

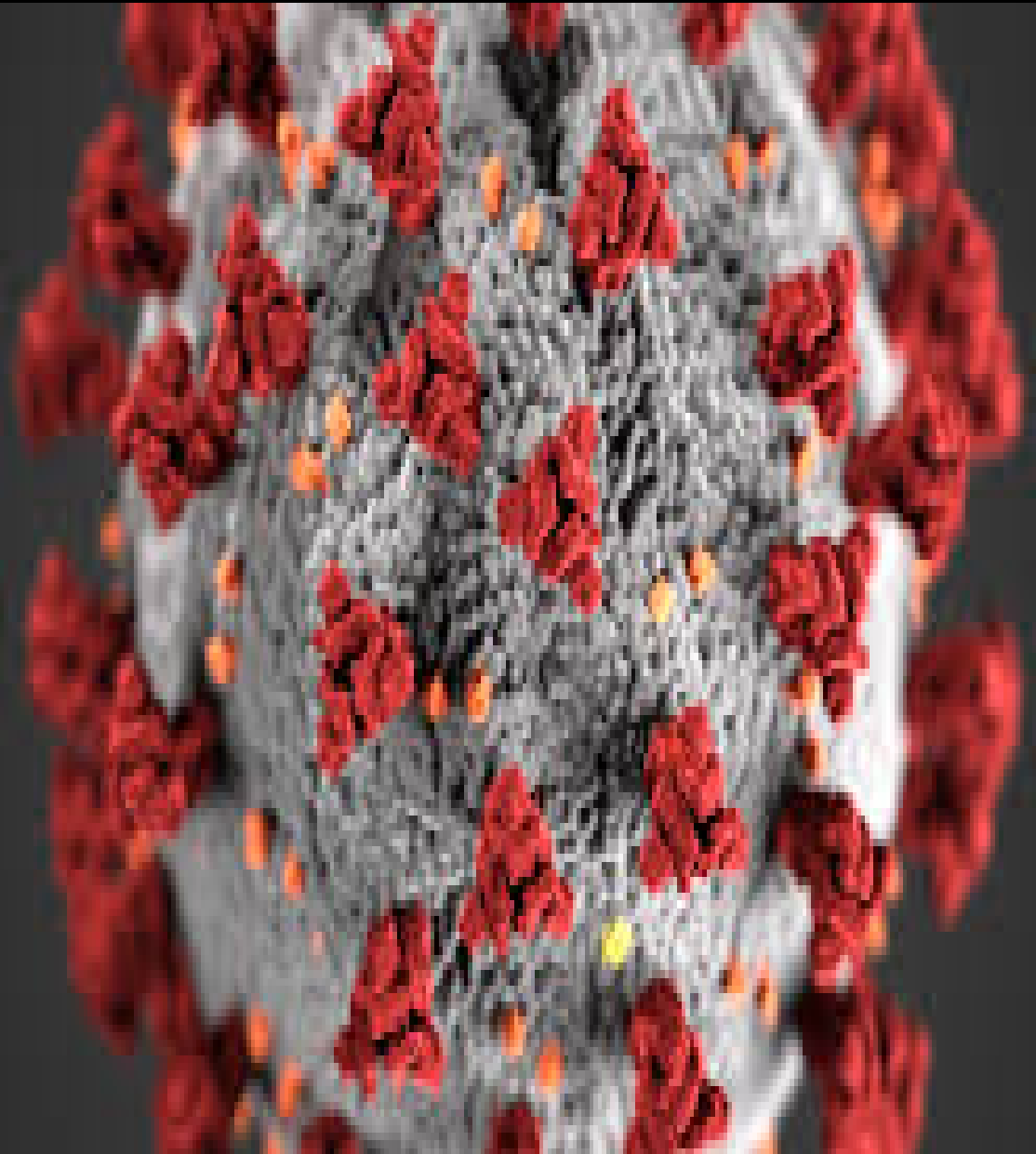


Managing media and post COVID19 advocacy for women's health rights in Australian maternity care

