

**Submission
No 857**

INQUIRY INTO BIRTH TRAUMA

Organisation: Maternity Services Alliance

Date Received: 18 August 2023

Submission to the Select Committee on Birth Trauma from the Maternity Services Alliance

The Maternity Services Alliance (MSA) consists of the Australian College of Midwives, Country Women's Association of NSW, Waminda South Coast Women's Health and Well-being Aboriginal Corporation, NSW Nurses and Midwives' Association, Better Births Illawarra and leading midwifery academics in NSW. We are a unique group of organisations within Australia that come together to advocate for positive change within national maternity services.

Many of our organisations have made individual in-depth submissions to this inquiry already.

For several reasons high quality maternity care is not a universal experience, and this inquiry will surface a number of cases. It is with the intent of ensuring that high quality maternity care is available to all, that members of the MSA have provided comprehensive responses to this Inquiry and endorse the following recommendations made by each; a summary of these are provided below.

Our recommendations to assist with the Birth Trauma Inquiry sit within five domains:

Changes to the way midwives work:

Midwifery-led Continuity of Care must be accessible for all birthing women, especially those who are deemed 'high-risk'. This needs to be mandated for all health districts.

Workforce planning

Urgent workforce planning, in consultation with academics, regulatory bodies, professional and industrial representatives, and employers, must occur.

Implementation of new staffing models in all maternity units must be undertaken to ensure there are sufficient midwifery staff of an appropriate skill-mix.

Appropriate services for women

Comprehensive and culturally appropriate antenatal education must be offered to all birthing women and their families free of charge.

A review of NSW Health policy regarding induction of labour be undertaken to ensure the threshold for intervention is evidence-based and the importance of informed consent is a paramount consideration.

Education on respectful maternity care, as per woman centered care strategy, must be provided to all health practitioners working in maternity services. Such education must include the identification of and care planning for women who have previously experienced birth trauma.

Establish midwifery led level 2 regional and rural birth centres close to home so women do not need to travel vast distances to get to a hospital.

Rural and remote area services should be a priority area for implementation

Expand publicly funded homebirth to the remaining 9 NSW Local Health Districts to give women in NSW the best chance of having a normal physiological birth as only 5 LHDs currently offer this service.

Provide all women in NSW access to government-supplied postpartum care in line with leading OECD nations for first 1000 days.

Support for midwives

Clinical supervision (CS) must be available for all midwives. Other health professionals must attend CS as a requirement of their registration. This is also vital for midwives in order for them to grow professionally, cope emotionally and make sense of their work.

Competitive remuneration for NSW midwives must be addressed in order to recruit and retain suitable numbers of midwives.

Systemic, educational, and legal changes

Ensure NSW upholds its obligations to the Committee on the Elimination of Discrimination against Women (CEDAW), to which Australia is a signatory, by ensuring all women receive dignified, respectful maternity care.

Consider current funding structures moving away from activity-based funding to woman-centred funding, in example a portion of funding is allocated to a woman during each trimester and the postnatal period.

Target obstetric violence by the appropriate collection of data to inform decision making in the area of Birth trauma into the future.

All maternity care providers in NSW complete funded consumer led training on women's reproductive health rights, and informed consent, and language around decision-making is reviewed.

Please contact Rita Martin, Government & Community Relations, NSWNMA at [redacted] if you would like further information. We would be happy to give evidence at the hearing of this Inquiry.

On behalf of NSW Maternity Services Alliance

