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Western Australia's Mothers and Babies, 2015

**33rd Annual Report of the Western Australian
Midwives' Notification System**

July 2019



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Maternal and Child Health
Information and Performance Governance Unit
Purchasing and System Performance
Department of Health, Western Australia

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1. Executive summary

This 33rd annual report contains information on women who gave birth in Western Australia in 2015, and their infants.

1.1. Maternal demographics

In 2015, 34,482 women gave birth in WA (Table 1). This is a decrease of 0.6 per cent from 2014 when 34,687 women gave birth (Table 79).

In the 2015 group of women:

- the average age was 30.1 years (Table 28);
- teenage women represented 2.8 per cent, the lowest proportion in 36 years (Table 79);
- women aged 35 years or older represented 20.6 per cent, similar to the previous six years (Table 79);
- the largest group resided in metropolitan health regions (79.0 per cent) (Table 2);
- the largest rural residential group lived in the Southwest region (6.5 per cent) (Table 2); and
- those born in Australia comprised 60.2 per cent, 16.2 per cent were born in Asian countries and 10.7 per cent in European countries (Table 3).

The age specific birth rate was 63.4 per 1,000 women, similar to 64.1 per 1,000 in 2014 (Table 30).

1.2. Place of birth

The majority (97.5 per cent) of women gave birth in hospitals or immediately prior to admission at hospital. Women also gave birth in birth centres (1.8 per cent) and at home (0.8 per cent) (Table 4).

Of women who at onset of labour were intending to give birth:

- at home, 76.2 per cent succeeded; and
- in a birth centre, 61.2 per cent succeeded (Table 4).

1.3. Tobacco smoking during pregnancy

The proportion of women who smoked tobacco during pregnancy was:

- 9.7 per cent (Table 5);
- 30.9 per cent among teenage women (Table 5);
- 48.6 per cent among Aboriginal women (Table 36); and
- 17.5 per cent among women who lived in country regions (Table 37).

1.4. Pregnancy Profile

The proportion of women who gave birth for the first time was 42.9 per cent. For women aged 35 years or more, 28.0 per cent gave birth to their first baby (Table 7).

Antenatal care in the first trimester of pregnancy occurred for 64.9 per cent of women. A further 30.0 per cent had antenatal care later in pregnancy. A small proportion did not attend antenatal care (0.1 per cent) (Table 8).

Seven out of eight women (87.8 per cent) attended more than five antenatal care visits (Table 9).

One in five women (20.0 per cent) were obese with a BMI of 30 or more. One in 40 women (2.4 per cent) had a BMI of 40 or more (Table 78).

Obese women were more likely to have pregnancies affected by a pre-existing medical condition (50.5 versus 40.6 per cent). The most common condition was asthma which affected 12.9 per cent of obese women and 8.1 per cent of other women (Table 10).

Nearly one third of women (30.3 per cent) were affected by a complication of pregnancy. The most common condition was gestational diabetes (8.8 per cent). For women who were obese in pregnancy, the proportion with gestational diabetes was 13.5 per cent and for women who were not obese, 7.7 percent had gestational diabetes (Table 11).

1.5. Labour and Birth

Labour commenced spontaneously for 48.6 per cent of women. Of women who had a spontaneous onset of labour, 36.4 per cent had their labour augmented (Table 12).

There was a 30.1 per cent induction of labour rate (Table 12).

Epidural and/or spinal analgesia was used by 50.0 per cent of women during labour (Table 16).

The caesarean section rate was 34.9 per cent. Hospital caesarean section rates ranged from 19.2 to 55.8 per cent (Table 21).

Complications of labour and birth occurred for 59.2 per cent of women. The most common complications reported were primary postpartum haemorrhage (24.6 per cent), previous caesarean section (16.4 per cent), and suspected fetal compromise (13.1 per cent) and failure to progress in labour (12.0 per cent) (Table 22).

The rate of primary postpartum haemorrhage increased in the past ten years from 9.8 per cent in 2004 to 24.6 per cent of women in 2015 (Figure 9).

Complications of labour and birth were reported for 65.5 per cent of obese women. These women had higher proportions of primary postpartum haemorrhage (32.5 per cent) and previous caesarean section (21.9 per cent) than did all women giving birth (Table 22).

Reason for caesarean section was reported from July 2014. Of women who gave birth by caesarean section the most common reasons for caesarean section were previous caesarean section (40.8 per cent) and lack of progress in labour (18.3 per cent) (Table 24).

1.6. Aboriginal Mothers

Aboriginal women represented 5.0 per cent of those who gave birth in WA (Table 27). They had a higher age-specific birth rate (76.1 per 1,000) than non-Aboriginal women (62.9 per 1,000) (Table 30).

The age specific birth rate for teenage Aboriginal women (58.6 per 1,000) was six times the rate for non-Aboriginal teenagers (9.5 per 1,000) (Table 30).

Nearly two-thirds of the Aboriginal women (63.2 per cent) lived in rural WA (Table 31).

Half the Aboriginal women (52.1 per cent) gave birth in public hospitals in rural regions and one quarter (25.9 per cent) gave birth in the metropolitan tertiary hospital (Table 43).

Aboriginal women were less likely to attend antenatal care early (in weeks 1-12), at 50.8 versus 63.5 per cent, and much more likely to never attend antenatal care than non-Aboriginal women (1.1 versus 0.1 per cent) (Table 32).

Aboriginal women were twice as likely to have a history of stillbirth or children who died (6.1 per cent) than non-Aboriginal women (2.9 per cent) (Table 35).

Nearly half of the pregnant Aboriginal women smoked tobacco during pregnancy (48.6 per cent) (Table 36). One in five aboriginal women who smoked tobacco early in pregnancy ceased (9.9 per cent) or reduced (12.2 per cent) tobacco smoking by late pregnancy (Table 38).

Less Aboriginal women who lived in Perth smoked tobacco (46.7 per cent) than those who lived in the country (49.6 per cent) (Table 37).

Slightly more Aboriginal women had complications of pregnancy (34.8 per cent) than did non-Aboriginal women (29.9 per cent). The proportion of Aboriginal women with gestational diabetes (7.3 per cent) was slightly lower than for non-Aboriginal women (8.8 per cent) (Table 39). However, the proportion of pregnant Aboriginal women with pre-existing diabetes (3.2 per cent) was almost four times the proportion in non-Aboriginal woman (0.7 per cent) (Table 40).

Aboriginal women were more likely to have a spontaneous vaginal birth (67.0 versus 48.5 per cent) and half as likely to have an elective caesarean section (9.7 versus 18.1 per cent) than non-Aboriginal women (Table 44).

1.7. Aboriginal infants

Of infants born to Aboriginal women, 0.7 per cent were stillborn compared to 0.6 per cent of those born to non-Aboriginal women. One in thirteen stillbirths for Aboriginal women (8.3 per cent) had death occurring during labour compared to nearly one in three (31.1 per cent) for non-Aboriginal women (Table 46).

One in seven infants born to Aboriginal women (14.1 per cent) had low birthweight compared to one in sixteen infants of non-Aboriginal mothers (6.3 per cent) (Table 50).

1.8. All Infants

In 2015, 34,981 infants were born in Western Australia. Of these, 34,757 (99.4 per cent) were born alive and 224 were stillborn (Table 57).

The crude birth rate was relatively similar to previous years at 13.4 per 1,000 (Table 56), although it was the lowest since 2005 (13.3 per 1,000).

There were 33,995 single infants born, representing 97.2 per cent of total infant births. Of the 2.8 per cent of infants born in multiple births, there were 475 sets of twins and 12 sets of triplets (Table 81).

The proportion of births that were preterm was 8.7 per cent. Of all preterm infants, 93.7 per cent were born alive (Table 57).

Of preterm liveborn infants born at 23 to 31 weeks gestation, 89.6 per cent were born in the tertiary hospital (Table 60).

An Apgar score between 8 and 10 at one minute of age occurred for 85.8 per cent of liveborn infants. At five minutes of age the proportion with Apgar score between 8 and 10 minutes was 96.5 per cent (Table 66 and Table 67).

Of liveborn infants, 20.6 per cent received some form of resuscitation at birth (Table 68) and 12.4 per cent were admitted to a Special Care Nursery (SCN) at the birth site for at least one day. Length of stay in SCN exceeded 7 days for 25.6 per cent of these infants (Table 70).

Since 1980, the proportion of infants discharged home within one day of birth has increased, particularly since 2006. There was an increase from one in ten infants in 2006 (11.1 per cent) to one in five infants in 2015 (21.5 per cent) (Table 76) (Figure 16).

1.9. Perinatal Mortality

Among infants born in 2015, there were 222 fetal deaths and 53 neonatal deaths, a perinatal mortality rate of 7.9 per 1,000 (Table 76).

The perinatal mortality rate for infants of multiple births (25.4 per 1,000) was more than four times the rate for single infants (7.4 per 1,000) (Table 76).

The perinatal mortality rate for infants of Aboriginal mothers was 12.6 per 1,000 infants compared to 7.6 per 1,000 infants of non-Aboriginal mothers (Table 74).

2. Introduction

This is the 33rd annual report on perinatal statistics in Western Australia (WA) from the Midwives' Notification System (MNS).

The report contains information on women who gave birth in WA in 2015 and their infants. Pregnancies that resulted in the birth of an infant at or greater than 20 week's gestation or more than 400 grams in weight have been included. These criteria are in alignment with national reporting practices.

The report presents an overview of births occurring in 2015 using data about maternal demography, procedures and infant outcomes. The report also describes trends over the period 1980 to 2015 where data is available. Information on women resident in this state who gave birth outside WA was not available for inclusion in this report.

To ensure complete ascertainment of births and perinatal deaths within WA, information is collated from the WA MNS, the WA Hospital Morbidity Data Collection and the WA Registry of Births, Deaths and Marriages. These data are maintained in separate collections.

Maternity services in WA changed in 2015 in that the Swan District Hospital closed and the St John of God Midland Public Hospital opened in November 2015.

This report includes some hospital level data with the permission of the Chief Executive Officers of maternity services in Western Australia. The WA Country Health Service data is presented in regions in this report to reflect more appropriately the service model provided in those regions.

Aboriginal women, their pregnancies, births and infants are described in a dedicated section of this report.

2.1. Changes to report format and content

No changes were introduced to birth data required to be notified by midwives for births occurring in 2015. However, there are data described in this report that commenced collection in July 2014 and has never been included in previous reports. These were:

- Addition of:
 - "Parity" to previous pregnancies descriptions;
 - "Gestational hypertension" and "Pre-eclampsia superimposed on essential hypertension" to complications of pregnancy;
 - "Type 1 diabetes" and "Type 2 diabetes" to replace "pre-existing diabetes" in medical conditions;
 - "Dilatation device i.e. Foley catheter" as method for induction of labour;
 - "Postnatal blood loss millilitres" to replace PPH "(≥500mLs)" in labour and birth complications;
 - "Principal reason for caesarean section"; and
 - "continuous positive airway pressure (CPAP)" to resuscitation.
- Removal of:
 - Baby for "Adoption".

2.2. Legal status of perinatal statistics in Western Australia

Western Australia's statutory requirements for notification are outlined in the *Health (Miscellaneous Provisions) Act 1911*, Section 335(1): "It shall be the duty of every midwife to furnish to the Chief Health Officer a report in writing in the manner and at the time and in the form prescribed of every case attended by the midwife, whether of living, premature or full term birth, or stillbirth, or abortion".

The Notification of Case Attended Form 2 (Appendix D) by the *Health (Notifications by Midwives) Regulations 1994*.

Form 2 (often incomplete) is submitted to the Chief Health Officer within 48 hours of the birth.

Once completed, the Form 2 is submitted usually within one month of the birth and includes, where necessary, the details of the infant's discharge from hospital.

A midwife who enters into private practice must notify the Chief Health Officer of this intention by completing Form 1. The Midwifery Advisor is the delegate for the Chief Health Officer for receiving Form 1 from midwives.

2.3. Midwives' Notification System

The MNS contains data from notifications of births that have occurred since 1980. Data are submitted electronically from a number of feeder systems or manually on paper forms. The main electronic feeder systems providing birth data in 2015 were "Stork", the IBA system from the Ramsay Group hospitals and the Midwives System from the SJOG Group. Stork is managed by the Department of Health's Health Support Services.

2.4. Aboriginal status

Within WA, the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. No disrespect is intended to our Torres Strait Islander colleagues and community.

Reporting Aboriginal status for women included in this report relied on multi-step processes in place at health services. Usually, women completed a "Patient Registration" health record form which included a requirement to respond to a question about whether or not they were of Aboriginal or Torres Strait Islander descent. This form is usually completed at every presentation to a health service with most women expected to confirm the content multiple times during a pregnancy and birth admission. When notifying a birth to the MNS, the midwife would have referred to this health record form to complete the ethnic origin data item. The relationship between the midwife and the woman could have provided knowledge and opportunity to report a different ethnic origin to MNS than that recorded on the health record form.

A WA Department of Health audit conducted in 2001 found that Aboriginal status was under ascertained in WA hospitals with 85.8 per cent of Aboriginal people found to be accurately reported in the hospital morbidity data. There was a range across health regions of 78.3 to 93.5 per cent. A recommendation of the audit was for a correction factor to be used when reporting health data to overcome under-ascertainment of Aboriginal status (Young, M, 2001).

A Commonwealth report in 2013 on “quality of Indigenous identification in records of hospitalisations in public hospitals in Australia” found that weighted completeness (and confidence intervals) of these data for WA was 91 per cent (85-95 per cent). The report recommended that these data should be used in any analyses of Indigenous hospitalisation rate (AIHW, 2013).

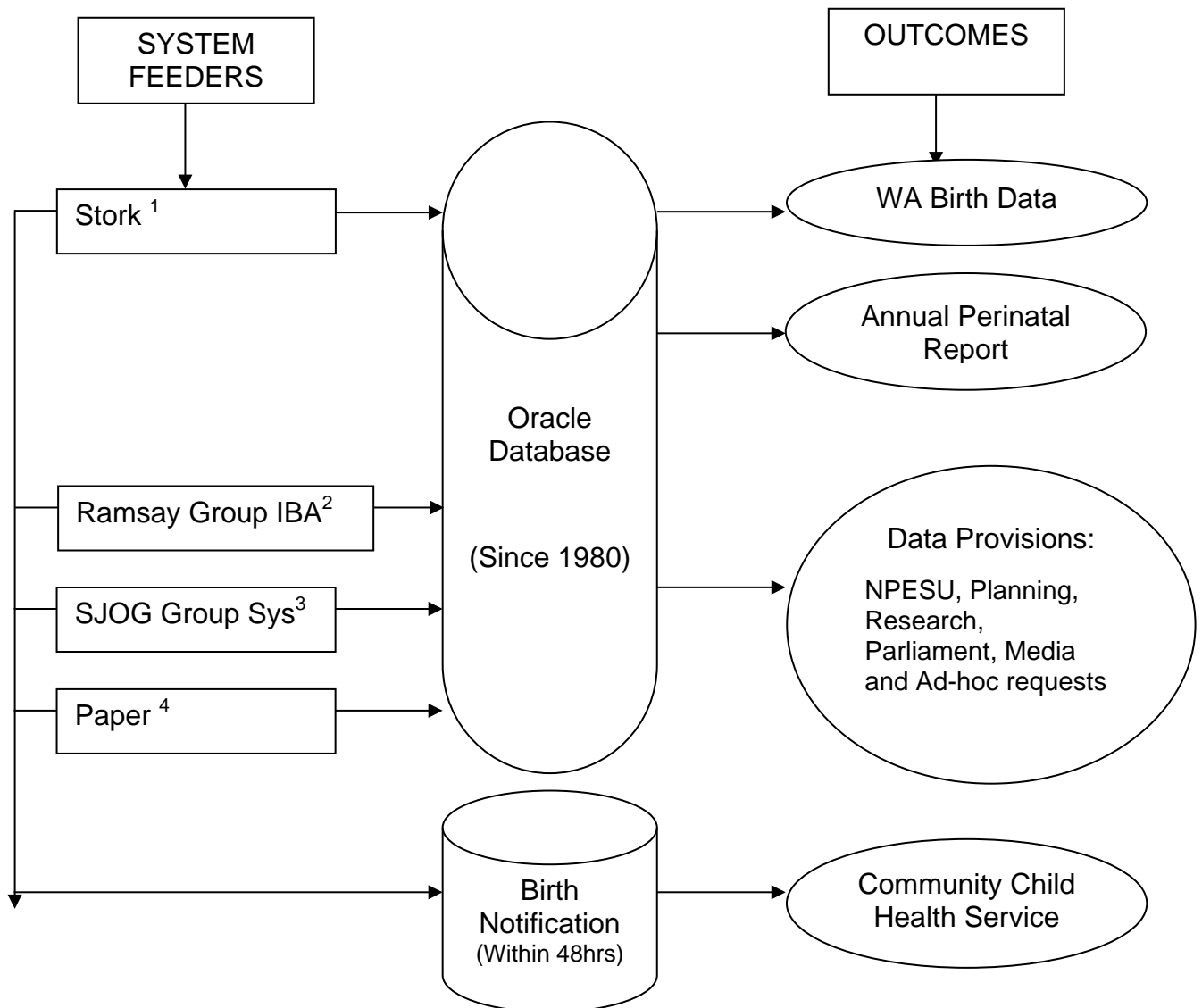
A validation of MNS data was last conducted in 2007 on data for the calendar year 2005. A review of the medical records for 525 (2%) randomly selected midwives' birth reports received to the MNS was conducted where data received was compared to the physical medical record. The MNS data field "Ethnic status" includes reporting of Aboriginal/TSI as one of a number of other values. The proportion of birth records found to have a different ethnicity to that recorded in the medical record was 5.9 per cent (Downey, F, 2007).

Considering that the Young (2001) audit found that the Aboriginal status recorded in the health medical record was incorrect in a proportion of records, it is unknown whether the smaller difference found in the validation of Aboriginal status in birth data in MNS was due to improved ascertainment as a consequence of the Young audit.

2.5. Presentation of data in report

All data presented here are in statistical form. There is no identification of individual patients, midwives or doctors. Some data identifies hospitals. The Department of Health has decided to remove the previously applied suppression of values less than 5 from information published in this report. Publishing of small numbers is deemed to a low risk to confidentiality.

2.6. Data provision model for Midwives' Notification System - 2015



2.7. Data Sources for the 2015 birth data

- | | | |
|---|-------------------------------|--|
| 1 | Stork | Albany, Armadale Kelmscott Memorial, Bentley Health Service, Bridgetown, Broome, Bunbury Regional, Busselton, Carnarvon, Collie, Community Midwife Program, Derby, Esperance, Fiona Stanley Hospital, Geraldton, Hedland Health Campus, Kalgoorlie, Katanning, King Edward Memorial, Kununnurra, Margaret River, Narrogin, Northam, Nickol Bay, Osborne Park, Rockingham General, Swan District, and Warren. |
| 2 | Ramsay Group IBA | Peel Health Campus, Glengarry Hospital, Joondalup Health Campus |
| 3 | SJOG Group Perinatal Database | St John of God – Murdoch, St John of God – Subiaco, St John of God – Geraldton, St John of God – Bunbury, St John of God – Mt Lawley, St John of God – Midland Public |
| 4 | Paper Forms | Private Practice Midwives and others |

3. Mothers

In 2015, 34,482 women gave birth in WA. This was a decrease of 205 women (0.6 per cent) from 2014. Of women who gave birth, 5.0 per cent were Aboriginal (Table 1).

Table 1: Aboriginal status of women who gave birth in WA, 2015

Aboriginal Status	Number	Percentage
Aboriginal	1,710	5.0
non-Aboriginal	32,772	95.0
Total	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

3.1. Maternal demographics

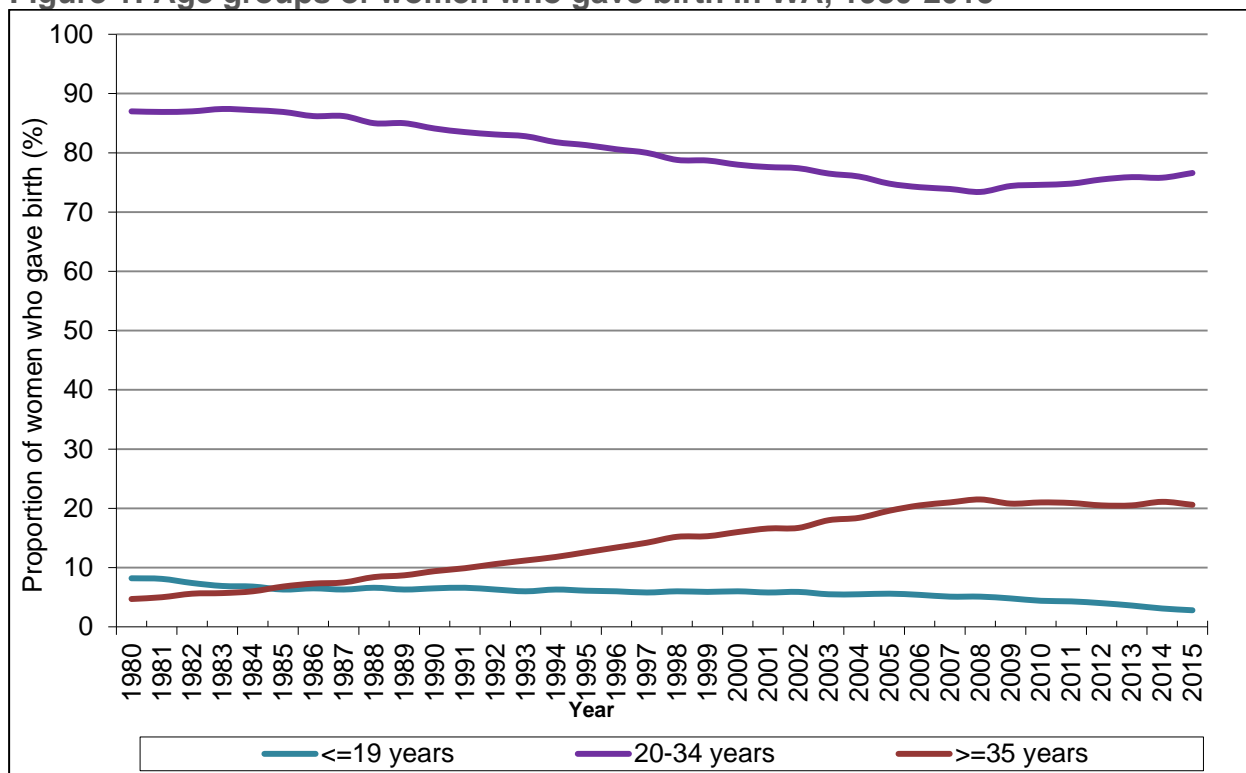
3.1.1. Maternal age

Among women who gave birth, the proportion of mothers aged 20 to 34 years has decreased since 1980 from 87.1 to 76.6 per cent in 2015. Older women of 35 years or more have increased in proportion from one in 20 to one in five (4.7 to 20.6 per cent) in the same period. There was little change in these proportions from 2014 to 2015 (Table 79).

The proportion of teenage women who gave birth declined from 8.2 per cent in 1980 to 2.8 per cent in 2015 (Figure 1). In 2015, the number of teenage women who gave birth was below 1,000 for the first time since 1980 (Table 79).

In 2015, women's ages ranged from 13 to 49 years with a mean of 30.1 years (Table 28).

Figure 1: Age groups of women who gave birth in WA, 1980-2015



Data presented in this graph are found in Table 79.

3.1.2. Place of residence

For reporting 2015 data geographically, the state of WA was divided into four health areas and ten health regions. The metropolitan area was split into three regions, while the country area has seven regions¹.

The majority of women who gave birth in WA in 2015 (79.0 per cent) resided in the metropolitan health regions. Of the country health regions, the Southwest had the largest proportion of women who gave birth (6.5 per cent of the WA figure) (Table 2).

Table 2: Place of residence of women who gave birth in WA, 2015

Region of residence by postcode	Total	
	No.	%
Metropolitan Health Regions	27,242	79.0
North	9,224	26.8
South	8,125	23.6
East	9,893	28.7
Country Health Regions	7,127	20.7
Goldfields	916	2.7
Great Southern	685	2.0
Kimberley	642	1.9
Midwest	855	2.5
Pilbara	887	2.8
Southwest	2,235	6.5
Wheatbelt	907	2.5
Not resident in a WA health region	113	0.3
Total	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

¹ See Glossary for description of Health Area and Health Region

3.1.3. Country of birth

In the 5-year period 2011 to 2015, between 60.2 and 66.0 per cent of all mothers were born in Australia. The proportion of Australian born women declined each from 66.0 in 2011 to 60.2 per cent in 2015.

Women born in the United Kingdom and Ireland accounted for 7.6 per cent of the women who gave birth in WA in 2015, New Zealand-born women 4.5 per cent. When grouped into continents, the highest proportion of women born outside Australia were those born in Asia (16.2 per cent) (Table 3).

Table 3: Number and percentage of women who gave birth by country of birth, WA, 2011-2015

Country Groups		Year of birth				
		2011	2012	2013	2014	2015
Number						
Oceania	Australia	20,353	20,840	20,866	20,786	20,241
	New Zealand	1,197	1,417	1,515	1,485	1,504
Europe	UK & Ireland	2,228	2,366	2,417	2,402	2,540
	Other Europe	801	851	889	956	1,059
Asia	Other Asia	1,910	2,303	2,716	3,140	3,281
	Other SE Asia	1,216	1,343	1,314	1,408	1,404
	Vietnam	277	381	311	319	302
	Malaysia	407	438	391	456	430
Africa	Other Africa & Middle East	1,193	1,253	1,302	1,458	1,431
	South Africa & Zimbabwe	687	738	777	766	790
Americas	Other Pacific	99	95	93	89	94
	South & Central America	203	208	254	271	282
	North America	255	266	278	283	274
Total		30,826	32,499	33,122	33,819	33,632
Percentage						
Oceania	Australia	66.0	64.1	63.0	61.5	60.2
	New Zealand	3.9	4.4	4.6	4.4	4.5
Europe	UK & Ireland	7.2	7.3	7.3	7.1	7.6
	Other Europe	2.6	2.6	2.7	2.8	3.1
Asia	Other Asia	6.2	7.1	8.2	9.3	9.8
	Other SE Asia	3.9	4.1	4.0	4.2	4.2
	Vietnam	0.9	1.2	0.9	0.9	0.9
	Malaysia	1.3	1.3	1.2	1.3	1.3
Africa	Other Africa & Middle East	3.9	3.9	3.9	4.3	4.3
	South Africa & Zimbabwe	2.2	2.3	2.3	2.3	2.3
Americas	Other Pacific	0.3	0.3	0.3	0.3	0.3
	South & Central America	0.7	0.6	0.8	0.8	0.8
	North America	0.8	0.8	0.8	0.8	0.8
Total		100.0	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

There were 4,340 cases (913, 895, 811, 871 and 850 respectively) where the mother's country of birth was unable to be ascertained.

3.1.4. Place of birth

Midwives reported the woman's intended place of birth when her labour commenced as well as the place where she gave birth.

In WA in 2015, 97.5 per cent of women intended to give birth in hospital, 1.8 per cent in a birth centre and 0.8 per cent at home. Thirty-seven women (0.1 per cent) had no intended place of birth at onset of labour.

Of the 606 women who intended to give birth in a birth centre, 371 (61.2 per cent) achieved this goal. Of 269 women who intended to have their birth at home, 76.2 per cent achieved a homebirth in 2015, a similar proportion to previous years.

A small number of women who intended to give birth in hospital gave birth at a birth centre or at home and were not considered to be "born before arrival" (Table 4).

Table 4: Place of birth by intended place of birth for women who gave birth in WA, 2015

Actual place of birth	Intended place of birth			Total
	Hospital	Birth Centre	Home	
Number				
Tertiary hospital ²	7,169	202	25	7,396
Public hospital ³	12,582	3	36	12,621
Private hospital ⁴	13,793	29	2	13,824
Birth centre	24	371	1	396
Home	2	1	205	208
Total	33,570	606	269	34,445
Percentage by actual place of birth				
Tertiary hospital	95.8	3.9	0.3	100.0
Public hospital	99.7	0.0	0.3	100.0
Private hospital	99.8	0.2	0.0	100.0
Birth centre	6.1	93.7	98.6	100.0
Home	1.0	0.5	98.6	100.0
Total	97.5	1.8	0.8	100.0
Percentage by intended place of birth at onset of labour				
Tertiary hospital	14.8	33.3	5.2	***
Public hospital	44.0	0.5	17.5	***
Private hospital	41.1	4.8	0.7	***
Birth centre	0.1	61.2	0.4	***
Home	0.0	0.2	76.2	***
Total	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

Excludes 37 cases with no intended place of birth at onset of labour.

Includes 163 cases that were Born Before Arrival to reporting site.

Birth Centre births include those at the freestanding birth centre at Kalamunda Hospital.

