

Why women and midwives choose to birth in primary birth centres in the Waikato region.

A descriptive study using a thematic analysis



Why?

- 10 primary birth units in Waikato region
- 30% of women use primary units
- 70% use tertiary facilities



Literature review

- Low risk women have better outcomes (fewer interventions/increase in normal birth) if they choose to birth in a primary unit (Davis et al, 2014; Dixon et al, 2014)
- Women will bypass primary unit citing safety concerns (Gibbons et al, 2016)
- Dominant discourse is hospital safest place (Grigg et al, 2015)
- Women's choices often related to personal beliefs and philosophies about birth (Grigg et al, 2015)
- Women chose carer rather than place of birth (Patterson, 2007)

Participants

- 3 primary birth units – 2 rural/1 urban
- 6 women who birthed in the units
- 7 midwives who cared for women who birthed in the units
- In the last five years



Method

- Interview of 6 women
- Interview of 7 midwives
- Review transcripts and audio recordings
- Identify themes
- Review data for facilities (5 years)

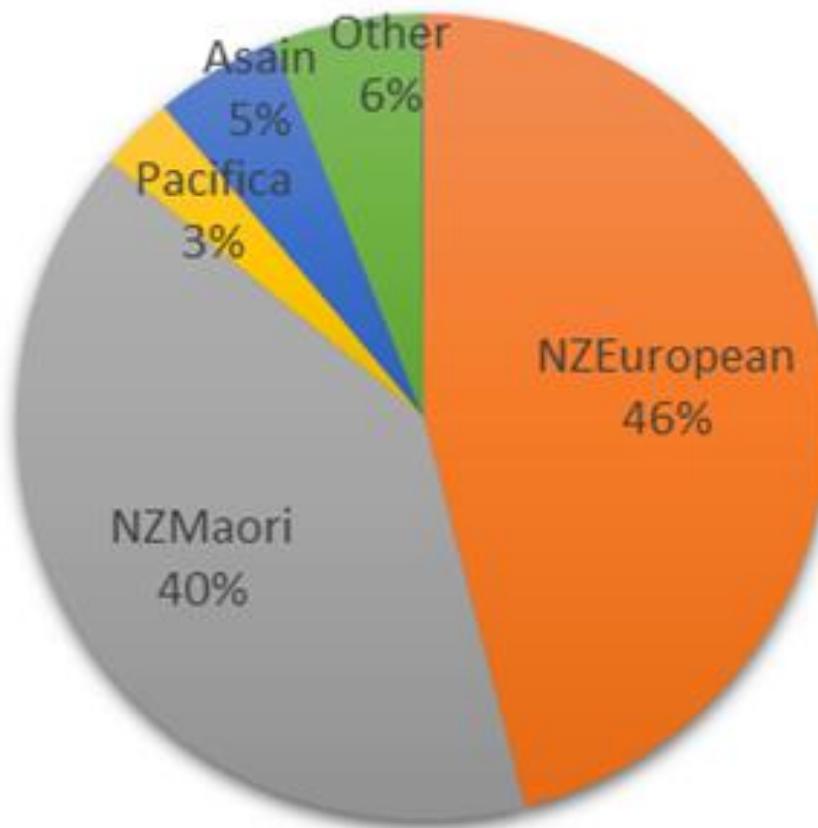


Data

- Data from 2010-2015 reviewed
- Manually recorded

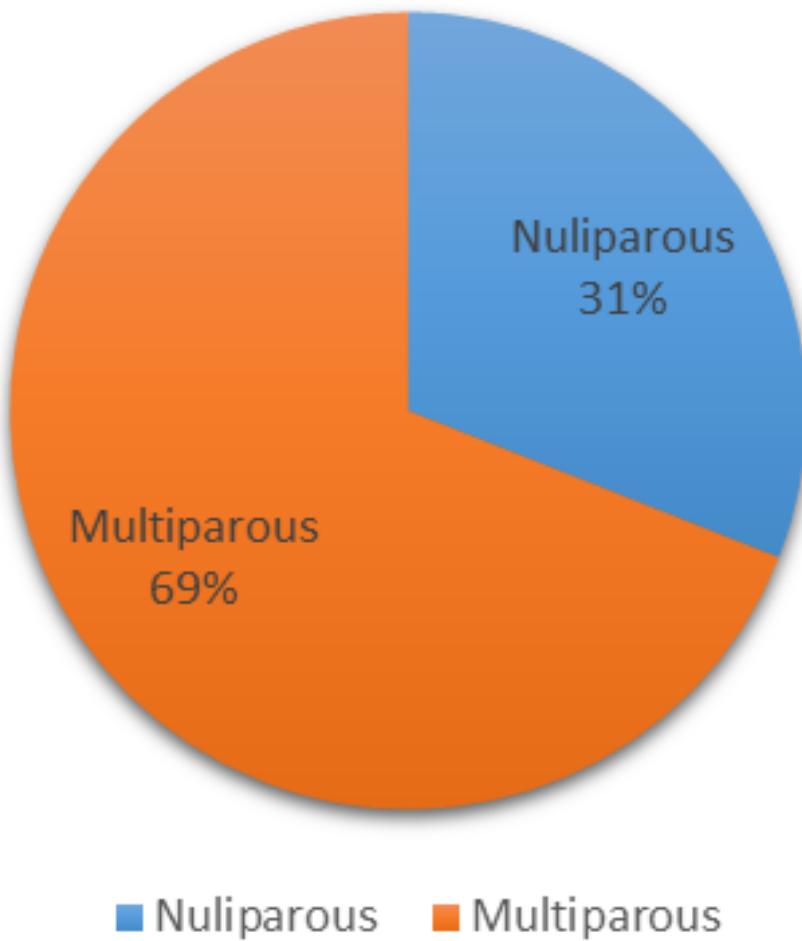


Ethnicity

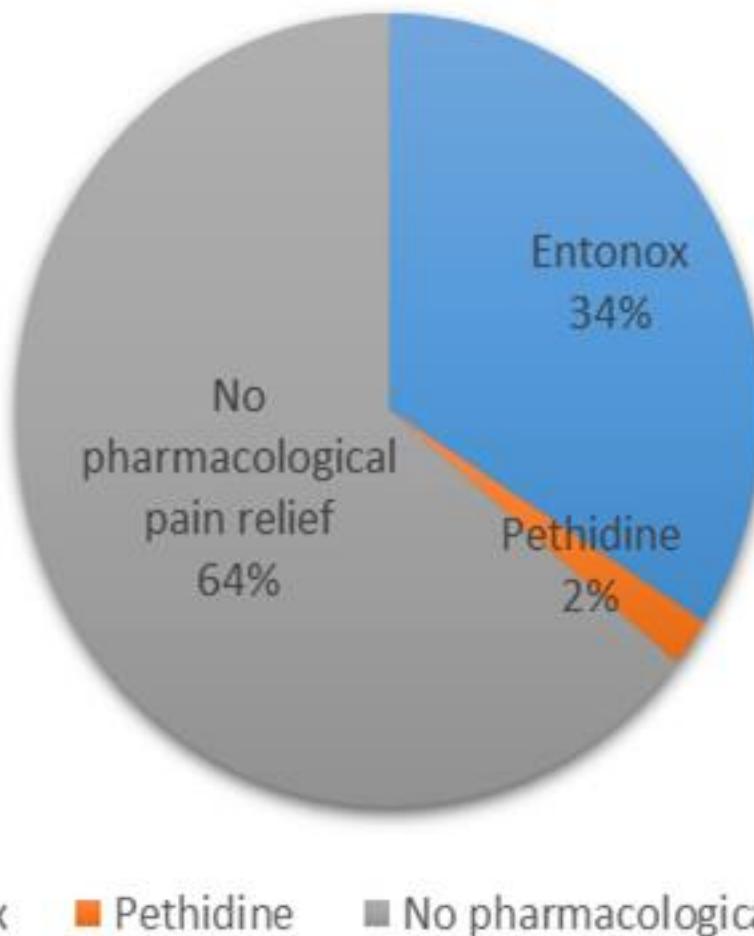