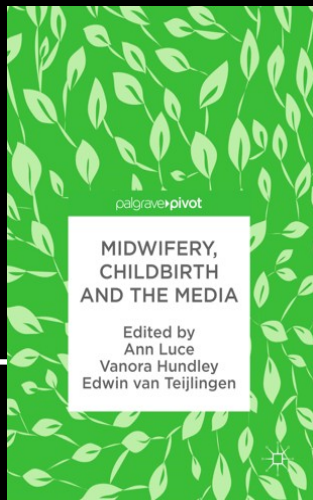
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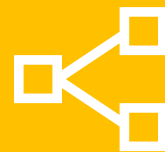
Working with the media: The power, the pitfalls and the possibilities



The media thrives on drama because we do as humans



Media health stories often oppose life with the threat, or reality of death.



Audiences seek emotional stimulation through dramatised contrasts that have an entertaining effect (Seale 2003)

Five key elements constitute a series of core oppositions (Seale 2003)

1. The dangers of modern life-fear and safety
2. Villains and freaks
3. Victimhood
4. Professional heroes
5. Lay heroes

COVID-19 has tapped into all of this and exposed another pandemic-one of neglect and oppression when it comes to women's reproductive rights.



Pre and Post COVID-19 advocacy for women's health rights in Australia

- The COVID-19 pandemic has exposed an underlying pandemic of neglect affecting women's reproductive rights, particularly in the provision of abortion services and maternity care.
- Historic oppressions that have resurfaced: opposition to homebirth, closure of birth centre services, removal of abortion services, restricting support people, banning of waterbirth, skin to skin, breastfeeding, active birth, excommunicating Doulas and PPMs from birth rooms
- Lack of support for homebirth and private midwifery has exposed the Achilles heel
- Move to electronic medium, while necessary and potentially beneficial for some, some of the time, is now being seen as the cost saving panacea

Abortion services

- In Australia, abortion services proprietors have, since April, been acquiring their own Personal Protective Equipment (PPE) from chemists, shortly after Australia suppliers cancelled scheduled orders.
- One supplier even told an abortion clinic that supplies were being diverted to health professionals, exposing a deep-seated belief that abortion services are not essential health services.¹⁰

As Erica Millar (2020) wrote in *The Conversation*:

*“The COVID-19 crisis has starkly revealed the patchy and precarious provision of abortion in Australia, deepening existing inequalities in access. What was already an expensive procedure may be even less attainable for many women facing financial strain during the pandemic”.*⁶

The long-term implications of restricting abortion services

- increase in unwanted pregnancies
- exacerbating the risks of domestic violence incidents and financial stress, particularly amongst migrant women
- for the recently unemployed, temporary visa holders and international students, the costs of abortion services are magnified by their exclusion from government financial support payments.



The Guttmacher Institute assessed the potential COVID-19 global impact on the provision of core women's health services and resulting health outcomes

- With a modest 10% decline in access to care in 132 low and middle income countries it is estimated that there will be:
- an additional 15 million unintended pregnancies leading to unsafe abortions (1000 additional maternal deaths), and 1.7 million women and 2.6 million newborns experiencing major complications leading to 28,000 maternal deaths and 168,000 newborn deaths.
- A Lancet Global Health comment was published, warning that maintaining reproductive health during the COVID-19 pandemic was 'not a luxury' but a matter of life and death.

Ahmed Z, Cross L. Crisis on the Horizon: Devastating Losses for Global Reproductive Health Are Possible Due to COVID-19. 2020

Tran N, Tappos H, Spilotros N, Krause S, Knaster S. Not a luxury: a call to maintain sexual and reproductive health in humanitarian and fragile settings during the COVID-19 pandemic. The Lancet - Global Health 2020

Despite all the
consistent
advice and
emerging
evidence the
response was
inconsistent

- SR of 49 studies (666 neonates and 655 women) where information was provided on the mode of delivery and the infant's infection status.
- 28/666 (4%) neonates had confirmed COVID-19 infection postnatally. Of the 291 women who delivered vaginally, 8/292 (2.7%) neonates were positive. Of the 364 women who had a Caesarean birth, 20/374 (5.3%) neonates were positive.
- Of the 28 neonates with confirmed COVID-19 infection, 7 were breast fed, 3 formula fed, 1 was given expressed breast milk and in 17 neonates the method of infant feeding was not reported.
- Neonatal COVID-19 infection is uncommon, uncommonly symptomatic, and the rate of infection is no greater when the baby is born vaginally, breastfed or allowed contact with the mother.