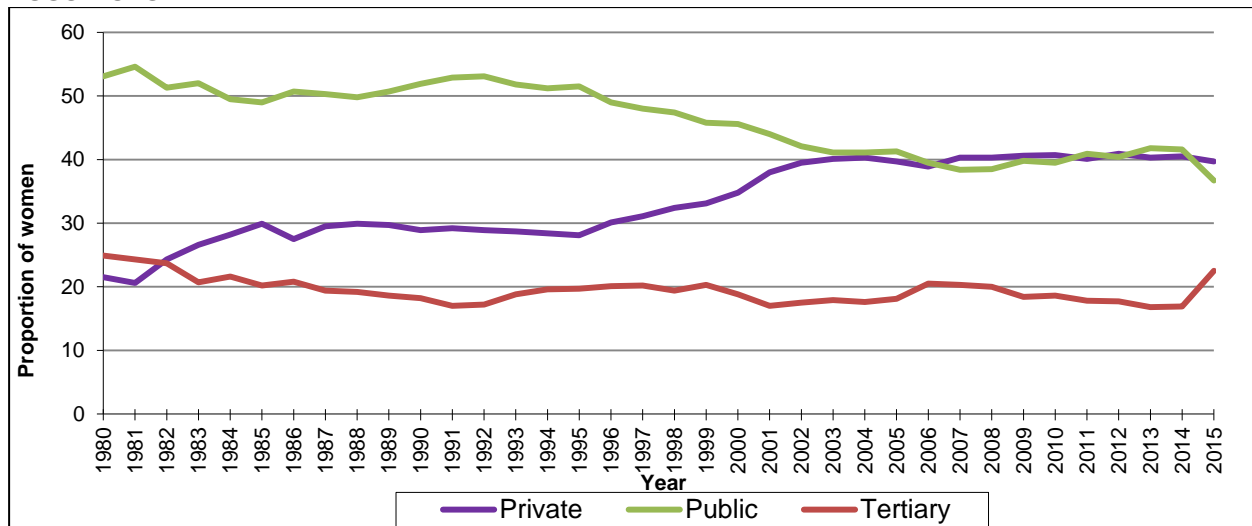
² Includes two tertiary maternity services

³ Includes all maternity services located at public hospitals in Western Australia

⁴ Includes private and public admissions at private hospitals in Western Australia

From 1980 to 2002, the proportion of births in WA that occurred at private hospitals increased and proportions at public hospitals excluding tertiary decreased. In 2015 the , proportion in private hospitals was very similar to the 2002 figure. In 2015, the proportion of women giving birth at tertiary maternity services increased and indicated a move of 5 per cent of women from other public maternity services (Table 83). This is explained by the opening of the Fiona Stanley Hospital tertiary maternity service and the closing of the Kaleeya secondary maternity service (Figure 2).

Figure 2: Proportion of women who gave birth by health service type in WA, 1980-2015



Women who gave birth in private hospitals with an admission type of public are included in private. For 2015 births a second tertiary site commenced at Fiona Stanley Hospital. This increases the proportion of women giving birth at a tertiary site.

3.1.5. Smoking tobacco during pregnancy

Smoking tobacco during pregnancy is associated with low birth weight, preterm birth, and perinatal death.

From January 2010, the method for reporting tobacco smoking during pregnancy changed from a Yes or No response to providing the average number of tobacco cigarettes smoked each day before 20 weeks of pregnancy and after 20 weeks of pregnancy.

Data presented in Figures 3 and 4 and display the variation in self-reported rate of tobacco smoking across health regions of maternal residence. Many country regions had a higher proportion of women who reported smoking or occasional smoking than occurred in women living in the metropolitan regions. The proportion of women who reported smoking tobacco after 20 weeks gestation in 2015 was similar to the figure for 2014.

Figure 3: Proportion of women who smoked tobacco in first 20 weeks of pregnancy in WA, 2015

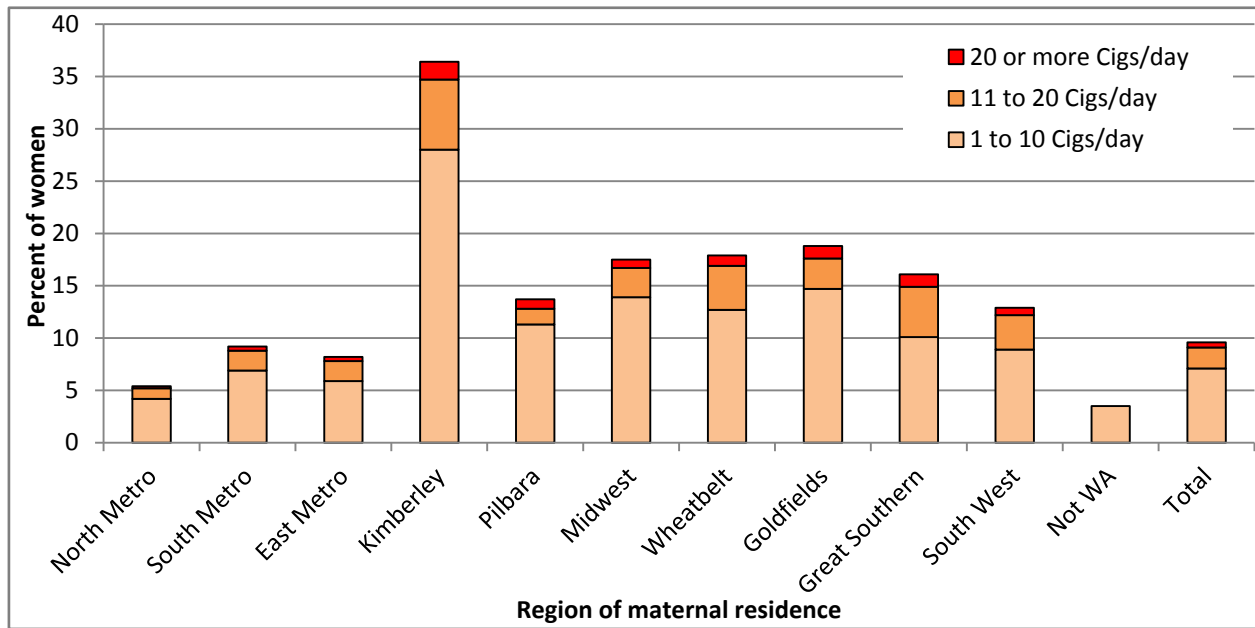
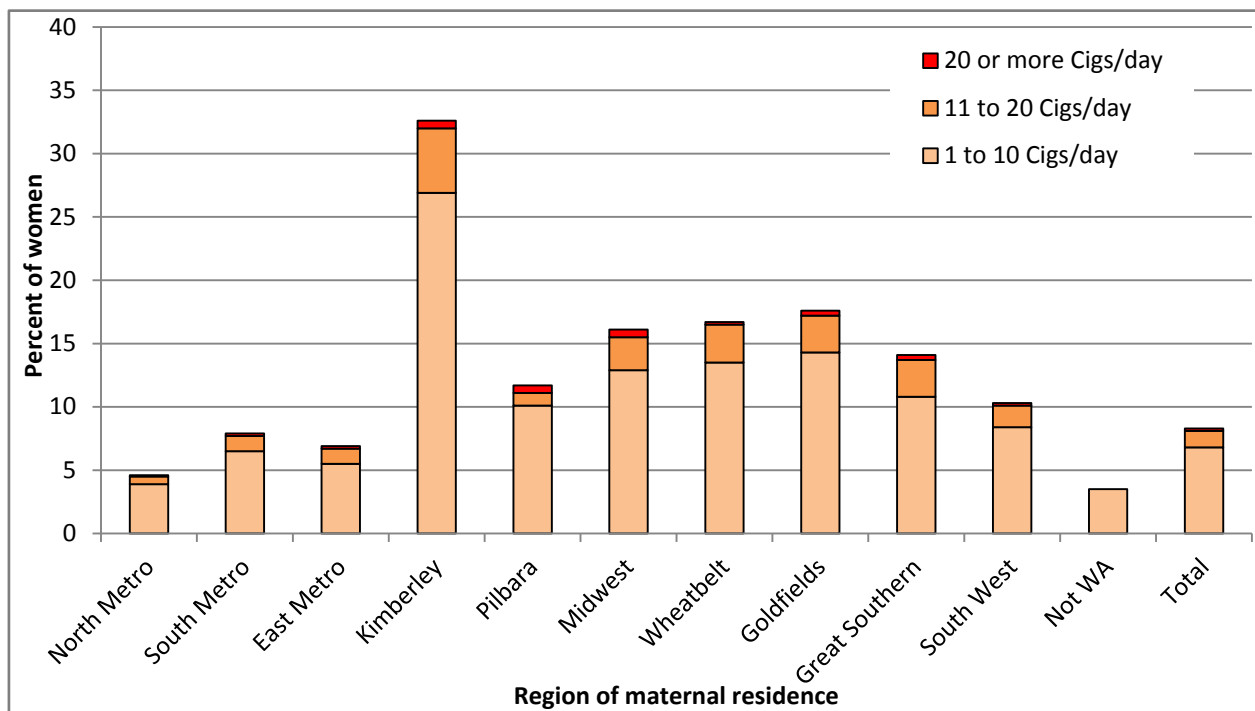


Figure 4: Proportion of women who smoked tobacco after 20 weeks gestation in WA, 2015



In 2015, 30.9 per cent of teenage mothers reported smoking during pregnancy, an increase from 29.3 per cent in 2014. Women aged 30 to 34 years had the lowest percentage of smokers (6.2 per cent), whilst women aged 20 to 24 years had the second highest proportion of women smoking tobacco (21.9 per cent). Overall, 9.7 per cent of WA women reported smoking tobacco during pregnancy (Table 5).

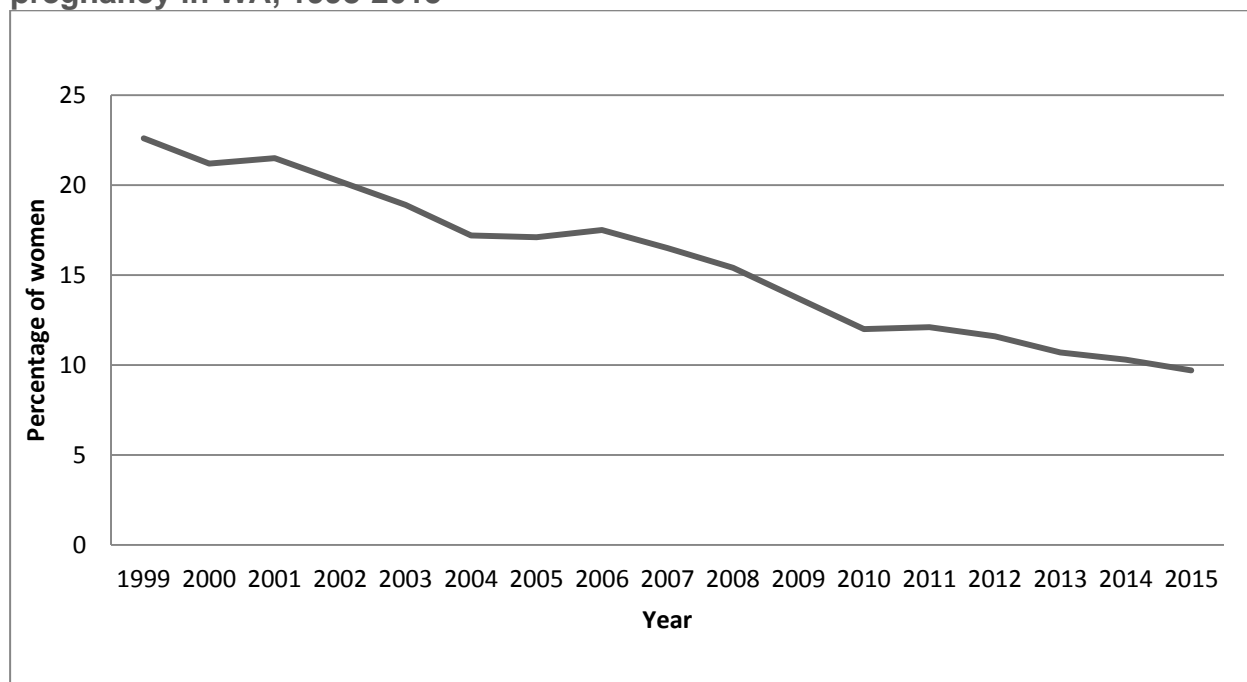
Table 5: Smoking and age of women who gave birth in WA, 2015

Age (years)	Smoking in pregnancy				Total	
	Smoking		Non-smoking		No.	%
	No.	%	No.	%		
<=15	7	22.6	24	77.4	31	100.0
16	19	25.7	55	74.3	74	100.0
17	55	33.5	109	66.5	164	100.0
18	71	28.2	181	71.8	252	100.0
19	148	33.0	301	67.0	449	100.0
≤19	300	30.9	670	69.1	970	100.0
20-24	921	21.9	3,505	79.2	4,426	100.0
25-29	961	10.3	8,924	90.3	9,885	100.0
30-34	714	6.2	11,384	94.1	12,098	100.0
35-39	367	6.6	5,522	93.8	5,889	100.0
>=40	83	7.4	1,131	93.2	1,214	100.0
Total	3,346	9.7	31,136	90.3	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

The proportion of women who reported smoking tobacco during pregnancy has declined from 22.6 per cent in 1999, when data was first collected in WA, to 9.7 per cent in 2015 (Table 5 and Figure 5).

Figure 5: Proportion of women who gave birth who smoked tobacco during pregnancy in WA, 1998-2015



3.1.6. Socio-economic status

Socio-economic status was assessed for residential area of all women who gave birth in WA in 2015. Some women (109) had insufficient address data to be included.

The Index of Relative Socio-Economic Disadvantage (IRSD) from the Socio-Economic Index for Areas (SEIFA) reported in the 2011 Australian Census data was used⁵. The Index summarises different measures, such as, low income, low education, and high unemployment, to obtain a ranking of each area's disadvantage called the index value, average index value and quintiles. The distribution of index values into five equal parts is referred to as quintiles.

In the quintiles presented below in Table 6, "I" indicate women who gave birth while living in areas within the 20 per cent most disadvantaged of IRSD values in WA. "V" indicate women who gave birth while living within areas within the 20 per cent least disadvantaged of IRSD in WA.

In women aged 19 years or less, most (58.4 per cent) had an IRSD value in the first and second quintile, indicating most of these women live in areas that are disadvantaged. In women aged 20 to 34 years, the largest proportion (25.8 per cent) was in the fourth quintile indicating residence in areas of less disadvantage. For women aged 35 years or more, the largest proportion (28 per cent) were also in the fourth quintile. These results are consistent with previous years.

⁵ For more information on the Disadvantage Index from SEIFA go to <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/2033.0.55.001Main+Features12012?OpenDocument>.

Table 6: Socio-economic status and age of women who gave birth in WA, 2015

Disadvantage ¹	Maternal age (years)			Total
	≤ 19	20–34	≥ 35	
Number				
I	352	4,848	914	6,114
II	214	4,658	991	5,863
III	211	5,879	1,470	7,560
IV	141	6,782	1,984	8,907
V	52	4,159	1,718	5,929
Total	970	26,326	7,077	34,373
Column percentage				
I	36.3	18.4	12.9	17.8
II	22.1	17.7	14.0	17.1
III	21.8	22.3	20.8	22.0
IV	14.5	25.8	28.0	25.9
V	5.4	15.8	24.3	17.2
Total	100.0	100.0	100.0	100.0
Row percentage				
I	5.8	79.3	14.9	100.0
II	3.6	79.4	16.9	100.0
III	2.8	77.8	19.4	100.0
IV	1.6	76.1	22.3	100.0
V	0.9	70.1	29.0	100.0
Total	2.8	76.6	20.6	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

IRSD values were determined from maternal address using the Statistical Area 2 value (SA2).

109 cases were excluded as there was no SA2 value able to be assigned.

3.2. Pregnancy profile

3.2.1. Maternal weight

The Australian Department of Health (DoHA, 2009) reports that a healthy Body Mass Index (BMI) is between 18.5 and 24.9. BMIs that indicate the person is overweight are divided into four categories; Pre-obese and Obese classes 1, 2 and 3.

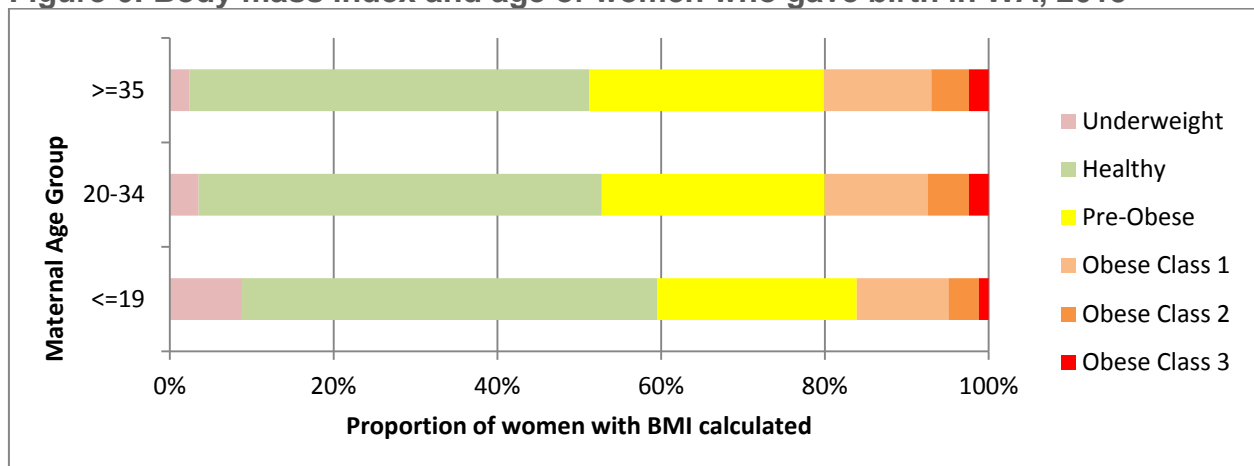
BMI Category	BMI	Risk of health consequences
Underweight	Less than 18.5	Low - possibly increased risk
Healthy weight	18.50 to 24.99	Average
Overweight:		
Pre-obese	25.00 to 29.99	Increased
Obese class 1	30.00 to 34.99	Moderate
Obese class 2	35.00 to 39.99	Severe
Obese class 3	40 or more	Very severe

Both weight and height were available to calculate a Body Mass Index (BMI) for 95.9 per cent of the women who gave birth in 2015. (Table 22)

20.0 per cent of women who gave birth in 2015 were obese women. A severe to very severe risk of health consequences related to obesity was possible for 7.3 per cent of these women. A small proportion of women were reported as underweight (3.4 per cent).(Table 78)

More than half of teenage women who gave birth were within a healthy BMI range (50.7 per cent), a similar proportion to women 35 years or older (48.8 percent) (Figure 6).

Figure 6: Body mass index and age of women who gave birth in WA, 2015



Data presented in this graph are found in Table 78.

3.2.2. Number of previous infants

As indicated in Table 7, 42.9 per cent of women who gave birth in 2015 gave birth to their first infant. Of these 14,797 women 5.5 per cent were teenage, which is a reduction from 5.9 per cent in 2014.

The proportion of women who had more than five previous infants and were in the greater than 35 years age group decreased from 55.1 per cent in 2014 to 48.7 per cent in 2015.

Table 7: Previous infants and age of women who gave birth in WA, 2015

Number of Previous Infants	Maternal age						Total	
	≤ 19		20–34		≥ 35		No.	%
	No.	%	No.	%	No.	%		
Nil	818	84.3	11,987	45.4	1,992	28.0	14,797	42.9
% of Total	5.5		81.0		13.5		100.0	
One or two	150	15.5	12,698	48.1	4,163	58.6	17,011	49.3
% of Total	0.9		74.6		24.5		100.0	
Three or four	2	0.2	1,483	5.6	719	10.1	2,204	6.4
% of Total	0.1	-	67.3		32.6		100.0	
Five or more	-	-	241	0.9	229	3.2	470	1.4
% of Total	-	-	51.3		48.7		100.0	
Total	970	100.0	26,409	100.0	7,103	100.0	34,482	100.0
% of Total	2.8		76.6		20.6		100.0	

Extracted from Midwives' Notification System on 3rd January 2019.

3.2.3. Pregnancy gestation at first antenatal care visit

In 2015, the majority of women had their first antenatal care visit in the first trimester of pregnancy (64.9 per cent). A small number of women received no antenatal care (0.1 per cent) which is the lower than 2014 (0.2 per cent) (Table 8).

Women who lived in the Great Southern health region in 2015 had the highest proportion of women who attended their first antenatal care visit in the first trimester (84.2 per cent), compared to the Wheatbelt where only 56.3 per cent of women attended their first antenatal care visit in the first trimester. Two health regions had a high proportion of women where the gestation at first antenatal care visit was unable to be determined (Goldfields and Southwest). Pilbara had the highest proportion of women attending their first antenatal care visit after 20 weeks gestation, while in the metropolitan area South Metropolitan had the largest number of not determined gestational age (Table 8).

Table 8: Gestation at first antenatal care visit by health region of residence for women who gave birth in WA, 2015

Health region maternal residence	Gestational age groups (weeks)					Total
	1-13	14-19	20+	Did not Attend	Not Determined	
Number						
North Metropolitan	5,615	1,009	2,452	7	141	9,224
South Metropolitan	5,122	1,351	962	14	676	8,125
East Metropolitan	6,659	1,274	1,749	20	191	9,893
Goldfields	590	57	79	-	190	916
Great Southern	577	46	51	2	9	685
Kimberley	499	65	75	-	3	642
Midwest	595	94	113	1	52	855
Pilbara	512	68	291	2	14	887
Southwest	1,642	71	112	3	407	2,235
Wheatbelt	511	133	231	1	31	907
Outside WA	50	18	44	-	1	113
Total	22,372	4,186	6,159	50	1,715	34,486
Row percentage						
North Metropolitan	60.9	10.9	26.6	0.1	1.5	100.0
South Metropolitan	63.0	16.6	11.8	0.2	8.3	100.0
East Metropolitan	67.3	12.9	17.7	0.2	1.9	100.0
Goldfields	64.4	6.2	8.6	-	20.7	100.0
Great Southern	84.2	6.7	7.4	0.3	1.3	100.0
Kimberley	77.7	10.1	11.7	-	0.5	100.0
Midwest	69.6	11.0	13.2	0.1	6.1	100.0
Pilbara	57.7	7.7	32.8	0.2	1.6	100.0
Southwest	73.5	3.2	5.0	0.1	18.2	100.0
Wheatbelt	56.3	14.7	25.5	0.1	3.4	100.0
Outside WA	44.2	15.9	38.9	-	0.9	100.0
Total	64.9	12.1	17.9	0.1	5.0	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

3.2.4. Number of antenatal care visits during pregnancy

Of women who gave birth in 2015, 93.0 per cent attended one or more antenatal visits, noting that it was not possible to determine the attendances for 6.9 per cent of women.

The proportion of women who attended five or more antenatal care visits was 87.8 per cent, while 55.6 per cent attended more than eight visits. A small proportion (0.1 per cent) had zero visits. These figures are improved on 2014.

More than half (52.6 per cent) of women who gave birth in private hospitals had greater than 8 antenatal visits compared to 53.4 per cent in metropolitan public and 64.7 per cent in country public (Table 9).

Table 9: Number of antenatal care visits by health service type for women who gave birth in WA, 2015

Birth Site	Number of antenatal care visits					Total
	Nil	1-4	5-8	>8	Not Determ	
Number						
Tertiary	23	448	2,873	4,460	1	7,805
Metro Public	9	498	3,180	4,230	1	7,918
Country Public	8	305	1,389	3,121	-	4,823
Private	11	509	3,618	7,214	2,367	13,719
Non-Hospital	-	3	56	157	1	217
Total	51	1,763	11,116	19,182	2,370	34,482
Row percentage						
Tertiary	0.3	5.7	36.8	57.1	0.0	100.0
Metro Public	0.1	6.3	40.2	53.4	0.0	100.0
Country Public	0.32	6.3	28.8	64.7	-	100.0
Private	0.1	3.7	26.4	52.6	17.3	100.0
Non-Hospital	-	1.4	25.8	72.4	0.5	100.0
Total	0.1	5.1	32.2	55.6	6.9	100.0
Column percentage						
Tertiary	45.0	25.4	25.8	23.2	0.0	22.6
Metro Public	18.0	28.2	28.6	22.0	0.0	23.0
Country Public	16.0	17.3	12.5	16.3	-	14.0
Private	22.0	28.9	32.5	37.6	99.9	39.8
Non-Hospital	-	0.2	0.5	0.8	0.0	0.6
Total	100.0	100.0	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

Non-hospital category includes homebirths and births before arrival.

Women who had a preterm birth are included.

3.2.5. Medical conditions

Medical conditions reported included hypertensive disorders, pre-existing diabetes, asthma, genital herpes and other. From July 2014, pre-existing diabetes was reported as either Type 1 or Type 2.

Maternal weight was used with height to calculate a Body Mass Index (BMI) for each woman who gave birth in WA in 2015.

A higher proportion of obese women had at least one pre-existing medical condition (50.5 per cent) compared to women with a low or healthy BMI (40.6 per cent).

Similar to previous years, the proportion of obese women with essential hypertension (2.3 per cent) was four times higher than for women with a low or healthy BMI (0.5 per cent). The proportion of obese women with pre-existing diabetes (1.8 per cent) was three times that of other women (0.6 per cent). In obese women most had Type 2 Diabetes (1.4 per cent versus 0.4 per cent) while women with a BMI lower than 30 kg/m had fairly equal proportions with either Type 1 or Type 2 diabetes (0.3 per cent) (Table 10).

Table 10: Selected pre-existing medical conditions by obesity of women who gave birth in WA, 2015

Medical Conditions	Obese				Total	
	No		Yes		No.	%
	No.	%	No.	%		
Essential Hypertension	142	0.5	151	2.3	293	0.9
Pre-Existing diabetes	159	0.6	116	1.8	275	0.8
Type 1 Diabetes	71	0.3	26	0.4	97	0.3
Type 2 Diabetes	88	0.3	90	1.4	178	0.5
Asthma	2,132	8.1	850	12.9	2,982	9.0
Genital Herpes	474	1.8	86	1.3	560	1.7
Other	8,913	33.7	2,710	41.2	11,623	35.2
One or more medical conditions	10,751	40.6	3,320	50.5	14,071	42.6
No medical conditions	15,730	59.4	3,255	49.5	18,985	57.4
Total Women	26,481	100.0	6,575	100.0	33,056	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

Excludes 1,426 women with BMI unable to be calculated.

Women may have had more than one medical condition and are included in each medical condition.

Women designated as obese had a BMI of 30 or more.

3.2.6. Complications of pregnancy

There were eleven complications of pregnancy specified for reporting. More than thirty percent (30.3 per cent) of women who gave birth during 2015, were reported as having one or more complications during pregnancy (Table 11).

In 2015 hypertension in pregnancy occurred in 4.1 per cent of women who gave birth described as pre-eclampsia (1.9 per cent), pre-eclampsia superimposed on essential hypertension (0.2 per cent) and gestational hypertension (2.0 per cent). This compares to 2014 when 3.2 per cent of women who gave birth had one of these types of hypertension. The increase is probably related to a change that enabled more refined reporting of hypertension.

The most common complications in women who gave birth were gestational diabetes (8.8 per cent), and premature rupture of membranes⁶ (3.5 per cent).

A higher proportion of obese women had at least one pregnancy complication (37.6 per cent) reported than women with a low or healthy BMI (28.5 per cent). Higher proportions of obese women had hypertension (5.8 per cent) or gestational diabetes (13.5 per cent) compared to other women (2.6 per cent and 7.7 per cent respectively) (Table 11).

Table 11: Selected pregnancy complications by obesity in women who gave birth in WA, 2015

Complications of pregnancy	Obese				Total	
	No		Yes		No.	%
	No.	%	No.	%		
Threatened miscarriage	398	1.5	64	1.0	462	1.4
Threatened preterm labour	646	2.4	156	2.4	802	2.4
Urinary tract infection	588	2.2	203	3.1	791	2.4
Pre-eclampsia	415	1.6	203	3.1	618	1.9
Antepartum haemorrhage						
— placenta praevia	101	0.4	15	0.2	116	0.4
— abruption	54	0.2	16	0.2	70	0.2
— other	584	2.2	129	2.0	713	2.2
Premature rupture of membranes ⁵	902	3.4	244	3.7	1,146	3.5
Gestational diabetes	2,038	7.7	887	13.5	2,925	8.8
Gestational hypertension	380	1.4	291	4.4	671	2.0
Pre-Eclampsia superimposed on Essential hypertension	42	0.2	38	0.6	80	0.2
Other	2,986	11.3	816	12.4	3,802	11.5
One or more complications	7,541	28.5	2,472	37.6	10,013	30.3
No complications of pregnancy	18,940	71.5	4,103	62.4	23,043	69.7
Total Women	26,481	100.0	6,575	100.0	33,056	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

Excludes 1,426 women with BMI unable to be calculated.

Women designated as obese had a BMI of 30 or more.

⁶ Prelabour rupture of membranes at any gestation, not preterm rupture of membranes

3.3. Labour

3.3.1. Onset of labour

Labour is defined as painful, regular uterine contractions that dilate the cervix. The first stage of labour is timed from when dilatation of the cervix occurs as a result of painful, regular uterine contractions. The second stage of labour begins when the cervix is fully dilated and ends with the complete expulsion of the final infant of the pregnancy.

Onset of labour can be spontaneous, induced or never occur. Labour that has a spontaneous onset can be augmented with medical or surgical procedures. Labour established spontaneously for 16,754 (48.6 per cent) of the women who gave birth in WA in 2015. Of those women 6,038 (36.0 per cent) had labour augmented.

Labour was induced for 30.1 per cent of women who gave birth. Women who did not experience labour comprised 21.3 per cent (Table 12).

