

My name is Associate Professor Lina Shahwan-Akl. I am the Director of Post Graduate Studies at RMIT University, Discipline of Nursing and Midwifery, School of Health Sciences. I am a registered nurse with the Australian Health Practitioner regulation Authority. I have completed my Bachelor of Science Degree in Nursing at the American University of Beirut, the Master of Science Degree with a sub-speciality in Cardiovascular Nursing at Boston University and commenced my PhD at RMIT University and completed my PhD in Public Health at Victoria University since I had to move with my supervisor.

I have over the past number of years been responsible for the overall management of all post graduate programs at RMIT Nursing and Midwifery including the Child and Family Health Nursing Program (MCH program). I also teach in the Child and Family Health program the assessment of the eyes, ears, heart and lungs of the young child. I might add that I was requested by the Department MCH services to teach the eye, ear, heart and lung assessments across the shires in the state of Victoria and in Metropolitan Melbourne and this period spanned over 2 years from 1989-1991. I also was a consultant for the MCH telephone service and was part of the initiating and implementing team for this service during the period 1990-1992. So my involvement and experience with this program has a long history and this has provided me with a very clear and sound knowledge of the MCH program and the educational requirements by students in this program.

I would like to thank you for the opportunity provided to comment on the Productivity Commission Draft report, "Early Childhood Development Workforce Study". The report has quite a number of excellent points and recommendations in relation to early childhood development. However, my submission of comments is limited to Chapter 12 of the Early Childhood Development report, and they are as follows:

- I am particularly concerned that the only two Universities that offer the Maternal and Child Health programs in Victoria namely RMIT University and Latrobe University have not been invited to participate in the discussions held that informed this report and thus have had no input what so ever into this report.
- I am also very concerned with recommendations 12.3 and 12.2 of the Draft report concerning the removal of the Midwifery qualification as a prerequisite for MCH nurses. I believe that the Victorian MCH education and delivery of health care system to mothers and babies is one of the best I have seen world wide. It is well documented how Australian families are highly satisfied with the services they receive from MCH nurses. Without the proper preparation and education in Midwifery MCH nurses will not be able to fulfil their roles. The Victorian educational programs prepare the MCH nurses with the required educational preparation to provide well informed and evidence based care to the mother and the infant. The midwifery qualification is crucial for the role of MCH nurse as the Australian undergraduate program does not prepare the students in Midwifery and rarely are undergraduate students provided with any Midwifery clinical experience. Yet the Bachelor of Midwifery students will have the Midwifery knowledge and clinical experience but they lack the generalist nurse experience. Thus the Victorian educational system for MCH nurses has the best combination in education for a well informed and independent MCH nurse practitioner in the community. It will be devastating to remove the prerequisite Generalist nurse and Midwifery educational preparation from this program.
- All the MCH nursing students have verbalised the benefits of obtaining a Generalist Degree and then a Midwifery Degree and I believe that they will have ample examples to provide as to when this combined educational backgrounds were

useful in their everyday practice. None of the RMIT students have ever stated that the Midwifery Degree was a hindrance to their practice, but I have had on the contrary feedback from the students that they firmly believe that the Midwifery education is crucial to their practice and enables them to provide safe and sound nursing care for mothers and children. Thus I strongly oppose the removal of the Midwifery degree post graduate as a prerequisite program for the preparation and education of future MCH nurses.

- Some of the statements in Chapter 12 are not at all substantiated with evidence. Actually they lack evidence based research and I am not sure how the commission arrived to such statements and conclusions as on page 231 in paragraph one line 5 to end of the paragraph.
- The MCH program has never been short of students. We always attract a large cohort of students wanting to join the program and the students are most satisfied with the program. We are also seeing a new trend in the younger age of the student applicants. There are few MCH scholarships on offer and these are taken up very quickly by students. Thus I recommend that we provide more scholarships for the MCH program.

I thank the commission for considering my comments above. I hope that the far reaching services of the Victorian MCH nurses which are based on a good educational background be adopted not only in Australia but worldwide in order to provide the best service to our biggest treasure our children.

Sincerely,

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