

Indigenous Birthing in an Urban Setting

The IBUS Study



This 5-year study evaluated a new **Birthing on Country** Service for First Nations women and families

↑
50%
reduction in preterm birth



Less babies in
Neonatal
intensive care

Our study of 1400+ women published in **Lancet Global Health** found women in the new Birthing on Country service had:

80% more women attending 5+ antenatal visits
~40% more breastfeeding
fewer epidurals
fewer planned cesareans

We also yarned with over 600 families about their health care

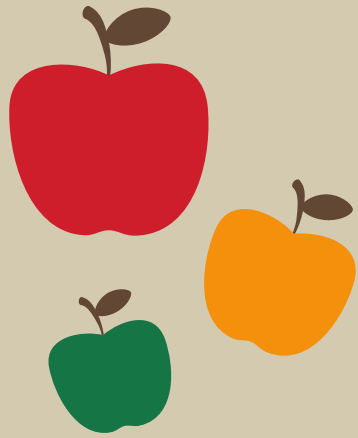
Four timepoints

- Early pregnancy
- 36 weeks pregnant
- 2 months old
- 6 months old

1,878
surveys completed



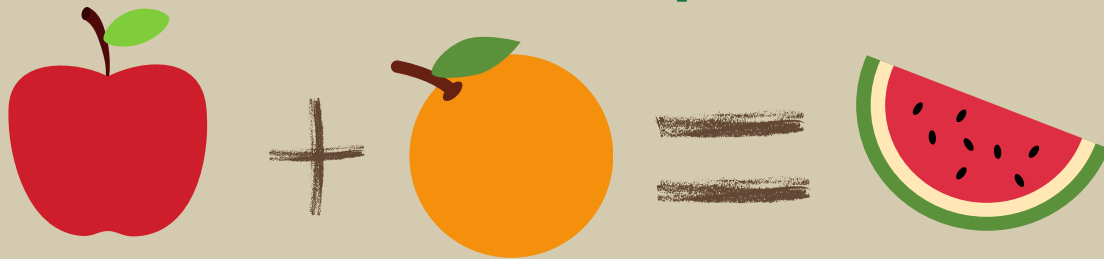
Sometimes people want to know if their service made a difference so they compare outcomes of their service to another service.



However, women with different health needs or backgrounds sometimes choose or get put into certain services.

This means they might be more or less likely to have certain health outcomes even before the research intervention happens.

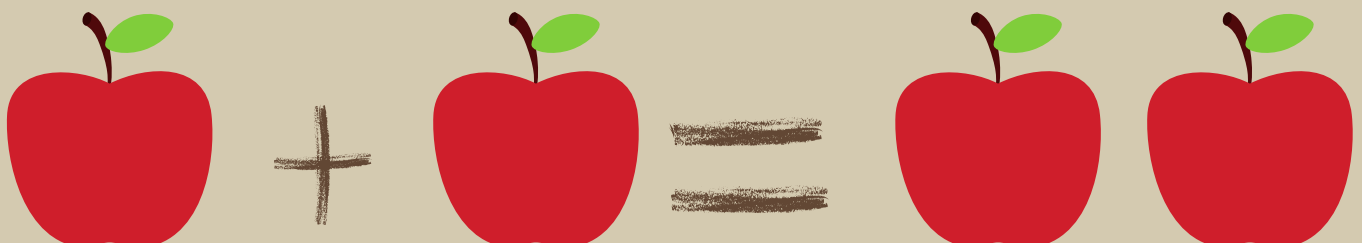
Those studies end up like this...



This service was too important to community so we wanted our numbers to be strong.

We used **propensity score matching** to see if there was a difference between services. This means we matched women in the new service with certain characteristics (like diabetes, age, education) with other women in another service with the same characteristics, then calculated how much the service impacted their individual chances of having certain health outcomes.

Our study did this:

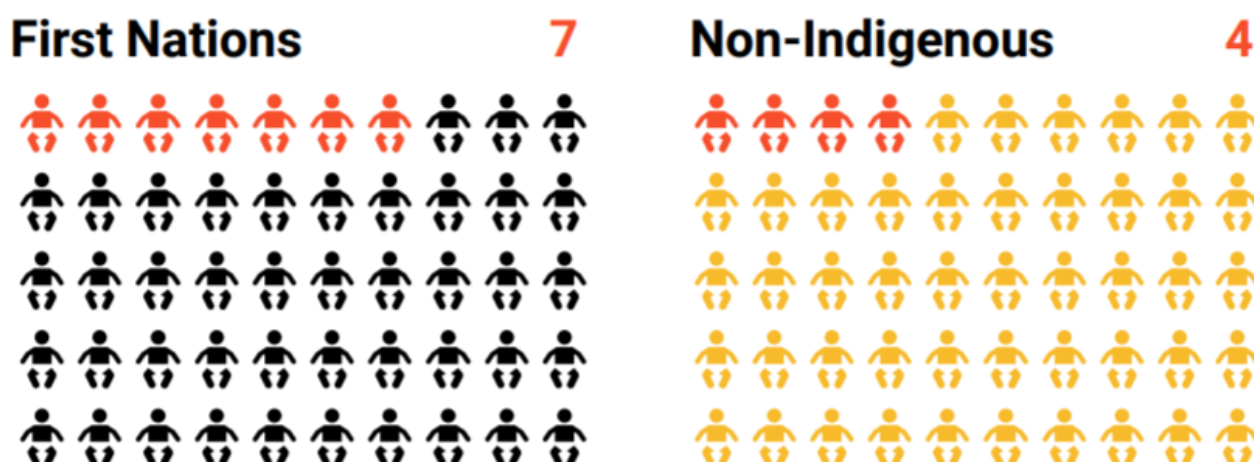


First Nations babies born too early (preterm) in every 50 babies

Babies born at Mater hospital



Babies born across Australia



Our study found that the Birthing in Our Community Service **Closed the Gap** in preterm birth for First Nations babies born in Brisbane South.