Table 12: Onset of Labour and plurality for women who gave birth in WA, 2015

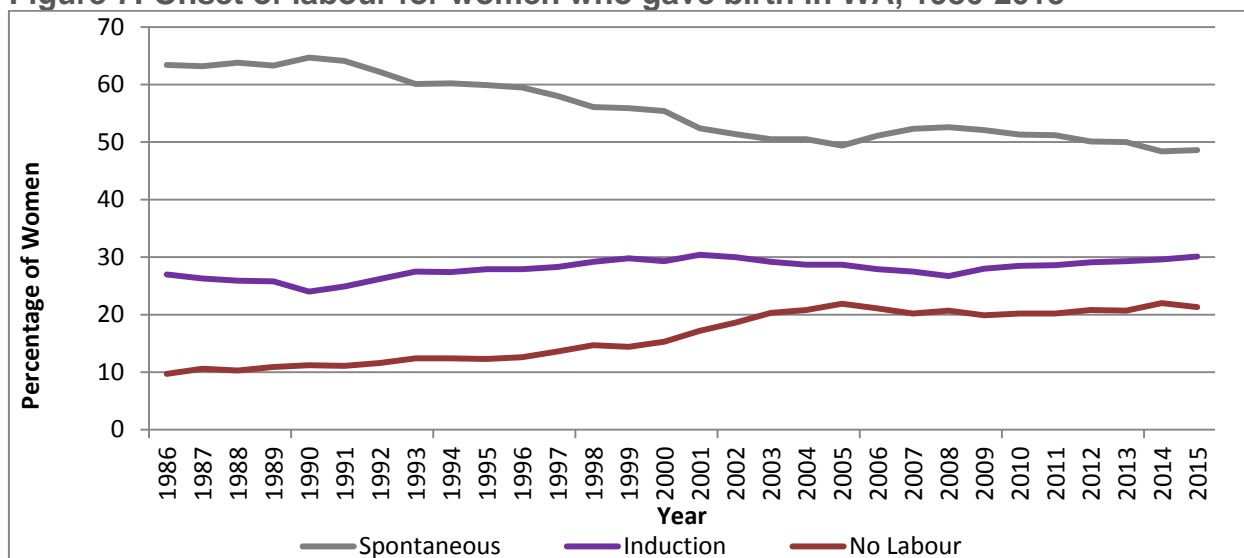
Onset of labour	Plurality				Total	
	Single		Multiple			
	No.	%	No.	%	No.	%
Spontaneous	16,617	48.9	137	28.1	16,754	48.6
- No Augmentation	10,608	31.2	108	22.2	10,716	31.1
- Augmentation	6,009	17.7	29	6.0	6,038	17.5
Induction	10,265	30.2	108	22.2	10,372	30.1
No Labour	7,114	20.9	242	49.7	7,356	21.3
Total	33,995	100.0	487	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019

Augmentation percent presented as a proportion of women with spontaneous labour.

There was a decrease in the proportion of women who established labour spontaneously, from 63.4 per cent in 1986 to 48.6 per cent in 2015 (Figure 7).

Figure 7: Onset of labour for women who gave birth in WA, 1986-2015



3.3.2. Augmentation of labour

Augmentation of labour refers to the use of a medication or procedure to hasten the process of labour that has spontaneously commenced. Augmentation may assist with improving strength and efficiency of contractions and/or to quickly advance labour if the health of the mother or infant is at risk.

Augmentation by surgical and/or medical intervention was administered to 17.5 per cent of women who gave birth (Table 12).

3.3.3. Methods of augmentation and duration of labour

Of the 16,754 women who had a spontaneous onset of labour, 9.4 per cent (1,562) had a labour duration of 12 hours or more. Of these women, 65.4 per cent had labour augmented and of these 99.8 per cent had augmentation with oxytocin, ARM or both.

Among 6,017 women who had augmentation of spontaneous labour in 2015, 40.5 per cent had artificial rupture of membranes (ARM) and 32.4 per cent had oxytocin infusion as the method. A further 27.0 per cent had a combination of the methods, oxytocin and ARM.

Of women with augmentation of spontaneous labour, 83.0 per cent gave birth in less than 12 hours compared to 94.9 per cent of women without augmentation (Table 13).

Table 13: Augmentation of spontaneous labour and hours of labour for women who gave birth in WA, 2015

Type of augmentation	Hours of labour ⁷				Total
	Less than 1 hr	1 hr to less than 5 hrs	5 hrs to less than 12 hrs	12 hrs or more	
Number					
None	333	5,847	3,977	540	10,697
Oxytocin	15	512	1,042	381	1,950
Art. rupture membranes (ARM)	37	919	1,251	231	2,438
Oxytocin and ARM	11	379	829	410	1,629
Total Augmented	63	1,810	3,122	1,022	6,017
Row percentage					
None	3.1	54.7	37.2	5.1	100.0
Oxytocin	0.8	26.3	53.4	19.5	100.0
Art. rupture membranes (ARM)	1.5	37.7	51.3	9.5	100.0
Oxytocin and ARM	0.7	23.3	50.9	25.2	100.0
Total Augmented	1.0	30.1	51.9	17.0	100.0
Column percentage					
None					
Oxytocin	23.8	28.3	33.4	37.3	32.4
Art. rupture membranes (ARM)	58.7	50.8	40.1	22.6	40.5
Oxytocin and ARM	17.5	20.9	26.6	40.1	27.1
Total Augmented	100.0	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

Women who had prostaglandin with oxytocin were reported in "oxytocin" groups.

Excludes 19 cases where women who had prostaglandin combined with ARM or other were reported in the "prostaglandin or other", or duration of labour was unknown.

⁷ Hours of labour include total of first and second stage, and include labours culminating in caesarean section.

3.3.4. Induction of labour

Induction of labour is the process of using medications or procedures to start labour. Induction is performed to initiate the birth of the infant/s where maternal or fetal health would be compromised if the birth awaited spontaneous onset of labour.

In 2015, labour was induced by medical and/or surgical means for 30.1 per cent of women or 10,372 women had labour induced of the 34,482 who gave birth (Table 12).

ARM and oxytocin infusion was the most common method and occurred for 38.4 per cent of women with labour induced (Table 14).

Table 14: Induction and birth methods for women who gave birth in WA, 2015

Induction Method	Method Birth ⁸			Total
	Spont vaginal	Assisted vaginal	Emergency caesarean	
Number				
Oxytocin	506	210	226	942
Prostaglandin	461	199	245	905
Artificial ruptured membrane (ARM)	405	81	70	556
Oxytocin and ARM	2,498	902	585	3,985
Prostaglandin and ARM	180	74	53	307
Prostaglandin and Oxytocin	84	63	81	228
Prostaglandin, Oxytocin and ARM	498	344	305	1,147
Other only ⁹	960	528	814	2,302
Total	5,592	2,401	2,379	10,372
Row percentage				
Oxytocin	53.6	22.3	24.0	100.0
Prostaglandin	50.9	22.0	27.1	100.0
Artificial ruptured membrane (ARM)	72.8	14.6	12.6	100.0
Oxytocin and ARM	62.7	22.6	14.7	100.0
Prostaglandin and ARM	58.6	24.1	17.3	100.0
Prostaglandin and Oxytocin	36.8	27.6	35.5	100.0
Prostaglandin, Oxytocin and ARM	43.4	30.0	26.6	100.0
Other only	41.7	22.9	35.4	100.0
Total	53.9	23.1	22.9	100.0
Column percentage				
Oxytocin	9.0	8.7	9.5	9.1
Prostaglandin	8.2	8.3	10.3	8.7
Artificial ruptured membrane (ARM)	7.2	3.4	2.9	5.4
Oxytocin and ARM	44.7	37.6	24.6	38.4
Prostaglandin and ARM	3.2	3.1	2.2	3.0
Prostaglandin and Oxytocin	1.5	2.6	3.4	2.2
Prostaglandin, Oxytocin and ARM	8.9	14.3	12.8	11.1
Other only	17.2	22.0	34.2	22.2
Total	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

Assisted vaginal births include all breech vaginal births, vacuum extraction and forceps delivery.

⁸ Women with multiple births were classified by the method of birth of the first infant born.

⁹ Women with multiple methods of induction that included "Other" were counted in "Other" totals in previous annual reports. In this report these women are included in counts for the named method/s.

3.3.5. Induction of labour by maternity service

Maternity sites who reported rates above the mean of 30.1 percent included Joondalup HC, KEMH, Osborne Park, SJOG Geraldton, SJOG Mt Lawley and SJOG Subiaco. WACHS sites had a combined induction rate of 26.1 (Table 15).

Table 15: Induction of labour by maternity service of women who gave birth in WA, 2015

Hospital	Onset of Labour				Total	
	Induced		Other ¹⁰		No.	%
	No.	%	No.	%	No.	%
Armadale Kelmscott	621	24.7	1,892	75.3	2,513	100.0
Attadale	60	28.3	152	71.7	212	100.0
Bentley	233	22.2	818	77.8	1,051	100.0
Fiona Stanley	544	24.6	1,669	75.4	2,213	100.0
Glengarry	201	33.9	392	66.1	593	100.0
Goldfields	252	31.4	550	68.6	802	100.0
Great Southern	122	22.0	433	78.0	555	100.0
Home Births	2	0.9	215	99.1	217	100.0
Joondalup HC	1,400	34.5	2,657	65.5	4,057	100.0
KEMH	1,901	34.0	3,691	66.0	5,592	100.0
Kimberley	138	23.1	459	76.9	597	100.0
Midwest	133	26.6	367	73.4	500	100.0
Osborne Park	523	34.0	1,017	66.0	1,540	100.0
Peel HC	282	26.7	773	73.3	1,055	100.0
Pilbara	108	16.6	543	83.4	651	100.0
Rockingham Kwinana	457	25.6	1,331	74.4	1,788	100.0
SJOG Bunbury	148	25.8	426	74.2	574	100.0
SJOG Geraldton	92	40.2	137	59.8	229	100.0
SJOG Midland	28	26.7	77	73.3	105	100.0
SJOG Mt Lawley	548	39.3	846	60.7	1,394	100.0
SJOG Murdoch	639	28.1	1,639	71.9	2,278	100.0
SJOG Subiaco	1,298	39.0	2,029	61.0	3,327	100.0
Southwest	371	23.8	1,186	76.2	1,557	100.0
Swan District	239	26.0	682	74.0	921	100.0
Wheatbelt	32	19.9	129	80.1	161	100.0
Total	10,372	30.1	24,110	69.9	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

¹⁰ Other labour onsets included spontaneous labour and no labour.

3.3.6. Analgesia

Analgesia is often administered during labour to reduce the pain experienced.

Of those women who experienced labour, 80.7 per cent received analgesia during labour. Analgesia via the epidural and/or spinal route was received by 50.0 per cent women with or without other analgesia.

Almost one in five (19.3 per cent) of all women experiencing labour had no analgesia (Table 16).

Table 16: Analgesia during labour and method of birth for women who laboured in WA, 2015

Type of Analgesia ¹¹	Method of Birth ¹²						Total	
	Spontaneous vertex		Assisted vaginal ¹³		Caesarean		No.	%
	No.	%	No.	%	No.	%		
Nitrous oxide	5,368	31.5	639	11.9	273	5.8	6,280	23.2
Systemic opioids	1,469	8.6	301	5.6	180	3.8	1,950	7.2
Epidural and/or spinal¹⁴	5,989	35.1	4,123	76.6	3,443	73.4	13,555	50.0
Epidural	5,612	32.9	3,740	69.5	2,867	61.1	12,219	45.0
Spinal	43	0.3	61	1.1	365	7.8	469	1.7
Combined spinal epidural	370	2.2	358	6.7	300	6.4	1,028	3.8
Other	71	0.4	18	0.3	18	0.4	107	0.4
Women with any analgesia	12,897	75.6	5,081	94.4	3,914	83.4	21,892	80.7
Women with no analgesia	4,157	24.4	299	5.6	778	16.6	5,234	19.3
Total women who laboured	17,054	100.0	5,380	100.0	4,692	100.0	27,126	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

¹¹ Analgesia was assigned an ascending rank order of None, Nitrous Oxide, Systemic Opioids, Epidural/Caudal, Spinal, and Combined Spinal/Epidural. The highest Analgesia recorded for each woman determined her "Type of Analgesia".

¹² Women with multiple births were classified by the method of birth of the first infant born.

¹³ Assisted vaginal births include all breech vaginal births, vacuum extraction and forceps delivery.

¹⁴ Count of women who had Epidural, Spinal and/or Combined Spinal Epidural singly or in combination for analgesia in labour.

3.3.7. Anaesthesia

Anaesthesia is often administered during the birth and differs from analgesia in that its action is to block sensation. Regional anaesthesia (Epidural/Spinal) may interfere with some reflexes and can impact mobility. General anaesthesia (GA) also induces loss of consciousness. Each woman who gave birth may have had nil, one or multiple types of anaesthesia. They may also have had different anaesthesia for each of multiple infants born. Table 17 presents one anaesthesia method for each woman. That method is the most intensive method for her first infant born.

Of the 34,482 women who gave birth in WA during 2015, 31.4 per cent had no anaesthesia, 33.9 per cent received anaesthesia via the epidural route, 15.3 per cent via the spinal route and 11.4 per cent had combined spinal and epidural anaesthesia. One point three per cent of women received general anaesthesia (Table 17).

Table 17: Anaesthesia and method of birth for women who gave birth in WA, 2015

Type of Anaesthesia ¹⁵	Method of Birth ¹⁶								Total	
	Spontaneous Vertex		Assisted vaginal ¹⁷		Elective caesarean		Emergency caesarean			
	No.	%	No.	%	No.	%	No.	%	No.	%
None	10,169	29.5	674	2.0	-	-	-	-	10,843	31.4
Local to perineum	926	2.7	604	1.8	-	-	-	-	1,530	4.4
Pudendal	15	0.0	126	0.4	-	-	-	-	141	0.4
Epidural	5,123	14.9	3,549	10.3	520	1.5	2,511	7.3	11,703	33.9
Spinal	38	0.1	79	0.2	3,288	9.5	1,866	5.4	5,271	15.3
Combined spinal epidural	302	0.9	305	0.9	2,186	6.3	1,128	3.3	3,921	11.4
General anaesthesia	6	0.0	4	0.0	80	0.2	355	1.0	445	1.3
Epidural/spinal & GA	-	-	-	-	35	0.1	79	0.2	114	0.3
Other	475	1.4	39	0.1	-	-	-	-	514	1.5
Total	17,054	49.5	5,380	15.6	6,109	17.7	5,939	17.2	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

¹⁵ For cases with both Epidural and Spinal, they were included in the Combined Spinal Epidural group.

¹⁶ Women with multiple births were classified by the method of birth of the first infant born.

¹⁷ Assisted vaginal births include all breech vaginal births, vacuum extraction and forceps delivery.

3.4. Fetal presentation

The majority (94.6 per cent) of infants born from single births were vertex presentations. Of these, 65.5 per cent were born vaginally.

Among single infants, 3.9 per cent had breech presentations. Of these infants, 57.1 per cent were born by elective caesarean section, 33.4 per cent by emergency caesarean section and 9.4 per cent were born vaginally.

Of single infants, 11.9 per cent were born by vacuum extraction and 3.4 per cent by forceps (Table 18).

Table 18: Fetal presentation and method of birth for single infants born in WA, 2015

Method of Birth ¹⁸	Fetal Presentation			Total No.
	Vertex No.	Breech No.	Other ¹⁹ No.	
Spontaneous	16,631	2	297	16,930
Vacuum	3,987	-	42	4,029
Forceps	1,154	-	15	1,169
Breech Vaginal	1	125	1	127
Elective Caesarean	5,136	762	43	5,941
Emergency Caesarean	5,234	445	120	5,799
Total	32,143	1,334	518	33,995
Column percentage				
Spontaneous	51.7	0.1	57.3	49.8
Vacuum	12.4	-	8.1	11.9
Forceps	3.6	-	2.9	3.4
Breech Vaginal	0.0	9.4	0.2	0.4
Elective Caesarean	16.0	57.1	8.3	17.5
Emergency Caesarean	16.3	33.4	23.2	17.1
Total	100.0	100.0	100.0	100.0
Row percentage				
Spontaneous	98.2	0.0	1.8	100.0
Vacuum	99.0	-	1.0	100.0
Forceps	98.7	-	1.3	100.0
Breech Vaginal	0.8	98.4	0.7	100.0
Elective Caesarean	86.5	12.8	0.8	100.0
Emergency Caesarean	90.3	7.7	2.1	100.0
Total	94.6	3.9	1.5	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

¹⁸ Where multiple methods of birth were reported for an infant, the highest method of birth was reported with ascending rank order being Spontaneous, Vacuum, Forceps, Breech Vaginal, Caesarean Section

¹⁹ Cephalic presentations like Brow and Face are included in "Other" with shoulder or compound presentations

3.4.1. Vertex presentation and method of birth in maternity services

Women with a vertex presentation of the first or only infant of the pregnancy may be more likely to have a spontaneous vaginal birth unless they have a history of caesarean section or complication of pregnancy or labour.

In WA in 2015, just over half (51.5 per cent) of women who gave birth to an infant with a vertex presentation had a spontaneous vaginal birth, a slight reduction from 2014 (51.6 per cent). The Tertiary maternity service at KEMH had a similar proportion to the whole of WA (52.7 per cent). Rates at other hospitals ranged from 31.0 per cent (SJOG Subiaco) to 70.8 per cent (Kimberley) (Table 19).

Table 19: Method of birth and maternity service of infants born with vertex presentation in WA, 2015

Hospital	Method of Birth				Total	
	Spont Vaginal		Other ²⁰			
	No.	%	No.	%	No.	%
Armadale Kelmscott	1,559	66.0	802	34.0	2,361	100.0
Attadale	92	45.8	109	54.2	201	100.0
Bentley	590	58.6	416	41.4	1,006	100.0
Fiona Stanley	1,099	52.4	997	47.6	2,096	100.0
Glengarry	186	33.2	375	66.8	561	100.0
Goldfields	491	64.4	272	35.6	763	100.0
Great Southern	347	65.5	183	34.5	530	100.0
Joondalup HC	1,806	46.7	2,063	53.3	3,869	100.0
KEMH	2,693	52.7	2,413	47.3	5,106	100.0
Kimberley	398	70.8	164	29.2	562	100.0
Midwest	329	69.3	146	30.7	475	100.0
Osborne Park	763	52.3	697	47.7	1,460	100.0
Peel HC	561	56.2	437	43.8	998	100.0
Pilbara	392	64.5	216	35.5	608	100.0
Rockingham Kwinana	1,060	62.3	642	37.7	1,702	100.0
SJOG Bunbury	271	49.5	277	50.5	548	100.0
SJOG Geraldton	128	56.9	97	43.1	225	100.0
SJOG Midland	62	62.0	38	38.0	100	100.0
SJOG Mt Lawley	479	36.3	842	63.7	1,321	100.0
SJOG Murdoch	683	31.9	1,458	68.1	2,141	100.0
SJOG Subiaco	982	31.0	2,184	69.0	3,166	100.0
South West	916	61.7	568	38.3	1,484	100.0
Swan	562	64.8	305	35.2	867	100.0
Wheatbelt	89	58.3	63	41.4	152	100.0
Home Birth	215	100.0	-	-	215	100.0
Total	16,753	51.5	15,764	48.5	32,517	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

Includes pregnancies of multiple plurality if first infant was vertex.

Includes infants born before arrival and those born at non-maternity sites.

Attadale, Glengarry and Joondalup Health Campus are not listed but are included in the total for WA.

²⁰ Other methods of birth include vacuum, forceps and caesarean section.

3.5. Method of birth

In 2015, half the women who gave birth had spontaneous vertex births (49.5 per cent). Caesarean section was the birth method for 34.9 per cent of women. This comprised 17.7 per cent elective caesarean section and 17.2 per cent emergency caesarean section.

Assisted vaginal birth (breech, vacuum or forceps) or caesarean section accounted for 50.5 per cent of births by WA women in 2015.

For women who gave birth for the first time, 35.8 per cent had a caesarean section in 2015. Of women with a history of caesarean section and most recent previous birth vaginal, 28.4 per cent had a caesarean section in 2015. (Table 20).

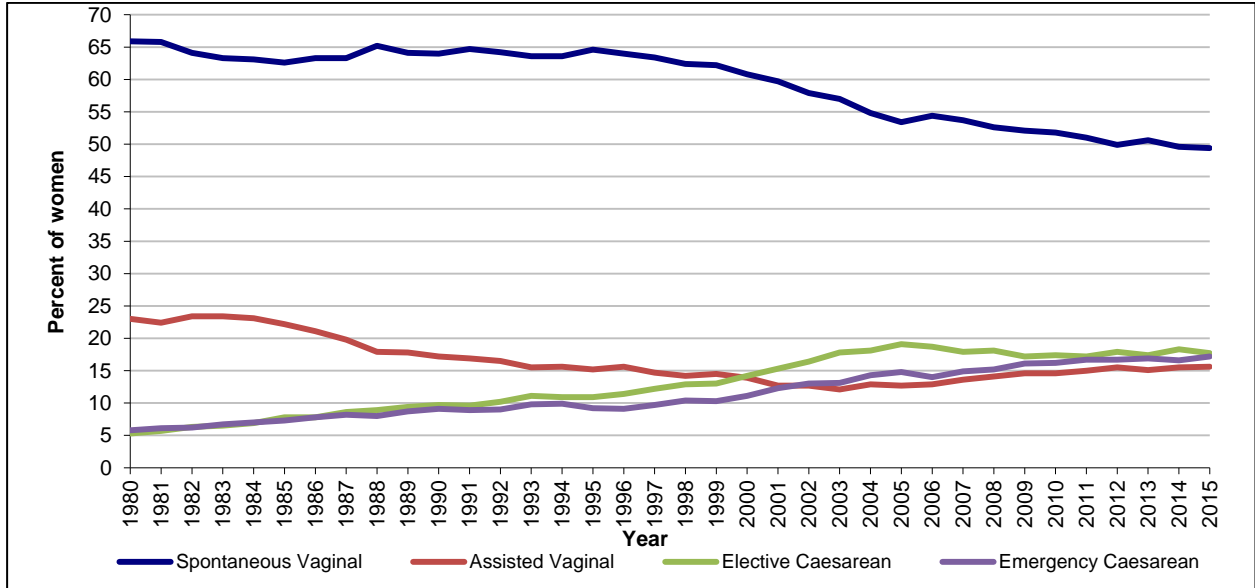
Table 20: Method of birth by history of caesarean section for women who gave birth in WA, 2015

Previous birth Method	Method of Birth										Total	
	Spontaneous		Breech		Instrumental		Elective caesarean		Emergency caesarean			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
First Birth	5,413	36.6	59	0.4	4,035	27.3	1,532	10.4	3,757	25.4	14,796	100.0
Previous births, no caesareans	11,025	81.5	59	0.4	1,014	7.5	594	4.4	843	6.2	13,535	100.0
No previous caesarean	16,438	58.0	118	0.4	5,049	17.8	2,126	7.5	4,600	16.2	28,331	100.0
Previous caesarean, last birth vaginal	237	63.5	2	0.5	28	7.5	51	13.7	55	14.7	373	100.0
Previous caesarean, last birth caesarean	379	6.6	14	0.2	169	2.9	3,932	68.1	1,284	22.2	5,778	100.0
Previous caesarean	616	10.0	16	0.3	197	3.2	3,983	64.8	1,339	21.8	6,151	100.0
Total	17,054	49.5	134	0.4	5,246	15.2	6,109	17.7	5,939	17.2	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

The incidence of both elective and emergency caesarean section has more than tripled over the 33 years of available data. The rates of elective caesarean section and emergency caesarean section appear to have plateaued since 2009 (Figure 8).

Figure 8: Method of birth for women who gave birth in WA, 1980-2015



Breech, Vacuum and Forceps for first or only infant were combined to determine "Assisted Vaginal" number of women.

3.5.1. Caesarean section by maternity service

Tertiary maternity services in WA (KEMH and Fiona Stanley) had 35.7 and 34.0 per cent caesarean section rate respectively in 2015. Rural health regions' caesarean section rates ranged between 21.3 per cent in the Goldfields and 35.4 per cent in the Wheatbelt. Caesarean section rates at private health services ranged between 19.2 per cent (SJOG Geraldton) and 55.8 per cent (SJOG Murdoch) (Table 21).

Table 21: Caesarean section by maternity service of women who gave birth in WA, 2015

Hospital	Method of Birth					
	Vaginal Birth		Caesarean		Total	
	No.	%	No.	%	No.	%
Armadale Kelmscott	1,939	77.2	574	22.8	2,513	100.0
Attadale	117	55.2	95	44.8	212	100.0
Bentley	771	73.4	280	26.6	1,051	100.0
Fiona Stanley	1,461	66.0	752	34.0	2,213	100.0
Glengarry	306	51.6	287	48.4	593	100.0
Goldfields	631	51.4	171	21.3	802	100.0
Great Southern	397	71.5	158	28.5	555	100.0
Homebirths	217	100.0	-	-	217	100.0
Joondalup HC	2,479	61.1	1,578	38.9	4,057	100.0
KEMH	3,598	64.3	1,994	35.7	5,592	100.0
Kimberley	457	76.5	140	23.5	597	100.0
Midwest	386	77.2	114	22.8	500	100.0
Osborne Park	1,025	66.6	515	33.4	1,540	100.0
Peel	725	68.7	330	31.3	1,055	100.0
Pilbara	457	70.2	194	29.8	651	100.0
Rockingham Kwinana	1,322	73.9	466	26.1	1,788	100.0
SJOG Bunbury	355	61.8	219	38.2	574	100.0
SJOG Geraldton	185	80.8	44	19.2	229	100.0
SJOG Midland	69	65.7	36	34.3	105	100.0
SJOG Mt Lawley	804	57.7	590	42.3	1,394	100.0
SJOG Murdoch	1,008	44.2	1,270	55.8	2,278	100.0
SJOG Subiaco	1,824	54.8	1,503	45.2	3,327	100.0
South West	1,135	72.9	422	27.1	1,557	100.0
Swan Districts	662	71.9	259	28.1	921	100.0
Wheatbelt	104	64.6	57	35.4	161	100.0
Total	22,435	65.1	12,051	34.9	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

3.6. Complications of labour and birth

3.6.1. Obesity

For women who gave birth in 2015, maternal weight and height were available for a large proportion (95.9 per cent).

Of all women who gave birth, 19.1 per cent were obese (BMI of 30 or higher). A higher proportion of these women had one or more complications of labour and birth (65.5 per cent) compared with women who had a BMI less than 30 (57.6 per cent). Women with an unknown BMI had complications in a similar proportion (58.7 per cent) to women with non-obese women, but had different proportions of some complications of labour and birth. Women with unknown BMI had high precipitate delivery (9.0 per cent) compared to non-obese women (5.1 per cent) and prolapsed cord (0.4 per cent compared to 0.1 per cent in all other women). The occurrence of these conditions may, in part, explain why BMI was unknown.

Incidence of PPH (32.5 per cent) and history of caesarean section (21.9 per cent) was approximately 50 per cent higher in obese women than in women who were not obese (22.7 per cent and 15.0 per cent respectively) (Table 22).

Table 22: Complications of labour and birth by obesity in women who gave birth in WA, 2015

Complications of labour and birth ²¹	Maternal obesity						Total	
	BMI <30		BMI ≥30		BMI N/A		No.	%
	No.	%	No.	%	No.	%		
Precipitate delivery	1,349	5.1	436	6.6	128	9.0	1,913	5.5
Fetal compromise	3,470	13.1	888	13.5	153	10.7	4,511	13.1
Prolapsed cord	27	0.1	17	0.3	6	0.4	50	0.1
Cord tight around neck	495	1.9	137	2.1	21	1.5	653	1.9
Cephalopelvic disproportion	174	0.7	46	0.7	9	0.6	229	0.7
Primary Postpartum Haemorrhage ≥500mLs (PPH)	6,017	22.7	2,140	32.5	341	23.9	8,498	24.6
Retained placenta manual removal	298	1.1	66	1.0	27	1.9	391	1.1
Persistent occipito posterior	422	1.6	113	1.7	13	0.9	548	1.6
Shoulder dystocia	428	1.6	136	2.1	27	1.9	591	1.7
Failure to progress ≤3cms	1,901	7.2	407	6.2	84	5.9	2,392	6.9
Failure to progress >3cms	1,317	5.0	382	5.8	45	3.2	1,744	5.1
Previous caesarean section	3,966	15.0	1,441	21.9	248	17.4	5,655	16.4
Other	6,664	25.2	1,785	27.1	398	27.9	8,847	25.7
Any complication	15,265	57.6	4,304	65.5	838	58.7	20,407	59.2
No complications of labour and birth	11,216	42.4	2,271	34.5	588	41.3	14,075	40.8
Total Women	26,481	100.0	6,575	100.0	1,426	100.0	34,482	100.0
Proportion of Total Women	76.8		19.1		4.1		100.0	

Extracted from Midwives' Notification System on 3rd January 2019.

These data include reasons for instrumental delivery or caesarean section of the first or only infant born from the pregnancy.

BMI N/A = BMI not able to be calculated.

²¹A woman may have nil, one or more complications of labour and birth reported.

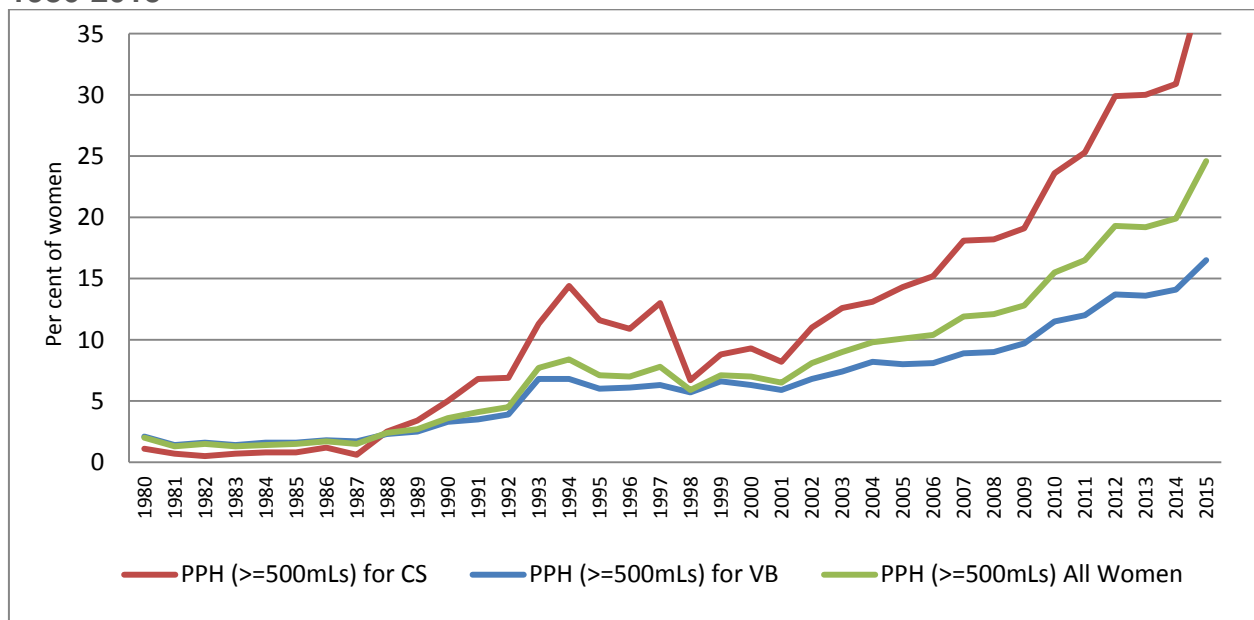
3.6.2. Primary postpartum haemorrhage

The overall primary postpartum haemorrhage (PPH) rate for 2015 was 24.6 per cent (Table 22).

