Guided by women’s voices

The Aboriginal Families Study will help policymakers, health service managers and service providers to keep community goals in mind.

Having a baby is an important life event in all families and all cultures. How supported women feel during pregnancy, how women and families are welcomed by services, how safe they feel coming into hospitals to give birth, and what happens to families during a hospital stay are important social determinants of maternal and child health outcomes.

The Aboriginal Families Study will invite all mothers of Aboriginal babies giving birth over a 12-month period in South Australia to talk about their pregnancy and birthing care and the support they received from services after their baby was born. The study – which is supported by a three-year grant from the National Health and Medical Research Council (NHMRC) – is being conducted by the Murdoch Childrens Research Institute, in partnership with the Aboriginal Health Council of South Australia.

The project developed as a sister study to a population-based survey of women who gave birth in South Australia and Victoria in 2007. Community consultations were held across South Australia from late 2007 to early 2009. The purpose of the consultations was: to find out what issues were important to Aboriginal communities with regard to services used by families around the time of pregnancy; determine whether there was community support for research about women’s experiences of using services during pregnancy, birth and the first few months after having a baby; and seek feedback on how the research should be done.

Two Aboriginal researchers – Roxanne Miller and Hayley Wilson – conducted consultations with Aboriginal community organisations and communities spanning urban, regional and remote areas of South Australia. The key messages from the consultations were:

- that communities wanted the research to lead to improved services for Aboriginal women and families; and,
- at the end of the project, communities must feel that their efforts in supporting the project have been worthwhile.

The research team was also told that:

- Families – including fathers – need more information about pregnancy and what happens at birth and afterwards provided in culturally respectful ways.
- Support for families managing social-health issues, such as family violence, drug and alcohol abuse, overcrowded and poor-quality housing and poverty, is important and needs to be seen as an integral part of antenatal care.
- Services need to respect Aboriginal culture and ways of doing things, including traditional birthing practices.

An Aboriginal Advisory Group was established in 2007, and has guided the research team and study investigators from consultation to the development of a research protocol, through the conduct of a pilot study, and refinement of recruitment and interview procedures; and the submission of several grant applications, including a successful NHMRC grant awarded to the study this year. Based on feedback from the consultation, the study will invite Aboriginal women from across South Australia to talk about pregnancy and birthing care, and the support they had from services before and after their baby was born. All women living in urban, regional and remote areas of South Australia who give birth to an Aboriginal infant over a 12-month period (n > 1000) will be invited to take part. The interviews will be conducted at around six months postpartum by a small team of Aboriginal and non-Aboriginal interviewers using a booklet-based interview schedule.

Over and over again in the consultations, we heard this message: the research must be sound; and it must lead to improved services for Aboriginal families. Early on, the Aboriginal Advisory Group recognised that, for the study to make a difference, we needed service providers and policymakers to be engaged and listening. With this in mind, senior policymakers in SA Health and service providers involved in delivering services to Aboriginal families were included in the State-wide consultations held at the very beginning of the project, before the research protocol had been fully formulated. Towards the end of the consultation period, we convened a meeting with senior policymakers spanning the Department of Health, Children Youth and Women’s Health Service and Country Health SA to discuss how the project could contribute to service improvements. Around one table there were senior Aboriginal women involved in service and policy roles from around the State, a representative of the Aboriginal Health Council of South Australia, several representatives of SA Health and senior members of the research team. This initial meeting led to what is now known as the Aboriginal Families Study Policy Implementation Partnership. This group brings together researchers, policymakers and Aboriginal community representatives with the explicit purpose of tackling issues arising from the research and working together to achieve knowledge translation – turning the information gathered in the research into action.

In South Australia, perinatal outcomes for Aboriginal infants are largely consistent with national figures. Compared with non-Aboriginal infants, Aboriginal babies are: three times more likely to die before their first birthday, twice as likely to be of low birth weight, almost three times more likely to suffer fetal growth restriction, and almost twice as likely to be born preterm. Aboriginal women are approximately five times more likely to die in childbirth or from childbirth-related causes as non-Aboriginal women.

Recent data suggest that in some Australian States, including South Australia, the proportion of low birthweight babies born to Aboriginal mothers may be increasing. Data reported in 2008 by the National Perinatal Statistics Unit showed that 13 per cent of babies born to Aboriginal mothers in 2006 weighed less than 2500 grams, compared with six per cent of babies born to non-Aboriginal mothers. In South Australia the proportion of low birthweight infants...
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born to Aboriginal mothers has been higher than the national average for the last two data collection periods (14.3 per cent in 2006 and 17.6 per cent in 2007).3,4 These data underline the need for urgent and immediate action.

There are many great examples – in South Australia and around the country – of local initiatives that provide culturally appropriate care for Aboriginal families.5,6 However, these initiatives are commonly on short-term funding and are rarely well integrated into State-wide systems of care. In South Australia, a healthy start to life for Aboriginal children is a major focus of State Government policy.7 Funding made available under the Council of Australian Governments (COAG) Indigenous Early Childhood Development Partnership has been directed to new service models involving Aboriginal Maternal Infant Care (AMIC) workers as members of the clinical team for pregnancy, intrapartum and postnatal care. New services are being developed in conjunction with metropolitan and regional maternity hospitals. In addition, SA Health has implemented cultural respect training for managers and clinical staff, with a particular focus on supporting the new AMIC worker model.

Too often when initiatives like these are implemented, the people most affected by changes to services don’t have a voice in the process. The Aboriginal Families Study aims to ensure that the voices of Aboriginal women and families are accessible to policymakers, health service managers and service providers as evidence to inform ongoing efforts to strengthen services. By keeping community and policy goals in mind right from the start, the project is laying foundations for sustained improvements in Aboriginal women’s and children’s health.

References
5 Herceg A. Improving health in Aboriginal and Torres Strait Islander mothers, babies and young children: a literature review. Canberra: Department of Health and Ageing; 2005.

Author profiles
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Further information about the study: http://www.mcri.edu.au/AboriginalFamiliesStudy

This painting, by South Australian artist Katrina Williams, is the motif for the study. It shows: ‘how a pregnant woman is looked after by her grandmother and mother, and they encourage her to eat healthy food and to go to the health service or the doctor regularly until she has her baby.’ It is currently displayed in the foyer of the Adelaide Women’s and Children’s Hospital.