

Home or away? Factors affecting birth choices in a rural community

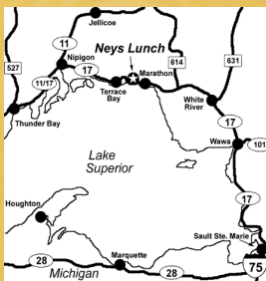
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Accepted for publication in Canadian Family Physician

OVERVIEW

- Background of rural obstetrical services in Marathon
- Objectives of our research study
- Methods
- Results
- Conclusions

MARATHON



MARATHON FAMILY PRACTICE

- 9 physicians
- Comprehensive primary care
- Emergency, in-patient, obstetrical services
- Level 1 hospital – no cesarean section capability
- Paddle, hike, fish, have kids, do research

BACKGROUND

- safe for low-risk pregnant women to give birth in a rural setting
- Low-risk pregnant women are able to give birth in Marathon – Level 1 centre
- Women can choose to give birth in Thunder Bay – Level 2 centre

OBSTETRICS IN MARATHON

- Obstetrics program reopened in 1996
- Since this time approximately 50% of all pregnant women deliver in Marathon
- 25% are high-risk and must deliver elsewhere
- 25% of low-risk women choose to deliver in a Level 2 centre

Factors influencing women's decisions to access prenatal care

- Personal and systemic factors
 - Cost
 - Support of family and friends
 - Atmosphere of services
 - Attitudes of health care providers
- Belief systems
 - Prior experiences with her health care provider
 - Attitudes
 - Present perception of self
 - Concerns for herself and her infant
- No research looking at factors influencing women's *intrapartum* choices

Informedness

- inadequate information about services was the primary barrier to the utilization of prenatal services in rural low-income pregnant women
- little is known regarding how well informed rural women are about obstetric related services

OBJECTIVES

- to determine some of the personal and systemic factors and beliefs that affect women's decisions to deliver their babies in Marathon as opposed to in a larger centre
- to determine how well informed women living in Marathon are about the local obstetrical services
- to see if the level of informedness influences women's decisions regarding the type of obstetrical care they seek

METHODS

- Summer 2003
- Survey of women aged 16 to 40 living in Marathon or catchment area
- Lakehead Research Ethics Board

RESULTS

- 2/3 of women approached participated
- 64 participants total
- most important personal and systemic factors:
 - closeness to home
 - ease of presence of partner
 - ease of presence of coach
- least important personal and systemic factors:
 - availability of epidurals in the city
 - care in a center with a high number of deliveries
 - expenses

- Most important belief:
 - convenience of delivering in Marathon
- Least important beliefs:
 - first pregnancies should deliver in the city
 - their partner believed they should deliver in the city

- Mean level of informedness was 66%
- 77.8% of women would choose to deliver in Marathon
- The level of informedness did not influence women's response to this question ($p=0.166$)

- *no significant association* between personal and systemic factors and women's choice of delivery location except for time away from work/children
- several of the questions about women's belief systems were *significantly associated* with their likelihood to choose Marathon for delivery

CONCLUSIONS

- Belief systems are more important than personal and systemic factors in influencing women's decisions to deliver in Marathon
- There exists a moderate level of informedness regarding local obstetrical services
- The majority of respondents would choose to remain in Marathon for the duration of a low-risk pregnancy and delivery

LIMITATIONS

- Self-selected study population
- Small sample size
- Unique health care environment

THANK YOU

- Health Sciences North Summer Studentship Program and Marathon Family Practice
- Dr. Laurie Goldsmith