The proportion of women who had a PPH of 500 mLs or more has risen each year since 1986 when it was 1.7 per cent. In particular, the PPH rate for women who had birth by caesarean section increased from 1.2 per cent in 1986 to 39.8 per cent in 2015.

Note that this increase should be interpreted with caution. Methods for reporting postpartum blood loss have changed for public maternity services, particularly since 2012. Before 2012 midwives reported if a PPH²² occurred. Since 2012, the progressive introduction of a new information system meant that amount of postpartum blood loss was recorded and any woman with an amount of 500mLs or more was considered to have had a PPH regardless of clinical signs and diagnosis (Figure 9).

Figure 9: Primary postpartum haemorrhage for women who gave birth in WA, 1986-2015



²² Instructions to midwives were that a PPH was 500mLs or more, however this amount is often reported as “normal” blood loss at caesarean section and was often not reported as a PPH prior to 2005.

3.6.3. Reason for caesarean section

Of women who had a caesarean section in 2015, 69.5 per cent had at least one complication reported. Previous caesarean section was the most frequently reported complication for these women in 2015 (40.8 per cent) (Table 23).

Table 23: Frequent complications of labour and birth for women who gave birth by caesarean section in WA, 2015

Complications of labour and birth ²³	No.		%	
	No.	%	No.	%
Previous caesarean section	4,917	40.8		
Lack of progress in labour	2,203	18.3		
Fetal distress	2,037	16.9		
Other	174	1.4		
Women with birth by caesarean section and one or more of above	8,377	69.5		
Women with birth by caesarean section and other complication	1,733	14.4		
Total Women with birth by CS	12,048	100.0		

Extracted from Midwives' Notification System on 2 October 2018.

Previous caesarean section was the most common reason for caesarean section (36.9 per cent) (Table 24).

Table 24: Reason for caesarean section and urgency of caesarean section for women who gave birth in WA, 2015

Reason for caesarean section	Urgency of caesarean section				Total	
	Elective		Emergency		No.	%
	No.	%	No.	%		
Fetal compromise	27	1.7	1,604	98.3	1,631	100.0
Suspected fetal macrosomia	176	71.3	71	28.7	247	100.0
Malpresentation	638	58.9	446	41.1	1,084	100.0
Lack of progress <= 3cm	-	-	366	100.0	366	100.0
Lack of progress in the 1 st stage 4-10cm	-	-	1,194	100.0	1,194	100.0
Lack of progress in 2 nd stage	-	-	248	100.0	248	100.0
Placenta praevia	153	67.4	74	32.6	227	100.0
Placental abruption	1	1.5	67	98.5	68	100.0
Vasa praevia	12	80.0	3	20.0	15	100.0
Antepartum/Intrapartum haemorrhage	1	1.2	85	98.8	86	100.0
Multiple pregnancy	107	68.2	50	31.8	157	100.0
Unsuccessful attempt at assisted delivery	-	-	117	100.0	117	100.0
Unsuccessful induction	-	-	198	100.0	198	100.0
Cord prolapse	-	-	35	100.0	35	100.0
Previous caesarean section	3,663	82.5	779	17.5	4,442	100.0
Previous shoulder dystocia	42	89.4	5	10.6	47	100.0
Previous perineal trauma/4 th degree tear	75	88.2	10	11.8	85	100.0
Previous adverse fetal/neonatal outcome	25	50	25	50.0	50	100.0
Other obstetric indications	669	58.1	482	41.9	1,151	100.0
Maternal choice	520	86.7	80	13.3	600	100.0
Total Women with birth by CS	6,109	50.7	5,939	49.3	12,048	100.0

Extracted from Midwives' Notification System on 3rd January 2019

²³ A woman may have nil, one or more complications of labour and birth reported

3.6.4. Accoucheur

Each infant of a birth may have had one or more birth attendants (accoucheurs) reported. For each woman the birth attendant for the first or only infant was counted.

Obstetricians and Midwives were the birth attendant for 35.7 and 35.0 per cent of births, respectively. Other medical officers attended 27.4 per cent of births. A midwife, or a supervised student, was the accoucheur for 70.3 per cent of women who had a spontaneous vertex birth (Table 25).

Table 25: Method of birth and accoucheur for women who gave birth in WA, 2015

Accoucheur	Method of Birth										Total	
	Spontaneous Vertex		Assisted Vaginal		Breech		Elective Caesarean		Emergency Caesarean			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Obstetrician	2,109	12.4	2,610	49.8	45	33.6	4,249	69.6	3,310	55.7	12,323	35.7
Other Med Officer ²⁴	2,300	13.5	2,631	50.2	32	24.9	1,860	30.4	2,629	44.3	9,452	27.4
Midwife	11,996	70.3	5	0.1	56	41.8	-	-	-	-	12,057	35.0
Student	482	2.8	-	-	-	-	-	-	-	-	482	1.4
Self/no attendant	58	0.3	-	-	-	-	-	-	-	-	58	0.2
Other	109	0.6	-	-	1	0.7	-	-	-	-	110	0.3
Total	17,054	100.0	5,246	100.0	134	100.0	6,109	100.0	5,939	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3rd January 2019.

The one accoucheur (birth attendant) for each woman was determined from her first or only infant and the order of values reported e.g. If obstetrician reported then midwife or student recorded for the same infant is ignored.

²⁴ Other Medical Officer includes GP Obstetricians, Obstetric Registrars and Residents, District Medical Officers etc.

3.7. Repair of perineum and/or vagina

Among the 22,434 women who gave birth vaginally, there were 32.9 per cent with no perineal trauma, 22.9 per cent had an episiotomy performed, and 2.8 per cent had a 3rd or 4th degree tear of the anal sphincter. Instrumental births had the highest rates for episiotomy (54.4 and 78.8 per cent) and 3rd or 4th degree tears (4.0 and 10.2 per cent) (Table 26).

Table 26: Vaginal birth and perineal status for women who gave birth in WA, 2015

Method of birth	Perineal status					Total
	None	Episiotomy ²⁵	1 or 2 degree	3 or 4 degree	Other ²⁶	
Number						
Spontaneous	6,822	1,981	7,511	334	406	17,054
Vacuum	429	2,206	1,210	164	45	4,054
Forceps	32	939	96	121	4	1,192
Breech	100	14	19	1	-	134
Total	7,383	5,140	8,836	620	455	22,434
Row percentage						
Spontaneous	40.0	11.6	44.0	2.0	2.4	100.0
Vacuum	10.6	54.4	29.8	4.0	1.1	100.0
Forceps	2.7	78.8	8.1	10.2	0.3	100.0
Breech	74.6	10.4	14.2	0.7	-	100.0
Total	32.9	22.9	39.4	2.8	2.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Perineal status was determined after birth of all infants, episiotomy includes 1st or 2nd degree extension.

Birth method presented is for a singly born infant or the first infant of a multiple birth.

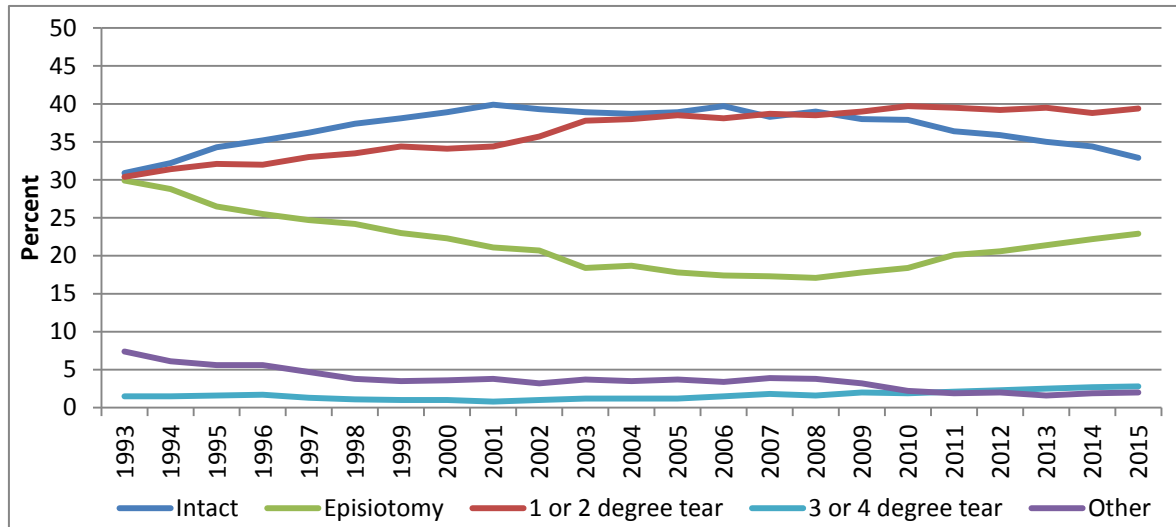
"Other" includes grazes, lacerations and haematomas without episiotomy, perineal or anal sphincter tear.

In earlier years rate of episiotomy decreased from 29.9 per cent in 1993 to 17.1 per cent in 2008. From this time the trend was an increasing rate to 22.9 per cent in 2015. The proportion of women with 1st or 2nd degree perineal trauma increased from 1993 to 39.4 per cent in 2015. The rate of anal sphincter trauma increased from a low of 0.8 per cent in 2001 to a high of 2.8 per cent in 2015 (Figure 10).

²⁵ Includes 531 women who had a 1st/2nd degree tear and episiotomy and 222 women who had a 3rd/4th degree tear and episiotomy reported.

²⁶ "Other" includes grazes, lacerations and haematomas without episiotomy, perineal or anal sphincter tear.

Figure 10: Perineal status for women who gave birth vaginally in WA, 1993-2015



4. Aboriginal mothers and infants

In 2015, there were 1,710 Aboriginal women who gave birth in WA, a decrease of 72 Aboriginal women since 2014. Aboriginal women comprised 5.0 per cent of all women who gave birth (Table 27).

Table 27: Aboriginal status of women who gave birth in WA, 2015

Aboriginal Status	Number	Percentage
Aboriginal	1,710	5.0
non-Aboriginal	32,772	95.0
Total	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Over the past 30 years, the proportion of women who gave birth in WA who were Aboriginal remained relatively consistent, ranging from 5.0 per cent in 1990 to 6.8 per cent in 2002 and 5.0 per cent in 2015 (Table 80).

4.1. Maternal age

Maternal age for all women ranged from 13 to 49 years with a mean of 30.1 years and a median of 30 years. Aboriginal women who gave birth were younger than non-Aboriginal women. Aboriginal women had a mean age of 25.4 years, a median age of 25 years and their most common age (mode) was 22 years. By comparison, non-Aboriginal women were older with a mean age of 30.3 years, a median age of 30 years and a modal age of 31 years (Table 28).

Table 28: Maternal age summary statistics and Aboriginal status for women who gave birth in WA, 2015

Maternal age (years)	Aboriginal status of mother		Total
	Aboriginal	non-Aboriginal	
Minimum age	13	14	13
Maximum age	47	49	49
Mean age	25.4	30.3	30.1
Median age	25	30	30
Modal age	22	31	31
Standard Deviation of age	5.8	5.2	5.4

Extracted from Midwives' Notification System on 3 January 2019

For Aboriginal women who gave birth in 2015, the highest proportion (31.9 per cent) were in the 5-year aged group of 20 to 24 years. In non-Aboriginal women, the highest proportion (36.1 per cent) were in the 5-year age group of 30 to 34 years (Table 29).

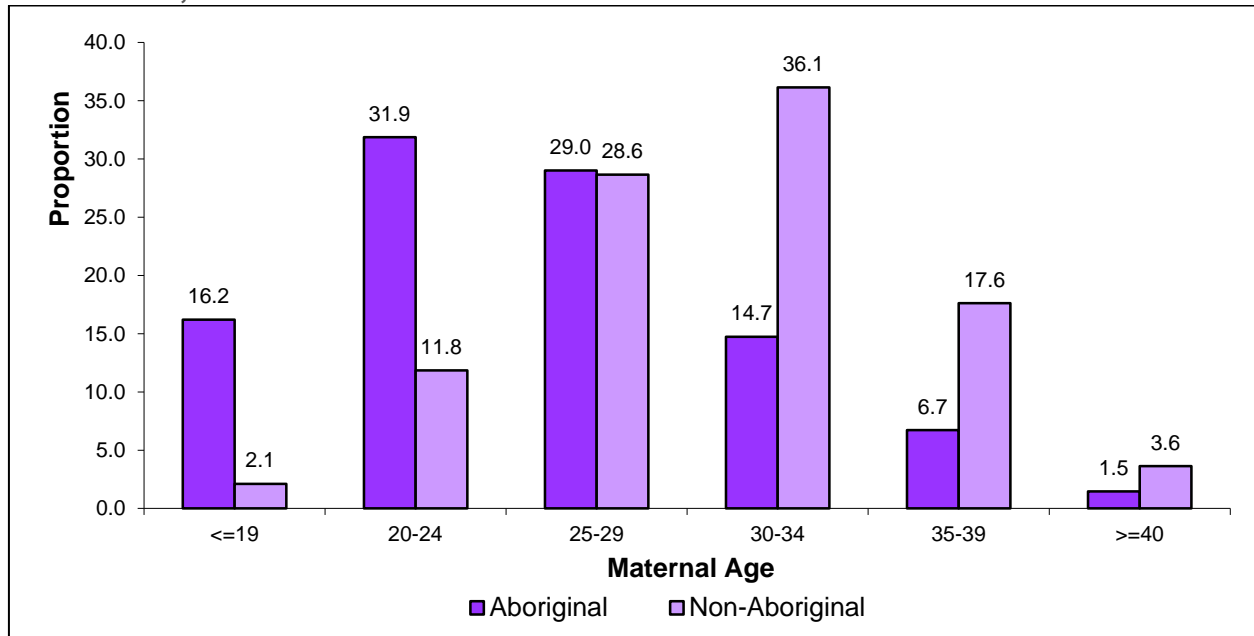
Table 29: Maternal age and Aboriginal status of women who gave birth in WA, 2015

Maternal age	Aboriginal status of mother				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
<=15	19	1.1	12	0.0	31	0.1
16	24	2.4	50	0.2	74	0.2
17	57	3.3	107	0.3	164	0.5
18	75	4.4	177	0.5	252	0.7
19	102	6.0	347	1.1	449	1.3
<=19	277	16.2	693	2.1	970	2.8
20-24	545	31.9	3,881	11.8	4,426	12.8
25-29	496	29.0	9,389	28.7	9,885	28.7
30-34	252	14.7	11,846	36.1	12,098	35.1
35-39	115	6.7	5,774	17.6	5,889	17.1
>=40	25	1.5	1,189	3.6	1,214	3.5
Total	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Teenagers accounted for 16.2 per cent of Aboriginal women who gave birth in 2015, a decrease of 1.6 per cent from 2014 (17.8 per cent). This proportion was more than seven times that of non-Aboriginal women who were teenage (2.1 per cent). Aboriginal women aged 30-34 years comprised 14.7 per cent, one half the proportion of non-Aboriginal women of the same age (36.1 per cent) (Figure 11).

Figure 11: Maternal age distribution by Aboriginal status for women who gave birth in WA, 2015



4.1.1. Age-specific birth rates

The age-specific birth rate of Aboriginal women was 76.1 per 1,000. This rate declined from 126.0 in 1990 and remained higher than the age-specific birth rate for non-Aboriginal women of 62.9 per 1,000.

For the teenage 5-year group, 15 to 19 years, the age-specific birth rate for Aboriginal women (58.6 per 1,000) was almost more than six times the rate for non-Aboriginal women (9.5 per 1,000).

For the 20 to 24 year age group, the age-specific birth rate for Aboriginal women (117.7 per 1,000 women) was almost double the rate for non-Aboriginal women (47.2 per 1,000 women).

For women in the 30 to 34 year age group, the age-specific birth rate for Aboriginal women (75.4 per 1,000) was less than the rate for non-Aboriginal women (123.9 per 1,000) (Table 30 and Figure 12).

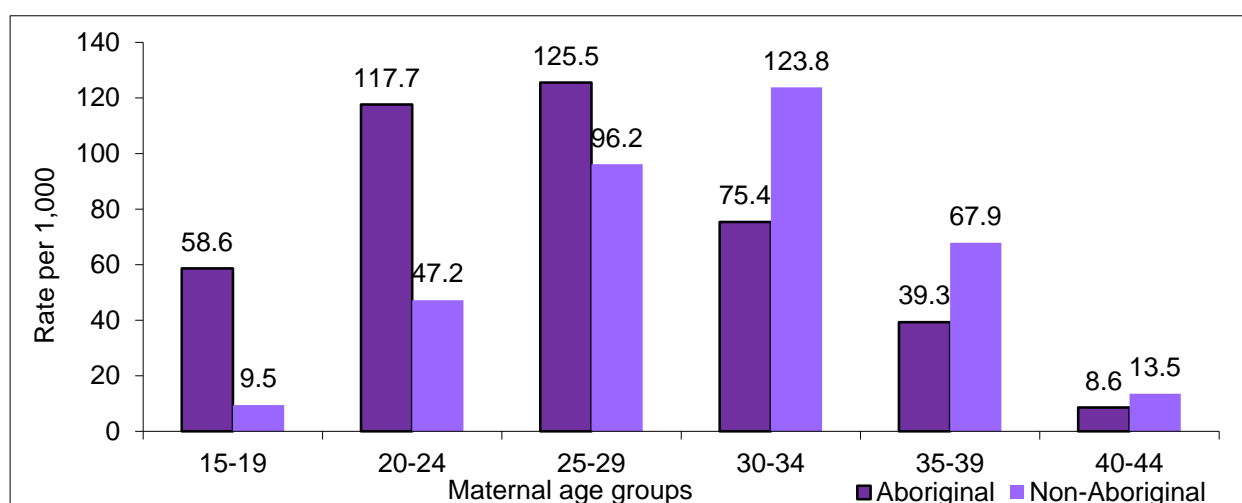
Table 30: Maternal age-specific birth rates²⁷ by Aboriginal status of women who gave birth in WA, 2015

Age	Aboriginal Status of mother						Total		
	Gave Birth	Pop'n ²⁸	Birth rate	Gave Birth	Pop'n	Birth rate	Gave Birth	Pop'n	Birth rate
15–19	277	4,723	58.6	693	73,138	9.5	970	77,861	12.5
20–24	545	4,631	117.7	3,881	82,186	47.2	4,426	86,817	51.0
25–29	496	3,951	125.5	9,389	97,640	96.2	9,885	101,591	97.3
30–34	252	3,342	75.4	11,846	95,653	123.9	12,098	98,995	122.2
35–39	115	2,925	39.3	5,774	85,050	67.9	5,889	87,975	66.9
40–44	25	2,905	8.6	1,189	87,755	13.5	1,214	90,660	13.4
Total	1,710	22,477	76.1	32,772	521,422	62.9	34,482	543,899	63.4

Data Extracted from Midwives' Notification System on 3 January 2019.

The 15-19 year age group includes births to mothers younger than 15 years of age. The 40-45 age group includes births to mothers aged 45 years or more.

Figure 12: Maternal age-specific birth rates by Aboriginal status for women who gave birth in WA, 2015



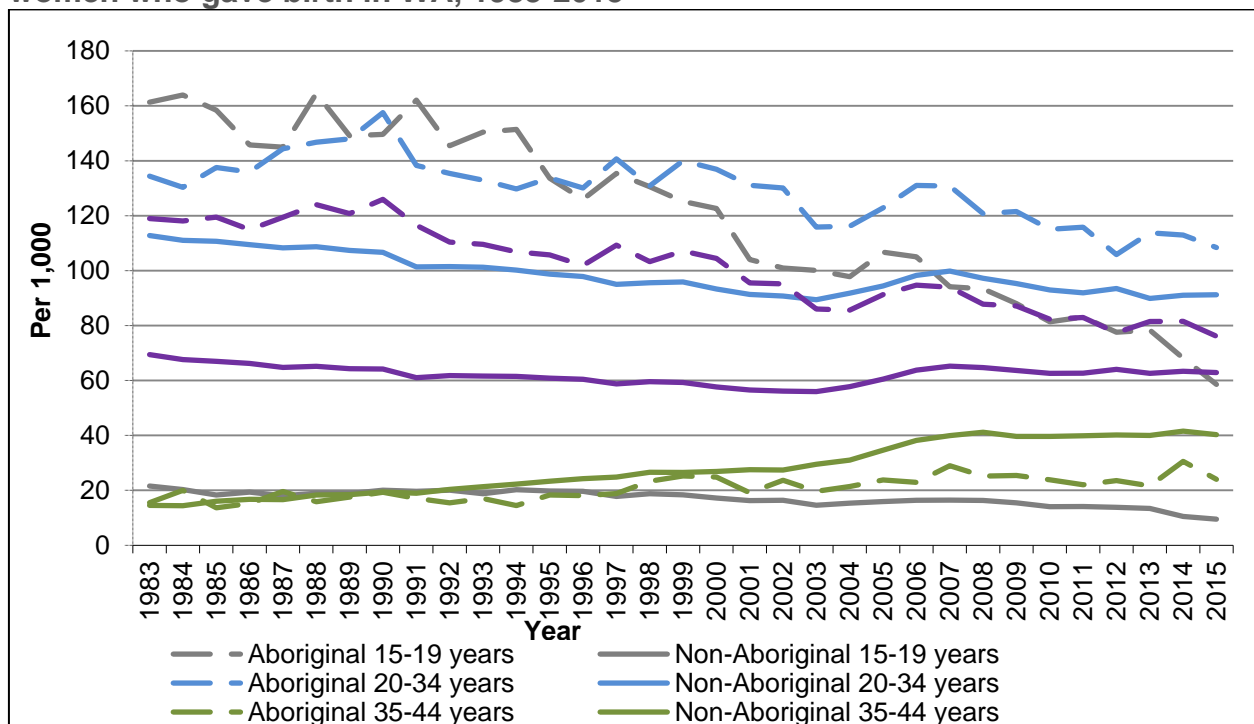
²⁷ Age-specific birth rate — the total number of liveborn infants in one year per 1,000 women of the same age group.

²⁸ Source of population data: Health Statistics Calculator, Oct 2018.

For the period 1983 to 2015 there is a downward trend in the age-specific birth rate for teenage women (aged 15 to 19 years). This rate decreased from 27.6 per 1,000 in 1983 to 12.5 per 1,000 in 2015. There was an upward trend for all women in the 10-year age group, 35 to 44 years. The rate was 14.5 per 1,000 in 1983 and 39.8 per 1,000 in 2015.

For Aboriginal women, the age-specific birth rate for teenage women reached the lowest it has been since 1988 when it was 164.6 per 1,000 with a birth rate of 58.6 per 1,000 in 2015. Older Aboriginal women, aged 35 years or more had a birth rate that increased from 15.5 per 1,000 in 1983 to 24.0 per 1,000 in 2015 (Figure 13).

Figure 13: Trend in maternal age-specific birth rates by Aboriginal status for women who gave birth in WA, 1983-2015



4.2. Health region of residence

Aboriginal women accounted for 5.0 per cent of women who gave birth in 2015 however, the proportion of women who were Aboriginal varied across health regions of residence.

Of the Aboriginal women residing in WA who gave birth, less (36.8 per cent) were metropolitan residents than were residents of a country health region (63.2 per cent). Conversely more non-Aboriginal women (81.5 per cent) lived in a metropolitan health region than in a country health region (18.5 per cent).

The lowest proportions of Aboriginal women in a health region was 1.1 per cent in the North Metropolitan Health region and 2.4 per cent in the South Metropolitan Health region. Aboriginal women who lived in the country represented 15.1 per cent of women giving birth in country health regions with the range between 2.8 per cent in the Southwest to 57.9 per cent in the Kimberley (Table 31).

Table 31: Health region of residence and Aboriginal status of women who gave birth in WA, 2015

Health region of residence	Aboriginal status of mother		Total
	Aboriginal	non-Aboriginal	
Numbers			
Metropolitan	627	26,615	27,242
North	99	9,125	9,224
South	198	7,927	8,125
East	330	9,563	9,893
Country	1,078	6,049	7,127
Goldfields	135	781	916
Great Southern	37	648	685
Kimberley	372	270	642
Midwest	180	675	855
Pilbara	197	690	887
Southwest	62	2,173	2,235
Wheatbelt	95	812	907
Total	1,705	32,664	34,369
Row percentage			
Metropolitan	2.3	97.7	100.0
North	1.1	98.9	100.0
South	2.4	97.6	100.0
East	3.3	96.7	100.0
Country	15.1	84.9	100.0
Goldfields	14.7	85.3	100.0
Great Southern	5.4	94.6	100.0
Kimberley	57.9	42.1	100.0
Midwest	21.0	79.0	100.0
Pilbara	22.2	77.8	100.0
Southwest	2.8	97.2	100.0
Wheatbelt	10.5	89.5	100.0
Total	5.0	95.0	100.0
Column percentage			
Metropolitan	36.8	81.5	79.3
North	5.8	27.9	26.8
South	11.6	24.3	23.6
East	19.4	29.3	28.8
Country	63.2	18.5	20.7
Goldfields	7.9	2.4	2.8
Great Southern	2.2	2.0	2.0
Kimberley	21.8	0.8	1.9
Midwest	10.6	2.1	2.6
Pilbara	11.6	2.1	2.8
Southwest	3.6	6.7	6.5
Wheatbelt	5.6	2.5	2.8
Total	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 68 women who were recorded with 'other' for region of residence

4.3. Care during pregnancy

4.3.1. Gestation at first visit

Gestational age at first antenatal care visit was not provided for 5.0 per cent of women who gave birth in 2015. This proportion decreased from 10.0 per cent in 2011.

Overall, more than half the women in WA attended their first antenatal care visit in the first trimester (62.8 per cent).

For Aboriginal women who gave birth in 2015, half commenced antenatal care in the first trimester (50.8 per cent). This was lower than the proportion of non-Aboriginal women who commenced antenatal care in the first trimester (63.4 per cent). Aboriginal women were ten times more likely not to attend antenatal care (Table 32).

Table 32: Gestation at first antenatal care visit and Aboriginal status of women who gave birth in WA, 2015

Aboriginal Status	Gestational Age Groups (weeks)					Total
	1-12	13-24	>24	Did not Attend	Undetermined	
Number						
Aboriginal	869	505	251	19	66	1,710
non-Aboriginal	20,786	7,779	2,527	31	1,649	32,772
Total	21,655	8,284	2,778	50	1,715	34,482
Percentage						
Aboriginal	50.8	29.5	14.7	1.1	3.9	100.0
non-Aboriginal	63.4	23.7	7.7	0.1	5.0	100.0
Total	62.8	24.0	8.1	0.1	5.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

4.3.2. Gestation at first visit by health region

For Aboriginal women, the Kimberley and Southwest health regions had the highest attendance of antenatal care in the first trimester (68.8 per cent and 64.5 per cent respectively). The Goldfields had the lowest proportion of 34.1 per cent. Kimberley, South West, Great Southern and the Midwest regions achieved higher than the average of 51.0 per cent for Aboriginal women.

For non-Aboriginal women the highest proportion attending antenatal care in the first trimester were for residents in the Kimberley (86.3 per cent) and Great Southern (84.6 per cent) health regions. The lowest first trimester attendance was in the Wheatbelt region and was 54.7 per cent (Table 33).

