attending face to face appointments unaccompanied.
Breastfeeding	Difficult to ascertain	<i>'parents need to wear masks but breastfeeding is supported if the baby is positive he/she stays with mother, if the baby is negative they are separated and the midwives feed the baby with breast milk/formula'</i> 'Cyprus'	Women and their families should be informed that infection with COVID-19 is not a contraindication to breastfeeding. (RCOG/RCM)	It seems that support for breastfeeding is present, but how this is done varies at a local level.
Mother/baby separation after birth	Difficult to ascertain	<i>'mothers are tested for C-19 before birth, mothers and infants are separated after birth'</i> Slovakia <i>'mothers and babies are separated if mother is C-19 positive, depends on whether the unit can offer a separate quarantine room or not'</i> Czech Republic	Women and their healthy babies should remain together in the immediate postpartum period, if they do not otherwise require maternal critical care or neonatal care. (RCOG/RCM)	It seems all countries are offering skin-to-skin contact after birth, and separation is based on the need for maternal or neonatal care
Visiting the postpartum period	30/32	<i>'partners are not allowed to accompany women to the postnatal wards'</i> Sweden <i>'first wave no partners could visit NICU mothers are permitted to visit 15 mins a day'</i> Ireland <i>'often parents of premature babies cannot visit them for weeks'</i> Poland	National guidance applies in terms of the models of care in place	Where access to postnatal wards is restricted it seems early discharge home was seen as an alternative for most countries. It seems when the baby has to receive neonatal care visiting restrictions can be particularly severe and prolonged
Mask wearing in labour	3/32	<i>'every woman has to wear a mask during labour even in the second stage'</i> Luxembourg <i>'the companion must wear a mask at all times (in delivery suite)'</i> Estonia <i>'mothers need to have a swab within last 48 hours, otherwise treated as C-19 positive and have to labour with a</i>	Guidance refers to national policies on wearing face masks. However, overall the guidance is towards the wearing of appropriate PPE by staff and once the woman is in an	

		<i>mask' Malta</i>	isolation room she can remove her mask.	
Impact on interventions	32/32	<i>'demands for caesarean section increased. More women arrived in active labour and the number of out-of-hospital births increased' Turkey</i>		All countries experienced practice changes from antenatal visits, to rules around companionship and access to mother and baby in the postnatal period or to baby in the NICU.

Thirty-two countries were represented and contributed to the chat on practice changes in their country in maternity care in wave 1 of the C-19 pandemic. These findings are not definitive. In addition, the variation between local and regional practices within countries is so wide that ascertaining a definitive description of the changes is not feasible.