

Differences in birth interventions by area of residence

Deborah Loxton¹, Jennifer Powers¹, Ashleigh O'Mara¹, Catherine Chojenta¹

¹University of Newcastle

Dr Deborah Loxton is the Deputy Director of the Australian Longitudinal Study on Women's Health. Deborah's research focuses on women's health and wellbeing with a particular emphasis on the impact of major life events such as abuse, sole motherhood, and young motherhood. Dr Loxton has also investigated women's reproductive health, including substance use during pregnancy and maternal health in the first years of motherhood. Dr Loxton has written a number of papers that describe various methods and outcomes of longitudinal data collection and analysis, and longitudinal methodology remains one of her primary research interests. Dr Loxton has used both quantitative and qualitative methods in analysing longitudinal data and is now undertaking various projects that link longitudinal survey data with other data sets, such as the Midwives Data Collection in NSW.

This paper aimed to examine differences in birth interventions between major cities and more rural and remote areas. Initial analyses of mailed survey data collected from the ALSWH cohort born 1973-1978 indicated that women living in major cities were more likely than women living in rural or remote areas to have had pain relief (particularly epidurals), an instrumental delivery or an episiotomy. Further analyses will examine whether these differences are due to birth and maternal differences such as age, education and private health insurance rather than where the women live.