

I am writing in response to the Commission's draft report on Early Childhood Development and Chapter 12 ( Child health workforce)in particular.

### **My Experience and Qualifications**

I am a fully qualified Maternal and Child Health Nurse working in the local government sector in outer Eastern Melbourne.

I have a Masters Degree in Child and Family Health, a post graduate Diploma of Midwifery and an Honours Degree in Nursing all from La Trobe University. I also benefited from a scholarship through Maroondah City Council which significantly influenced my decision to undertake Child and Family Health whilst having three small children.

I have been driven to make a submission because I am deeply concerned that the report, as it is currently drafted, runs the risk of undervaluing the importance to the community of happy, healthy children and mothers and fathers with the skills to cope with the responsibilities of parenthood.

### **Many Benefits**

The report rightly identifies the tangible benefits of increased rates of immunisation and of a greater uptake of breastfeeding as a result of child health services.

What is given little or no prominence is the confidence provided to first time mothers (and fathers) when dealing with properly qualified and experienced maternal and child health nurses.

We are in a unique position of trust and we draw heavily on our midwifery experience and, very often, our own experience as mothers to assist children and their parents. This represents a powerful support to families most often at a time when it is most needed by families.

### **Vital Role**

In addition, we form a vital part of the observation and referral chain for these parents to other health and medical professionals and we link parents with resources. Post graduate qualifications and extensive work experience improve our ability to more quickly make the right referrals and access the right resources

The report underplays each of these dimensions of our work and gives the impression that less experienced, often younger, nurses without a midwifery qualification could do an equally valuable role. This is not borne out by practice and I am sure would be rejected by any of our clients you approached.

Midwifery qualifications are identified in the report as "unnecessary" and creating " additional hurdles." I find this observation ill-informed and not reflective of our experience with parents and children across the spectrum.

Much of our work is about the birth and post birth experience where midwifery qualifications make a material difference. With breastfeeding too, midwifery qualifications and experience are of significant benefit in identifying problems and recommending solutions.

### **Need for more data**

The report identifies gaps in data collection and the need for more research.

Research and data can come in many forms. I would love the opportunity to share our work with the commission. You would see first hand the impact we have on the lives of mothers, fathers and their children in the community. You would see the support we provide, the problems we help avoid and the speed at which we arrange extra assistance where it is needed.

The report, as it is currently drafted, undervalues this work and suggest standards should be dropped in the recruitment of the people who provide vital maternal and child health services in Victoria. This would be a path that would come at significant costs to the families who visit our centre.

### **The community needs us**

I strongly recommend that more investigation occur in order to garner a fuller understanding of the value of having properly qualified and experienced Maternal and Child Health Nurses in our community.

Already not enough is done to promote early childhood development and health promotion, we can't afford to take backward steps in ignorance of their full impact on our community.

Yours sincerely

Susie Houston  
Maternal and Child Health Nurse