<u>17173 - New submission from Early Years Strategy - Public Submissions</u>

What are your biggest hopes for children in the early years in Australia?

That the mother-baby dyad is respected from the moment of conception.

If a community values its children is must cherish its mothers – John Bowlby. and

'there is no such thing as an infant' meaning, of course, that wherever one finds an infant one finds maternal care or a significant other, and without this care there would be no infant - Donald Winnicott

and

As universally powerful as the bond is that connects a baby with the person who gives birth to them, imagine how damaging it is for both those souls when that bond is compromised - Anon

The early years strategy includes the antenatal period. If we are to get the first 5 years right - we need to get maternity care right

One in three Australian mothers experience physical and emotional birth trauma. One in 10 emerges with post-traumatic stress disorder. This has long term impacts on women, babies and their families. The health and wellbeing of mothers is critically connected to the best outcomes for infants and children and provides the basis for a healthy society. Global health experts agree that how people are treated during childbirth can affect the health and well-being of mother, child, and family - we know a fifth of couples break up during the 12 months after welcoming their new arrival. The World Health Organisation states that access to appropriate maternity services and respect for human rights is essential to a positive maternity experience and a confident transition to parenting. We know if a woman is supported through her pregnancy and labour, allowed to make informed decisions on her care and receives respectful maternity care she steps into motherhood confident, empowered, with a feeling of accomplishment.

As one mother said - "I cannot underestimate the emotional, physical & psychological long-term benefits of a positive birth experience, & of feeling listened to, respected & held."

And another - "Being heard and respected throughout my labour and birth allowed for a positive birth experience which in turn made for a smooth transition into motherhood."

We MUST commit to respectful maternity care and providing continuity of care with a known midwife. The evidence is overwhelming, showing this care improves outcomes for mothers, babies, families, and the staff caring for them. Currently we fail to ensure physiological and psychological safe experiences for women and babies.

One gap in the strategy is a statement on the importance of a positive childbirth experience, support for the mother/baby dyad and linkage to other frameworks for maternity care.

We refer you to:

- World Health Organisation; Improving early childhood development https://www.who.int/publications/i/item/97892400020986
- World Health Organisation; The Network for Improving Quality of Care for Maternal, Newborn and Child Health (Quality of Care Network) https://www.who.int/groups/Quality-of-care-network#"::text=of%20Care%20Network)-

,The%20Network%20for%20Improving%20Quality%20of%20Care%20for%20Maternal%2C%20Newborn,receives%20good%20quality%20care%20throughout

- World Health Organisation; The importance of a positive birth experience https://www.who.int/activities/making-childbirth-a-positive-experience
- World Health Organisation; The prevention and elimination of disrespect and abuse during facility-based childbirth

https://apps.who.int/iris/bitstream/handle/10665/134588/WHO_RHR_14.23_eng.pdf

• COAG Health Council (2019), Woman-centred care: Strategic directions for Australian maternity services; https://www.health.gov.au/resources/publications/woman-centred-care-strategic-directions-for-australian-maternity-services

Transitioning to Parenting

Few would deny the vast majority of parents, greatly desire to benefit their children, nor that mothers in particular are often the first to suffer emotionally, financially and otherwise if their children do not thrive.

Inter-generational trauma/disadvantage is a concept developed to help explain years of generational challenges within families. It is the transmission (or sending down to younger generations) of the oppressive disadvantage or trauma.

When babies are born, they have little ability to self-regulate; however, from infancy, parents and other primary caregivers help children learn through a process called co-regulation.

One way to support parents and mitigate the impact of intergenerational disadvantage and trauma is to support all parents during the early years as they transition to parenting.

Programs such as relaxing into parenting, baby makes three and circle of security to name some, need to be offered during pregnancy and the two years after birth. Done well they will create support networks within local communities.

Parents, most especially the primary caregiver require support for 12 months after birth. We suggest all families would benefit from enhanced support until the child is two. A 2019 Australian study found that mothers experiencing adversity benefit from increasing the number of visits from maternal and child health nurses. Researchers found that when the children turned two, they had more regular bed times, safer home environments, and more opportunities to learn, and experienced warmer and less hostile parenting (Goldfeld, S., Price, A., Smith, C., Bruce, T., Bryson, H., Mensah, F., Kemp, L. (2019). Nurse Home Visiting for Families Experiencing Adversity: A Randomized Trial. Pediatrics, 143(1), e20181206. https://doi.org/10.1542/peds.2018-1206).

Preventing chronic disease starts at birth.

The impact of the burden of disease in Australia is rising. In health, it's obvious that well-chosen preventive health measures will yield significant return on investment to taxpayers down the track.

One area that can contribute significantly to the prevention of chronic disease is a focus on maternity care and infant health. A healthy, strong and confident mother gives a baby the best start at birth, influencing the long-term wellness of her child. Diabetes, obesity, mental health and auto immune diseases often have linkages / causes that research shows relate back to maternity care and the early years of life.

There is no real comprehensive understanding of the long-term impact on the infants on health and well-being from parents suffering from iatrogenic harm, disability, grief, anxiety and depression for long periods of time following a birth.

Whether a woman breastfeeds her baby—or not—can affect the lifelong health of both. Breastfeeding is the normal biological extension of pregnancy and childbirth. Breast feeding is protective of many chronic diseases and of maternal neglect. The State of the World's Mothers Report (2015 and 2021) asserts that "Immediate breastfeeding is one of the most effective interventions for newborn survival. Breastfeeding supports newborn stability, providing the baby with good immune system protection via protective immunoglobulins, especially secretory IgA, and other immune protective factors. Human milk also provides human milk oligosaccharides, facilitating the colonization of the intestinal tract with probiotics and establishing a microbiome that protects against pathogenic bacteria creating gut protection, and protection against obesity and short-term and long-term disease protection. Supporting women to breastfeed and then continue to breastfeed for at least 6 months, and preferably 12 months, is essential to ensuring best health outcomes for each baby.???

Social determinants of health

The social determinants of health are the non-medical factors that influence health and well-being outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.

The SDH have an important influence on health inequities - the unfair and avoidable differences in health status seen within and between countries. In countries at all levels of income, health and illness follow a social gradient: the lower the socioeconomic position, the worse the health. The following list provides examples of the social determinants of health, which can influence health equity in positive and negative ways:

- Income and social protection
- Education

- Unemployment and job insecurity
- Working life conditions
- Food insecurity
- Housing, basic amenities and the environment
- Early childhood development
- Social inclusion and non-discrimination
- Structural conflict
- Access to affordable health services of decent quality.

Research shows that the social determinants can be more important than health care or lifestyle choices in influencing health. For example, numerous studies suggest that SDH account for between 30-55% of health outcomes. In addition, estimates show that the contribution of sectors outside health to population health outcomes exceeds the contribution from the health sector.

Addressing SDH appropriately is fundamental for improving health and reducing longstanding inequities in health, which requires action by all sectors and civil society.

No matter what strategy is implemented for the early years, unless the social determinants of health are addressed, inequity will remain.

No child with thrive without a loving significant other (hopefully a parent), shelter, food and sleep.

The strategy makes no reference to social determinants or to programs that do.