The Chinese Childbirth Self-Efficacy Inventory: the development of a short form
Aims and objectives. To examine the validity and reliability of the short form of the Childbirth Self-Efficacy Inventory in a clinical Chinese pregnant population.

Background. Childbirth self-efficacy has become an important psychological construct for both childbirth educators and researchers because pregnant women’s perception may influence the meaning and consequences of childbirth. Assessment done by the original Childbirth Self-Efficacy Inventory limits the scientific rigor for generating additional research into the construct, as its items were repetitive and its structure is lengthy.

Methods. This prospective study investigated 293 Chinese pregnant women in their third trimester of pregnancy. The women completed the short form of the Childbirth Self-Efficacy Inventory, the Chinese Self-efficacy Scale and the socio-demographic questionnaire in an interview room of the study hospital. The re-testing of the scale on the participants was carried out two weeks later in the same clinic.

Results. Factor analysis and item-subscale correlations supported the conceptual dimensions of the short form of the Chinese Childbirth Self-Efficacy Inventory. The Cronbach’s alpha coefficients for both subscales were over 0.9. The convergent validity with the Chinese Self-Efficacy Scale was reflected by a moderate correlation for the two subscales. The efficacy expectancy subscale differentiated primigravid from multigravid women (t = 2.83, P < 0.01, CI -2.33 to 2.34).

Conclusions. The reliability and validity information presented in this paper supports the use of the short form of the Childbirth Self-Efficacy Inventory as a research instrument in measuring the childbirth self-efficacy among the Chinese population. Further validation of the measure is warranted.

Relevance to clinical practice. The reliable short form of the Childbirth Self-Efficacy Inventory could be used in routine clinical practice in maternity care services to provide a point of reference for future research and development in both childbirth education and clinical practice.