

## Antenatal care study

In 1998, the Perinatal Data Collection Unit of the Department of Human Services conducted a statewide population study into women's use of antenatal and intrapartum (birth) care in Victoria. Over 24,000 women of at least 20 weeks gestation were included. This four month study was designed to gain a better understanding of the types and use of different models of care and to support the planning of health services. Comparisons of pregnancy outcomes were made in some cases, and feedback passed to individual hospitals to allow for policy development.

### Models of care

The extensive range of care models studied includes:

- **Public hospital, outpatient, standard care** - the woman attends the hospital for all aspects of her antenatal care, and is cared for by the hospital and midwifery staff during birth.
- **Public hospital, high risk clinic and specialist obstetrician** - after a specific obstetric need or condition is identified, the woman attends a hospital clinic.
- **Public hospital, midwife clinic** - the woman sees one of a group of midwives for her antenatal care and a consultant obstetrician for designated visits. During birth, the woman receives care from midwives.
- **Team midwifery in public hospital** - the woman is seen by the same team of midwives throughout her entire pregnancy, birth and postnatal period.
- **Share care, public hospital with GP** - the majority of the woman's antenatal care is provided by a GP accredited by the specific hospital.
- **Share care, public hospital with midwife in private practice** - the midwife in private practice provides most of the antenatal care.
- **Share care, GP with midwife** - the woman sees the midwife for care throughout pregnancy, birth and the postnatal period. The GP also provides antenatal care.
- **Share care, public hospital with community health centre** - the woman attends the hospital for designated visits and receives most of her antenatal care at her community health centre.
- **Private obstetrician and private GP** - the woman sees her GP regularly during the antenatal period with specific visits to an obstetrician.
- **GP, private** - the woman sees her GP throughout her pregnancy and birth.
- **GP, obstetrician, public patient** - when a public hospital doesn't provide any outpatient antenatal care, women attending as public patients are required to obtain this care privately.
- **Private obstetrician** - the woman attends her obstetrician for antenatal care.
- **Midwife in private practice** - the woman attends the midwife for care throughout pregnancy, birth and the postnatal period.
- **Hospital birth centre** - care is provided by a small team of midwives in the family birth centre. This type of care is only for women with uncomplicated pregnancies.
- **Share care** - antenatal care is shared between the family birth centre, midwives and an obstetrician or accredited GP, or a midwife in private practice.

### Other models of care

Other models of care include:

- Care shared between a private obstetrician and a midwife in private practice.
- Care shared between a private obstetrician and a midwife.
- Midwife managed care.
- Variations on 'team midwifery'.

## Selected results

Some of the findings of the four month survey included:

- The type of care available depended on where the woman lived.
- In some hospitals and for women living in some regions, there is only limited use or availability of certain models of care.
- Private obstetrician was the most frequently used model, used by 28.3 per cent of women.
- Overall, 85.4 per cent of women used the same type of care throughout their pregnancy.
- A higher number of women from non-English speaking backgrounds used public hospital standard care than women born in Australia, North America and the United Kingdom.
- Birth centres were used more frequently by women born overseas, particularly North and South American women.
- Women born in Oceania, Asia, Africa and the Middle East were more likely to have no care at 20 weeks gestation than Australian-born women.

## Where to get help

- Your doctor
- Hospital.

## Things to remember

- In 1998, the Perinatal Data Collection Unit of the Department of Human Services conducted a statewide population study into women's use of antenatal and intrapartum care in Victoria.
- There are a large number of different models of care available to pregnant Victorian women.
- In some hospitals and for women living in some regions, there is only limited use or availability of certain models of care.

**This page has been produced in consultation with, and approved by:**

Department of Health - Clinical Council's Unit (Victoria Perinatal Data Collection)

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