

# NEW SOUTH WALES MOTHERS AND BABIES 1996

## BACKGROUND

The *New South Wales Mothers and Babies 1996* report combines the previous annual reports of the NSW Midwives Data Collection and the NSW Birth Defects Register. This article presents a summary of the major findings of this report, which covers the period 1990-1996.

### Trends in NSW

The number of births in NSW rose from 87,532 in 1990 to a peak of 88,976 in 1992 and then declined to 86,429 in 1996. The number of teenage mothers decreased from 4,850 (5.6 per cent of all mothers) in 1990 to 4,295 (5.0 per cent) in 1996, while the number of mothers aged 35 years and over rose from 8,974 (10.4 per cent) in 1990 to 12,712 (14.9 per cent) in 1996 (Figure 3).

The reported number of confinements among Aboriginal and Torres Strait Islander women rose from 1,202 in 1990 (1.4 per cent) to 1,712 (2.0 per cent) in 1996. Part of this increase is likely to be because of an increased willingness of women to be identified as Aboriginal or Torres Strait Islander.

Since 1990 there has been an increasing number of confinements among women who were born in Asian countries, particularly China and Vietnam, and Pacific Island countries, and a decreasing number of confinements among those who were born in European countries.

There has been a marked decrease in the number of women with private obstetric care since 1990. The proportion of women with private obstetric care decreased from 48.6 per cent to 32.2 per cent.

The number of women planning to give birth in a birth centre rose from 723 in 1990 to 4,015 in 1996, while the reported number of women planning a home birth decreased from 353 in 1990 to 247 in 1996.

The rate of normal vaginal birth in 1996 was 71.8 per cent, the same as in 1990. The caesarean section rate increased from 16.1 to 17.6 per cent, with most of this increase being due to an increased rate of emergency caesarean section. The rate of instrumental delivery (forceps and vacuum extraction) decreased from 12.0 to 10.6 per cent.

The rate of low birth weight (less than 2,500 grams) remained stable at about 6.0 per cent between 1990 and 1996 and the rate of prematurity (less than 37 weeks gestation) was also stable at about 6.5 per cent. The perinatal mortality rate decreased from 10.4 per 1,000 to 8.9 per 1,000. Most of the decrease is because there have been fewer neonatal deaths.

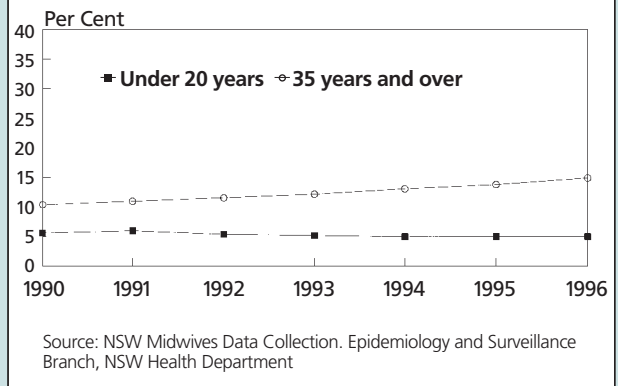
In the period 1990-1996, 54 deaths were reported among pregnant women or women who had given birth less than six weeks previously. Of these, about two-thirds were directly or indirectly related to pregnancy or its management and about one-third were due to incidental causes not related to the pregnancy.

### Area Health Services

In 1996 the largest numbers of births occurred to mothers resident in the Western Sydney and South Western Sydney Areas. These two Areas contributed about a quarter of the State's births.

FIGURE 3

CONFINEMENTS AMONG MOTHERS AGED UNDER 20 YEARS AND 35 YEARS AND OVER, NSW 1990-1996



In 1996, as in previous years, there were large variations between Areas in the age distribution of women giving birth. The proportion of women giving birth at less than 20 years of age varied from 1.2 per cent in the Northern Sydney Area to 10.5 per cent in the Far West Area, while the proportion of women giving birth at 35 years of age or more ranged from 9.6 per cent in the Macquarie Area to 25.5 per cent in the Northern Sydney Area.

The proportion of Aboriginal or Torres Strait Islander mothers varied from 0.1 per cent in the Northern Sydney Area to 18.1 per cent in the Far West Area. The highest proportions of mothers born in non-English speaking countries were in the Central Sydney and South Western Sydney Areas. In South Western Sydney, the highest proportion of mothers born in non-English speaking countries was born in South-East Asia (42.7 per cent). In Central Sydney, most mothers born in non-English speaking countries were born in North-East Asia (25.8 per cent) and the Middle East and Africa (23.5 per cent).

The rate of low birth weight varied from 3.4 per cent in the Southern Area to 6.8 per cent in the Far West Area. The rate of prematurity varied from 3.4 per cent in the Southern Area to 7.8 per cent in the Wentworth Area.

