

23 July 2025

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Ms Lesley Clarke
Chief Executive and Chair
Midwifery Council of New Zealand

RE: Formal Complaint – Removal of Sex-Based Language from Midwifery Standards and Public Communications

Tēnā koutou,

I am writing to formally lodge a complaint regarding the **systematic removal of sex-based language**—specifically the terms *woman*, *mother*, and *baby*—from official documentation, public materials, and professional standards published by the Midwifery Council of New Zealand.

In particular, I am concerned by the changes made to the:

- **Midwifery Scope of Practice**
- **Midwifery Standards and Competencies**
- As well as other Council publications, promotional materials, and digital resources that now replace sex-specific language with gender-neutral terms such as *whānau*, *pregnant people*, and *birthing parents*.

While I understand the Council has justified these changes under the aim of “inclusivity,” I must stress that inclusivity **must not come at the cost of erasing biological realities** or obscuring the specific rights, needs, and experiences of women and mothers. The current language shift is not neutral—it is exclusionary to the very group midwifery was established to serve.

This concern aligns with the **United Nations Human Rights Council (HRC59)**, where Special Rapporteur Reem Alsalem stated that erasing women and women-specific

language and needs “is not only wrong, but also demeaning, regressive, and constitutes one of the worst forms of violence against women and girls.”

Furthermore, the **Health Practitioners Competence Assurance Act 2003**, under which the Council is mandated, refers to the profession’s function as providing care for **women and babies**. The **Code of Health and Disability Services Consumers' Rights** also requires that all communication be **clear, honest, and effective**, particularly when the wellbeing of vulnerable populations is involved.

As a mother, a community advocate, and Founder of Mums4Mums Charitable Trust—which has supported more than 400 mothers and babies across Tauranga, Whakatāne, and Rotorua—I submit this complaint with deep concern for how these language changes may:

- Confuse service users, particularly those with limited English or cultural understanding;
- Compromise care clarity and safety;
- Contribute to the **erasure of women's lived experience**, especially during pregnancy, birth, and postpartum recovery.

I respectfully request the Midwifery Council:

1. Provide a transparent and evidence-based explanation for the decision to remove sex-based language from professional documents—including how this decision aligns with your legal mandate under the HPCAA and the Code of Rights—not simply refer to "inclusivity" as a rationale.
2. Reinstate the words *woman*, *mother*, and *baby* across all documentation where biologically accurate and appropriate, especially within standards of care, scopes of practice, and public-facing material.
3. Ensure the results of the current public consultation are **honoured in full transparency** and commit to future language changes being made **only after meaningful consultation** with women, mothers, and midwifery service users.

Mothers deserve care that recognises our biological and relational experiences without being erased under a linguistic ideology. Inclusive care should expand access—not diminish clarity or dignity.

I look forward to your timely response and am open to engaging further in discussion if needed.

Ngā manaakitanga,



Caroline J Dafoe (“CJ”)

Founder & CEO

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