



Society of Rural Physicians of Canada Soci t  de la m decine rurale du Canada

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News Release:

7 July 2013

**Closure of Rural Birthing Units Associated with Increased Costs / Worse outcomes
1 in 5 Rural Women have to travel to the city for Birth**

FOR IMMEDIATE RELEASE

SHAWVILLE July 8, 2013 : A recent government report shows that 1 in 5 rural women now have to travel to the city for birth. The report finds that these women, unlike those who have the ability to deliver at the small town hospital, have increased rates of prematurity which dramatically increases costs.

The report by the Canadian Institute for Health Information (CIHI) shows that more than 17% of women from rural areas travelled longer than two hours to reach the hospital where they delivered their babies, compared with less than 1% of urban women. Some women are uprooted from their families for 2 to 4 weeks to deliver elsewhere.

Dr Braam de Klerk, president of the Society of Rural Physicians of Canada says "Babies suffer when rural hospitals close their obstetrical wards. The pennies saved are foolish when you consider the risk to health and increased dollars of caring for those premature babies. Provincial governments should support rural women with their need for local care."

In its recently published Joint Position Paper on Rural Maternity care, the SRPC recommends that "Women who reside in rural and remote communities in Canada should receive high-quality maternity care as close to home as possible."

International studies show that closing a rural maternity unit doesn't save the system money but actually increases costs. Studies have shown that such closures can cause an overall doubling of costs, primarily from increased costs associated with increased prematurity rates.

A study from Washington State by Nesbitt found " Women from communities with relatively few obstetrical providers in proportion to number of births were less likely to deliver in their local community hospital... Women from these high-outflow communities had a greater proportion of complicated deliveries, higher rates of prematurity, and higher rates of neonatal care than women from communities where most patients delivered in the local hospital."

In addition, evidence from Australia shows that closure of rural maternity units lead to poor outcomes. " ... there was a high proportion of low birth-weight infants, stillbirths and neonatal deaths" in towns where maternity services had been withdrawn.

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Background

Joint position paper on rural maternity care

This is a review of the current literature on issues of maternity care relevant to rural populations underpins 14 recommendations prepared and approved by 5 national physician, midwifery and nursing organizations. This review and these recommendations are intended to help rural obstetric care providers to continue to provide quality care for women in their communities.

www.srpc.ca/PDF/cjrm/vol17n4/pg135.pdf



CIHI paper: Hospital Births in Canada: A Focus on Women Living in Rural and Remote Areas

available at

<https://secure.cihi.ca/estore/productFamily.htm?locale=en&pf=PFC2258><https://secure.cihi.ca/estore/productFamily.htm?locale=en&pf=PFC2258&lang=en&media=0>

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The SRPC

The Society of Rural Physicians of Canada (SRPC) is the national voice of Canadian rural physicians. Founded in 1992, the SRPC's mission is to provide leadership for rural physicians and to promote sustainable conditions and equitable health care for rural communities.

The SRPC is a voluntary professional organization with over 3,000 members representing rural physicians in Canada's 5 regional divisions spanning the country. <http://www.srpc.ca>

