2022 Best Research Poster Award

Barwon Health

DEAKIN UNIVERSITY

Optimising the rate of birth by Caesarean Section in an Australian health care setting: utilising Group Model Building to identify stakeholder perspectives

O'Halloran S[1], Chapman A[2], Radelaar E[3], Hutchinson A[2], Sominsky L[4], Dawson S[5], Masson G[6], Wong Shee A[7], Alston Laura[1], Vuillermin Peter[6]. [1]Global Centre for Preventative Health and Nutrition, Deakin University, [2]Institute for Health Transformation, Deakin University,[3]Deakin University, [4] Barwon Health and Institute for Mental and Physical Health and Clinical Translation, Deakin University, [5]Institute for Mental and Physical Health and Clinical Translation, Deakin University, [6]Barwon Health, [7]Deakin Rural Health and Grampians Health.

INTRODUCTION

- According to the World Health Organization, caesarean sections (CS) accounts for >21% of all childbirths globally.
- In Victoria, in 2019, the CS rate was 37.2%; hence, there is a need to understand the drivers for this from key stakeholders' perspectives to inform future action.

OBJECTIVES

1. To apply a systems science methods to determine the drivers that influence the CS rate, as perceived by stakeholders.
2. To identify potential areas of action that health services can implement to optimise the rate of birth by CS.

METHOD

- Healthcare professionals involved in maternity care and women undergoing pregnancy care were recruited via email and flyers from six health services across West Victoria.
- Group Model Building workshops were conducted online, and sessions were recorded and transcribed.
- Participants co-created a Causal Loop Diagram (CLD) representing localised drivers using Systems Thinking for Community Knowledge Exchange (STICKE) software, and then identified priority areas for action.
- Drivers and actions were summarised into main themes using theoretical thematic analysis.

RESULTS

- A total of 34 participants attended at least one of three GMB workshops to generate Figure 1.
- Four key themes emerged from the workshops: mothers health and confidence; clinicians providing care; clinical monitoring and intervention; health system issues.
- Sixteen action ideas were generated across the four key themes such as improved education for mothers, birth courses, shared decision making, identifying knowledge gaps in clinical setting, use of intermittent auscultation.

Figure 1: The Causal Loop Diagram developed during Group Model Building workshops with healthcare workers and women undergoing pregnancy care
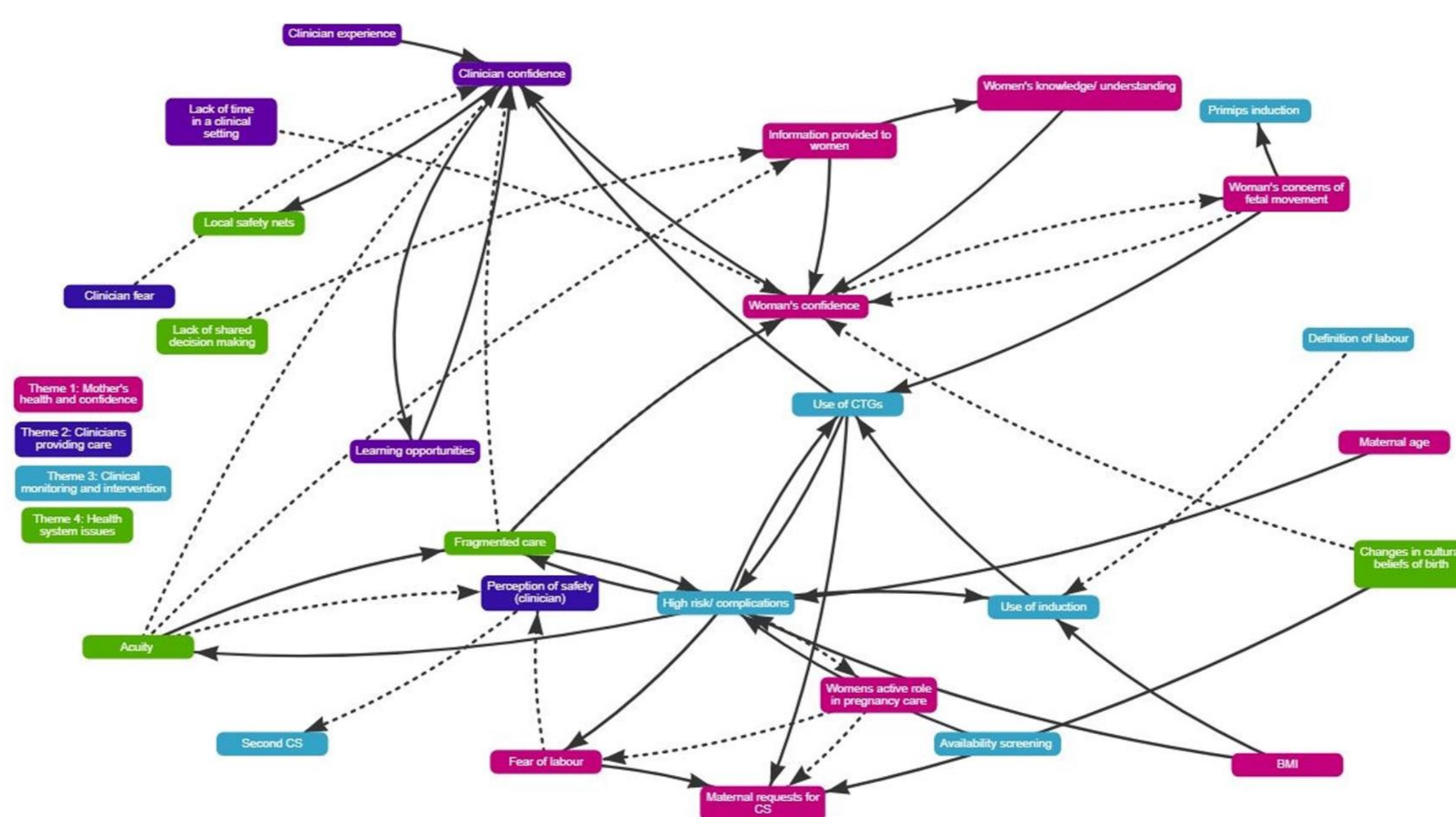
CONCLUSION

Facilitation using the systems science process informed the development of a locally relevant CLD. From key stakeholders' perspective four key themes outlined the main factors influencing CS rates and will provide guidance on strategies to optimise the CS rate and improve the wellbeing of mothers and infants.