# Article information:

Rural–urban disparities in caesarean section rates in minority areas in China: evidence from electronic health records - Lili Kang, Hai Gu, Shangyuan Ye, Biao Xu, Kangzhen Jing, Ning Zhang, Bo Zhang, 2020
<https://journals.sagepub.com/doi/10.1177/0300060519877996>

# Article summary:

1. This study examined the electronic health records of 61,903 women who gave birth in three major public hospitals in Inner Mongolia, China between 2012 and 2016.

2. The results showed that caesarean section rates were significantly higher in rural compared to urban hospitals (48% vs 38%).

3. Multinomial regression analyses revealed that maternal age, ethnicity, health insurance type, employment status, reproductive history and the newborn’s sex were significant risk factors associated with caesarean section rate.

# Article rating:

May be slightly imbalanced: The article presents the information in a generally reliable way, but there are minor points of consideration that could be explored further or claims that are not fully backed by appropriate evidence. Some perspectives may also be omitted, and you are encouraged to use the research topics section to explore the topic further.

# Article analysis:

This article provides a detailed analysis of the rural-urban disparities in caesarean section rates using electronic health records from three major public hospitals located in the Province of Inner Mongolia, which is a minority area in Northeastern China. The authors used multinomial regression analyses to examine the data from 61,903 women who gave birth between January 2012 and December 2016. The results showed that caesarean section rates were significantly higher in rural compared to urban hospitals (48% vs 38%), and this disparity consistently increased over time.

The article is well written and provides a comprehensive overview of the research conducted by the authors. The methods used are appropriate for this type of study and provide reliable results. Furthermore, the authors have taken into account potential confounding factors such as maternal age, ethnicity, health insurance type, employment status, reproductive history and newborn’s sex when conducting their analyses.

However, there are some potential biases that should be noted when interpreting these results. Firstly, the study was conducted in only one province in China which may limit its generalizability to other regions or countries with different healthcare systems or cultural norms regarding childbirth practices. Secondly, it is possible that some of the data collected may be incomplete or inaccurate due to errors made during data entry or coding errors which could lead to inaccurate conclusions being drawn from the analysis. Finally, it is important to note that while this study provides valuable insights into rural-urban disparities in caesarean section rates among minority populations in China it does not explore any potential causes for these disparities or suggest any interventions that could be implemented to reduce them.

# Topics for further research:

* Causes of rural-urban disparities in caesarean section rates
* Interventions to reduce rural-urban disparities in caesarean section rates
* Cultural norms regarding childbirth practices
* Accuracy of electronic health records
* Impact of health insurance type on caesarean section rates
* Reproductive health disparities in minority populations

# Report location:

<https://www.fullpicture.app/item/4f25573eccb708e20446f1e8da067066>