Table 33: Gestation at first antenatal care visit, Aboriginal status and health region of residence for women who gave birth in WA, 2015

Aboriginal Status	Health Regions	Gestational Age Groups (weeks)					Total
		1-12	13-24	>24	Did not Attend	Not Determ	
		%	%	%	%	%	
Aboriginal	North Metro	38.4	28.3	28.3	1.0	4.0	100.0
	South Metro	45.5	32.3	11.1	2.5	8.6	100.0
	East Metro	43.0	37.9	16.7	2.4	-	100.0
	Goldfields	34.1	25.9	12.6	-	27.4	100.0
	Great Southern	59.5	29.7	10.8	-	-	100.0
	Kimberley	68.8	21.5	9.4	-	0.3	100.0
	Midwest	55.6	28.3	13.9	0.6	1.7	100.0
	Pilbara	50.8	27.9	19.8	1.0	0.5	100.0
	Southwest	64.5	21.0	12.9	1.6	-	100.0
	Wheatbelt	36.8	42.1	16.8	1.1	3.2	100.0
Aboriginal Total		51.0	29.4	14.6	1.1	3.9	100.0
non-Aboriginal	North Metro	59.3	27.6	11.6	0.1	1.5	100.0
	South Metro	61.0	25.3	5.2	0.1	8.3	100.0
	East Metro	66.0	24.6	7.3	0.1	2.0	100.0
	Goldfields	66.1	10.6	3.7	-	19.6	100.0
	Great Southern	84.6	11.3	2.5	0.3	1.4	100.0
	Kimberley	86.3	10.0	3.0	-	0.7	100.0
	Midwest	69.5	18.2	5.0	-	7.2	100.0
	Pilbara	58.7	27.7	11.7	-	1.9	100.0
	Southwest	72.0	6.7	2.4	0.1	18.7	100.0
	Wheatbelt	54.7	28.8	13.1	-	3.4	100.0
non-Aboriginal Total		63.5	23.7	7.6	0.1	5.0	100.0
Total		62.9	24.0	8.0	0.1	5.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

4.4. Previous pregnancies

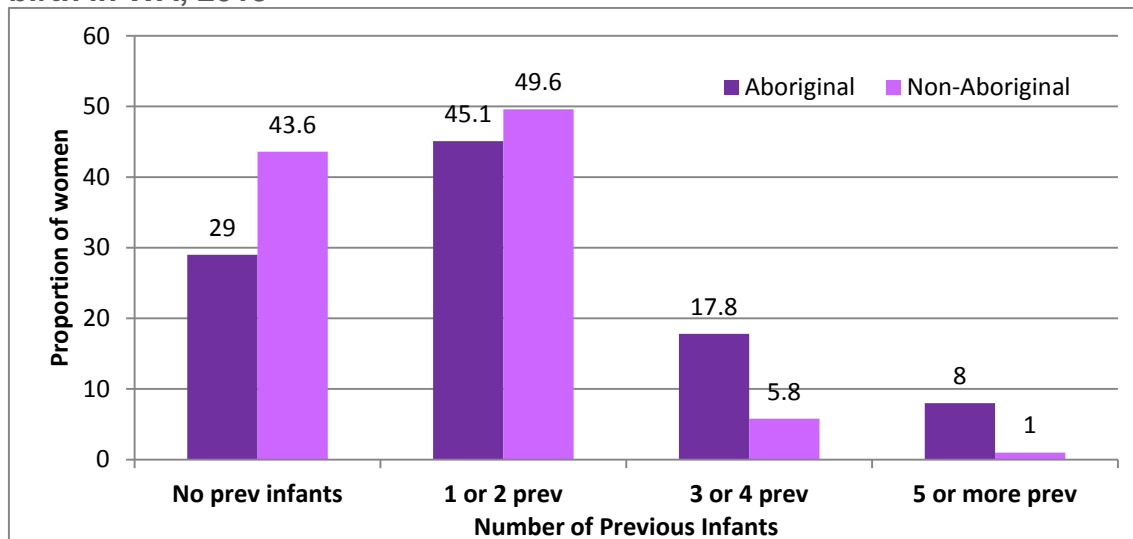
In 2015, the proportion of Aboriginal women who gave birth to their first infant (29.0 per cent) was lower than for non-Aboriginal women (43.6 per cent). There was a higher proportion of Aboriginal women who gave birth to their third or higher number child than the proportion of non-Aboriginal women (Table 34, Figure 14).

Table 34: Number of previous infants and Aboriginal status of women who gave birth in WA, 2015

Number previous infants	Aboriginal status of mother				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Nil	496	29.0	14,301	43.6	14,797	42.9
One or two	772	45.1	16,239	49.6	17,011	49.3
Three or four	305	17.8	1,899	5.8	2,204	6.4
Five or more	137	8.0	333	1.0	470	1.4
Total	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Figure 14: Number of previous infants and Aboriginal status of women who gave birth in WA, 2015



The proportions of Aboriginal women who had given birth previously and had a history of a stillborn infant (4.3 per cent) or an infant who died following birth (2.2 per cent) or had either or both (6.1 per cent) were twice that of non-Aboriginal women (2.0, 1.0 and 2.9 per cent respectively) (Table 35).

Table 35: Number of previous infants who died and Aboriginal status of women who gave birth in WA, 2015

Previous stillbirth or death	Aboriginal status of mother				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Previous stillborn infants						
None	1,162	95.7	18,105	98.0	19,267	97.9
One or more	52	4.3	366	2.0	418	2.1
Previous infants that died						
None	1,187	97.8	18,283	99.0	19,470	98.9
One or more	27	2.2	188	1.0	215	1.1
Previous stillbirth or infant that died						
None	1,140	93.9	17,929	97.1	19,069	96.9
One or more	74	6.1	542	2.9	616	3.1
Total with previous infants	1,214	100.0	18,471	100.0	19,685	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 14,797 women (496 Aboriginal) without previous infants.

4.5. Smoking tobacco during pregnancy

Smoking tobacco during pregnancy is associated with low birth weight, preterm birth, and perinatal death.

Overall 9.7 per cent of women who gave birth in 2015 smoked tobacco during pregnancy, down from 10.3 per cent in 2014.

Almost half the Aboriginal women smoked tobacco during pregnancy (48.6 per cent), compared to 7.7 per cent of non-Aboriginal women (Table 36).

Table 36: Tobacco smoking and Aboriginal status of women who gave birth in WA, 2015

Aboriginal status	Smoking in pregnancy				Total	
	Smoking		Non-smoking		No.	%
	No.	%	No.	%		
Aboriginal	831	48.6	879	51.4	1,710	100.0
non-Aboriginal	2,515	7.7	30,257	92.3	32,772	100.0
Total	3,346	9.7	31,136	90.3	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Tobacco smoking proportions were highest in women who resided in country health regions. For these rural women, smoking proportions ranged from 13.0 per cent in the Southwest to 36.7 per cent in the Kimberley. Tobacco smoking during pregnancy for metropolitan women was 5.0 per cent in North Metro, 6.9 per cent in East Metro and 8.6 per cent in South Metro.

Aboriginal women with the highest tobacco smoking during pregnancy resided in the Kimberley health region (57.8 per cent). Great Southern health region had the lowest proportion of Aboriginal women smoking tobacco during pregnancy (37.8 per cent) (Table 37).

Table 37: Tobacco smoking numbers and rates, health region of residence and Aboriginal status of women who gave birth in WA, 2015

Place of residence	Maternal Aboriginal Status		Total
	Aboriginal	non-Aboriginal	
Numbers			
Metro	293	1,802	2,095
North Metro	46	458	504
South Metro	87	680	767
East Metro	160	664	824
Country	535	712	1,247
Goldfields	69	105	174
Great Southern	14	97	111
Kimberley	215	21	236
Midwest	85	65	150
Pilbara	76	46	122
Southwest	32	258	290
Wheatbelt	44	120	164
Total	828	2,514	3,342
Rates			
Metro	46.7	6.8	7.7
North Metro	46.5	5.0	5.5
South Metro	43.9	8.6	9.4
East Metro	48.5	6.9	8.3
Country	49.6	11.8	17.5
Goldfields	51.1	13.4	19.0
Great Southern	37.8	15.0	16.2
Kimberley	57.8	7.8	36.8
Midwest	47.2	9.6	17.5
Pilbara	38.6	6.7	13.8
Southwest	51.6	11.9	13.0
Wheatbelt	46.3	14.8	18.1
Total	48.6	7.7	9.7

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 4 women who smoked tobacco and did not reside in WA.

Rates represent the proportion of mothers in the designated region and of the specified Aboriginal status who smoked in pregnancy.

Eight hundred and fifty seven Aboriginal women did not smoke at all during pregnancy (50.1 per cent). Of the 818 who smoked in the first 20 weeks of pregnancy, 81 (9.9 per cent) stopped smoking after 20 weeks of pregnancy and 100 (12.2 per cent) reduced their smoking after 20 weeks of pregnancy. Some did not change the number of cigarettes smoked (615 or 75.2 per cent) during pregnancy and 2.7 per cent increased the number of cigarettes smoked (Table 38). A further 12 women who did not smoke in first 20 weeks of pregnancy were smoking tobacco after 20 weeks of pregnancy (Table 38).

Table 38: Change in tobacco smoking during pregnancy by Aboriginal women who gave birth in WA, 2015

After 20 weeks of pregnancy	Average number of cigarettes smoked per day First 20 weeks of pregnancy							Total
	Not reported	Did not smoke	Occass	<10	10 to 19	20 to 29	≥ 30	
Not reported	21	1	-	-	-	-	-	22
Did not smoke	-	857	-	55	21	5	-	938
Occasional	-	-	2	-	-	-	-	2
<10	-	10	-	375	67	9	2	463
10 to 19	1	1	-	15	186	15	3	221
20 to 29	-	-	-	3	3	46	4	56
30 or more	-	1	-	1	-	-	6	8
Total	22	870	2	449	277	75	15	1,710

Extracted from Midwives' Notification System on 3 January 2019.

Green highlight indicates decreased or nil smoking during pregnancy.

Orange highlight indicates no change in smoking during pregnancy.

Red highlight indicates increased smoking during pregnancy.

4.6. Complications of pregnancy

In women who gave birth in 2015 in WA the proportion with no complications of pregnancy were somewhat similar for Aboriginal (65.2 per cent) and non-Aboriginal (70.1 per cent) women.

However, compared to non-Aboriginal women, higher proportions of Aboriginal women had threatened preterm labour (4.9 versus 2.4 per cent), urinary tract infection (7.5 versus 2.2 per cent), placental abruption (0.3 versus 0.2 per cent), and prelabour rupture of membranes (5.8 versus 3.4 per cent).

The proportion of Aboriginal women with gestational diabetes (7.3 per cent) was slightly lower than for non-Aboriginal women (8.8 per cent) (Table 39) however the proportion of Aboriginal women with Type 2 Diabetes was higher (3.2 versus 0.4 per cent) (Table 40).

Table 39: Complications of pregnancy and Aboriginal status of women who gave birth in WA, 2015

Complications of pregnancy ²⁹	Aboriginal status				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Threatened miscarriage	6	0.4	464	1.4	470	1.4
Threatened preterm labour	83	4.9	777	2.4	860	2.5
Urinary tract infection	128	7.5	706	2.2	834	2.4
Pre-eclampsia	36	2.1	608	1.9	644	1.9
Antepartum haemorrhage						
— placenta praevia	3	0.2	118	0.4	121	0.4
— abruption	5	0.3	76	0.2	81	0.2
— other	35	2.0	719	2.2	754	2.2
Prelabour rupture of membranes	99	5.8	1,117	3.4	1,216	3.5
Gestational diabetes	124	7.3	2,888	8.8	3,012	8.7
Gestational hypertension	35	2.0	656	2.0	691	2.0
Pre-eclampsia superimposed on essential hypertension	6	0.4	75	0.2	81	0.2
Other	204	11.9	3,731	11.4	3,935	11.4
One or more complications	595	34.8	9,806	29.9	10,401	30.2
No complications of pregnancy	1,115	65.2	22,966	70.1	24,081	69.8
Total Women	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

²⁹ A woman may have more than one complication during pregnancy.

4.7. Medical conditions before pregnancy

Three in seven women (42.3 per cent) of all women who gave birth in 2015, had one or more pre-existing medical conditions. For Aboriginal women, the proportion (56.3 per cent) was higher than for non-Aboriginal women (41.6 per cent). This difference was almost entirely due to higher proportions of Aboriginal women with pre-existing diabetes and other conditions.

For most other specified conditions, a slightly higher proportion of Aboriginal women than non-Aboriginal women had the condition (Table 40) with genital herpes being the main exception.

Table 40: Pre-existing medical conditions and Aboriginal status of women who gave birth in WA, 2015

Medical Conditions before Pregnancy ³⁰	Aboriginal Status				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%	No.	%
Essential hypertension	14	0.8	285	0.9	299	0.9
Pre-existing diabetes	55	3.2	230	0.7	285	0.8
Type 1 Diabetes	2	0.1	98	0.3	100	0.3
Type 2 Diabetes	53	3.2	132	0.4	185	0.5
Asthma	158	9.2	2,933	8.9	3,091	9.0
Genital herpes	17	1.0	555	1.7	572	1.7
Other	877	51.3	11,180	34.1	12,057	35.0
One or more conditions	963	56.3	13,627	41.6	14,590	42.3
No medical conditions	747	43.7	19,145	58.4	19,892	57.7
Total Women	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019

³⁰ A woman may have more than one pre-existing medical condition

4.8. Procedures and treatments

Of all women who gave birth in 2015, 95.7 per cent had one or more of the listed procedures and treatments. For Aboriginal women, the proportion (98.6 per cent) was similar to non-Aboriginal women (95.5 per cent).

Table 41: Procedures, treatments and Aboriginal status of women who gave birth in WA, 2015

Procedures and Treatments ³¹	Aboriginal Status				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Fertility treatments	4	0.2	1,095	3.3	1,099	3.2
Cervical suture	11	0.6	116	0.4	127	0.4
CVS (placental biopsy)	2	0.1	98	0.3	100	0.3
Amniocentesis	20	1.2	458	1.4	478	1.4
Ultrasound	1,662	97.2	30,529	93.2	32,191	93.4
CTG antepartum	417	24.4	7,257	22.1	7,674	22.3
CTG intrapartum	1,078	63.0	16,835	51.4	17,913	51.9
One or more procedures	1,686	98.6	31,297	95.5	32,983	95.7
No procedures	24	1.4	1,475	4.5	1,499	4.3
Total Women	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

4.9. Labour and birth details

4.9.1. Onset of labour

Labour established spontaneously for 60.1 per cent of Aboriginal women who gave birth in WA in 2015, a higher proportion than for non-Aboriginal women (48.0 per cent). A lower proportion of Aboriginal women (16.1 per cent) to non-Aboriginal women (17.6 per cent) had spontaneous labour augmented. Labour did not occur (13.9 per cent) or was induced (26.0 per cent) for a lower proportion of Aboriginal women than for non-Aboriginal women (21.7 and 30.3 percent respectively) (Table 42).

Table 42: Onset of labour and Aboriginal status of women who gave birth in WA, 2015

Onset of labour	Aboriginal status				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Spontaneous	1,028	60.1	15,726	48.0	16,754	48.6
<i>Augmentation</i>	275	16.1	5,763	17.6	6,038	17.5
<i>No Augmentation</i>	753	44.0	9,963	30.4	10,716	31.1
Induced	445	26.0	9,927	30.3	10,372	30.1
No labour	237	13.9	7,119	21.7	7,356	21.3
Total	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Augmentation percent presented as a proportion of women with spontaneous labour.

³¹ A woman may have more than one treatment or procedure during the pregnancy

4.9.2. Place of birth

The place of birth of the largest proportion of Aboriginal women was at tertiary maternity services (25.9 per cent) and maternity services in the Kimberley (20.9 per cent). Half the Aboriginal women (52.1 per cent) gave birth in country regions compared to one in seven non-Aboriginal women (14.4 per cent) (Table 43).

Table 43: Place of birth, Aboriginal status of women who gave birth in WA, 2015

Place of birth	Aboriginal status		Total
	Aboriginal	non-Aboriginal	
Number			
Private Homebirth	-	92	92
Public Homebirth			
Metro	819	27,957	28,776
Private Metro	4	7,800	7,804
Private site with Public	76	5,141	5,217
Public Homebirth	1	129	130
Birth Centres	2	410	412
Tertiary	443	6,957	7,400
North Metro	35	1,505	1,540
South Metro	48	1,740	1,788
East Metro	210	4,275	4,485
Country	891	4,723	5,613
Private Country	3	800	803
Goldfields	119	684	803
Great Southern	24	530	554
Kimberley	357	240	597
Midwest	147	353	500
Pilbara	162	489	651
Southwest	60	1,484	1,544
Wheatbelt	18	143	161
Home Birth	1	-	1
Total	1,710	32,772	34,482
Row percentage			
Private Homebirth	-	100.0	100.0
Metro	2.8	97.2	100.0
Private Metro	0.1	99.9	100.0
Private site with Public	1.5	98.5	100.0
Public Homebirth	0.8	99.2	100.0
Birth Centres	0.5	99.5	100.0
Tertiary	6.0	94.0	100.0
North Metro	2.3	97.7	100.0
South Metro	2.7	97.3	100.0
East Metro	4.7	95.3	100.0
Country	15.9	84.1	100.0
Private Country	0.4	99.6	100.0
Goldfields	14.8	85.2	100.0
Great Southern	4.3	95.7	100.0
Kimberley	59.8	40.2	100.0
Midwest	29.4	70.6	100.0
Pilbara	24.9	75.1	100.0

Western Australia's Mothers and Babies, 2015, 33rd Annual Report

Place of birth	Aboriginal status		Total
	Aboriginal	non-Aboriginal	
Southwest	3.9	96.1	100.0
Wheatbelt	11.2	88.8	100.0
Homebirth	100.0	-	100.0
Total	5.0	95.0	100.0
Column percentage			
Private Homebirth	-	0.3	0.3
Metro	47.9	85.3	83.5
Private Metro	0.2	23.8	22.6
Private site with Public	4.4	15.7	15.1
Public Homebirth	0.1	0.4	0.4
Birth Centres	0.1	1.3	1.2
Tertiary	25.9	21.2	21.5
North Metro	2.0	4.6	4.5
South Metro	2.8	5.3	5.2
East Metro	12.3	13.0	13.0
Country	52.1	14.4	16.3
Private Country	0.2	2.4	2.3
Goldfields	7.0	2.1	2.3
Great Southern	1.4	1.6	1.6
Kimberley	20.9	0.7	1.7
Midwest	8.6	1.1	1.5
Pilbara	9.5	1.5	1.9
Southwest	3.5	4.5	4.5
Wheatbelt	1.1	0.4	0.5
Homebirth	0.1	-	0.0
Total	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

4.9.3. Method of birth

A higher proportion of Aboriginal women had spontaneous vertex (67.0 per cent) and breech births (0.7 per cent) than did non-Aboriginal women (48.5 and 0.4 per cent).

Aboriginal women had a lower caesarean section rate (25.3 per cent) compared to non-Aboriginal women (35.4 per cent). Elective caesareans for Aboriginal women (9.7 per cent) were half the proportion for non-Aboriginal women (18.1 per cent) (Table 44).

Table 44: Method of birth, Aboriginal status for women who gave birth in WA, 2015

Method of birth of first infant	Aboriginal status				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Spontaneous	1,145	67.0	15,909	48.5	17,054	49.5
Breech	12	0.7	122	0.4	134	0.4
Vacuum	92	5.4	3,962	12.1	4,054	11.8
Forceps	29	1.7	1,163	3.5	1,192	3.5
Elective Caesarean	166	9.7	5,943	18.1	6,109	17.7
Emergency Caesarean	266	15.6	5,673	17.3	5,939	17.2
Total	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Method of birth reported is that for the only or first infant of the pregnancy.

4.9.4. Complications of labour and birth

Precipitate delivery occurred twice as often for Aboriginal women (11.2 per cent) as for non-Aboriginal women (5.3 per cent). Prolapsed cord was more frequent for Aboriginal women (0.3 versus 0.1 per cent) and cephalopelvic disproportion was less frequent (0.4 versus 0.7 per cent) (Table 45).

Table 45: Complications of labour and birth and Aboriginal status of women who gave birth in WA, 2015

Complications of labour or birth ³²	Aboriginal status				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Precipitate delivery	192	11.2	1,721	5.3	1,913	5.5
Fetal compromise	187	10.9	4,324	13.2	4,511	13.1
Prolapsed cord	5	0.3	45	0.1	50	0.1
Cord tight around neck	22	1.3	631	1.9	653	1.9
Cephalopelvic disproportion	6	0.4	223	0.7	229	0.7
Primary Postpartum Haemorrhage (PPH) ³³	456	26.7	8,042	24.5	8,498	24.6
Retained placenta manual removal	28	1.6	363	1.1	391	1.1
Persistent occipito posterior	22	1.3	526	1.6	548	1.6
Shoulder dystocia	32	1.9	559	1.7	591	1.7
Failure to progress ≤3cms	130	7.6	2,262	6.9	2,392	6.9
Failure to progress >3cms	75	4.4	1,669	5.1	1,744	5.1
Previous caesarean section	286	16.7	5,369	16.4	5,655	16.4
Other	538	31.5	8,309	25.4	8,847	25.7
One or more complications	1,061	64.0	19,346	59.0	20,407	59.2
No complications	649	38.0	13,426	41.0	14,075	40.8
Total Women	1,710	100.0	32,772	100.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

³² A woman may have had more than one pre-existing medical condition

³³ From July 1st 2014, data was collected under Postnatal blood loss in mLs

4.10. Infants born to Aboriginal women

In 2015, there were 1,743 infants born to Aboriginal mothers of which 99.3 per cent of were born alive.

The proportion of stillborn infants for Aboriginal women (0.7 per cent) was comparable to the proportion of stillborn infants that occurred for non-Aboriginal women (0.6 per cent).

For stillbirths where death occurred during labour, the proportion was less for Aboriginal women (8.3 per cent) than for non-Aboriginal women (31.1 per cent) (Table 46).

Table 46: Birth status and maternal Aboriginal status for infants born in WA, 2015

Birth status	Maternal Aboriginal status				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
Liveborn	1,731	99.3	33,026	99.4	34,757	99.4
Stillborn	12	0.7	212	0.6	224	0.6
Total	1,743	100.0	33,238	100.0	34,981	100.0
Time of death						
Antenatal	11	91.7	127	59.9	138	61.6
Intrapartum	1	8.3	66	31.1	67	29.9
Unspecified time	-	-	19	9.0	19	8.5
Total	12	100.0	212	100.0	224	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Births of infants reported by public establishments are never reported as unspecified time of death. For these cases, unknown time of fetal death was reported as antenatal death.

4.11. Regions of residence

The East Metropolitan region was the area of residence of the highest proportion of infants of non-Aboriginal women (29.2 per cent) while the Country regions had the highest proportion of infants born to Aboriginal women residents (63.1 per cent).

Aboriginal women living in the South Metropolitan region had the highest proportion of stillbirths (1.5 per cent). Proportions of infants that were stillborn were similar for Aboriginal and non-Aboriginal women who resided in Country regions (0.4 per cent and 0.5 per cent respectively). The highest proportion of stillbirths for non-Aboriginal women was for those residing in the Metropolitan regions (0.7 per cent) (Table 47).

Table 47: Birth status, maternal residence and maternal Aboriginal status for infants born in WA, 2015

Health Region maternal residence	Maternal Aboriginal status						Total
	Aboriginal			non-Aboriginal			
	Livebirth	Stillbirth	Total	Livebirth	Stillbirth	Total	
Number							
North Metropolitan	103	1	104	9,206	62	9,268	9,372
South Metropolitan	198	3	201	7,984	56	8,040	8,241
East Metropolitan	335	1	336	9,619	64	9,683	10,019
Country	1,090	7	1,097	6,107	30	6,137	7,234
Total	1,726	12	1,738	32,916	212	33,128	34,866
Row percentage							
North Metropolitan	99.0	1.0	100.0	99.3	0.7	100.0	
South Metropolitan	98.5	1.5	100.0	99.3	0.7	100.0	
East Metropolitan	99.7	0.3	100.0	99.3	0.7	100.0	
Country	99.3	0.4	100.0	99.5	0.5	100.0	
Total	99.3	0.7	100.0	99.4	0.6	100.0	
Column percentage							
North Metropolitan	6.0	8.3	6.0	28.0	29.2	28.0	26.9
South Metropolitan	11.5	25.0	11.6	24.3	26.4	24.3	23.6
East Metropolitan	19.4	8.3	19.3	29.2	30.2	29.2	28.7
Country	63.2	58.3	63.1	18.6	14.2	20.7	20.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 68 infants where mother was not resident in WA.

To avoid a large number of cell values <5 being suppressed the country regions have been aggregated.

4.11.1. Crude birth rate

The crude birth rate for infants of Aboriginal women in WA in 2015 was 18.4 per 1,000. This rate was the lowest since the series began in 1983. The figure peaked at 31.0 in 1990 (Table 48).

Table 48: Crude birth rate for infants of Aboriginal women born in WA, 1983-2015

Year	Birth status				Total		Aboriginal population ³⁴	Crude birth rate ³⁵
	Livebirth		Stillbirth		No.	%		
	No.	%	No.	%	No.	%		
1983	1,135	98.6	16	1.4	1,151	100.0	41,011	28.1
1984	1,179	98.0	24	2.0	1,203	100.0	42,259	28.5
1985	1,235	98.4	20	1.6	1,255	100.0	43,491	28.9
1986	1,231	98.4	20	1.6	1,251	100.0	44,760	27.9
1987	1,329	98.6	19	1.4	1,348	100.0	46,098	29.2
1988	1,428	98.6	21	1.4	1,449	100.0	47,461	30.5
1989	1,431	98.4	23	1.6	1,454	100.0	48,878	29.7
1990	1,542	98.9	17	1.1	1,559	100.0	50,306	31.0
1991	1,464	98.5	22	1.5	1,486	100.0	51,834	28.7
1992	1,412	98.5	22	1.5	1,434	100.0	53,263	26.9
1993	1,436	98.6	20	1.4	1,456	100.0	54,650	26.6
1994	1,431	98.4	24	1.6	1,455	100.0	56,072	25.9
1995	1,444	98.6	20	1.4	1,464	100.0	57,511	25.5
1996	1,426	98.6	20	1.4	1,446	100.0	59,001	24.5
1997	1,549	97.9	33	2.1	1,582	100.0	60,369	26.2
1998	1,506	99.0	15	1.0	1,521	100.0	61,712	24.6
1999	1,603	98.6	22	1.4	1,625	100.0	63,199	25.7
2000	1,587	98.3	27	1.7	1,614	100.0	64,557	25.0
2001	1,632	98.9	18	1.1	1,650	100.0	71,572	23.1
2002	1,646	98.4	27	1.6	1,673	100.0	73,038	22.9
2003	1,525	98.4	25	1.6	1,550	100.0	74,791	20.7
2004	1,559	98.9	17	1.1	1,576	100.0	76,982	20.5
2005	1,697	98.6	24	1.4	1,721	100.0	78,824	21.8
2006	1,780	98.5	27	1.5	1,807	100.0	80,270	22.5
2007	1,810	99.0	19	1.0	1,829	100.0	81,624	22.4
2008	1,715	98.7	23	1.3	1,738	100.0	83,464	20.8
2009	1,740	98.7	23	1.3	1,763	100.0	85,595	20.6
2010	1,677	98.6	23	1.4	1,700	100.0	87,282	19.5
2011	1,706	98.0	34	2.0	1,740	100.0	88,270	19.7
2012	1,629	98.3	28	1.7	1,657	100.0	89,365	18.5
2013	1,734	98.7	23	1.3	1,757	100.0	90,526	19.2
2014	1,776	98.5	27	1.5	1,803	100.0	92,879	19.4
2015	1,731	99.3	12	0.7	1,743	100.0	94,236	18.4

Data Extracted from Midwives' Notification System on 3 January 2019.

Trend table begins in 1983 as population data not available for 1980 to 1982.

Aboriginal population data retrieved from Epidemiology Population Calculator and crude birth rate published in previous reports have been amended in this report with updated population data.

³⁴ Source of population data: ABS Estimated Resident Populations for WA.

³⁵ Crude birth rate was determined by the calculation: 1,000 times total infants born alive divided by mid-year total population for the geographical area.

4.11.2. Birthweight and gestational age

Preterm birth (less than 37 weeks gestation) is associated with significant morbidity and mortality in newborn infants.

In 2015, preterm birth occurred for 14.6 per cent of all infants born to Aboriginal women, a reduction from 14.9 per cent in 2014. Similarly, low birthweight (less than 2,500 grams) occurred in 14.1 per cent of infants born to Aboriginal women, a small increase from 13.9 per cent in 2014 (Table 49).

Table 49: Gestational age and birthweight for infants of Aboriginal women in WA, 2015

Birthweight (grams)	Gestation (weeks)				Total
	20-27	28-32	33-36	37-44	
Row percentage					
< 1000	77.3	22.7	-	-	100.0
1000-1499	21.4	71.4	7.1	-	100.0
1500-1999	-	22.2	66.7	11.1	100.0
2000-2499	-	3.8	46.3	50.0	100.0
< 2500	9.3	15.9	40.7	34.1	100.0
2500-2999	-	-	16.6	83.4	100.0
3000-3499	-	-	3.9	96.1	100.0
3500-3999	-	-	1.5	98.5	100.0
4000-4499	-	-	2.7	97.3	100.0
>= 4500	-	-	-	100.0	100.0
Total	1.3	2.2	11.1	85.3	100.0
Column percentage					
< 1000	73.9	12.8	-	-	1.3
1000-1499	26.1	51.3	1.0	-	1.6
1500-1999	-	20.5	12.4	0.3	2.1
2000-2499	-	15.4	38.1	5.4	9.2
< 2500	100.0	100.0	51.5	5.7	14.1
2500-2999	-	-	32.0	21.0	21.5
3000-3499	-	-	11.9	38.4	34.1
3500-3999	-	-	3.1	26.2	22.7
4000-4499	-	-	1.5	7.4	6.5
>= 4500	-	-	-	1.3	1.1
Total	100.0	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

4.11.3. Birthweight

Infants of Aboriginal women were more than twice as likely to have low birthweight as infants of non-Aboriginal women (14.1 versus 6.3 per cent).

Infants of Aboriginal women had the similar proportion with birthweight of 4,500 grams or more as infants of non-Aboriginal women (1.1 and 1.2 percent respectively) (Table 50).

Table 50: Birthweight and maternal Aboriginal status for infants born in WA, 2015

Birthweight (grams)	Aboriginal status of mother				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
<1000	22	1.3	234	0.7	256	0.7
1000-1499	28	1.6	163	0.5	191	0.5
1500-1999	36	2.1	403	1.2	439	1.3
2000-2499	160	9.2	1,306	3.9	1,466	4.2
< 2500	246	14.1	2,106	6.3	2,352	6.7
2500-2999	374	21.5	5,427	16.3	5,801	16.6
3000-3499	594	34.1	12,607	37.9	13,201	37.7
3500-3999	395	22.7	9,834	29.6	10,229	29.2
4000-4499	113	6.5	2,859	8.6	2,972	8.5
≥ 4500	20	1.1	399	1.2	419	1.2
Total	1,742	100.0	33,232	100.0	34,974	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 2 infants where birthweight not reported.

The mean and median weights of infants of Aboriginal women were about 200 grams less than those for non-Aboriginal women (Table 51).

Table 51: Birthweight statistics for all infants born in WA, 2015

Infants	Birthweight (grams)		
	Mean	Standard deviation	Median
Of Aboriginal women	3,152.3	668.8	3,200
Of non-Aboriginal women	3,345.1	550.1	3,374
All infants	3,335.5	558.1	3,365

Extracted from Midwives' Notification System on 3 January 2019

Annually, the proportion of infants who had low birthweight born to Aboriginal women ranged between 11.0 per cent in 1987 and 16.5 per cent in 2005. In 2015 the proportion was 14.4 per cent (Table 52).

