

Note:

The survey was administered online in Japanese.  
In the process of synthesizing the research findings into an English paper,  
an English translation of the survey content was created for reference.

## Survey on Information Gathering and Social Support Status for Pregnant Women

### First, we will ask about you and your family.

1. Please tell us your age. *Numerical input*
2. Gestational weeks (weeks) *Numerical input, limited to 28 weeks to 42 weeks*
3. What number child will your current pregnancy be?  
(Example: If this is your first pregnancy, write 1) *Numerical input, limited to 1 or more*
4. Please tell us the number of babies you are carrying in your current pregnancy  
(i.e., whether it is a multiple pregnancy)  
(Example: For singleton pregnancy, enter 1; for twin pregnancy, enter 2; for more, enter the actual number)  
*Numerical input, limited to 1 or more*
5. Please select one option that applies to your current employment status:
  - 1) Full-time employment (including maternity leave)
  - 2) Part-time/contract employment (including maternity leave)
  - 3) None (including full-time homemaker)
6. Educational background:
  - 1) Junior high school
  - 2) High school
  - 3) Vocational school
  - 4) Technical college
  - 5) Junior college
  - 6) Four-year university
  - 7) Graduate school (including six-year programs)
  - 8) Other (please specify)
7. Household income:
  - 1) Less than 2 million yen
  - 2) 2-3.99 million yen
  - 3) 4-5.99 million yen
  - 4) 6-7.99 million yen
  - 5) 8-9.99 million yen
  - 6) 10 million yen or more
8. Marital status:
  - 1) Have a spouse (including common-law/de facto marriage)
  - 2) No spouse (including those separated or widowed)
9. Who do you live with? Select all that apply. *Multiple selections allowed*
  - 1) Spouse
  - 2) Children
  - 3) Your parents
  - 4) Spouse's parents
  - 5) Relatives other than parents
  - 6) Other

7) Live alone

**10. Place of residence** *Select from 47 prefectures*

**11. Which of the following best describes the area where you live?**

Reference: <https://www.kokudo.or.jp/service/distribution.html>

- 1) 23 Special Wards of Tokyo
- 2) Designated city (Population of 500,000 or more)
- 3) Core city (Population of 200,000 or more)
- 4) Medium-sized city (Population of 100,000 or more)
- 5) Small city (Population of 50,000 or more)
- 6) Town or Village (Population of less than 50,000)

**12. Where do you plan to give birth?**

- 1) Obstetrics/gynecology clinic or hospital specializing in obstetrics
- 2) Obstetrics department of a general hospital with multiple departments
- 3) Midwifery birth center
- 4) Home
- 5) Not yet decided
- 6) Other (Please specify)

**13. Presence of abnormalities indicated by your doctor during this pregnancy:**

- 1) None
- 2) Yes (continuation/worsening of pre-existing condition)
- 3) Yes (complications that appeared during pregnancy, including multiple pregnancy)  
*If yes → Current medication during pregnancy (Yes/No)*  
*→ Current hospitalization during pregnancy (Yes/No)*

**14. Did you undergo fertility treatment for this pregnancy?**

- 1) Yes
- 2) No

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**Next, we will ask about information gathering during your current pregnancy.**

**1. Please tell us all the sources you have consulted or used to obtain information about pregnancy, childbirth, and childcare. (Multiple selections allowed)**

- 1) Spouse / Partner
- 2) Your mother
- 3) Your father
- 4) Spouse / Partner's mother
- 5) Spouse / Partner's father
- 6) Your sister(s)
- 7) Your brother(s)
- 8) Sister(s)-in-law
- 9) Brother(s)-in-law
- 10) Other female relatives (Excluding parents/siblings)
- 11) Other male relatives (Excluding parents/siblings)
- 12) Friends / Acquaintances
- 13) Peers/Groups met through the internet
- 14) Obstetricians / Pediatricians (Doctors)
- 15) Nurses / Midwives (at OB-GYN or Pediatric clinics)
- 16) Public health nurses
- 17) Local government staff (Municipal office)
- 18) Staff from private sectors or NPOs
- 19) Teachers at your older child's school or daycare
- 20) Websites / SNS of hospitals or local governments

- 21) Websites / SNS of specialists (Midwives, doctors, nurses, childcare workers, registered dietitians)
- 22) Websites / SNS featuring reviews from other parents
- 23) Websites / SNS / Apps from private companies or NPOs
- 24) Magazines and books
- 25) Information newsletters or posters produced by local governments
- 26) Other: [ ] (Required / No input restrictions / Max 200 characters)
- 27) None in particular (Exclusive choice)

**2.** In gathering information about your current pregnancy and childbirth (including paid article subscriptions, participation in individual consultations or classes, etc.), have you used "paid services" provided by sources other than your planned delivery facility or local government?

*Display the above question items excluding parents and spouse, check information sources, and have them write specific details*

- 1) No
- 2) Yes → If yes, what kind of services?

