



Another call for increased access to midwifery continuity of care models

PRESS RELEASE: July 2, 2019

The Australian Preterm Birth Prevention Alliance (APTBPAA) released a statement on Friday regarding the considerable body of evidence that shows a reduction in preterm birth for women who experience continuity of care from a known midwife.

The Australian College of Midwives (ACM) has long advocated the benefits of midwifery continuity of care and we commend APTBPAA on their statement highlighting one of the many significant benefits.

We know that women who receive continuity of care from a known midwife are more likely to have a normal birth, breastfeed their babies and cost the health system less. Their babies are more likely to be born healthy and at term.

Midwifery continuity of care models are typically available to women with pregnancies that are deemed 'low risk', but strong evidence supports the benefits of these models of care for women from vulnerable or disadvantaged groups who typically experience higher rates of preterm birth.

In Australia, we see higher preterm birth rates in Aboriginal and/or Torres Strait Islander women, women of migrant or refugee background, women living in remote areas, women under 25 years or women experiencing social and economic disadvantage. Midwifery continuity of care may be difficult or impossible to access for these women, but it is a safe and cost-effective option which should be made available.

ACM supports APTBPAA in their recommendation of women being able to choose both their care provider and their preferred model of care for their pregnancy; a principle that should be respected and protected.

Further, ACM joins APTBPAA in their call to jurisdictional health departments and healthcare providers to increase access to midwifery continuity of care models, including for women in vulnerable, higher risk groups, as a public health strategy to safely reduce the rising rate of preterm birth in Australia.

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For comment, please contact:

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Additional information: The Australian College of Midwives

The Australian College of Midwives (ACM) is the peak professional body for midwives in Australia who are registered with, and regulated by, the Nursing and Midwifery Board of Australia (NMBA). ACM's position is that women be attended during pregnancy, birth and postnatally by a midwife who is registered with the NMBA.

Statement from the Australian Preterm Birth Prevention Alliance: Midwifery Continuity of Care

Friday, 28 June 2019

The Australian Preterm Birth Prevention Alliance recommends midwifery continuity of care as a key strategy to prevent preterm birth in Australia.

There is a considerable body of evidence that demonstrates a reduction in preterm birth when women experience continuity of care from a known midwife during pregnancy.

Midwifery continuity of care is defined as care provided by a known midwife or a small group of known midwives to women during pregnancy, birth and the postnatal period. This care is provided in collaboration with other relevant healthcare providers when appropriate, including obstetricians and general practitioners, together with specialised staff such as social support workers.

High quality evidence from the [Cochrane Database of Systematic Reviews](#) demonstrates clearly that women in midwifery continuity models of care have about a 24% lower risk of preterm birth before 37 weeks gestation when compared with other models of care. There is also good evidence of efficacy in preventing preterm birth in specific populations of pregnant women, such as those from vulnerable or disadvantaged groups.

Disparities in preterm birth rates are well known, and in Australia manifest as persistently higher rates of preterm birth among women who are Aboriginal and/or Torres Strait Islander, of migrant or refugee background, living in rural and remote areas, aged younger than 25 years, or experiencing social and economic disadvantage.

However, midwifery continuity of care is often not accessible to these vulnerable groups of women as these models of care often focus on women deemed 'low risk'. Evidence suggests that increasing access to midwifery continuity of care offers great promise in reducing current disparities in preterm birth rates, especially when tailored to the needs and context of members of the individual groups of women.

Ensuring that the needs of vulnerable groups of women are met will require flexibility in design of the model of care to provide appropriate partnerships with multidisciplinary care providers (such as in the case of Aboriginal women when models need to support Aboriginal leadership).

The Alliance supports women's choice of care providers and this principle should be respected at all times.

We acknowledge that it may not always be possible to provide all women with full continuity of care throughout pregnancy and the perinatal period. Many creative models of service will be required to increase the extent of continuity provided by midwives throughout our diverse health care system, including within private obstetric models of care.

The Australian Preterm Birth Prevention Alliance calls on jurisdictional health departments and healthcare providers to increase women's access to midwifery continuity of care models, particularly in vulnerable groups, as a major public health strategy to safely reduce the rising rate of preterm birth in Australia.

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Background

The Australian Preterm Birth Prevention Alliance is a national Alliance of clinical leaders, researchers, health departments, and communities working together to safely lower the rate of preterm birth in Australia.