Submission No 29

SUPPORT FOR NEW PARENTS AND BABIES IN NEW SOUTH WALES

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New parents and their babies need much more support than they receive currently nationally, including New South Wales. This lack of support cuts across socioeconomic, cultural and geographic boundaries, as many families live significant distances from each other. The support of 'the village' from times past is available to only a lucky few.

The women and children who are impacted most by the lack of government and family support are almost entirely voiceless, with little opportunity to express their stories and seek help, firstly because the forums for collecting their stories are not available, and secondly because they are too busy in their unrelenting 24/7 roles of raising young children.

This lack of support for families has led to a significant lack of support for evidence based reforms that would improve families' outcomes. For example, the best possible maternity care scenario for all women and their babies is midwifery-led continuity of care: http://www.cochrane.org/CD004667/PREG_midwife-led-continuity-models-care-compared-other-models-care-women-during-pregnancy-birth-and-early

However only approximately 8% of women in Australia are receiving continuity of care: (https://www.ncbi.nlm.nih.gov/pubmed/26603016).

This means that over 90% of women receive only fragmented care during their pregnancies, births and postnatal periods that places their and their babies' lives at greater risk.

This is also in spite of Australia having had a national plan (National Maternity Services Plan (NMSP) 2010-2015) to improve maternity outcomes, including implementing rolling out continuity of care for women, yet during this time there was only a negligible increase in the amount of women who could receive it. This is also in spite of NSW having a policy to improve birth outcomes "Towards Normal Birth" that has only been implemented in a piecemeal fashion in some hospitals.

NSW families need to start receiving evidence based maternity care, which has these key elements (as quoted from the NMSP):

- continuity of carer across the birth continuum (which includes the postnatal period)
- near where they live or in their homes

• Care to be provided in the 'wellness paradigm' as overwhelmingly, women in the perinatal period are well

Families also need to be actively engaged with by their health services to co-design their health services, as per Standard 2: Partnering with Consumers.