11303 Continuity Midwifery B

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Conference Abstract and Reference List Final

249 words

Poster

Australia is a country built on diversity and women from culturally and linguistically diverse (CALD) backgrounds make up a large demographic of women birthing in Canberra. However, they continue to face cultural and social barriers that negatively impact their mental health during pregnancy and birth. CALD populations are frequently underrepresented in mental health data, suggesting that they are often underreporting mental health struggles. Studies conducted to investigate depressive symptoms antenatally and postnatally have found that CALD women are more likely to report having these symptoms using the Edinburgh Postnatal Depression Scale (EPDS).

Language barriers, lack of social supports and a lack of understanding around differing cultural norms means that CALD women are left feeling misinformed and unsupported throughout their care. It is paramount that midwives and other healthcare professionals understand and acknowledge the difficulties they face and adapt their care to suit. The literature tells us that essential to bettering care for CALD women is effective referral and collaboration, specialised mental health screening and increased time and resources.

This policy aims at creating a CaTCH program, specifically for women of CALD backgrounds that will allow them to receive continuity of care that is supportive and culturally safe. Mental health outcomes would be assessed postnatally using the EPDS and a survey focused on support and mental health. Midwives – especially those in continuity models – are well placed to recognise the barriers facing CALD women throughout their perinatal period that contributes to ill mental health to ensure early detection and considered care.

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