

Need for residential parenting services grows with birth interventions, finds largest-ever study

September 24 2019, by Ali Sardyga

In the largest study of its kind, Western Sydney University researchers have found a link between birth interventions and the use of Residential Parenting Services (RPS).

Researchers from the University's School of Nursing and Midwifery examined more than 32,000 RPS admissions to Tresillian and Karitane facilities in New South Wales between 2000 and 2012—as part of a large, government-funded Australian Research Council (ARC) Linkage study. Tresillian and Karitane partnered with Western Sydney University in this important research. The research team compared these outcomes with more than one million women giving [birth](#) in NSW during that [time period](#) who did not go to these RPS.

The results, published in the academic journal *BMJ Open*, revealed:

- Women admitted to Residential Parenting Services (RPS) experienced more intervention during labour and birth;
- Women admitted to RPS were on average two years older, more socially advantaged and more likely to be Australian born than the average birthing population;
- They are more likely to have given birth in a private hospital (51% RPS admissions vs 36% overall).

Lead researcher Professor Hannah Dahlen said the fact that the rates of

caesarean section and instrumental births (forceps and vacuum), are significantly higher in women admitted to RPS is intriguing—particularly given that the rates of assisted deliveries in the general population had not increased that significantly during the time period of the study.

The data analysis found that:

- 50% of mothers with RPS admissions vs. 39% overall birthing population in NSW had an assisted vaginal delivery or caesarean section;
- 38% of RPS patients (vs 25% overall) had an epidural;
- 28% of RPS patients (vs 25% overall) had their labour induced.

Their babies were:

- More likely to be resuscitated (44% vs 39% overall);
- Go to Special Care Nursery (SCN) /Neonatal Intensive Care Unit (NICU) (20% vs 16% overall);
- Have experienced birth trauma, especially to the scalp (due to instrumental birth);
- More likely to be male (55% vs 51% overall). These results are consistent with previous studies published by this team of researchers, which have shown that more than one-in-ten women admitted to RPS experienced a traumatic birth, and about more than half of RPS patients presented with mental health issues. This is substantially higher than the general population.

Most women seeking parenting support struggle with sleep, feeding and settling issues, which in turn contributes to high levels of maternal fatigue and exhaustion.

Professor Dahlen said: "However, if you look at the underlying factors,

the data shows that a high number of women who require RPS support identify as having mental health issues, such as anxiety and depression. With high numbers also experiencing what they consider to be a traumatic birth we need to seriously look at models of care, such as continuity of midwifery care that can reduce this trauma."

"One factor we need to look at is the higher percentage of mothers in RPS who had given birth in private hospitals. Private obstetric care has been linked with more birth interventions, with evidence of more morbidity for babies as a result," she said.

"Private hospitals are also less likely to carry out a mental health assessment, which are routine in public hospitals, possibly missing a critical opportunity to determine risk factors for maternal [mental health issues](#) early and provide appropriate support."

The study also raises further questions about the disparity between women from socioeconomically advantaged and disadvantaged groups.

"Removing any existing institutional or other barriers to accessing RPS needs to be prioritised. Social isolation, or perceived lack of social support, has a significant impact on parenting and adjustment to motherhood, for [women](#) from all walks of life," said Professor Dahlen.

"These research findings demonstrate the continued need for residential and intensive parenting support models of care across Australia and aligns with Karitane's feedback from parents on the benefits of the service, with 95% of our families reporting greater confidence in parenting after their residential stay," said Grainne O'Loughlin, CEO, Karitane.

"The evidence from this research clearly demonstrates the need for greater accessibility to these Residential Parenting Services for

vulnerable families, including those families living in regional areas of NSW and Australia," said Robert Mills, CEO, Tresillian.

More information: Hannah G Dahlen et al. Characteristics and changes in characteristics of women and babies admitted to residential parenting services in New South Wales, Australia in the first year following birth: a population-based data linkage study 2000–2012, *BMJ Open* (2019). [DOI: 10.1136/bmjopen-2019-030133](https://doi.org/10.1136/bmjopen-2019-030133)

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