Walker et al. Maternal transmission of SARS-COV-2 to the neonate, and possible routes for such transmission: A systematic review and critical analysis June 12th 2020 BJOG
<https://doi.org/10.1111/1471-0528.16362>

This is not to even mention the human rights abuses

“The pandemic has underlined an old truth about labour room violence. On June 6, Neelam Kumari Gautam died during labour after being turned away from eight hospitals. At the first hospital, the doctor reportedly told her: “I’ll slap you if you take off your mask.”

treated with dignity

Women in labour must be treated with dignity

The coronavirus pandemic has highlighted an old problem of the mistreatment of women in the labour room

Updated: Jun 26, 2020 19:29 IST

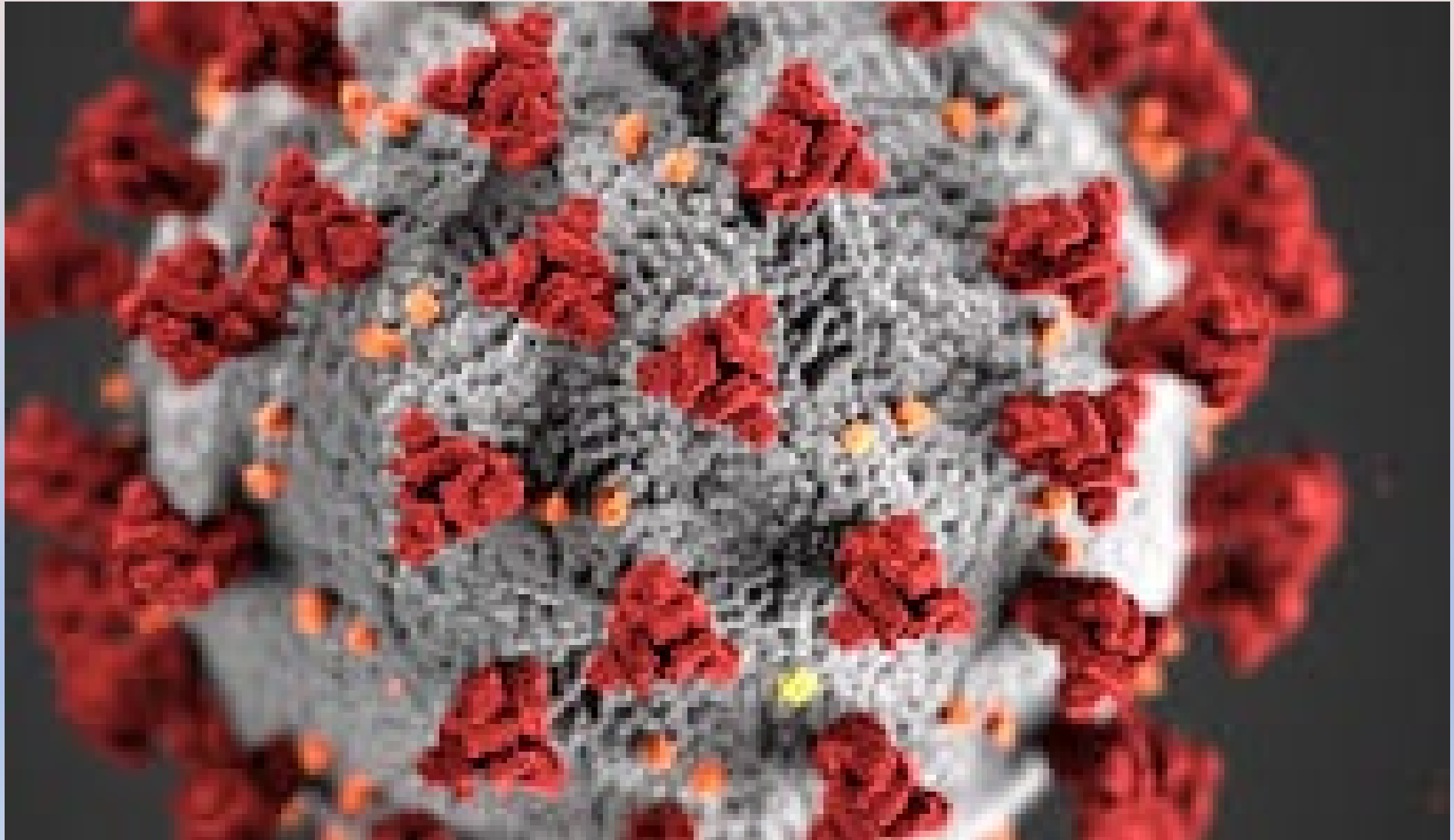
By Namita Bhandare,