For those who answered that they have used a service, please provide more details about the service(s) based on the examples below. (Required)

*If you have used multiple services, please provide details for each one.*

- Service Provider: Who (Occupation), Organization (Company, Group, NPO, Website)
- Service Details: Individual consultation, Prenatal classes, Paid articles, etc.
- Service Cost: e.g., 5,000 yen per session, 500 yen per month

**3.** Please tell us about the methods of information provision and consultation you seek from midwives and nurses at your planned delivery facility during pregnancy. - Educational Needs During Pregnancy

- 1) In-person, individual information provision and consultation (including prenatal checkups and midwife outpatient clinics)
- 2) Online, individual information provision and consultation
- 3) In-person, group information provision and consultation (including maternity classes and couples' classes)
- 4) Online, group information provision and consultation (including online maternity classes and couples' classes)
- 5) I do not seek information provision or consultation from midwives/nurses at the delivery location (other methods are sufficient)

→ If you selected 1-4, what kind of information provision or consultation would you like?

(Limited to 100 characters)(Free response)

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**The following questions ask about people in your environment who provide you with help or support.**

The following questions ask about people in your environment who provide you with help or support. Each question has two parts.

In **A**), we ask how many people help you. Please select only one number that best applies to you by marking  . Next, in **B**), please select one number from 1-6 indicating how satisfied you are with the people mentioned in A), and mark  on the corresponding number.

**[1]**

**A)** Whom can you really count on to be dependable when you need help?

None / 1 person / 2 people / 3 people / 4 people / 5 people / 6 or more people  
(If 6 or more, specify: \_\_\_ people)

**B)** How satisfied?

(If you answered "None" in A, please indicate how satisfied you are with that situation)

- 1) Very dissatisfied
- 2) Fairly dissatisfied
- 3) A little dissatisfied
- 4) A little satisfied
- 5) Fairly satisfied

6) Very satisfied

[2]

**A)** Whom can you really count on to help you feel more relaxed when you are under pressure or tense?

None / 1 person / 2 people / 3 people / 4 people / 5 people / 6 or more people (\_\_\_ people)

**B)** How satisfied?

(If you answered "None" in A, please indicate how satisfied you are with that situation)

- 1) Very dissatisfied
- 2) Fairly dissatisfied
- 3) A little dissatisfied
- 4) A little satisfied
- 5) Fairly satisfied
- 6) Very satisfied

[3]

**A)** Who accepts you totally, including both your worst and your best points?

None / 1 person / 2 people / 3 people / 4 people / 5 people / 6 or more people (\_\_\_ people)

**B)** How satisfied?

(If you answered "None" in A, please indicate how satisfied you are with that situation)

- 1) Very dissatisfied
- 2) Fairly dissatisfied
- 3) A little dissatisfied
- 4) A little satisfied
- 5) Fairly satisfied
- 6) Very satisfied

[4]

**A)** Whom can you really count on to care about you, regardless of what is happening to you?

None / 1 person / 2 people / 3 people / 4 people / 5 people / 6 or more people (\_\_\_ people)

**B)** How satisfied?

(If you answered "None" in A, please indicate how satisfied you are with that situation)

- 1) Very dissatisfied
- 2) Fairly dissatisfied
- 3) A little dissatisfied
- 4) A little satisfied
- 5) Fairly satisfied
- 6) Very satisfied

[5]

**A)** Whom can you really count on to help you feel better when you are feeling generally down-in-the-dumps?

None / 1 person / 2 people / 3 people / 4 people / 5 people / 6 or more people (\_\_\_ people)

**B)** How satisfied?

(If you answered "None" in A, please indicate how satisfied you are with that situation)

- 1) Very dissatisfied
- 2) Fairly dissatisfied
- 3) A little dissatisfied
- 4) A little satisfied
- 5) Fairly satisfied
- 6) Very satisfied

[6]

**A)** Whom can you count on to console you when you are very upset?

None / 1 person / 2 people / 3 people / 4 people / 5 people / 6 or more people (\_\_\_ people)

**B)** How satisfied?

(If you answered "None" in A, please indicate how satisfied you are with that situation)

- 1) Very dissatisfied
- 2) Fairly dissatisfied

- 3) A little dissatisfied
- 4) A little satisfied
- 5) Fairly satisfied
- 6) Very satisfied

The following statements describe how people sometimes feel. For each statement, please indicate how you feel the way described by circling one number of each.

**[7]** How often do you feel that you lack companionship?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[8]** How often do you feel that you have a lot in common with the people around you?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[9]** How often do you feel close to people?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[10]** How often do you feel left out?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[11]** How often do you feel that no one really knows you well?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[12]** How often do you feel isolated from others?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[13]** How often do you feel that there are people who really understand you?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[14]** How often do you feel that people are around you but not with you?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[15]** How often do you feel that there are people you can talk to?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

**[16]** How often do you feel that there are people you can turn to?

- 1) Never
- 2) Rarely
- 3) Sometimes
- 4) Always

Please submit.

Thank you very much for your cooperation.