Submission No 45

SUPPORT FOR NEW PARENTS AND BABIES IN NEW SOUTH WALES

Organisation: Country Women's Association of NSW

Name: Ms Danica Leys

Position: Chief Executive Officer

Date Received: 22 November 2017

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Country Women's Association of NSW

Incorporated in 1931 by an Act of NSW Parliament Constituent Society of the Associated Country Women of the World ABN 82 318 909 926

22 November 2017

Lodged Online

Re: Support for New Parents and Babies in NSW

The Country Women's Association ("CWA") is the largest women's organisation in Australia. The CWA of NSW was formed out of desperate need back in 1922. Country women were fighting isolation and an appalling lack of health facilities. These women realised they had nowhere else to turn but themselves – and the result was staggering. Within a year the Association was a unified, resourceful group that was going from strength to strength. The CWA remains an Australian institution and a strong voice for women across the country.

CWA members share a commitment to improving the lives of women and their families by lobbying government on key agenda issues, fundraising and teaching life skills.

As part of the largest women's organisation in Australia, our key aims are to provide a forum for the voice of women in NSW and improve the conditions and welfare of all women and families, especially in regional and rural areas.

We also support initiatives that enhance the value of 'country living' – especially in the areas of health and education; as well as strong encourage development in regional areas and increase the viability of rural communities.

The CWA of NSW would like to provide some brief comment to the Community Services Inquiry into support for new parents and babies in New South Wales.

- The adequacy of current services and structures for new parents, especially those who need extra support, to provide a safe and nurturing environment for their babies.
- The current pre-birth classes and information sessions cannot be faulted.
- Weekly visits to baby clinic supportive.
- Phone contact with child and family health reassuring for ongoing issues.
- New mums encouraged to call if any concerns, the nurses are very caring and approachable at all times.
- Inadequate drop-in services for women experiencing difficulties with breast feeding.

- Day-stay units for families with complex vulnerabilities are not universally available. These centres need to be multidisciplinary and be staffed by Child & Family Health Nurses, Psychologists and Social Workers and should be able to work with families experiencing difficulties in parenting adjustment and settling issues.
- Long stay mother-baby facilities are not universally accessible for families with complex vulnerabilities.
- Access to speech pathology for infants with feeding and swallowing disorders is inconsistent.
- Access to physiotherapy and occupational therapy for infants with specific needs is inconsistent.

2. Changes to current services and structures that could improve physical health, mental health and child protection outcomes.

- Screening for post-natal depression for new Mums prior to leaving hospital and at an appropriate interval.
- Some new mums relocate from isolated areas to family support before birthing.
- Child and family health nurse follow-up for all infants presenting to hospitals in the first 6 months of life.
- Maternal support for returning to healthy weight range.

3. Specific areas of disadvantage or challenge in relation to health outcomes for babies.

- Refugee communities.
- Culturally and linguistically diverse groups.

4. Models of support provided in other jurisdictions to support new parents and promote the health of babies.

- The committee should establish a reference group of Mums to give personal first hand advice, for example Jessica Rowe has suffered post-natal depression – she must have some thoughts.
- Seek advice from isolated Mums about what support they need.
- Infants or mothers with disabilities and the potential of the NDIS to support.
- Various NGO groups that provide mother, infant or family support.

5. Opportunities for new and emerging technology to enhance support for new parents and babies.

- A 24 hour 1800 support numbers for new Mums to use for support or reassurance.
- Skype to the support nurses etc. for isolated Mums.
- Phone apps to gain access to information and support.
- TeleHealth particularly in rural and remote areas.

6. Any other related matters.

• Find attached: "Aqua Mums" an example of a successful health promotion activity currently running in WNSWLHD.

Case study

The support I received as a new mum included 2 or 3 visits from a midwife after I came home from the hospital, and then I joined a mothers group at the Fairy Meadow Early Childhood Centre which was facilitated by a nurse for the first four weeks.

It was good to have the midwife visit in those first few days because I had a whole page of questions about everything that I was doing as a mum and Caleb was doing as a baby. It was reassuring to have the midwife tell me that all of that was normal. I have also appreciated the mothers group for the support of having other mums in a similar situation to me to talk to.

Both of these are good services that are provided for new mums. It is easy to feel anxious as a new parent and worried about your baby. I know that some of my friends and those in my mothers group had a lot of trouble with feeding and with weight gain for their baby. Sometimes I think the nurses exacerbated this worry by telling them that their baby wasn't meeting certain weight goals and making them come in for regular checks. I know that it is important to keep an eye on this, but I think sometimes the mums interpreted this as being more serious a problem than it really was, and being really worried when they didn't need to be.

I think a lot of mums don't end up joining a mothers group or staying in one because they find it too daunting to be in a big group or because they don't want to be comparing their baby to all the other babies. I think this can lead to these mums feeling very isolated.

The nurse who facilitated my mothers group for the first four weeks didn't come across as very supportive. She made us feel like some of our questions were silly, and was only able to give advice within certain prescribed guidelines which sometimes felt a bit limiting and not tailored for our individual babies and situations. But I have continued to meet with the mothers from my group and it has been a really positive experience.