Table 52: Birthweight by maternal Aboriginal status for infants born in WA, 1980-2015

Year	Aboriginal status of woman											
	Aboriginal						non-Aboriginal					
	< 1500 grams		< 2500 grams		≥ 2500 grams		< 1500 grams		< 2500 grams		≥ 2500 grams	
No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
1980	15	1.4	133	12.8	905	87.2	265	1.3	1,116	5.6	18,651	94.4
1981	24	2.1	146	13.1	972	86.9	239	1.1	1,175	5.6	19,928	94.4
1982	35	3.1	150	13.3	982	86.7	251	1.2	1,197	5.6	20,062	94.4
1983	22	1.9	153	13.3	998	86.7	299	1.4	1,355	6.2	20,566	93.8
1984	43	3.6	166	13.8	1,037	86.2	271	1.2	1,264	5.8	20,496	94.2
1985	47	3.7	176	14.0	1,079	86.0	318	1.4	1,351	6.1	20,751	93.9
1986	32	2.6	151	12.1	1,099	87.9	305	1.3	1,329	5.9	21,308	94.1
1987	31	2.3	148	11.0	1,200	89.0	311	1.4	1,405	6.1	21,453	93.9
1988	44	3.0	197	13.6	1,252	86.4	340	1.4	1,420	6.0	22,289	94.0
1989	40	2.8	163	11.2	1,291	88.8	356	1.5	1,573	6.5	22,516	93.5
1990	34	2.2	177	11.4	1,382	88.6	280	1.1	1,457	6.0	23,003	94.0
1991	48	3.2	220	14.8	1,266	85.2	311	1.3	1,405	6.0	22,117	94.0
1992	33	2.3	169	11.8	1,265	88.2	309	1.3	1,481	6.2	22,408	93.8
1993	62	4.3	191	13.1	1,265	86.9	281	1.2	1,456	6.1	22,424	93.9
1994	47	3.2	206	14.2	1,249	85.8	348	1.5	1,441	6.0	22,529	94.0
1995	41	2.8	176	12.0	1,288	88.0	322	1.3	1,496	6.2	22,486	93.8
1996	39	2.7	198	13.7	1,247	86.3	349	1.4	1,542	6.4	22,597	93.6
1997	45	2.8	217	13.7	1,365	86.3	328	1.4	1,467	6.2	22,217	93.8
1998	44	2.9	192	12.6	1,329	87.4	320	1.3	1,538	6.4	22,619	93.6
1999	63	3.9	233	14.3	1,392	85.7	314	1.3	1,488	6.2	22,657	93.8
2000	62	3.8	232	14.4	1,382	85.6	337	1.4	1,521	6.4	22,093	93.6
2001	59	3.6	259	15.7	1,391	84.3	325	1.4	1,498	6.4	21,793	93.6
2002	55	3.3	238	14.2	1,435	85.8	297	1.3	1,431	6.2	21,680	93.8
2003	57	3.7	235	15.2	1,315	84.8	286	1.2	1,477	6.4	21,650	93.6
2004	54	3.4	235	14.9	1,340	85.1	357	1.5	1,586	6.6	22,370	93.4
2005	64	3.7	284	16.5	1,437	83.5	357	1.4	1,631	6.5	23,626	93.5
2006	71	3.9	269	14.9	1,538	85.1	381	1.4	1,726	6.4	25,133	93.6
2007	50	2.7	300	16.4	1,529	83.6	381	1.3	1,757	6.2	26,487	93.8
2008	60	3.5	278	16.0	1,460	84.0	398	1.4	1,775	6.1	27,155	93.9
2009	62	3.5	256	14.5	1,507	85.5	442	1.5	1,853	6.3	27,591	93.7
2010	56	3.3	238	14.0	1,462	86.0	389	1.3	1,825	6.2	27,732	93.8
2011	57	3.3	245	14.1	1,495	85.9	414	1.4	1,897	6.2	28,554	93.8
2012	65	3.9	260	15.7	1,397	84.3	415	1.3	1,986	6.2	30,216	93.8
2013	55	3.1	257	14.6	1,500	85.4	431	1.3	2,075	6.4	30,572	93.6
2014	57	3.2	250	13.9	1,553	86.1	449	1.3	2,207	6.6	31,196	93.4
2015	50	2.9	246	14.4	1,497	85.9	397	1.2	2,106	6.3	31,132	93.7

Extracted from Midwives' Notification System on 3 January 2019.

4.11.4. Low birthweight in liveborn infants

The proportion of liveborn infants of Aboriginal women with low birthweight (13.8 per cent) was more than twice the proportion of infants of non-Aboriginal women (5.8 per cent) (Table 53).

Table 53: Birthweight and maternal Aboriginal status for infants born alive in WA, 2015

Birthweight (grams)	Aboriginal status of woman				Total	
	Aboriginal		non-Aboriginal		No.	%
	No.	%	No.	%		
<1000	18	1.0	93	0.3	111	0.3
1000-1499	27	1.6	149	0.5	176	0.5
1500-1999	35	2.0	390	1.2	425	1.2
2000-2499	159	9.2	1,293	3.9	1,452	4.2
< 2500	239	13.8	1,925	5.8	2,164	6.2
2500-2999	372	21.5	5,412	16.4	5,784	16.6
3000-3499	592	34.2	12,597	38.1	13,189	37.9
3500-3999	394	22.8	9,830	29.8	10,224	29.4
4000-4499	113	6.5	2,858	8.7	2,971	8.5
≥ 4500	20	1.2	399	1.2	419	1.2
Total	1,730	100.0	33,021	100.0	34,751	100.0

Extracted from Midwives' Notification System on 3 January 2019.

The mean and median weights of liveborn infants of Aboriginal women were respectively 190 and 175 grams less than those for non-Aboriginal women (Table 54).

Table 54: Birthweight statistics for liveborn infants born in WA, 2015

Infants	Birthweight (grams)		
	Mean	Standard deviation	Median
Of Aboriginal women	3,156.5	665.5	3,202
Of non-Aboriginal women	3,346.0	555.2	3,375
All infants	3,336.4	562.9	3,370

Extracted from Midwives' Notification System on 3 January 2019

4.11.5. Low birthweight and place of residence

For infants liveborn to Aboriginal women living in metropolitan areas, the proportion that were low birthweight was 13.7 per cent compared with 13.9 per cent of those living in country areas. These proportions were more than double those occurring in infants born alive to non-Aboriginal women, 6.0 per cent and 4.9 per cent respectively.

The Goldfields and Southwest regions had the highest proportion of infants of Aboriginal women with low birthweight (18.7 and 17.7 per cent respectively) (Table 55).

Table 55: Low birthweight, maternal residence and maternal Aboriginal status for infants born alive in WA, 2015

Health region of maternal residence	Aboriginal status of woman					
	Aboriginal			non-Aboriginal		
	Low birthweight	Total	%	Low birthweight	Total	%
Metro	87	636	13.7	1,620	26,804	6.0
North Metro	15	103	14.6	584	9,206	6.4
South Metro	19	198	9.6	455	7,980	5.7
East Metro	53	335	15.8	581	9,618	6.0
Country	151	1,089	13.9	300	6,107	4.9
Goldfields	26	113	18.7	52	791	6.6
Great Southern	5	32	13.5	36	659	5.5
Kimberley	50	324	13.4	16	273	5.9
Midwest	20	162	11.0	26	676	3.8
Pilbara	23	175	11.6	22	694	3.2
Southwest	11	51	17.7	113	2,198	5.1
Wheatbelt	16	81	16.5	35	816	4.3
Total	238	1,725	13.8	1,920	32,911	5.8

Extracted from Midwives' Notification System on 3 January 2019.

Low birthweight is less than 2,500 grams.

115 liveborn infants, were excluded as their maternal residence was not within Western Australia.

5. Infants

5.1. Metrics of infants born

There were 34,981 infants born in WA in 2015. This was an decrease of 225 infants from the 35,206 infants born in 2014. Of the infants born in 2015, 99.4 per cent were born alive (Table 56).

5.1.1. Crude birth rate

Despite an increase in number of infants born, the crude birth rate generally declined from a high of 17.0 per 1,000 in 1981 to a low of 12.5 per 1,000 in 2003. Since an increase to 14.2 per 1,000 occurred in 2007, the rate has been generally decreasing and was down from 13.8 per 1,000 in 2014 to 13.4 in 2015. (Table 56 and Figure 15).

Table 56: Birth status and crude birth rate for infants born in WA, 1980-2015

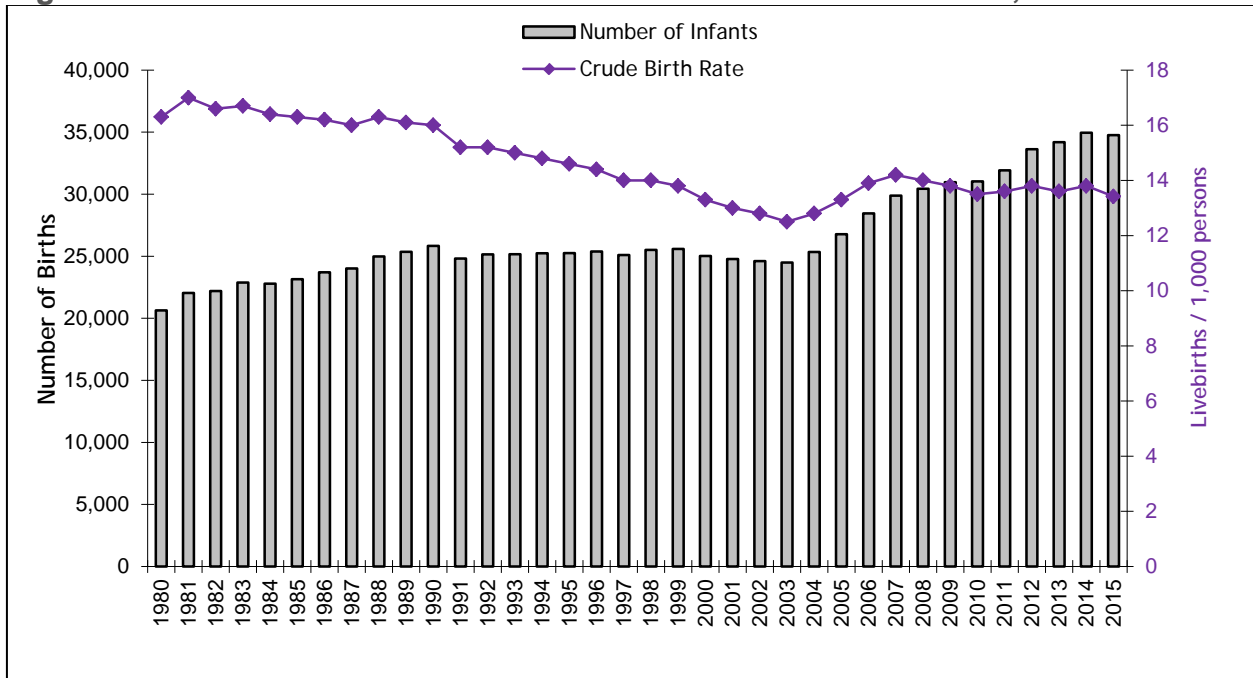
Year	Condition at birth				Total		Total population ³⁶	Crude birth rate ³⁷
	Live Birth		Stillbirth		No.	%		
	No.	%	No.	%	No.	%		
1980	20,636	99.1	178	0.9	20,814	100.0	1,269,068	16.3
1981	22,039	99.2	182	0.8	22,221	100.0	1,300,056	17.0
1982	22,196	99.1	195	0.9	22,391	100.0	1,338,899	16.6
1983	22,875	99.1	197	0.9	23,072	100.0	1,369,318	16.7
1984	22,795	99.3	168	0.7	22,963	100.0	1,391,539	16.4
1985	23,153	99.1	204	0.9	23,357	100.0	1,419,012	16.3
1986	23,703	99.2	185	0.8	23,888	100.0	1,459,247	16.2
1987	24,015	99.2	191	0.8	24,206	100.0	1,496,472	16.0
1988	24,981	99.3	177	0.7	25,158	100.0	1,535,449	16.3
1989	25,359	99.3	184	0.7	25,543	100.0	1,578,761	16.1
1990	25,844	99.3	175	0.7	26,019	100.0	1,613,447	16.0
1991	24,814	99.2	194	0.8	25,008	100.0	1,636,599	15.2
1992	25,158	99.3	165	0.7	25,323	100.0	1,658,609	15.2
1993	25,160	99.3	176	0.7	25,336	100.0	1,678,292	15.0
1994	25,237	99.3	188	0.7	25,425	100.0	1,703,503	14.8
1995	25,255	99.2	191	0.8	25,446	100.0	1,734,228	14.6
1996	25,386	99.2	199	0.8	25,585	100.0	1,765,635	14.4
1997	25,095	99.3	171	0.7	25,266	100.0	1,795,300	14.0
1998	25,514	99.4	164	0.6	25,678	100.0	1,822,891	14.0
1999	25,591	99.3	179	0.7	25,770	100.0	1,849,855	13.8
2000	25,022	99.2	206	0.8	25,228	100.0	1,874,518	13.3
2001	24,774	99.3	167	0.7	24,941	100.0	1,906,274	13.0
2002	24,609	99.3	175	0.7	24,784	100.0	1,928,512	12.8
2003	24,493	99.3	184	0.7	24,677	100.0	1,952,741	12.5
2004	25,341	99.3	188	0.7	25,529	100.0	1,979,542	12.8
2005	26,778	99.3	200	0.7	26,978	100.0	2,011,207	13.3
2006	28,456	99.3	209	0.7	28,665	100.0	2,050,581	13.9
2007	29,884	99.4	189	0.6	30,073	100.0	2,106,139	14.2
2008	30,443	99.3	225	0.7	30,668	100.0	2,171,700	14.0
2009	30,973	99.3	234	0.7	31,207	100.0	2,240,250	13.8
2010	31,039	99.3	218	0.7	31,257	100.0	2,290,845	13.5
2011	31,922	99.2	269	0.8	32,191	100.0	2,353,409	13.6
2012	33,625	99.3	237	0.7	33,862	100.0	2,432,409	13.8
2013	34,194	99.4	210	0.6	34,404	100.0	2,519,321	13.6
2014	34,957	99.3	249	0.7	35,206	100.0	2,557,046	13.8
2015	34,757	99.4	224	0.6	34,981	100.0	2,590,259	13.4

Data Extracted from Midwives' Notification System on 3 January 2019.

³⁶ Source of population data: ABS Estimated Resident Populations for WA.

³⁷ Crude birth rate is determined by the calculation: 1,000 times total infants born alive divided by mid-year total population for the geographical area.

Figure 15: Number of infants born alive and crude birth rate in WA, 1980-2015



Data Extracted from Midwives' Notification System on 3 January 2019.

5.1.2. Gestational age

Preterm birth (less than 37 weeks gestation) is associated with significant morbidity and mortality in newborn infants.

In 2015, preterm birth occurred for 8.7 per cent of all infants born. In preterm infants, 93.7 per cent were born alive, 2.1 per cent died during labour; and the remaining preterm infants (4.3 per cent) were stillborn with death occurring before onset of labour or at an unknown time.

For term infants, 99.9 per cent were born alive (Table 57).

Table 57: Gestational age and birth status for infants born in WA, 2015

Gestation (weeks)	Birth status			Total
	Livebirth	Stillbirth (before labour)	Stillbirth (during labour)	
Number				
20 to 27	117	76	62	255
28 to 32	362	25	-	387
33 to 36	2,371	29	1	2,402
Less than 37	2,850	130	63	3,043
37 or more	31,907	27	4	31,938
Total	34,757	157	67	34,981
Row percentage				
20 to 27	45.9	29.8	24.3	100.0
28 to 32	93.5	6.5	-	100.0
33 to 36	98.8	1.2	0.0	100.0
Less than 37	93.7	4.3	2.1	100.0
37 or more	99.9	0.1	0.0	100.0
Total	99.4	0.4	0.2	100.0
Column percentage				
20 to 27	0.3	48.4	92.5	0.7
28 to 32	1.0	15.9	-	1.1
33 to 36	6.8	18.5	1.5	6.9
Less than 37	8.2	82.8	94.0	8.7
37 or more	91.8	17.2	6.0	91.3
Total	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Infants where timing of stillbirth was unspecified (19 infants) were included in "before labour" counts.

5.1.3. Gestational age, birthweight and plurality

Plurality influenced proportion of infants in gestational age and birthweight groups.

Among single infants, 6.9 per cent were born before 37 weeks gestation (preterm) and 5.2 per cent weighed less than 2,500 grams at birth. For term single infants, 1.8 per cent weighed less than 2,500 grams at birth (Table 58).

Table 58: Gestational age and birthweight for single infants born in WA, 2015

Birthweight (grams)	Gestation (weeks)								Total	
	20-27		28-32		33-36		≥37		No.	%
	No.	%	No.	%	No.	%	No.	%		
<1000	192	91.4	20	7.4	-	-	-	-	212	0.6
1000-1499	18	8.6	86	31.6	16	0.8	-	-	120	0.4
1500-1999	-	-	116	42.6	151	8.0	23	0.1	290	0.9
2000-2499	-	-	48	17.6	574	30.4	532	1.7	1,154	3.4
< 2500	210	100.0	270	99.3	741	39.3	555	1.8	1,776	5.2
2500-2999	-	-	2	0.7	739	39.2	4,754	15.0	5,495	16.2
3000-3499	-	-	-	-	315	16.7	12,790	40.4	13,105	38.6
3500-3999	-	-	-	-	69	3.7	10,154	32.1	10,223	30.1
4000-4499	-	-	-	-	18	1.0	2,953	9.3	2,971	8.7
≥ 4500	-	-	-	-	4	0.2	415	1.3	419	1.2
Total	210	100.0	272	100.0	1,886	100.0	31,621	100.0	33,989	100.0
Percent of total		0.6		0.8		5.5		93.0		100.0

Extracted from Midwives' Notification System on 3 January 2019.
Excludes 6 infants where birthweight was unknown.

Among infants from multiple births, 68.4 per cent were born preterm was and of these, 86.5 per cent weighed less than 2,500 grams at birth. For term multiple births, 25.0 per cent of infants weighed less than 2,500 grams (Table 59).

Table 59: Gestational age and birthweight for multiple birth infants born in WA, 2015

Birthweight (grams)	Gestation (weeks)								Total	
	20-27		28-32		33-36		37-44		No.	%
	No.	%	No.	%	No.	%	No.	%		
<1000	30	68.2	9	7.8	4	0.8	1	0.3	44	4.5
1000-1499	14	31.8	48	41.7	9	1.7	-	-	71	7.2
1500-1999	-	-	51	44.3	91	17.7	7	2.2	149	15.1
2000-2499	-	-	6	5.2	236	45.8	70	22.4	312	31.6
< 2500	44	100.0	114	99.1	340	66.0	78	25.0	576	58.4
2500-2999	-	-	1	0.9	138	26.8	167	53.5	306	31.0
3000-3499	-	-	-	-	30	3.7	66	25.2	96	9.7
3500-3999	-	-	-	-	5	1.0	1	0.3	6	0.6
4000-4499	-	-	-	-	1	0.2	-	-	1	0.1
Total	44	100.0	115	100.0	514	100.0	312	100.0	985	100.0
Percent of total		4.5		11.7		52.2		31.7		100.0

Extracted from Midwives' Notification System on 3 January 2019.
Excludes 1 infant where gestational age and birthweight were unknown.

5.1.4. Birth status and place of birth of preterm infants

Among preterm infants born alive at 23 to 31 weeks gestation, 89.6 per cent were born in tertiary maternity services. A small proportion (4.7 per cent) of preterm infants were born alive at 23 to 31 weeks gestation in private hospitals. Public maternity services in the country were the birthplace of 3.0 per cent of these infants and the remaining hospital births (2.4 per cent) took place in secondary public maternity services in the metropolitan area.

The largest proportion of preterm stillborn infants (78.9 per cent) were born at tertiary maternity services, 9.9 per cent were born in private hospitals and country maternity services. The remaining 4.2 per cent were born in metropolitan public secondary maternity services (Table 60).

Table 60: Birth status and place of birth of infants born at 23 to 31 weeks gestation in WA, 2015

Place of birth	Live birth					Still birth					Total	
	Gestation (weeks)				Subtotal	Gestation (weeks)				Subtotal		
	23-25 %	26-28 %	29-31 %	No.		%	23-25 %	26-28 %	29-31 %		No.	%
Tertiary	98.0	90.4	87.1	303	89.6	80.0	61.9	100.0	56	78.9	359	87.8
Public Metro	-	1.1	3.6	8	2.4	2.9	9.5	-	3	4.2	11	2.7
Public Country	2.0	3.2	3.1	10	3.0	8.6	9.5	-	5	7.0	15	3.7
Private	-	5.3	5.7	16	4.7	8.6	19.0	-	7	9.9	23	5.6
Non-hospital	-	-	0.5	1	0.3	-	-	-	-	-	1	0.2
Total	100.0	100.0	100.0	338	100.0	100.0	100.0	100.0	71	100.0	409	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Includes infants that were "born before arrival" at birth site.

Public Metro included public births at private hospitals.

Trend data for the period 1986 to 2015 indicate that the proportion of livebirths among infants born at 23 to 31 weeks gestation increased from a low of 74.3 per cent in 1987 to a high of 86.7 per cent in 2007. In 2015, the proportion of live births among these infants was 82.6 per cent.

Tertiary maternity services is the preferred place of birth for livebirths of infants at these gestations. Births at this site at these low gestations may also include some terminations of pregnancy. There is an increasing trend of livebirths occurring at the tertiary service with figures ranging from a low of 65.0 per cent in 1987 to a high of 79.4 per cent in 2007. 72.1 per cent of infants at these gestations were born at tertiary maternity services in 2015 (Table 61).

Table 61: Birth status and place of birth of infants born at 23 to 31 weeks gestation in WA, 1986-2015

Year	Tertiary				Other				Total			
	Live birth		Still birth		Live birth		Still birth		Live birth		Still birth	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1986	212	67.1	46	14.6	33	10.4	25	7.9	245	77.5	71	22.5
1987	182	65.0	48	17.1	26	9.3	24	8.6	208	74.3	72	25.7
1988	250	73.1	48	14.0	24	7.0	20	5.8	274	80.1	68	19.9
1989	271	78.1	36	10.4	20	5.8	20	5.8	291	83.9	56	16.1
1990	206	72.3	41	14.4	19	6.7	19	6.7	225	78.9	60	21.1
1991	220	72.1	34	11.1	23	7.5	28	9.2	243	79.7	62	20.3
1992	231	77.5	32	10.7	21	7.0	14	4.7	252	84.6	46	15.4
1993	200	69.9	40	14.0	22	7.7	24	8.4	222	77.6	64	22.4
1994	244	74.4	32	9.8	22	6.7	30	9.1	266	81.1	62	18.9
1995	225	75.0	37	12.3	20	6.7	18	6.0	245	81.7	55	18.3
1996	226	71.7	45	14.3	22	7.0	22	7.0	248	78.7	67	21.3
1997	265	78.4	35	10.4	22	6.5	16	4.7	287	84.9	51	15.1
1998	264	78.1	37	10.9	16	4.7	21	6.2	280	82.8	58	17.2
1999	246	79.4	34	11.0	18	5.8	12	3.9	264	85.2	46	14.8
2000	268	76.6	44	12.6	27	7.7	11	3.1	295	84.3	55	15.7
2001	261	77.2	35	10.4	24	7.1	18	5.3	285	84.3	53	15.7
2002	219	73.7	40	13.5	25	8.4	13	4.4	244	82.2	53	17.8
2003	230	76.4	30	10.0	23	7.6	18	6.0	253	84.1	48	15.9
2004	283	78.8	36	10.0	23	6.4	17	4.7	306	85.2	53	14.8
2005	286	77.9	36	9.8	27	7.9	16	4.4	315	85.8	52	14.2
2006	302	77.8	43	11.1	29	7.5	14	3.6	331	85.3	57	14.7
2007	317	79.4	38	9.5	29	7.3	15	3.8	346	86.7	53	13.3
2008	328	77.5	44	10.4	31	7.3	20	4.7	359	84.9	64	15.1
2009	313	72.3	46	10.6	51	11.8	23	5.3	364	84.1	69	15.9
2010	297	75.4	49	12.4	29	7.4	19	4.8	326	82.7	68	17.3
2011	305	76.3	45	11.3	26	6.5	24	6.0	331	82.8	69	17.3
2012	323	73.7	58	13.2	37	8.4	20	4.6	360	82.2	78	17.8
2013	306	74.1	49	11.9	39	9.4	19	4.6	345	83.5	68	16.5
2014	335	76.0	49	11.1	37	8.4	20	4.5	372	84.4	69	15.6
2015	303	74.1	56	13.7	35	8.6	15	3.7	338	82.6	71	17.4

Extracted from Midwives' Notification System on 3 January 2019.

Denominator for all percentages in above table was total infants born in the year at a gestation 23 to 31 completed weeks.

5.1.5. Birthweight

Of all infants born alive in 2015, the largest proportion (37.7 per cent) weighed between 3,000 and 3,499 grams. A further 29.2 per cent of infants weighed between 3,500 and 3,999 grams. Those less than 2,500 grams represented 6.2 per cent of liveborn infants. Of all the infants stillborn in 2015, 84.3 per cent had a birthweight less than 2,500 grams (Table 62).

Table 62: Birthweight and birth status for infants born in WA, 2015

Birthweight (grams)	Condition at birth				Total	
	Live birth		Still birth		No.	%
	No.	%	No.	%		
<1000	111	0.3	145	65.0	256	0.7
1000-1499	176	0.5	15	6.7	191	0.5
1500-1999	425	1.2	14	6.3	439	1.3
2000-2499	1,452	4.2	14	6.3	1,466	4.2
< 2500	2,164	6.2	188	84.3	2,352	6.7
2500-2999	5,784	16.6	17	7.6	5,801	16.6
3000-3499	13,189	38.0	12	5.4	13,201	37.7
3500-3999	10,224	29.4	5	2.2	10,229	29.2
4000-4499	2,971	8.5	1	0.4	2,972	8.5
≥ 4500	419	1.2	-	-	419	1.2
Total	34,751	100.0	223	100.0	34,974	100.0

Extracted from Midwives' Notification System on 3 January 2019.
Excludes 7 infants where birthweight was unknown.

5.1.6. Resuscitation and birthweight

In 2015, 18.6 per cent of infants with a birthweight of at least 2,500 grams received resuscitation at birth. Of infants who were resuscitated at birth most had Continuous Positive Airway Pressure (CPAP) or ventilation by bag and mask (Table 63).

Table 63: Birthweight and resuscitation for infants born alive in WA, 2015

Resuscitation methods ³⁸	Birthweight (grams)				Total	
	< 1500	1500-1999	2000-2499	≥ 2500	No.	%
None	23	131	908	26,520	27,582	79.4
Suction Only	2	21	55	1,593	1,671	4.8
Oxygen Therapy	7	18	61	1,012	1,098	3.2
Continuous Positive Airway Pressure (CPAP)	75	144	228	1,461	1,908	5.5
Bag & Mask ³⁹	57	81	166	1,708	2,012	5.8
Intubation	76	23	22	121	242	0.7
External cardiac massage	1	3	6	74	84	0.2
Other ⁴⁰	46	4	6	98	154	0.4
Any resuscitation	264	294	544	6,067	7,169	20.6
% receiving any resuscitation	92.0	69.2	37.4	18.6	20.6	
Total	287	425	1,452	32,587	34,751	100.0
Percentage of total	0.8	1.2	4.2	93.8		100.0

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 6 infants where birthweight was unknown.

³⁸ Description of resuscitation received at birth was limited to the most "intensive" method as determined by the order of the values displayed here.

³⁹ Continuous Positive Airway Pressure (CPAP) was added to the hierarchy above Bag & Mask for births from July 2014.

⁴⁰ Other Resuscitation Methods included medications. The "Other" option is considered the highest value for resuscitation methods. Infants that have had the "Other" option reported may or may not have had any other methods lower in the hierarchy.

5.1.7. Birth status and place of birth

There were 34,757 (99.3 per cent) infants liveborn and 224 (0.4 per cent) infants stillborn in 2015. These include infants born as a result of termination of pregnancy when gestation was 20 weeks or greater.

The stillbirth rate in 2015 was 6.4 per 1,000 births with an intrapartum fetal death rate of 1.9 per 1,000 births. Of the infants who died during labour, 91.0 per cent were born at tertiary maternity services. The stillbirth rate of tertiary maternity services was 19.2 per 1,000 births reflecting the referral of mothers with extreme preterm gestations, termination of pregnancy or other high-risk condition in pregnancy. Homebirths included no stillbirths in 2014 (Table 64).

Table 64: Birth status and place of birth for infants born in WA, 2015

Place of birth	Birth Status						Total	Stillbirth rate ⁴¹	
	Livebirths		Fetal Death Before Labour		Fetal Death During Labour				
	No.	%	No.	%	No.	%			No.
Metropolitan									
Tertiary	7,863	22.6	93	59.2	61	91.0	8,017	22.9	19.2
Public	13,004	37.4	37	23.6	3	4.5	13,044	37.3	3.1
Private	7,898	22.7	13	8.3	-	-	7,911	22.6	1.6
BBA	116	0.3	1	0.6	1	1.5	118	0.3	16.9
Country									
Regional public	4,813	13.8	11	7.0	2	3.0	4,826	13.8	2.7
Other public	6	0.0	-	-	-	-	6	0.0	0.0
Private	803	2.3	-	-	-	-	803	2.3	0.0
BBA	37	0.1	2	1.3	-	-	39	0.1	51.3
Non-hospital									
Home births	205	0.6	-	-	-	-	205	0.6	0.0
BBA	12	0.0	-	-	-	-	12	0.0	0.0
Total	34,757	100.0	157	100.0	67	100.0	34,981	100.0	6.4
Proportion		99.4		0.4		0.2		100.0	

Extracted from Midwives' Notification System on 3 January 2019.