The mistreatment of women in the labour room is fairly common, especially if you're poor (Diwakar Prasad/ Hindustan Times)

Birth in the time of COVID-19

#BITTOC



Outline of study

BACKGROUND

It is not known how COVID19 will affect pregnant women, midwives and midwifery students working within hospital systems dealing with the pandemic.

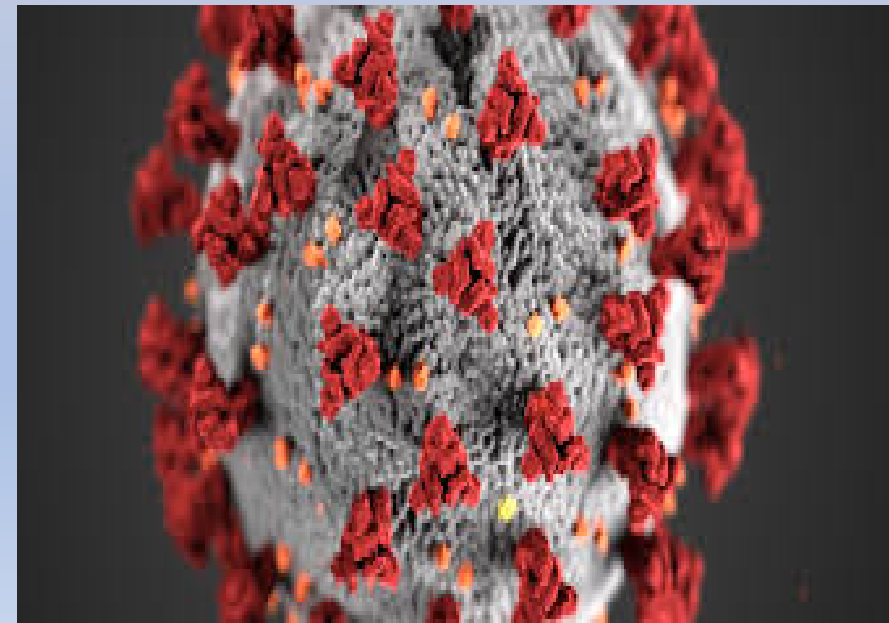
AIM

The aim of this project is to explore the experience of women who are pregnant, giving birth and managing the early days and weeks of motherhood during the COVID19 pandemic as well as midwives and midwifery students providing care.

METHODOLOGY

- Indepth Interviews
- VoQal App
- Online surveys

*SPHERE involvement



Pre COVID-19
Mid COVID-19
Post COVID-19

**WOMEN WHO DON'T
CONTROL THEIR OWN
REPRODUCTIVE RIGHTS
ARE NOT FREE**

ANI DIFRANCO

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