Statement of Need

Why establishing the Trust is so important!

Aboriginal and Torres Strait Islander midwifery students and midwives explain that the cultural needs of Aboriginal and Torres Strait Islander women are very different to other women – birth is seen as the commencement of the relationship with land and ideally this birth should take place on the woman’s “own terms” surrounded by her choice of family and support people in a culturally appropriate environment either in, or as close as possible, to their own communities. The training of Aboriginal and Torres Strait Islander midwives and women’s healthcare workers, has been noted as one of the critical ways to address this need. Making this care more accessible and culturally appropriate for Aboriginal and Torres Strait Islander women increases their opportunities for health improvement during pregnancy, birth and afterwards.

Universities across Australia are reporting an increase in the number of applications from Aboriginal and Torres Strait Islander people seeking to complete a midwifery education program. However the barriers for them are significant with many having to relocate or travel long distances to complete intensive study components, followed by clinical placements. This incurs high incidental costs over a three year period and severely impacts on the chances of them attaining their goal. Easing the financial burden for Aboriginal and Torres Strait Islander women making the decision to become midwives will make it much easier for women living anywhere in Australia to complete their midwifery qualification and ultimately practice in their community.

In 2010, Aboriginal midwifery students, studying at Southern Cross University, reported that they wanted to help Aboriginal women to be ‘fully informed, educated and empowered during their pregnancies’ – they stated that it had been ‘very difficult due to the costs’. Another Aboriginal student had the additional burden of travelling from Broken Hill with her four-month-old son to attend intensive units of study. This dedication to her desire to become a midwife and the financial impost this creates is significant and represents the need to support these women and others like them.

Fifty-five per cent of Aboriginal and Torres Strait Islander birthing women live in outer regional and remote areas and, as reported in 2008 by the Australian Institute of Health and Welfare, they suffer some of the worst maternal and infant health outcomes in the country. The current practice of relocating Aboriginal and Torres Strait Islander women into larger regional centres for their labour and birth, fails to address the cultural needs or self-identified ‘social’ risks. All of these factors contribute to the increase in poorer outcomes. The important role of community based midwives, where the woman has a midwife who speaks her language or has a good knowledge of her culture or customs, is vitally important to help reduce maternal and newborn mortality and morbidity and is vastly underutilised. Funding to support Aboriginal and Torres Strait Islander student midwives is an important factor in contributing to an improvement in the maternal and neonatal outcomes for Aboriginal and Torres Strait Islander women.

The provision of primary birthing services in remote areas, as has occurred in many countries including Canada and New Zealand, has been positively evaluated. The concept of ‘Birthing on Country’ incorporates local knowledge, community owned and led on-site midwifery training, and a research and evaluation framework, as essential elements in improving the maternal outcomes for Aboriginal and Torres Strait Islander women. A number of Australian case studies, such as those in Ngarampa, Malabar and the Pilbara have found that increasing the uptake of antenatal visits through the provision of culturally appropriate care which engages with local community can significantly improve the birth outcomes and reduce the social isolation that many Aboriginal and Torres Strait Islander women face in the current approach to childbirth and maternal health care.

The Australian College of Midwives strives to be the leading organization in shaping the maternity care for the benefit of women and their families. Part of this vision is to ensure all childbearing women living anywhere in Australia have access to continuity of care by a known midwife. As a member of the Australian Peak Nursing and Midwifery Forum, the College supports and advocates for the development of an Aboriginal and Torres Strait Islander health care workforce to ensure the provision of culturally appropriate care.
The Australian College of Midwives supports the need to increase the number of Aboriginal and Torres Strait Islander midwives in order that women will receive continuity of care, from a known midwife and experience improved health outcomes, thereby helping to close the maternal and infant health gap experienced by Aboriginal and Torres Strait Islander mothers and babies.

More than a decade ago, the Australian Health Ministers’ Advisory Council endorsed the Aboriginal and Torres Strait Islander Health Workforce National Strategic Framework. Increasing the number of Aboriginal and Torres Strait Islander people working across all the health professions, and addressing the role and development needs of health workforce groups contributing to Aboriginal health are among the five key objectives to achieve a competent health workforce with appropriate clinical, management, community development and cultural skills to address the health needs of Aboriginal and Torres Strait Islander peoples. This is supported by a set of 42 strategies designed to deliver appropriate training, supply, recruitment and retention of the workforce, and based on nine principles.

Increasing the number of Aboriginal and Torres Strait Islander midwives will be fundamental in ultimately “Closing the Gap” initiative for Aboriginal and Torres Strait Islander mothers and babies.

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