This is now at similar rates to Non-Indigenous babies.

More urgent work is needed across the country.

Lots of First Nations babies continue to be born preterm.

Many First Nations women and families do not have access to local and culturally safe birthing services.

The Birthing in Our Community Service

In five years...

Over 600 women had
a 24/7 known
midwife and family
support worker



20

New jobs for First
Nations women
created

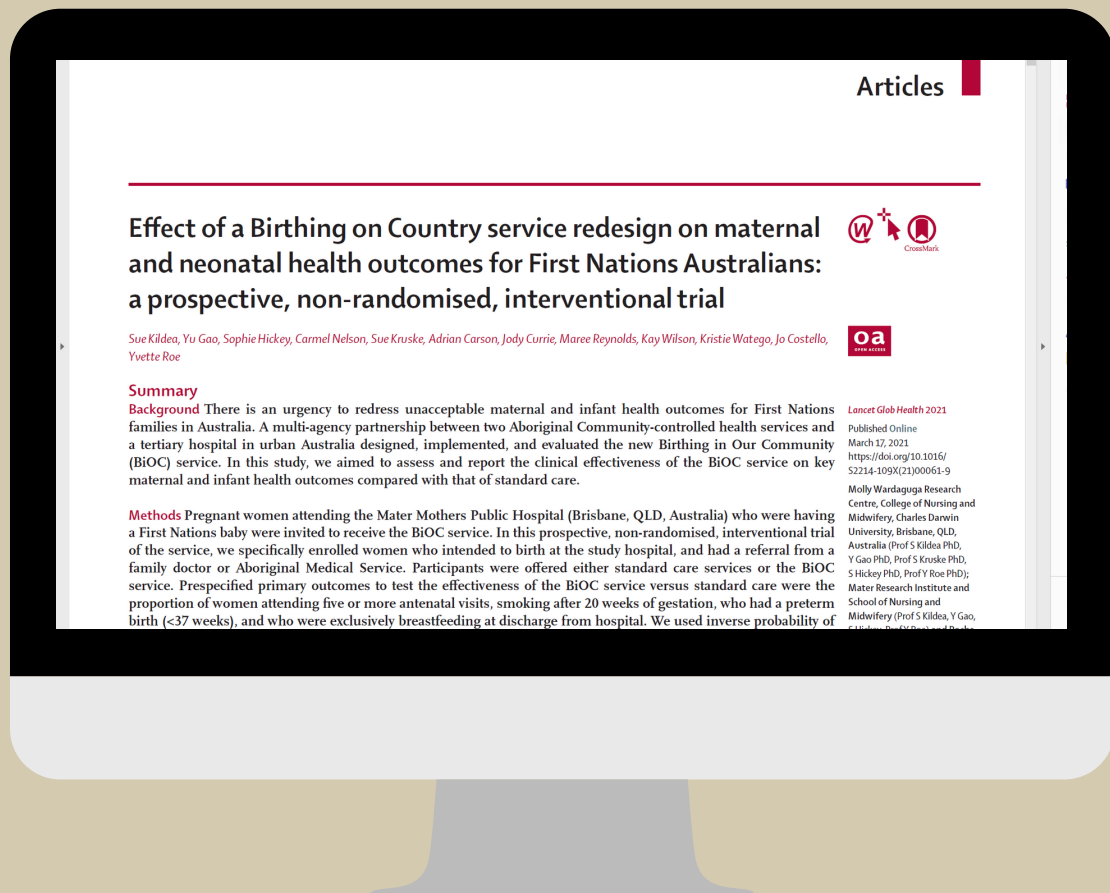
- 1 Grad-midwife
- 2 Midwifery cadets
- 4 Family support workers
- 3 Community researchers
- 1 Practice nurse
- 1 Psychologist
- 2 Transport officers
- 1 Medical receptionist
- 4 Research students
- 1 Creche worker

Community
mums and bubs
hub with
yarning days

Strong partnership
between hospital and 2
Aboriginal health
organisations

Let's endorse
Medicare for Midwives
recommendations
and enable
Aboriginal Community-
Controlled Health Services
to purchase insurance for
caseload midwifery. Let's
roll-out this out across
the country!

 **MOLLY WARDAGUGA**
RESEARCH CENTRE THE BEST START TO LIFE



More details in full article:

Kildea, S., Gao, Y., Hickey, S., Nelson, C., Kruske, S., Carson, A., Currie, J., Reynolds, M., Wilson, K., Watego, K. Costello, J., & Y. Roe (2021) **Effect of a Birthing on Country service redesign on maternal and neonatal health outcomes for First Nations Australians: a prospective, non-randomised, interventional trial.** *The Lancet Global Health.*

[https://authors.elsevier.com/sd/article/S2214-109X\(21\)00061-9](https://authors.elsevier.com/sd/article/S2214-109X(21)00061-9)

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