

MEDIA RELEASE

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More WA women missing out on access to quality maternity care as birth outcomes decline during pandemic

The Western Australia (WA) Department of Health is being called on to provide women with expanded access to continuous antenatal care as an increasing number of women are missing out on optimal maternity care.

Just one in 10 women in WA public hospitals has access to the same midwife during their pregnancy, birth and postpartum, with many women seeing more than 20 different care providers.

The call comes as the state's healthcare system grapples with significant staff shortages, and many pregnant women are being turned away from their maternity care provider during periods of high demand.

President of Maternity Choices Australia, Peta Tuck, said providing women with access to continuity of midwifery care models not only improves outcomes for mothers and babies but can significantly address staff retention issues and take the pressure of a strained hospital system.

'Sadly, only a small proportion of women birthing in public hospitals can access ongoing personal care with a known midwife, and we're calling on the state government to expand access now,' Ms Tuck said.

Demand for publicly funded home births has grown significantly during the pandemic, but only two out of nine Health Services in the state offer a home birth program, which provides women with ongoing monitoring and support from a known midwife.

Meanwhile, the most recent Mothers & Babies Report shows that demand for birth centres in Australia has doubled in the last five years, and more than half of women who chose to have their baby in a birth centre missed out.

A number of community organisations has joined Maternity Choices Australia in writing to WA health and state ministers in the lead-up to the state election demanding key revisions to the state's maternity services.

The call comes against the backdrop of a rise in caesareans in WA, with the state's caesarean rate soaring to 38%, the highest in the country, while one in three women birthing in the state is experiencing trauma.

Ms Tuck said fragmented maternity services led to poorer physical and emotional outcomes for mothers and babies, particularly for First Nations women and their newborns.

'We've seen a rise in demand for access to publicly funded home births and birth centres primarily because of the higher level of personal care and support that is offered through these models as opposed to the hospital system where service delivery is fragmented and women are usually attended to by a stranger,' Ms Tuck said.

'Continuity of midwifery care means women and their babies are supported by a primary and backup midwife during the continuum of their journey, which means they're less likely to slip through the cracks.

'There's a wealth of research locally and internationally that expanded access to continuity of care produces better outcomes for mother and baby, including a reduction in the incidence of low birth weight, preterm birth, stillbirth and neonatal death, as well as improved breastfeeding rates and mental health.

The effects are more pronounced for First Nations communities, with data showing that fragmented maternity care results in a 50% rise in pre-term births.

'Continuity of midwifery care is also cost-effective,' Ms Tuck said.

'It is estimated such models would save the WA government over \$5000 per birth compared to all other models of care, which equates to a saving of \$170 million annually.'

Research shows that one in three women in Australia experience birth trauma, one in four develop post-natal depression, and up to one in five develop post-traumatic stress disorder from their birth.

'Studies have found that midwifery continuity of care is the primary means to prevent or drastically reduce trauma,' Ms Tuck said.

'It's time for the government to take action so that our women and babies no longer miss out on the care they deserve.'

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