■ Ethnicity ■ NZEuropean ■ NZMaori ■ Pacifica ■ Asain ■ Other ■ Not stated

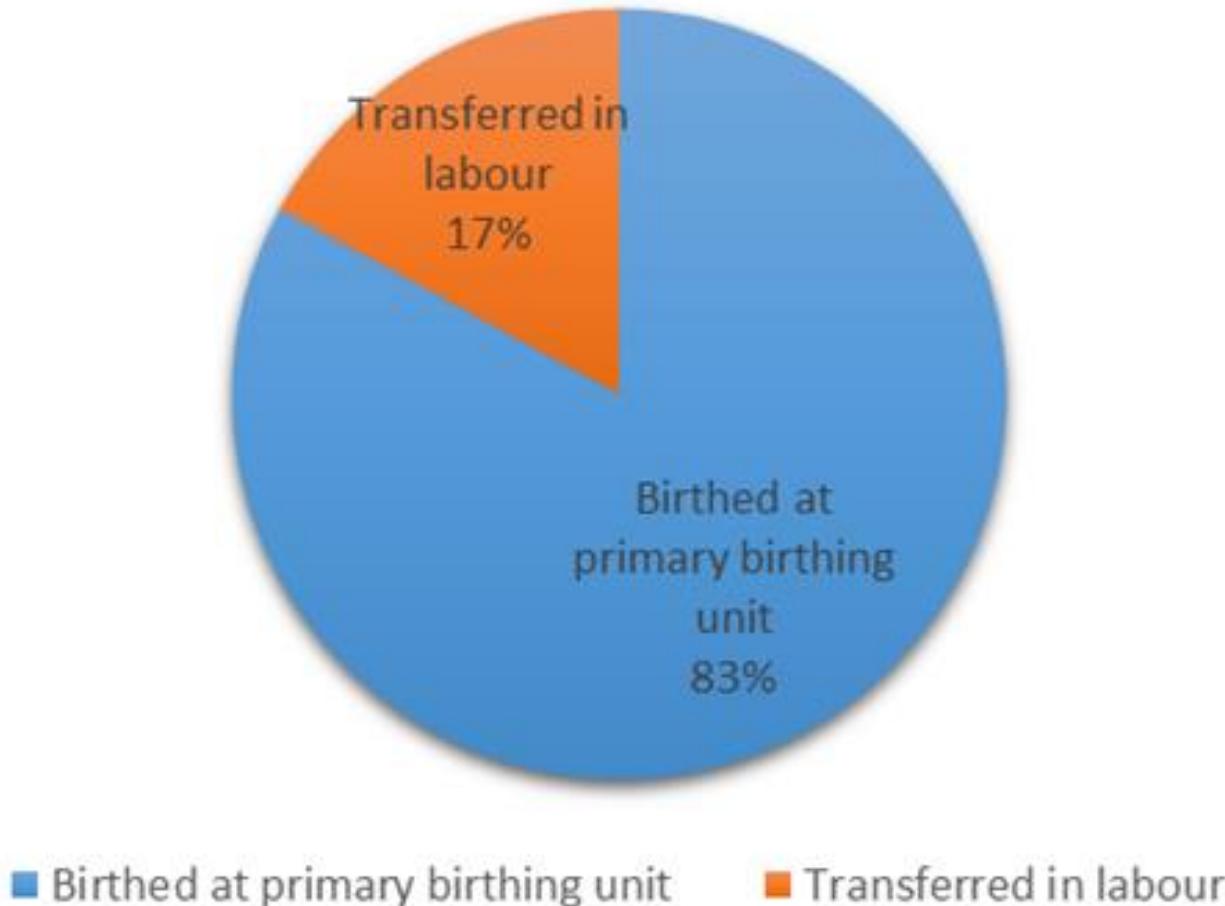
Parity



Use of pharmacological pain relief



Percent of transfers in labour



Findings - midwives

- Political
- Guardianship
- Ownership
- Collegiality



Political

- Role of midwife to advocate primary birth
- Midwives aware of risk culture
- Mindful of geographical distances
- Need to work with eligibility options



Guardianship

- Offering safe choices for women
- Protecting the birth space
- Build women's knowledge and confidence
- Work with woman's timeline
- More time with women