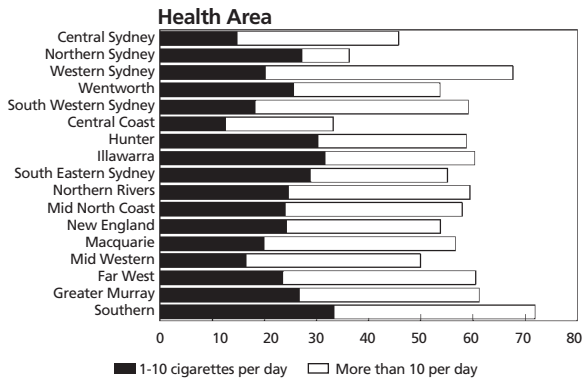
The perinatal mortality rate was 8.9 per 1,000 births in 1996. The rate varied from 6.0 per 1,000 in the Southern Area to 16.4 per 1,000 in the Far West Area.

### Aboriginal and Torres Strait Islander mothers and babies

In 1996, 1,724 babies were born to Aboriginal or Torres Strait Islander mothers, 2.0 per cent of all babies born in NSW. A quarter of Aboriginal and Torres Strait Islander women who gave birth in 1996 lived in the Far West or Macquarie Areas and two-thirds lived in rural Areas. About one in five Aboriginal or Torres Strait Islander mothers were teenagers and three-quarters were aged 20 to 34 years. More than 60 per cent of Aboriginal and Torres Strait Islander mothers reported smoking during pregnancy, compared with 21.1 per cent of all mothers (Figure 4).

**FIGURE 4**

**SMOKING IN THE SECOND HALF OF PREGNANCY AMONG ABORIGINAL AND TORRES STRAIT ISLANDER MOTHERS, BY HEALTH AREA OF RESIDENCE, NSW 1996**



Source: NSW Midwives Data Collection. Epidemiology and Surveillance Branch, NSW Health Department

In 1996, 88.3 per cent of Aboriginal and Torres Strait Islander mothers were booked into the hospital of birth, compared with 98.8 per cent of all mothers in NSW; and 61.0 per cent of Aboriginal and Torres Strait Islander mothers began antenatal care before 20 weeks gestation, compared with 85.3 per cent of all mothers in NSW.

Since 1991 the rate of low birth weight among Aboriginal and Torres Strait Islander babies has been more than 10 per cent. This is about one and a half times higher than the rate for NSW overall, which was 5.8 per cent in 1996. The perinatal mortality rate in babies born to Aboriginal and Torres Strait Islander women was 17.4 per 1,000 in 1996, about twice the rate of 8.9 per 1,000 for NSW overall.

**Maternal country of birth**

Between 1990 and 1996, the number of mothers born in non-English-speaking countries rose from 14,469 to 17,333, an increase from 16.7 to 20.3 per cent of all confinements. Mothers born in Asia showed the largest increase, from 6.8 per cent to 10.5 per cent of confinements. Small increases were observed in the numbers of mothers born in Central and South America and the Pacific Islands, while the number of mothers born in Southern Europe declined by about one-third over the seven-year period.

Births to teenagers were less common among women born in non-English-speaking countries than English-speaking countries, as was smoking in pregnancy.

In 1996, 85.3 per cent of all mothers began antenatal care before 20 weeks' gestation.

There was some variation between country of birth groups, with 87.6 per cent of mothers born in English speaking

countries beginning antenatal care before 20 weeks gestation, compared with 55.6 per cent of those born in Melanesia, Micronesia and Polynesia and 65.4 per cent of those born in the Middle East and Africa.

The highest rates of low birth weight were in babies of women born in Southern Asian countries (8.5 per cent) and Melanesia, Micronesia and Polynesia (7.9 per cent). The highest rates of prematurity and perinatal mortality were in babies of women born in Melanesia, Micronesia and Polynesia: 8.1 per cent and 1.6 per cent respectively.

**Birth defects**

About 2,000 infants are born with birth defects each year in NSW, and for about half these infants the malformation is detected after birth. Over the period 1990-1996, in stillborn and liveborn infants defects of the cardiovascular system were the most commonly reported, followed by defects of the musculoskeletal system and defects of the genitourinary system.

The reported number of infants born with neural tube defects, such as spina bifida, decreased from 80 in 1992 to 38 in 1996.

In 1996 the number of reported terminations of pregnancy associated with birth defects was 102, less than the 140-150 a year since 1992. About half the reported terminations are associated with chromosomal defects, most commonly Down syndrome, and almost one-third with neural tube defects.

Birth defects were more common in premature infants than full-term infants, and more common in male than female infants. The rate of birth defects increased with increasing maternal age, especially after the age of 35. However, as most babies are born to women aged under 35 years, most babies with birth defects were born to younger mothers.

**Hospital-specific information**

Detailed information is provided for hospitals with more than 200 confinements in 1996. The number of hospital-specific tables has been increased and now includes the following topics:

- onset of labour;
- type of delivery;
- epidural block;
- episiotomy and third degree tears;
- birth weight and gestational age distribution of liveborn babies; and
- discharge status and length of postnatal stay.

**FURTHER INFORMATION**

The report may be accessed through the Department's World Wide Web site at <http://www.health.nsw.gov.au>. Requests for further analyses may be directed to a Public Health Unit or the Epidemiology and Surveillance Branch, NSW Health Department.