Thank you for the opportunity to comment, we would be more than willing to provide verbal comment should the opportunity arise.



Danica Leys
Chief Executive Officer

AQUA MUM'S





Cowra Community Health 18th May 2017

In the beginning

- There was a recognised need for Mums visiting the Cowra Child and Family Health Nurses (C&FHN) to have improved access to social engagement and regular exercise
- The solution was found within our team in the successful 20 year old 'Mobility Improved Aqua Program'.
- The idea sparked, the team was motivated and 'Aqua Mum's' was born.

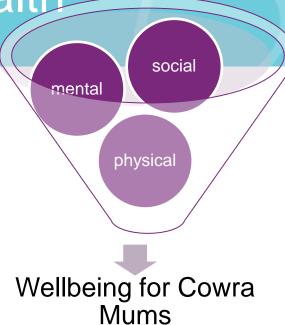


The Process

- To begin the process the CFHN's attended the professionally run Aqua Leaders Training provided by the WNSWLHD Health Promotion Team
- Following consultation with the Aquatic Centre It was decided that Each Tuesday from November to April the C&FHN would hold an Aqua class in Partnership with Cowra Shire Aquatic Centre (CSAC).
- The Classes are free, the only cost to mothers is entry to the pool.

Preventative Health

 This is our local solution to the nationwide challenge of social inclusion for young families in a rural community.





Teamwork and Partnerships

- Cowra Aqua Mums is successful today because of partnerships developed between volunteers, Cowra Aquatic Centre and Cowra Information and Neighbourhood centre. (CINC)
- As the exercise program grew in popularity so did the need for greater teamwork.
- A toddlers room was started in 2012 staffed by CINC and in 2014 volunteers from the MIPS were invited to assist with the babies. We now have 7 registered volunteers who rock prams, sing songs and walk the deck, allowing mothers to attend aqua and enjoy the benefits of activity and socialising.

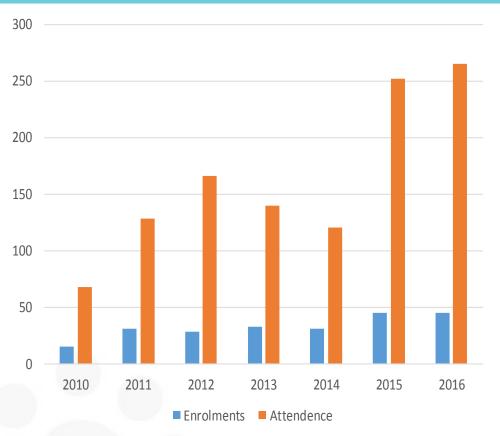


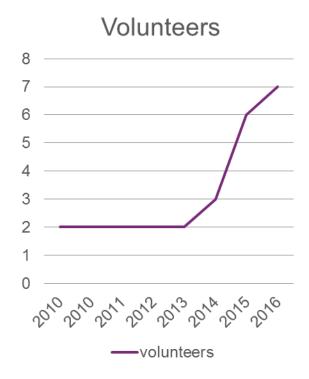
Outcomes

- The program has grown from 5 mums to an amazing 41 Registered mums. The benefits expressed by Mum's are access to Health Professionals, social inclusion and improving health and fitness.
- The Aboriginal Maternal Infant Health Nurses are closely link to the Aqua Mums and provide the opportunity for all Aboriginal Families in the Community to participate in the program.



Data 2010 - 2016







Evaluations

"Great Social outing" "Fun and fitness" "One hour of me time a week"

"To get back into shape"

"The babysitting was the reason I could attend"

"Meet other mums and get out of the house"

"Something different"
"Fitness during pregnancy"

"The Classes are absolutely wonderful"

Sustainability

- Cowra Community Health this year celebrated 20 years of Aqua Fitness with the MIPS having over 100 participants and 10 trained Aqua leaders (seven volunteers and three staff). We would like to think we can meet this amazing milestone.
- The equipment pool has been built up over the years with Health Promotions Grants, donations and fund raising activities.
- Babysitting can be organised with a partnering organisation and volunteers.

Productivity and Efficiency

- Aqua Mums required no ongoing budget as it was built on the back of the resourced MIPS program that had an established equipment pool and positive networks within the Community.
- The Cowra Community Health Team supports the program within existing staffing FTE. The group approach allows staff to support more Families in a shorter time frame.
- Making use of volunteers improves Community involvement and also a labour cost saving initiative improving the efficiency of the program
- Engaging partners allowed resource to be spread across various organisations with differing skills to contribute

Link to NSW Health strategic planning framework

'Aqua Mums' is linked to the NSW State Health Plan Towards 2021 by Delivering Truly Integrated Care & Keeping People Healthy, by providing the opportunity for Families to manage their own health in a fun and innovative way.

WHSWLHD Strategic Priorities are reflected by supporting high performing primary care, closing the Aboriginal health gap, Improving patient experience and Living within our means.



Thank you Any Questions

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Adolofed from the artwork of Jasmine spill

