

## Response ID ANON-T9XT-PH5W-W

Submitted to **Establishing a National Action Plan for the Health of Children and Young People: 2020 to 2030**  
Submitted on **2019-03-27 14:49:07**

### SECTION A – DEMOGRAPHICS

#### 1 Please provide your name (optional)

**Name:**

Ruth King

#### 2 Where are you based?

SA

**Other location:**

#### 3 Are you providing your response on behalf of an organisation?

Yes - please provide the name of the organisation below:

**Organisation:**

Australian College of Midwives

#### 4 What is your email address?

**Email:**

ruth.king@midwives.org.au

#### 5 What is your area of expertise?

**Area of expertise:**

Midwifery

#### 6 Are you providing your response as:

a health professional

**Other occupation:**

#### 7 Do you identify as an Aboriginal or Torres Strait Islander person?

No

#### 8 Priority population group status

None of the above

#### 9 Does your organisation represent one of the priority population groups?

Yes - please specify below:

**Priority population group:**

all children from pre-conception through to 6 weeks of age)

#### 10 In which country were you born?

Australia

**Country born:**

### SECTION B - THE STRUCTURE OF THE ACTION PLAN

#### 11 Overall structure of the Action Plan

Yes

**Overall structure - comments:**

## 12 Adequate context and background for the Action Plan

Yes

**Adequate context:**

## SECTION C - PRIORITY AREAS

### 13 Do you agree with the priority areas identified for the Action Plan?

Yes

**Priority areas - agreement:**

### 14 Priority area 1 – Enhance services for rural and remote areas

No - please provide comments and explain your selection (200 word limit). Please ensure that your response is supported by evidence/references.

#### **Disagreement to actions/activities under priority 1:**

Midwifery is missing. Evidence identifies midwifery continuity of care as providing better outcomes for women and their families - even in rural and remote. There needs to be a commitment to the expansion of these services to support women during pregnancy, which is the first key life stage for all children (antenatal & infancy)

### 15 Priority area 2 - Expand support for families, especially families living with adversity

No - please provide comments and explain your selection (200 word limit). Please ensure that your response is supported by evidence/references.

#### **Disagreement to actions/activities under priority 2 :**

Priority 4 has nurses delivering antenatal care - this is the role of a Midwife. Again the evidence identifies midwifery continuity of care to be gold standard evidence based care. Further the action states "Identify sustained funding for the roll-out of programs in disadvantaged communities, choosing from evidence-based programs which are in use in Australia, and are designed specifically for Australian contexts. " Midwifery CoC is in existence and is evidence based. Priority 5 should be expanded to include midwives. The Action states: "Undertake a Randomised Controlled Trial of adapted evidence-based programs, co-designed with communities, for use with Aboriginal and Torres Strait Islander families." There are existing Birthing on Country Models which could be implemented/supported.

### 16 Priority area 3 – Increase investment in research, policy and practice translation

Yes

**Disagreement to actions/activities under priority 3:**

### 17 Priority area 4 – Commit to nationally consistent data collection

Yes

**Disagreement to actions/activities under priority 4:**

## SECTION D - OVERALL COMMENTS

### 18 Do you have any additional comments? (200 word limit)

#### **Overall comments:**

We are very concerned at the omission of midwifery in the initial consultation.

This is evidenced by the lack of recognition of midwifery and the role of the midwife in the first key stage of the child's life - antenatal and infancy.

There is strong, current evidence that highlight the benefits to women and the wider communities of midwifery continuity of care (e.g. reducing stillbirths and premature births and lowering perinatal mental health). Midwifery has in this strategy been overlooked/omitted and in the case of Priority 4 been replaced with nursing - when the antenatal care is the scope of a midwife.

As the Action Plan identifies "... that the ante-natal period, and in some cases pre-conception period, are also key to optimal health for children and young people." which means that to ensure the best start in life for children, consideration must include the time before they are born and therefore the care that is provided to their mothers is an important consideration and should not be overlooked or attributed to the wrong health profession.

We would request that further consultation is undertake with this in mind.