



Press Release

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For immediate release

From the Atlantic Centre of Excellence for Women's Health

Maternity Care in Their Own Communities: A Thing of the Past for Rural Women?

Canadian women in rural communities are finding it harder and harder to get good maternity care -- or any maternity care at all, according to a new study. Dr. Jude Kornelsen, co-principal investigator of Rural Women's Experiences of Maternity Care: Implications for Policy and Practice, will speak about her findings as part of the Canadian Association of Midwives' Annual Meeting. Her talk is sponsored by the Atlantic Centre of Excellence for Women's Health.

"Decisions are being made to close rural services in the absence of a strong evidence base" says Dr. Kornelsen. "Our research has shown that this has devastating consequences to rural parturient women, their families, and communities."

The new study looks at women's experiences in four British Columbia communities. But the findings are not restricted to that province, says Dr. Christine Saulnier, Senior Research Officer with the Atlantic Centre of Excellence for Women's Health. "This study has particular relevance in Atlantic Canada because of our strong rural population base and many remote communities."

As one rural Atlantic Canada woman told Dr. Saulnier, "The birthing rooms had been closed down since my second delivery. Due to lack of finances for a second anesthesiologist required to fulfill the demand for freezing prior to delivery, my options were an hour and a quarter to an hour and a half drive to the nearest hospital that would deliver my baby. When my contractions started, the last place I wanted to be was in a car or ambulance, which I would have to cover the cost of."

Dr. Kornelsen's study increases understanding about the social and psychological effects of limiting local access to maternity services, and how these changes might affect the birth experience. Many concerns have been raised in terms of physical health outcomes alone. Evidence suggests that a lack of local access can be associated with increased perinatal mortality and increased rates of premature birth.

"In some of the communities we studied," says Dr. Kornelsen, a member of the Department of Family Practice at the University of British Columbia, "women are forced to travel to access basic birthing support for the first time in recorded history. This is especially poignant for Aboriginal communities where records of local occupation go back 10,000 years."

Among the issues raised by Dr. Kornelsen's participants was the financial cost of leaving the home community. Other problems include physical and emotional stress due to weather conditions, the care needs of children left at home, and the loneliness of being separated from family at the birth and in the days or weeks before it.

Dr. Kornelsen's study also makes recommendations on how to increase access to maternity services for rural women. One of the key ingredients for this is the integration of regulated and funded midwifery services.

Dr. Kornelsen's presentation will take place Thursday, November 10th from 7:30 to 8:30 p.m. in the Imperial Room, Lord Nelson Hotel. Members of the public, health professionals and other interested individuals are welcome to attend.

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