BBA (Born Before Arrival) are those infants born enroute to hospital or at home when not attended by a health professional.

"Public" includes public births at private sites.

⁴¹ Number of infants stillborn per 1,000 infants born.

5.1.8. Plurality, presentation and birth method

Of the 34,981 infants born in 2015, 97.2 per cent were single infants (Table 58) and 2.8 per cent were from multiple births (Table 59).

Of the 1,334 single infants that had a breech presentation, 9.5 per cent were born vaginally. Of the 300 infants from multiple births that had a breech presentation, 25.8 per cent were born vaginally.

Of the 32,143 single infants that had a vertex presentation, 51.7 per cent were born by spontaneous vaginal birth and 32.3 per cent were by caesarean section. The remaining single infants had a birth by vacuum extraction (12.4 per cent) and forceps (3.6 per cent) (Table 65).

Table 65: Fetal presentation, method of birth and plurality of birth for infants born in WA, 2015

Birth method	Fetal presentation						Total
	Vertex		Breech		Other ⁴²		
	Plurality of birth						
	Single	Multiple	Single	Multiple	Single	Multiple	
Number							
Spontaneous	16,631	188	2	1	297	4	17,123
Breech	1	-	125	78	1	-	205
Vacuum	3,987	45	-	-	42	1	4,075
Forceps	1,154	34	-	-	15	-	1,203
Elective CS	5,136	215	762	113	43	12	6,281
Emergency CS	5,234	163	445	108	120	24	6,094
Total	32,143	645	1,334	300	518	41	34,981
Column percentage							
Spontaneous	51.7	29.1	0.1	0.3	57.3	9.8	48.9
Breech	0.0	0.3	9.4	25.5	0.2	-	0.6
Vacuum	12.4	7.0	-	-	8.1	2.4	11.6
Forceps	3.6	5.3	-	-	2.9	-	3.4
Elective CS	16.0	33.5	57.2	37.9	8.3	29.3	18.0
Emergency CS	16.3	24.9	33.3	36.2	23.2	58.5	17.4
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Each infant born from a multiple pregnancy may have a different method of birth.

Unsuccessful vacuum extraction, unsuccessful forceps and forceps lift out at caesarean section are not specified in this table.

The percentages for caesarean section presented here do not represent a "caesarean section rate" they are the percentage of infants born by caesarean section and multiple infants may be born from one caesarean section.

⁴² Other presentations include face, brow, compound, transverse, other or unspecified.

5.2. Infant extra-uterine adjustment

5.2.1. Apgar score at one minute and five minutes

Apgar scoring is a practical method of evaluating the physical condition of a newborn infant shortly after birth, assessing adaptation to extra-uterine life, and their response to resuscitation, should it be required. The Apgar score is calculated based on the infant's heart rate, respiratory effort, muscle tone, skin colour, and reflexes to a total score of 10. Stillborn infants have a total score of 0.

In 2015, for liveborn infants with an Apgar score at one minute reported, 97.9 per cent had an Apgar score of 8 to 10. The proportion of infants with an Apgar score of less than four where the time to spontaneous respiration was less than two minutes was 5.5 per cent.

Among all infants born alive with Apgar score reported, 90.0 per cent established spontaneous respirations within the first minute of life (Table 66).

Table 66: Apgar score at one minute and time to spontaneous respiration for infants born alive in WA, 2015

Time to spontaneous respiration (mins)	Apgar score at 1 minute						Total	
	0-3		4-7		8-10		No.	%
	No.	%	No.	%	No.	%		
≤ 1	37	5.5	2,074	48.6	29,174	97.9	31,285	90.0
2-3	170	25.4	940	22.0	334	1.1	1,444	4.2
4-6	149	22.3	214	5.0	33	0.1	396	1.1
≥ 7	62	9.3	52	1.2	6	0.0	120	0.3
Unknown ⁴³	251	37.5	990	23.2	257	0.9	1,498	4.3
Total	669	100.0	4,270	100.0	29,804	100.0	34,743	100.0
Row percentage	1.9		12.3		85.8		100.0	

Extracted from Midwives' Notification System on 3 January 2019.

14 infants with no Apgar score reported for 1 minute after birth were excluded from the table above.

In 2015, 96.8 per cent of liveborn infants had an Apgar Score of between 8 and 10. A small proportion had an Apgar score of less than four (0.2 per cent) (Table 67).

Table 67: Apgar score at five minutes and time to spontaneous respiration for infants born alive in WA, 2015

Time to spontaneous respiration (mins)	Apgar score at 5 minutes						Total	
	0-3		4-7		8-10		No.	%
	No.	%	No.	%	No.	%		
≤ 1	2	3.2	251	21.9	31,033	92.5	31,286	90.1
2-3	-	-	198	17.3	1,246	3.7	1,444	4.2
4-6	6	9.5	202	17.6	187	0.6	395	1.1
≥ 7	21	33.3	89	7.8	10	0.0	120	0.3
Unknown ³⁴	34	54.0	407	35.5	1,057	2.2	1,498	4.3
Total	63	100.0	1,147	100.0	33,533	100.0	34,743	100.0
Row percentage	0.2		3.3		96.5		100.0	

Extracted from Midwives' Notification System on 3 January 2019.

14 infants with an unknown Apgar score at 5 minutes were excluded from the table above.

⁴³ Cases have no time to spontaneous respiration reported if the infant received ventilation assistance for more than 10 minutes or was not attended at birth by a health professional.

5.2.2. Apgar score and resuscitation

Of infants born alive, 20.6 per cent received some form of resuscitation. The proportion that received external cardiac massage was 0.2 per cent and 0.7 per cent had endotracheal intubation without external cardiac massage. Assisted ventilation was provided to 5.8 per cent and continuous positive airway pressure was provided to 5.5 per cent, 3.1 per cent received oxygen with or without suction and suction only was required by 4.8 per cent of infants.

Apgar score at 5 minutes often reflects the response by an infant to any resuscitation provided. Of infants born alive in 2015 with an Apgar score at five minutes of 8 to 10, 82.1 per cent received no resuscitation, 3.0 per cent received oxygen therapy, 4.8 per cent received suction only and 9.3 per cent required assisted ventilation or continuous positive airway pressure with a bag and mask (Table 68).

Table 68: Resuscitation and Apgar score at five minutes for infants born alive in WA, 2015

Resuscitation methods ⁴⁴	Apgar score at 5 minutes						Total	
	0-3		4-7		8-10		No.	%
	No.	%	No.	%	No.	%		
1-None	8	12.7	33	2.9	27,540	82.1	27,581	79.4
2-Suction Only	-	-	19	1.7	1,652	4.9	1,671	4.8
3-Oxygen Therapy	1	1.6	71	6.2	1,022	3.0	1,094	3.1
4-Continuous Positive Airway Pressure	1	1.6	307	26.8	1,601	4.8	1,909	5.5
5-Bag & Mask ⁴⁵	12	19.0	489	42.6	1,512	4.5	2,013	5.8
6-Intubation	8	12.7	126	11.0	107	0.3	241	0.7
7-External Cardiac Massage	17	27.0	46	4.0	21	0.1	84	0.2
8-Other ⁴⁶	16	25.4	56	4.9	82	0.2	154	0.4
Total	63	100.0	1,147	100.0	33,537	100.0	34,747	100.0

Extracted from Midwives' Notification System on 3 January 2019.

16 infants with no Apgar score at 5 minutes reported or no resuscitation method were excluded from the table above.

⁴⁴ Description of resuscitation received at birth was limited to the most "intensive" method as determined by the order of the values displayed here

⁴⁵ Continuous Positive Airway Pressure (CPAP) was added to the hierarchy above Bag & Mask for births from July 2014.

⁴⁶ Other Resuscitation Methods included medications. The "Other" option is considered the highest value for resuscitation methods. Infants that have had the "Other" option reported may or may not have had any other methods lower in the hierarchy employed.

5.3. Birth trauma

Infant birth trauma may occur when the presenting part of the fetus is well applied to the maternal cervix during labour. Trauma can also result from application of a vacuum cup or forceps used to facilitate birth. Other manipulation of a fetus at birth may be required for situations such as shoulder dystocia, breech, compound presentation, or at caesarean section.

In 2015, 3.6 per cent of infants born by caesarean section had a birth trauma compared with 6.2 per cent of infants born vaginally. The most frequently reported birth trauma was chignon for vaginal births (2.3 per cent) and all infants born (1.5 per cent). The most frequently occurring trauma in infants born by caesarean section was bruising of the scalp (1.8 per cent). Erb's Palsy and/or fracture of clavicle associated with a difficult extraction was reported for 17 infants having vaginal birth (0.2 per cent of infants born vaginally) (Table 69).

Table 69: Birth trauma to infants born in WA, 2015

Type of Birth Trauma	Birth Method				Total	
	Caesarean		Vaginal		No.	%
	No.	%	No.	%		
Cephalhaematoma	21	0.2	129	0.6	150	0.4
Chignon	30	0.2	521	2.3	551	1.6
Bruising of scalp	218	1.8	323	1.5	541	1.5
Other trauma to scalp	121	0.9	355	1.6	476	1.4
Birth trauma to face/facial nerve/eye	13	0.1	20	0.1	33	0.1
Birth trauma to skeleton, unspecified	1	0.1	5	0.3	6	0.0
Erb's Palsy/Fracture of clavicle	1	0.1	17	0.9	18	0.1
Other specified birth trauma	40	0.3	34	0.2	74	0.3
Total	445	3.6	1,404	6.2	1,849	5.3
Total infants by birth method	12,375	35.4	22,606	64.6	34,981	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Percentages are calculated as proportions of all infants with the same birth method.

5.4. Birth defects

Midwives who reported a birth defect enabled early advice of potential cases to the WA Register for Developmental Anomalies (WARDA).

WARDA staff were able to ensure reporting of birth defects by medical practitioners to WARDA. Ascertainment of birth defects for a birth cohort is not considered complete until reported by a medical practitioner and the child is 6 years of age. More detailed information including trends over birth years is available for births occurring 1980 to 2014 in the WARDA Annual Report (Bower, et al., 2015) found at <http://www.wnhs.health.wa.gov.au/Our-services/Statewide-Services/WARDA/Reports>.

5.5. Infant outcome

5.5.1. Admission to Special Care Nursery

In 2015, there was one birth site in WA with a Level 3 and Level 2 Special Care Nursery (SCN); 12 other birth sites had a Level 2 SCN. Sites with no SCN could have provided neonatal care for unstable infants for a short time, usually less than 1 day.

Of 34,757 liveborn infants, 12.4 per cent were admitted to a SCN (Level 2 or 3) at their birth site with a SCN length of stay of at least one day.

The proportion of infants of a multiple birth admitted to SCN for at least one day was 58.9 per cent while the proportion of single infants was 11.1 per cent.

The SCN length of stay exceeded 7 days for 20.6 per cent of single infants, which was about one third of the proportion for infants from multiple births (58.4 per cent) (Table 70).

Table 70: Length of stay in Special Care Nursery and plurality of birth for infants born alive in WA, 2015

Length of stay (days)	Plurality				Total	
	Single		Multiple		No.	%
	No.	%	No.	%	No.	%
1	1,130	30.2	74	13.0	1,204	27.9
2	752	20.1	50	8.8	802	18.6
3	436	11.7	29	5.1	465	10.8
4	268	7.2	33	5.8	301	7.0
5	186	5.0	22	3.9	208	4.8
6	106	2.8	17	3.0	124	2.9
7	90	2.4	12	2.1	102	2.4
8-14	335	9.0	122	21.4	457	10.6
15-20	141	3.8	71	12.5	212	4.9
21-28	100	2.7	32	5.6	132	3.1
29-60	116	3.1	75	13.2	191	4.4
61-90	40	1.1	22	3.9	62	1.4
91-180	36	1.0	11	1.9	47	1.1
>180	1	0	-	-	1	0
More than 7	769	20.6	333	58.4	1,102	25.6
Total admitted ≥ 1 day	3,737	100.0	570	100.0	4,307	100.0
Total liveborn	33,789		968		34,757	
Proportion of liveborn admitted ≥ 1 day		11.1		58.9		12.4

Extracted from Midwives' Notification System on 3 January 2019.

Excludes infants with stays in SCN of less than 1 day or who were transferred from a birth site to another site for admission to SCN.

5.5.2. Transfer from birth place

In 2015, the transfer of infants to another hospital following birth occurred for 4.5 per cent of liveborn infants. Transfer may have been undertaken when a higher level of care was required than was available at the birth site or when lower level of care provision was appropriate for ongoing care before discharge.

Of liveborn infants, 95.4 per cent were discharged home from their place of birth.

In the neonatal period (before 28 days of age) 0.1 per cent of infants died before discharge from their birth site (Table 71).

Information about infants that were stillborn or died within one year of birth were reviewed by the WA Perinatal and Infant Mortality Committee in a separate process. Reports on mortality rates in WA are provided by the Committee at <https://ww2.health.wa.gov.au/Reports-and-publications/Perinatal-infant-and-mortality-committee>.

Table 71: Method of discharge from birth place for infants born alive in WA, 2015

Place of Birth	Discharge outcome						Total	
	Transferred		Died		Discharged home		No.	%
	No.	%	No.	%	No.	%		
Metropolitan								
Tertiary	729	9.2	33	0.4	7,136	90.4	7,898	100.0
Other Public	245	3.1	1	0.0	7,663	96.8	7,913	100.0
Private	186	1.4	-	-	12,884	98.6	13,070	100.0
Country								
Regional	264	7.8	4	0.1	3,129	92.1	3,397	100.0
Other Public	94	6.5	-	-	1,362	93.5	1,456	100.0
Private	12	1.5	-	-	793	98.5	805	100.0
Homebirth	13	6.0	-	-	204	94.0	217	100.0
Other	-	-	-	-	1	100.0	1	100.0
Total	1,547	4.5	38	0.1	33,172	95.4	34,757	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 1 case without place of birth.

Of the 33,168 liveborn infants with an outcome of discharge from their birth site, 21.5 per cent went home within 24 hours. This figure included homebirths. The majority (75.5 per cent) had a length of stay at their birth site between two and seven days. A small proportion of infants (3.0 per cent) stayed longer than a week before they were discharged home.

In 2015, among infants with a birthweight of at least 2,500 grams, 22.4 per cent stayed at their birth site for one day or less.

Infants with low birthweight spent more days at the birth site. Of the 465 infants that stayed at the birth site for more than two weeks, 83.4 per cent had birthweight less than 2,500 grams (Table 72 and Figure 16).

Table 72: Length of stay at birth site before discharge home by birthweight for infants born alive in WA, 2015

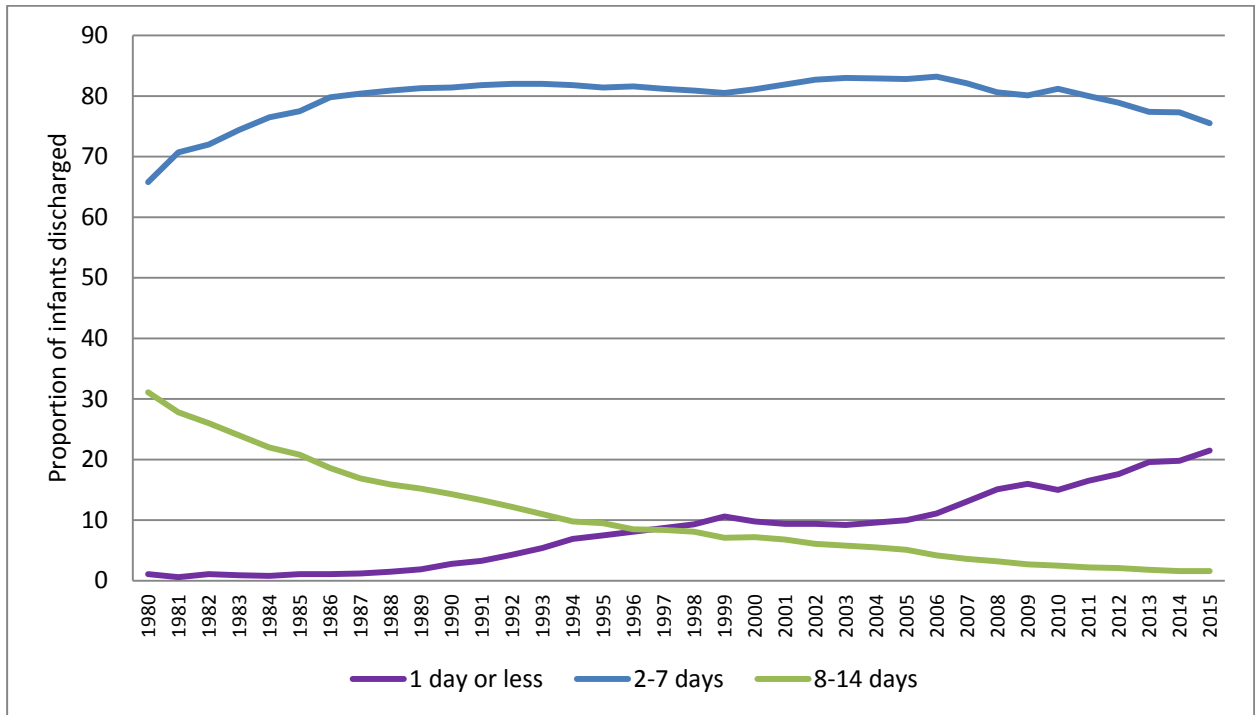
Birthweight (grams)	Length of stay (days)				Total
	≤ 1	2-7	8-14	> 14	
Number					
<1000	-	-	-	47	47
1000-1499	-	-	1	61	62
1500-1999	-	29	35	140	204
2000-2499	28	809	206	140	1,183
< 2500	28	839	242	388	1,496
2500-2999	977	4,353	144	46	5,520
3000-3499	2,926	9,867	84	22	12,899
3500-3999	2,409	7,510	51	3	9,973
4000-4499	692	2,157	22	4	2,875
≥ 4500	95	306	2	2	405
≥ 2500	7,099	24,193	303	77	31,672
Total	7,127	25,031	545	465	33,168
Row percentage					
<1000	-	-	-	100.0	100.0
1000-1499	-	-	1.6	98.4	100.0
1500-1999	-	14.2	17.2	68.6	100.0
2000-2499	2.4	68.4	17.4	11.8	100.0
< 2500	1.9	56.0	16.2	25.9	100.0
2500-2999	17.7	78.9	2.6	0.8	100.0
3000-3499	22.7	76.5	0.7	0.2	100.0
3500-3999	24.1	75.3	0.5	0.0	100.0
4000-4499	24.1	75.0	0.8	0.1	100.0
≥ 4500	23.5	75.6	0.5	0.5	100.0
≥ 2500	22.4	76.4	1.0	0.2	100.0
Total	21.5	75.5	1.6	1.4	100.0
Column percentage					
<1000	-	-	-	10.1	0.1
1000-1499	-	-	0.2	13.1	0.2
1500-1999	-	0.1	6.4	30.1	0.6
2000-2499	0.4	3.2	37.8	30.1	3.6
< 2500	0.4	3.4	44.4	83.4	4.5
2500-2999	13.7	17.4	26.4	9.9	16.6
3000-3499	41.1	39.4	15.4	4.7	38.9
3500-3999	33.8	30.0	9.4	0.6	30.1
4000-4499	9.7	8.6	4.0	0.9	8.7
≥ 4500	1.3	1.2	0.4	0.4	1.2
≥ 2500	99.6	96.6	55.6	16.6	95.5
Total	100.0	100.0	100.0	100.0	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Includes homebirths in midwife's care where discharge date equals birth date.

Excludes infants that were stillborn or died or were transferred to another site.

Figure 16: Length of stay at birth site for infants discharged alive in WA, 1980-2015



6. Perinatal Mortality

Perinatal deaths include stillborn infants (fetal deaths) where the infant died before the onset of labour or during labour, and neonatal deaths where the infant was born alive and died in the neonatal period, between birth and the 28th day of life.

Infants of 20 weeks gestation that were born as a result of termination of a pregnancy are included and contribute to the perinatal mortality rate presented here. Data from the WA Abortion Notification System indicate that these cases numbered 76 for the calendar year 2015 and would comprise 27.6 per cent of the 275 perinatal deaths described in text and tables below.

There were 275 perinatal deaths occurring for infants born in 2015 from pregnancies of 20 weeks or more gestation. There were 222 stillborn infants (fetal deaths) and 53 infants born alive who died in the neonatal period. There was a perinatal mortality rate of 7.9 per 1,000 infants born a decrease from 8.3 per 1,000 infants born in 2014. The stillbirth rate was 6.3 per 1,000 infants born and the neonatal mortality rate was 1.5 per 1,000 infants born alive.

Mortality rates for infants of Aboriginal mothers were nearly double those for infants of non-Aboriginal mothers in all categories. The overall perinatal mortality rate for infants born to Aboriginal mothers was 12.6 per 1,000 compared to 7.6 per 1,000 infants born to non-Aboriginal mothers. This was driven by the much higher neonatal (Table 73).

For more information about perinatal mortality in Western Australia go to the reports of the WA Perinatal Mortality Committee at: <http://ww2.health.wa.gov.au/Reports-and-publications/Perinatal-infant-and-mortality-committee>.

Table 73: Perinatal mortality and maternal Aboriginal status in WA, 2015

Mortality type	Maternal Aboriginal status				Total	
	Aboriginal		non-Aboriginal		Number	Rate ⁴⁹
	Number	Rate ⁴⁷	Number	Rate ⁴⁸		
Fetal deaths	11	6.3	211	6.3	222	6.3
Neonatal death	11	6.4	42	1.3	53	1.5
Perinatal deaths	22	12.6	253	7.6	275	7.9

Extracted from the Midwives' Notification System and the Perinatal Mortality Database 3 January 2019. Includes 76 infants (34.2 per cent) resulting from abortion.

Since 1994, infants of Aboriginal mothers had a perinatal mortality rate ranging from a high of 25.9 per 1,000 infants born in 1997 to a low of 12.6 per 1,000 in 2015. The perinatal mortality rate for infants of non-Aboriginal women has fluctuated in the period since 1997 but has been half the rate for infants of Aboriginal women prior to 2015 and was 7.6 per 1,000 in 2015 (Table 74).

⁴⁷ The Denominators used for infants of Aboriginal mothers were 1,803 total infants born and 1,776 infants born alive.

⁴⁸ The Denominators used for infants of non-Aboriginal mothers were 33,403 total infants born and 33,181 infants born alive.

⁴⁹ The Denominators used were for Total infants born in WA 35,206 and 34,957 infants born alive.

Table 74: Trends for perinatal mortality by maternal Aboriginal status for infants born in WA, 1994-2015

Year of birth	Maternal Aboriginal Status		Total rate
	Aboriginal rate	Non-Aboriginal rate	
1994	22.7	10.2	10.9
1995	21.9	10.0	10.7
1996	21.4	11.1	11.7
1997	25.9	8.6	9.7
1998	17.8	8.6	9.1
1999	25.8	9.0	10.1
2000	24.2	9.9	10.8
2001	17.6	9.2	9.7
2002	25.1	8.0	9.2
2003	23.9	8.6	9.6
2004	16.5	9.3	9.8
2005	19.8	9.5	10.2
2006	24.3	8.5	9.5
2007	14.8	7.8	8.2
2008	19.6	8.6	9.3
2009	20.4	9.4	10.0
2010	21.2	8.5	9.2
2011	23.6	9.6	10.3
2012	21.1	7.8	8.4
2013	20.5	7.1	7.8
2014	17.2	8.0	8.5
2015	12.6	7.6	7.9

Extracted from the Midwives' Notification System and the Perinatal Mortality Database 3 January 2019.

6.1. Perinatal mortality by birthweight in WA

In 2015, of all stillborn infants, 85.1 per cent had a birthweight less than 2,500 grams. Of infants who died in the neonatal period a lower proportion were in this low birthweight category (62.3 per cent). The proportion of perinatal deaths that were low birthweight infants was 80.7 per cent (Table 75).

Table 75: Birthweight for infants that died in perinatal period and were born in WA, 2015

Birthweight (grams)	Mortality type		
	Fetal deaths	Neonatal deaths	Perinatal deaths
Number			
Total Number	222	53	275
Column percentage			
< 1000	65.8	43.4	61.5
1000–1499	6.8	1.9	5.8
1500–1999	6.3	7.5	6.5
2000–2499	6.3	9.4	6.9
< 2500	85.1	62.3	80.7
2500–2999	6.8	18.9	9.1
3000–3499	5.4	7.5	5.8
≥ 3500	2.7	11.3	4.4
Total percentage	100.0	100.0	100.0

Extracted from the Perinatal Mortality Database and Midwives Notification System 3 January 2019. Excludes 1 case where birthweight was not reported.

For infants of multiple births, the perinatal mortality rate was 25.4 per 1,000 infants, more than three times the rate for single infants (7.4 per 1,000) (Table 76).

Table 76: Perinatal mortality and plurality of birth for infants born in WA, 2015

Plurality	Mortality type					
	Fetal death		Neonatal death		Perinatal death	
	No.	Rate	No.	Rate	No.	Rate
Single	204	6.0	46	1.4	250	7.4
Multiple	18	18.3	7	7.2	25	25.4
Total	222	6.3	53	1.5	275	7.9

Extracted from the Midwives' Notification System and Perinatal Mortality Database 3 January 2019.

6.2. Autopsy

Autopsy occurred for 52.0 per cent of all perinatal deaths. For stillbirths (fetal deaths), 57.2 per cent had an autopsy and 30.2 per cent of infants that died in the neonatal period (Table 77).

Table 77: Autopsy for infants that died in perinatal period in WA, 2015

Autopsy	Mortality Type					
	Fetal deaths		Neonatal deaths		Perinatal deaths	
	No.	%	No.	%	No.	%
Yes	127	57.2	16	30.2	143	52.0
No/Unknown	95	42.8	37	69.8	132	48.0
Total	222	100.0	53	100.0	275	100.0

Extracted from the Perinatal Mortality Database 3 January 2019.

6.3. Perinatal mortality by cause of death and maternal age

The most recent report from the Perinatal and Infant Mortality Committee of WA (Ballestas, 2017) was published in 2017 ([The 15th Report](#)). This report classifies deaths according the Perinatal Society of Australia and New Zealand (PSANZ) guidelines for cause of death.

7. References

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Appendix A Glossary

Age-specific birth rate	The total infants born (live births and still births) per 1,000 born to women aged between 15–44 years.
Anaesthesia	Often administered immediately before delivery and differs from analgesia in that it causes a loss of all sensation. It includes loss of touch, loss of certain reflexes and loss of ability to move. With general anaesthesia there is also a loss of consciousness.
Analgesia	Often administered during labour to reduce the feeling of pain while allowing sensations of touch, pressure and the ability to move to generally remain intact.
Apgar score	A numeric scoring system applied after birth to evaluate the condition of the infant. It is based on heart rate, respiration, muscle tone, reflexes and colour. A low score indicates poor condition of the infant.
Augmentation of labour	Refers to the use of medication or other intervention to 'speed up' the process of labour that has already commenced spontaneously. Augmentation may be required to assist with an abnormal or difficult labour (dystocia), or to speed up normal labour if the health of the mother or baby is at risk.
Body Mass Index (BMI)	<p>The calculation for BMI is maternal weight (kgs) divided by the maternal height (m) squared, for example $72\text{kgs}/1.65\text{m}^2$ is 26.45 BMI.</p> <p>Where height and weight at time of booking for pregnancy care was reported. However, if the woman had no weight recorded before 20 weeks gestation, it will be the self-reported weight at conception.</p>
Born before arrival (BBA)	A birth that occurs prior to arrival of the mother at the health service reporting the birth. It usually indicates a planned hospital or birth centre birth occurring unexpectedly before arrival at service. A planned homebirth is reported as BBA if birth occurs before midwife arrives at the home. BBA is an indication of a birth occurring in an uncontrolled environment.
Birth defects	Any defect present in the infant at the time of birth, probably of developmental origin.
Birthweight	The first weight of the infant, measured to the nearest five grams. Usually obtained within the first hour of birth.
Caesarean section	<p>Infant is born through an incision in the maternal uterus via the abdomen.</p> <p><u>Elective caesarean section:</u> a scheduled procedure that occurs prior to onset of labour and rupture of membranes and without any labour induction procedure.</p> <p><u>Emergency caesarean section:</u> a procedure performed at a time determined by an arising complication. May be performed before or after the onset of labour.</p>

Diabetes	Two values are reported to the Midwives Notification System, "gestational diabetes" as a pregnancy complication and "pre-existing diabetes" as a medical condition. Pre-existing diabetes includes both Type 1 and Type 2 diabetes.
Crude birth rate	The number of liveborn infants occurring per 1,000 of the total population.
Epidural	Injection of analgesic agent outside the dura mater encasing the maternal spinal canal.
Episiotomy	An incision of the perineum and vagina to enlarge the opening of the vagina.
Gestational age	The duration of pregnancy from the first day of the last normal menstrual period. If unable to be determined in this way, ultrasound estimations of gestational age during pregnancy or assessment of the newborn infant may be used to determine this age. Ultrasounds conducted early in pregnancy are more accurate at estimating gestational age. Data presented here is in completed weeks e.g. a gestational age of 40 days would be presented as 5 weeks and not 5 weeks and 5 days or 6 weeks.
Health Service Area	Within WA, there are three Health Service Areas created by grouping of the Statistical Local Areas (SLA) devised by the Australian Bureau of Statistics (ABS) into North Metro, South Metro and Country.
Statistical Local Area	(SLA) An Australian Standard Geographical Classification (ASGC) defined area that comprises a suburb or groups of suburb. Describes geographical locations for the whole of Australia without gaps or overlays. It is described with a 9 digit number made up of values representing state, statistical division (SD), statistical subdivision (SSD) and SLA, for example, the SLA of Armadale (City) has an SLA value of 505250210 which can be broken down to 5/05/25/0210 to represent values for WA/SD/SSD/SLA.
Health Region	SLAs also determine division of the Country Area into the seven regions of Kimberley, Pilbara, Midwest, Wheatbelt, Goldfields, Southwest, and Great Southern. With the two undivided Metropolitan Areas of North and South, these comprise the nine Health Regions in WA.
Homebirth	Homebirths only include women attended by midwives for a planned homebirth. Other homebirths may include "freebirths", a homebirth planned to occur without a health professional in attendance, or an unplanned or unexpected homebirth where the birth may be reported as "born before arrival" to the health service.
Induction of labour	The process of using medications or procedures to initiate labour. Induction is performed when birth in next 24 hours is believed to best serve the welfare of mother and/or infant.