Ownership

- Community involvement in unit
- Relationships with local services
- Need to support local service
- Access for support ie CTG



Collegiality

- Midwives feel welcomed
- Feel cared for
- Feel trusted
- Confidence in local ambulance service



Findings - women

- Women's expectations
- Belief in birth
- Choice
- Staff and facility



Women's expectations

- Expectations of normal birth
- Primary birth fitted their world view
- Wanted family/whanau included
- Felt more at home locally



- Michelle: *my understanding is that women that are in a primary care facility have less intervention and therefore you have a higher chance of having a natural birth, which was certainly an aim of mine, to have a natural birth.*



Belief in birth

- Shared belief and trust in midwife
- Shared confidence in normal birth



- Aroha: *She was really good and reassuring, so positive – the whole time she was telling me how I was handling it so well, lots of positive reassurance to me, which was great, through the whole birth and that gave me a lot of confidence in myself. She kept saying it's all normal, it's all going great, you're doing well, so I wasn't worried about anything.*
- Georgia: *I couldn't fault my midwife my midwife is very on to it and she just went click, click, click and I felt like I was in really good hands*

Choice

- Woman's choice to birth at birth centre
- Attended the unit during pregnancy
- Liked atmosphere of the unit
- Hospitals for sick people



Jane: *Women....just need the support from their friends and their family or whoever their birth team's going to be, and from their midwife, and they need to believe in themselves*

Jane: *Women get a sense of fear and that they need to have the hospital*

Abbey: *My midwife obviously supported the decision....I wouldn't say she influenced my decision, I made that on my own.*

Staff & facility

- Staff there for me
- Felt respected and valued
- Staff knowledgeable and skilled
- Convenient for woman and whanau
- Facilities fresh, clean and of high standard



Michelle: *The nurses there are really lovely and supportive. I have a bit of trouble breastfeeding. They're just there really, really helpful. They popped in... if my husband went out then they would come in and have a chat, they were always friendly....they always came in and made sure that I was alright.*

Georgia: *I really felt like I was someone and I was being taken care of.*

*Michelle: Convenience, being in the same town.
That my husband could stay there and pop home if
he needed to.*

*Georgia: I really enjoyed the food and stuff. Clean.
I'm a clean freak. I could tell that they were
hygienic.*

*Aroha: I signed up for antenatal classes and that
was at Waterford, and from those classes I
became more familiar with the options and what
we wanted to do*

*Abbey: To me, I don't think there's any point in
being in hospital unless I need to be there. I'd
rather be in a nice warm, comfortable, friendly,
homely environment.*

Summary

- Benefits of online data
- Quality of the facility important to women
- Facility provides a support hub for midwife



Where next?

- Explore the reasons why women with no risk factors choose to birth at Waikato Hospital
- Explore midwives knowledge and confidence in primary birth



References

- Davis, D., Baddock, S., Pairman, S., Hunter, M., Benn, C. et al (2011). Planned place of birth in New Zealand: Does it affect model of birth and intervention rates among low risk women? *Birth Issues in Perinatal Care*. 38,2.
- Dixon, L. Prileszky , G., Guilliland, K., Miller, S., Anderson, J. (2014). Place of birth and outcomes for a cohort of low risk women in New Zealand: A comparison with Birthplace England. *New Zealand College of Midwives Journal*. 50. pp. 11-18.
- Gibbons, V., Lancaster, G., Gosman, K. & Lawrenson, R. (2016). Rural women's perspective of maternity services in the Midland Region of New Zealand. *Journal of Primary Health Care*, 8(3). 220-226.
- Grigg, C. P., Tracy, S., Schmied, V., Daellenbach, R., Kensington, M. (2015) Women's birthplace decision-making, the role of confidence: Part of the evaluating maternity units study, New Zealand. *Midwifery*.
- Patterson, J. (2007). Rural midwifery and the sense of difference. *New Zealand College of Midwives Journal*.
- Surtees, R. (2010). Everybody expects the perfect baby...and perfect labour... and so you have to protect yourself': discourses of defence in midwifery practice in Aotearoa/New Zealand. *Nursing inquiry*.