



Australian College of
Midwives

ACM: For midwives. With women. For the future.

**NHMRC Consultation
Section 4 of the National Statement**

ACM Submission

Issued September 2023



NHMRC Section 4 of National Statement – ACM Submission

The Australian College of Midwives

The Australian College of Midwives (ACM) is the peak professional body for midwives in Australia and welcomes the opportunity to provide a written submission to the **NHMRC Review of Section 4 of the National Statement**. ACM represents the professional interests of midwives, supports the midwifery profession to enable midwives to work to full scope of practice, and is focused on ensuring better health outcomes for women, babies, and their families. ACM is committed to growth of the midwifery profession, midwifery leadership and strengthening and enhancing the opportunities for midwives. Better outcomes for women, include the right to access respectful maternity care, quality maternity care, and the care of their choice, close to home. Rigour and quality of Australian research pertaining to women, pregnant women and babies is key to supporting high-quality, evidence-based care.

Consent to publish

ACM consents to this submission being published in its entirety, including names.

Terms of Reference / Questions

This submission will address the following questions:

3. *Language related to sex and gender is evolving, particularly in the context of references to pregnancy. Do you have any input on whether the language used in the revised Chapter 4.2 is appropriate and, if not, with what it should be replaced?*
4. *If you have any other input related to Section 4 that you would like to provide, please do so here*

ACM response

ACM highly recommends the term ‘woman’ remain in Section 4 and is used in its sexed meaning of “adult human female”.

It is vital to differentiate between sex and gender identity in research, public health policy and when communicating with consumers. While a person’s gender identity may change over time, a person’s sex at a biological/genomic level will not. Precision and accuracy of data is of vital importance when studying the impact of diseases, medications, interventions etc. on various groups. Inappropriate inclusion of persons in study groups due to confusion around their sex and gender has created misleading and confusing research and this does not engender robust evidence to improve health outcomes.

ACM recognises the need to include a diversity of human experiences. The midwifery philosophy of ‘woman-centred care’ focuses on individualised care¹. At its core, this manifests as orientating the professional partnership around the identified needs, priorities, and preferences of the individual seeking care.

1. International Confederation of Midwives. (2014). Core Document. *Philosophy and Model of Midwifery Care*. Retrieved from <https://www.internationalmidwives.org/assets/files/definitions-files/2018/06/eng-philosophy-and-model-of-midwifery-care.pdf>

Recommendations

1. ACM recommends the term ‘woman’ remain in Section 4 and is used in its sexed meaning of “adult human female”.
2. ACM recommends the NHMRC develop guidance specifying the importance of separating sex and gender / gender identity in all research applications to support best practice research within Australia.
3. ACM supports the explanatory statement below however we recommend the removal of the phrase ‘important to avoid gendering birth’. Birth is an inherently female process, and only those who are born biologically female can become pregnant and birth babies. As such we recommend the following rewording.

Existing Explanatory Statement

1 The terms *pregnant woman/women* and *woman who has carried the fetus* will be used in the National Statement because women, including pregnant women, continue to be unfairly excluded from research or otherwise disadvantaged in many countries around the world, including Australia. However, we recognise **that it is also important to avoid gendering birth**, and those who give birth, as feminine, and the National Statement does not support exclusion of those who are or have been pregnant and do not identify as women.

New recommended wording.

1 The terms *pregnant woman/women* and *woman who has carried the fetus* will be used in the National Statement because women, including pregnant women, continue to be unfairly excluded from research or otherwise disadvantaged in many countries around the world, including Australia. However, we recognise that **not everyone who gives birth identifies as a woman or female**, and the National Statement does not support exclusion of those who are or have been pregnant and do not identify as women.

For your consideration.



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