Length of stay	The total number of days spent in hospital. A stay of less than one day (admission, birth and discharge occur on the same day) is counted as one day in the total days of care. For women or infants admitted and discharged on different days, the number of days is computed by subtracting the date of admission/birth from the day of separation. For planned home births length of stay is reported as 0 days from date of birth.
Livebirth	The complete expulsion or extraction from its mother of an infant irrespective of duration of pregnancy, which after birth shows signs of life. The Midwives' Notification System excludes livebirths less than 20 weeks gestation.
Mortality rates	<p><u>Fetal death rate:</u> the number of fetal deaths per 1,000 total births in a year.</p> <p><u>Neonatal mortality:</u> the number of neonatal deaths per 1,000 live births in a year.</p> <p><u>Perinatal mortality:</u> the number of stillbirths and neonatal deaths per 1,000 total births in a year.</p>
Neonatal death	The death of a liveborn infant within 28 days of birth.
Obstetrician	Medical Practitioner who has achieved consultant status in Obstetrics and Gynaecology.
Other medical officer	Medical Practitioner who is not a consultant of Obstetrics and Gynaecology.
Oxytocin/Syntocinon	Oxytocin is a naturally occurring hormone released by the pituitary gland. Two of its actions are to stimulate smooth muscle of the uterus producing rhythmic contractions and cause contraction of small muscles in the breast facilitating lactation. Syntocinon is a synthetic copy of Oxytocin made available by pharmaceutical companies as an injectable solution.
Parity	<p>The total number of pregnancies that resulted in an infant born alive or stillborn to the mother prior to the index pregnancy.</p> <p><u>Nulliparous:</u> Never having completed a pregnancy beyond 20 weeks gestation prior to the index pregnancy.</p> <p><u>Multiparous:</u> having completed one or more pregnancies beyond 20 weeks gestation.</p>
Perinatal death	A stillbirth (fetal death) or neonatal death.
Perineal status	<p><u>First degree tear:</u> a perineal graze, laceration, or tear involving the fourchette, hymen, labia, skin, vagina or vulva.</p> <p><u>Second degree tear:</u> a perineal laceration or tear involving the pelvic floor or perineal muscles or vagina muscles.</p> <p><u>Third degree tear:</u> a perineal laceration or tear involving the anal sphincter or rectovaginal septum.</p> <p><u>Fourth degree tear:</u> a third degree perineal laceration or tear which also involves the anal or rectal mucosa.</p>

Plurality	The number of infants resulting from a pregnancy of 20 weeks gestation or more. On this basis a birth may be classified as single or multiple.
Prostaglandin	Prostaglandins are naturally occurring products of metabolism. Some cause strong contraction of the uterine muscle and ripening and dilatation of the cervix. Prostaglandin E formulas are synthetic copies made available by pharmaceutical companies in formats that can be administered orally, sublingually or vaginally.
Relative Risk (RR)	The likelihood of having an adverse event following exposure to some factor. Determines association rather than causation. Calculation used to describe Relative Risk (RR) in this report, was the Rate Ratio (rate of occurrence in exposed) / (rate of occurrence in non-exposed). For example (number of infants of Aboriginal mothers with low birthweight/number of infants of Aboriginal Mother) / (number of infants of non-Aboriginal mothers with low birthweight/number of infants born to non-Aboriginal mothers)
SEIFA Disadvantage Index	Using 2011 census data, Statistical Area 2 (SA2) values were allocated to five groups based on the socio-economic-index-for-areas (SEIFA 2012) disadvantage index. Group I is considered as having the highest disadvantage and group V has the lowest disadvantage. http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/2033.0.55.001Main+Features12012?OpenDocument .
Stillbirth or fetal death	The complete expulsion or extraction from its mother of an infant which did not show any sign of life from the time of birth. Where the pregnancy was at least 20 weeks gestation or the infant's birthweight was at least 400 grams.
Term Infants	Infants born from pregnancy with gestational age of 37 weeks or greater.
Vertex Presentation	The most common presentation of the fetus immediately prior to birth. The fetal chin is tucked in and the smallest and roundest circumference of the fetal head (just above the ears) is applied to the maternal cervix.

Appendix B Abbreviations

ARM	Artificial Rupture of Membranes
DoHA	Australian Department of Health
AIHW	Australian Institute of Health and Welfare
BBA	Born Before Arrival
BMI	Body Mass Index
CS	Caesarean Section
CTG	Cardiotocograph
CVS	Chorionic Villus Sample
CPAP	Continuous Positive Airway Pressure
GA	General Anaesthesia
IRSD	Index of Relative Socio-Economic Disadvantage
ICD-10-AM	International Classification of Diseases, Version 10, Australian Modification
KEMH	King Edward Memorial Hospital
MCHU	Maternal and Child Health Unit
MNS	Midwives Notification System
mLs	Millilitres
NOCA	Notification of Case Attended
PPH	Postpartum Haemorrhage
WARDA	WA Register for Developmental Anomalies
SEIFA	Socio-Economic Index for Areas
SCN	Special Care Nursery
SA2	Statistical Area Level 2
SJOG	St John of God
WA	Western Australia

Appendix C Supplementary Tables and Figures

Table 78: Body Mass Index (BMI) by maternal age group for women who gave birth in WA, 2015

BMI	Maternal Age						Total	
	≤19		20-34		≥ 35		No.	%
	No.	%	No.	%	No.	%		
Less than 18.5 (underweight)	78	8.8	896	3.5	165	2.4	1,139	3.4
18.5 – 24.9 (healthy)	447	50.7	12,465	49.2	3,348	48.8	16,260	49.2
25 – 29.9 (pre-obese)	214	24.3	6,892	27.2	1,965	28.6	9,071	27.4
30 – 34.9 (Obese Class 1)	99	11.2	3,184	12.6	900	13.1	4,183	12.7
35 – 39.9 (Obese Class 2)	33	3.7	1,262	5.0	317	4.6	1,612	4.9
40 or more (Obese Class 3)	11	1.2	615	2.4	165	2.4	791	2.4
Obese	151	16.1	5,061	20.0	1,382	20.1	6,586	20.0
Total	882	100.0	25,314	100.0	6,860	100.0	33,056	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Excludes 1,427 cases without height or weight.

Table 79: Age of women who gave birth in WA, 1980-2015

Year of Birth	Maternal Age						Total No.
	≤19		20-34		≥ 35		
	No.	%	No.	%	No.	%	
1980	1,698	8.2	17,928	87.1	969	4.7	20,595
1981	1,770	8.1	19,110	86.9	1,100	5.0	21,980
1982	1,643	7.4	19,271	87.0	1,238	5.6	22,152
1983	1,577	6.9	19,955	87.4	1,294	5.7	22,826
1984	1,542	6.8	19,807	87.2	1,354	6.0	22,703
1985	1,455	6.3	20,062	86.9	1,559	6.8	23,076
1986	1,535	6.5	20,344	86.2	1,724	7.3	23,603
1987	1,494	6.3	20,597	86.2	1,804	7.5	23,895
1988	1,635	6.6	21,084	85.0	2,083	8.4	24,802
1989	1,586	6.3	21,372	85.0	2,199	8.7	25,157
1990	1,662	6.5	21,617	84.1	2,423	9.4	25,702
1991	1,639	6.6	20,599	83.5	2,440	9.9	24,678
1992	1,574	6.3	20,756	83.1	2,639	10.6	24,969
1993	1,496	6.0	20,670	82.8	2,807	11.2	24,973
1994	1,592	6.3	20,515	81.8	2,964	11.8	25,071
1995	1,521	6.1	20,391	81.3	3,176	12.7	25,088
1996	1,521	6.0	20,298	80.6	3,374	13.4	25,193
1997	1,446	5.8	19,898	80.0	3,524	14.2	24,868
1998	1,520	6.0	19,926	78.8	3,846	15.2	25,292
1999	1,509	5.9	19,977	78.7	3,891	15.3	25,377
2000	1,479	6.0	19,366	78.0	3,972	16.0	24,817
2001	1,423	5.8	19,007	77.6	4,065	16.6	24,495
2002	1,438	5.9	18,874	77.4	4,084	16.7	24,396
2003	1,338	5.5	18,557	76.4	4,380	18.0	24,275
2004	1,390	5.5	19,092	76.0	4,630	18.4	25,112
2005	1,484	5.6	19,849	74.8	5,192	19.6	26,525
2006	1,514	5.4	20,960	74.2	5,780	20.5	28,254
2007	1,512	5.1	21,900	73.9	6,217	21.0	29,629
2008	1,534	5.1	22,188	73.4	6,509	21.5	30,231
2009	1,468	4.8	22,880	74.4	6,400	20.8	30,748
2010	1,351	4.4	22,998	74.6	6,486	21.0	30,835
2011	1,367	4.3	23,727	74.8	6,640	20.9	31,734
2012	1,342	4.0	25,206	75.5	6,845	20.5	33,393
2013	1,236	3.6	25,746	75.9	6,946	20.5	33,928
2014	1,081	3.1	26,282	75.8	7,324	21.1	34,687
2015	970	2.8	26,417	76.6	7,095	20.6	34,482

Extracted from Midwives' Notification System on 3 January 2019.

Table 80: Aboriginal status for women who gave birth in WA, 1980-2015

Year	Maternal Aboriginal Status					
	Aboriginal		non-Aboriginal		Total	
	No.	%	No.	%	No.	%
1980	1,030	5.0	19,580	95.0	20,610	100.0
1981	1,110	5.0	20,871	95.0	21,981	100.0
1982	1,123	5.1	21,029	94.9	22,152	100.0
1983	1,142	5.0	21,684	95.0	22,826	100.0
1984	1,185	5.2	21,518	94.8	22,703	100.0
1985	1,247	5.4	21,829	94.6	23,076	100.0
1986	1,239	5.2	22,364	94.8	23,603	100.0
1987	1,336	5.6	22,559	94.4	23,895	100.0
1988	1,436	5.8	23,366	94.2	24,802	100.0
1989	1,439	5.7	23,718	94.3	25,157	100.0
1990	1,548	6.0	24,154	94.0	25,702	100.0
1991	1,468	5.9	23,211	94.1	24,679	100.0
1992	1,422	5.7	23,548	94.3	24,970	100.0
1993	1,442	5.8	23,531	94.2	24,973	100.0
1994	1,439	5.7	23,632	94.3	25,071	100.0
1995	1,455	5.8	23,633	94.2	25,088	100.0
1996	1,431	5.7	23,761	94.3	25,192	100.0
1997	1,564	6.3	23,304	93.7	24,868	100.0
1998	1,508	6.0	23,784	94.0	25,292	100.0
1999	1,600	6.3	23,777	93.7	25,377	100.0
2000	1,597	6.4	23,220	93.6	24,817	100.0
2001	1,627	6.6	22,868	93.4	24,495	100.0
2002	1,652	6.8	22,745	93.2	24,397	100.0
2003	1,527	6.3	22,748	93.7	24,275	100.0
2004	1,556	6.2	23,557	93.8	25,113	100.0
2005	1,698	6.4	24,828	93.6	26,526	100.0
2006	1,788	6.3	26,466	93.7	28,254	100.0
2007	1,805	6.1	27,826	93.9	29,631	100.0
2008	1,722	5.7	28,515	94.3	30,237	100.0
2009	1,749	5.7	29,011	94.3	30,760	100.0
2010	1,683	5.5	29,160	94.5	30,843	100.0
2011	1,723	5.4	30,011	94.6	31,734	100.0
2012	1,630	4.9	31,763	95.1	33,393	100.0
2013	1,739	5.1	32,189	94.9	33,928	100.0
2014	1,782	5.1	32,905	94.9	34,687	100.0
2015	1,710	5.0	32,772	95.0	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

Table 81: Plurality of birth and maternal Aboriginal status for infants born in WA, 2015

Plurality	Aboriginal Status				Total	
	Aboriginal		Non-Aboriginal		No.	%
	No.	%	No.	%		
Single	1,679	4.8	32,316	92.4	33,995	97.2
Twin	58	0.2	892	2.5	950	2.7
Triplet	6	0.0	30	0.1	36	0.1
Total	1,743	5.0	33,238	95.0	34,981	100

Extracted from Midwives' Notification System on 3 January 2019.

Table 82: Age-specific birth rates and Aboriginal status for women who gave birth in WA, 1983-2015

Year of birth	Aboriginal status						Total		
	Aboriginal			Non-Aboriginal			15-19	20-34	35-44
	15-19	20-34	35-44	15-19	20-34	35-44			
1983	161.4	134.4	15.5	21.6	112.8	14.5	27.6	113.4	14.5
1984	164.0	130.3	20.0	20.3	111.1	14.4	26.7	111.7	14.5
1985	158.4	137.6	13.7	18.3	110.7	16.0	24.7	111.6	16.0
1986	145.8	135.9	15.2	19.4	109.5	16.8	25.1	110.3	16.7
1987	144.9	144.4	19.6	18.0	108.3	16.6	23.6	109.5	16.7
1988	164.6	146.8	15.8	19.0	108.7	18.3	25.5	110.0	18.3
1989	149.1	148.0	17.5	18.8	107.4	18.4	24.5	108.8	18.4
1990	149.6	157.6	19.3	20.1	106.6	19.4	25.7	108.4	19.4
1991	162.1	138.3	17.1	19.6	101.4	19.0	25.9	102.7	18.9
1992	145.5	135.4	15.4	20.0	101.5	20.3	25.6	102.7	20.2
1993	150.4	132.9	17.0	18.8	101.3	21.3	24.5	102.4	21.2
1994	151.4	129.8	14.5	20.3	100.2	22.3	26.0	101.3	22.1
1995	133.6	133.7	18.3	19.8	98.7	23.3	24.7	100.1	23.2
1996	125.9	130.1	18.1	19.6	97.9	24.3	24.4	99.1	24.1
1997	135.4	140.7	18.8	17.8	95.0	24.8	23.1	96.8	24.7
1998	130.6	130.9	23.3	18.8	95.6	26.6	24.0	97.0	26.5
1999	125.2	140.0	25.2	18.4	95.9	26.5	23.4	97.6	26.5
2000	122.6	136.9	24.8	17.2	93.3	26.9	22.2	95.1	26.8
2001	104.1	131.1	19.1	16.3	91.3	27.5	20.9	93.1	27.2
2002	101.0	130.1	23.7	16.4	90.7	27.4	20.9	92.5	27.3
2003	100.1	115.9	19.7	14.6	89.4	29.5	19.3	90.6	29.2
2004	97.8	116.1	21.4	15.3	91.8	31.0	19.9	92.9	30.7
2005	107.0	122.9	23.8	15.9	94.4	34.6	21.2	95.7	34.2
2006	105.0	131.0	22.9	16.4	98.3	38.2	21.5	99.8	37.6
2007	94.1	130.8	29.0	16.5	99.9	39.9	20.9	101.2	39.5
2008	93.4	120.8	25.2	16.3	97.2	41.1	20.7	98.2	40.6
2009	88.0	121.5	25.4	15.4	95.3	39.6	19.6	96.4	39.1
2010	81.4	115.1	23.8	14.1	93.0	39.6	18.0	93.9	39.1
2011	83.2	115.8	22.0	14.1	91.9	39.9	18.2	92.9	39.3
2012	77.6	105.8	23.5	13.9	93.5	40.1	17.6	93.8	39.6
2013	78.3	113.8	21.6	12.1	90.4	40.0	16.1	91.2	39.4
2014	68.1	112.9	30.6	10.5	91.0	41.6	13.9	91.9	41.2
2015	58.6	108.4	24.0	9.5	91.2	40.3	12.5	91.9	39.8

Data Extracted from Midwives' Notification System on 3 January 2019.

The 15-19 year age group includes births to mothers younger than 15 years of age. The 40-45 year age group includes births to mothers aged 45 years or more.

Age-specific birth rate was calculated from the total number of births in one year per 1,000 women of the same age group.

ABS population data available from WA Department of Health Epidemiology Branch was used. No population data available for years 1980 to 1982.

Table 83: Health service type for place of birth for women who gave birth in WA, 1980-2015

Year	Place of Birth										Total	
	Tertiary		Public		Private		Home Birth		BBA			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1980	5,126	24.9	10,935	53.1	4,436	21.5	62	0.3	50	0.2	20,609	100.0
1981	5,332	24.3	11,994	54.6	4,521	20.6	59	0.3	75	0.3	21,981	100.0
1982	5,249	23.7	11,362	51.3	5,374	24.3	94	0.4	73	0.3	22,152	100.0
1983	4,731	20.7	11,872	52.0	6,065	26.6	99	0.4	59	0.3	22,826	100.0
1984	4,894	21.6	11,236	49.5	6,411	28.2	96	0.4	66	0.3	22,703	100.0
1985	4,666	20.2	11,296	49.0	6,900	29.9	143	0.6	71	0.3	23,076	100.0
1986	4,921	20.8	11,977	50.7	6,483	27.5	174	0.7	48	0.2	23,603	100.0
1987	4,625	19.4	12,008	50.3	7,053	29.5	144	0.6	65	0.3	23,895	100.0
1988	4,768	19.2	12,360	49.8	7,420	29.9	175	0.7	79	0.3	24,802	100.0
1989	4,675	18.6	12,751	50.7	7,478	29.7	176	0.7	77	0.3	25,157	100.0
1990	4,677	18.2	13,346	51.9	7,436	28.9	151	0.6	92	0.4	25,702	100.0
1991	4,200	17.0	13,052	52.9	7,204	29.2	145	0.6	77	0.3	24,678	100.0
1992	4,301	17.2	13,267	53.1	7,216	28.9	107	0.4	78	0.3	24,969	100.0
1993	4,695	18.8	12,934	51.8	7,161	28.7	102	0.4	81	0.3	24,973	100.0
1994	4,917	19.6	12,841	51.2	7,111	28.4	109	0.4	93	0.4	25,071	100.0
1995	4,930	19.7	12,912	51.5	7,055	28.1	96	0.4	95	0.4	25,088	100.0
1996	5,074	20.1	12,332	49.0	7,583	30.1	120	0.5	84	0.3	25,193	100.0
1997	5,025	20.2	11,925	48.0	7,741	31.1	112	0.5	65	0.3	24,868	100.0
1998	4,912	19.4	11,979	47.4	8,200	32.4	101	0.4	100	0.4	25,292	100.0
1999	5,150	20.3	11,634	45.8	8,397	33.1	123	0.5	73	0.3	25,377	100.0
2000	4,671	18.8	11,312	45.6	8,633	34.8	120	0.5	81	0.3	24,817	100.0
2001	4,168	17.0	10,787	44.0	9,316	38.0	137	0.6	87	0.4	24,495	100.0
2002	4,267	17.5	10,279	42.1	9,645	39.5	120	0.5	85	0.3	24,396	100.0
2003	4,335	17.9	9,971	41.1	9,726	40.1	163	0.7	80	0.3	24,275	100.0
2004	4,425	17.6	10,325	41.1	10,131	40.3	149	0.6	82	0.3	25,112	100.0
2005	4,811	18.1	10,949	41.3	10,517	39.6	150	0.6	98	0.4	26,525	100.0
2006	5,792	20.5	11,164	39.5	10,997	38.9	194	0.7	107	0.4	28,254	100.0
2007	6,008	20.3	11,363	38.4	11,928	40.3	203	0.7	127	0.4	29,629	100.0
2008	6,051	20.0	11,633	38.5	12,186	40.3	232	0.8	129	0.4	30,231	100.0
2009	5,653	18.4	12,231	39.8	12,493	40.6	245	0.8	126	0.4	30,748	100.0
2010	5,744	18.6	12,168	39.5	12,539	40.7	255	0.8	129	0.4	30,835	100.0
2011	5,650	17.8	12,993	40.9	12,733	40.1	232	0.7	126	0.4	31,734	100.0
2012	5,900	17.7	13,492	40.4	13,673	40.9	200	0.6	128	0.4	33,393	100.0
2013	5,707	16.8	14,192	41.8	13,681	40.3	195	0.6	153	0.5	33,928	100.0
2014	5,732	16.5	14,439	41.6	14,057	40.5	198	0.6	148	0.4	34,687	100.0
2015	7,770	22.5	12,646	36.7	13,692	39.7	205	0.6	169	0.5	34,482	100.0

Extracted from Midwives' Notification System on 3 January 2019.

BBA indicates women who give birth before arrival at the health service or for homebirths before the midwife arrived at the home.

Homebirth total includes both public and private homebirths and public births at the freestanding birth centre in Kalamunda.

Tertiary total includes women giving birth at the Birth Centre attached.

Appendix D Notification of Case Attended Jan-Dec 2015

Health (Notifications by Midwives) Regulations 1994 Form 2 NOTIFICATION OF CASE ATTENDED – PREGNANCY DETAILS MR15

Last name _____	Unit Record No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Estab _____
First name _____	Birth date (Mother)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Ward _____
Address of usual residence		State _____		Post code		<input type="text"/>		Marital status <input type="text"/>
Number and street _____		State _____		Post code		<input type="text"/>		1=never married 2=widowed 3=divorced 4=separated 5=married (incl. Defacto) 6=unknown
Town or suburb _____	Height	<input type="text"/>	<input type="text"/>	Weight	<input type="text"/>	<input type="text"/>	<input type="text"/>	Ethnic status of mother <input type="text"/>
Maiden name _____	Telephone	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	1=Caucasian 10=Aboriginal not TSI 11=TSI not Aboriginal 12=Aboriginal and TSI Other _____

PREGNANCY DETAILS	
PREVIOUS PREGNANCIES:	
Total number (excluding this pregnancy):	<input type="text"/>
Parity (excluding this pregnancy):	<input type="text"/>
Previous pregnancy outcomes:	
- liveborn, now living	<input type="text"/>
- liveborn, now dead	<input type="text"/>
- stillborn	<input type="text"/>
Number of previous caesareans	<input type="text"/>
Caesarean last delivery 1=yes 2=no	<input type="text"/>
Previous multiple births 1=yes 2=no	<input type="text"/>
THIS PREGNANCY:	
Estimated gest wk at 1 st antenatal visit	<input type="text"/>
Total number of antenatal care visits	<input type="text"/>
Date of LMP:	<input type="text"/>
This date certain 1=yes 2=no	<input type="text"/>
Expected due date:	<input type="text"/>
Based on 1=clinical signs/dates	<input type="text"/>
2=ultrasound <20 wks	<input type="text"/>
3=ultrasound >=20 wks	<input type="text"/>
Smoking:	
Number of tobacco cigarettes usually smoked each day during first 20 weeks of pregnancy	<input type="text"/>
Number of tobacco cigarettes usually smoked each day after 20 weeks of pregnancy	<input type="text"/>
<i>(If none use '000'; occasional or smoked < 1 use '998', undetermined use '999')</i>	
Complications of pregnancy:	
1 <input type="checkbox"/> threatened abortion (<20wks)	
2 <input type="checkbox"/> threatened preterm labour (<37wks)	
3 <input type="checkbox"/> urinary tract infection	
4 <input type="checkbox"/> pre-eclampsia	
5 <input type="checkbox"/> antepartum haemorrhage (APH) placenta praevia	
6 <input type="checkbox"/> APH – placental abruption	
7 <input type="checkbox"/> APH - other	
8 <input type="checkbox"/> pre-labour rupture of membranes	
9 <input type="checkbox"/> gestational diabetes	
11 <input type="checkbox"/> gestational hypertension	
12 <input type="checkbox"/> pre-eclampsia superimposed on essential hypertension	
99 <input type="checkbox"/> other (specify) _____	
Medical conditions:	
1 <input type="checkbox"/> essential hypertension	
3 <input type="checkbox"/> asthma	
4 <input type="checkbox"/> genital herpes	
5 <input type="checkbox"/> type 1 diabetes	
6 <input type="checkbox"/> type 2 diabetes	
8 <input type="checkbox"/> other (specify) _____	

LABOUR DETAILS	
Procedures/treatments:	
1 <input type="checkbox"/> fertility treatments (include drugs)	
2 <input type="checkbox"/> cervical suture	
3 <input type="checkbox"/> CVS/placental biopsy	
4 <input type="checkbox"/> amniocentesis	
5 <input type="checkbox"/> ultrasound	
6 <input type="checkbox"/> CTG antepartum	
7 <input type="checkbox"/> CTG intrapartum	
Intended place of birth at onset of labour:	
1=hospital 2=birth centre allocated to hospital	<input type="text"/>
3=birth centre free standing 4=home 8=other	<input type="text"/>
Onset of labour:	
1=spontaneous 2=induced 3=no labour	<input type="text"/>
Augmentation (labour has begun):	
1 <input type="checkbox"/> none	
2 <input type="checkbox"/> oxytocin	
3 <input type="checkbox"/> prostaglandins	
4 <input type="checkbox"/> artificial rupture of membranes	
8 <input type="checkbox"/> other	
Induction (before labour begun)	
1 <input type="checkbox"/> none	
2 <input type="checkbox"/> oxytocin	
3 <input type="checkbox"/> prostaglandins	
4 <input type="checkbox"/> artificial rupture of membranes	
5 <input type="checkbox"/> dilatation device i.e. Foley Catheter	
8 <input type="checkbox"/> other	
Analgesia (during labour)	
1 <input type="checkbox"/> none	
2 <input type="checkbox"/> nitrous oxide	
4 <input type="checkbox"/> epidural/caudal	
5 <input type="checkbox"/> spinal	
6 <input type="checkbox"/> systemic opioids	
7 <input type="checkbox"/> combined spinal/epidural	
8 <input type="checkbox"/> other	
Duration of labour	
1 st stage (hour & min):	hr <input type="text"/> min <input type="text"/>
2 nd stage (hour & min):	hr <input type="text"/> min <input type="text"/>
Postnatal blood loss in mLs:	<input type="text"/>
Number of babies born (admin purposes only):	<input type="text"/>
MIDWIFE	
Name _____	
Signature _____	
Date _____	<input type="text"/>
Reg. No. _____	<input type="text"/>

Complete this Pregnancy form once for each woman giving birth, and submit one Baby form for each baby born

Health (Notifications by Midwives) Regulations 1994 Form 2 NOTIFICATION OF CASE ATTENDED – BABY DETAILS

Mother last name _____	First name _____	Unit Rec No _____	Etab _____
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BIRTH DETAILS

Anaesthesia (during delivery):

1 none

2 local anaesthesia to perineum

3 pudendal

4 epidural/caudal

5 spinal

6 general

7 combined spinal/epidural

8 other (specify) _____

Complications of labour and birth
(include the reason for instrument delivery):

1 precipitate delivery

2 fetal distress

3 prolapsed cord

4 cord tight around neck

5 cephalopelvic disproportion

7 retained placenta – manual removal

8 persistent occipito posterior

9 shoulder dystocia

10 failure to progress <= 3cm

11 failure to progress > 3cm

12 previous caesarean section

13 other (specify) _____

Principal reason for Caesarean Section (Tick one box only)

1 fetal compromise

2 suspected fetal macrosomia

3 malpresentation

4 lack of progress <= 3cm

5 lack of progress in the 1st stage, 4cm to < 10cm

6 lack of progress in the 2nd stage

7 placenta praevia

8 placental abruption

9 vasa praevia

10 antepartum/intrapartum haemorrhage

11 multiple pregnancy

12 unsuccessful attempt at assisted delivery

13 unsuccessful induction

14 cord prolapse

15 previous caesarean section

16 previous shoulder dystocia

17 previous perineal trauma/4th degree tear

18 previous adverse fetal/neonatal outcome

19 other obstetric, medical, surgical, psychological indications

20 maternal choice in the absence of any obstetric, medical, surgical, psychological indications

Perineal status

1 intact

2 1st degree tear/vaginal tear

3 2nd degree tear

4 3rd degree tear

5 episiotomy

7 4th degree tear

8 other

BABY DETAILS (continued)

Born before arrival: 1=yes 2=no

Birth date: _____ 2 0 _____

Birth time: (24hr clock) _____

Plurality: (number of babies this birth) _____

Birth order: _____
(specify this baby, eg, 1=1st baby born, 2=2nd baby born, etc)

Presentation: _____
1=vertex 2=breech 3=face 4=brow 8=other

Method of birth:

1 spontaneous

2 vacuum successful

3 vacuum unsuccessful

4 forceps successful

5 forceps unsuccessful

6 breech (vaginal)

7 elective caesarean

8 emergency caesarean

Accoucheur(s):

1 obstetrician

2 other medical officer

3 midwife

4 student

5 self/no attendant

8 other

Gender: 1=male 2=female 3=indeterminate

Status of baby at birth: 1=liveborn 2=stillborn (unspecified)

3=antepartum stillborn 4=intrapartum stillborn

Infant weight: (whole gram): _____

Length: (whole cm): _____

Head circumference: (whole cm): _____

Time to establish unassisted regular breathing: (whole min) _____

Resuscitation: (Record one only – the most intensive or highest number)

1 none

2 suction only

3 oxygen therapy only

4 continuous positive airway pressure (CPAP)

5 bag and mask (IPPV)

6 endotracheal intubation

7 ext. cardiac massage and ventilation

8 other

Apgar score: 1 minute _____
5 minutes _____

Estimated gestation: (whole weeks): _____

Birth defects: (specify): _____

Birth trauma: (specify): _____

BABY SEPARATION DETAILS

Separation date: _____ 2 0 _____

Mode of separation: _____
1=transferred 8=died 9=discharged home

Transferred to: (specify establishment code) _____

Special care number of days: _____
(excludes Level 1; whole days only)

MIDWIFE Name _____
Date _____ 2 0 _____

Complete this Baby form once for each baby born, and submit with Pregnancy form



This document can be made available in alternative formats on request for a person with a disability.

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