

Re: Inquiry into Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009 and two related Bills

I write to express my concern about the above bills. I understand that these bills will enable Medicare funding, access to the Pharmaceutical Benefits Scheme and professional indemnity premium support for midwives providing care for women to give birth in hospital.

Medicare funding for midwifery care is long overdue. It is not acceptable however to exclude homebirth from this funding and indemnity arrangement. By doing this Australia is totally out of step with nations such as the United Kingdom, Canada, The Netherlands and New Zealand.

These nations support the rights of women to choose homebirth and fund a registered midwife through their national health scheme. In New Zealand and the U.K women have a legislative right to choose homebirth.

The intersection of this legislation with the national registration and accreditation of health professionals will prevent homebirth midwives from registering. I believe this to be an unintended consequence and ask that you take steps to include homebirth within the Health Legislation Amendment (Midwives and Nurse Practitioners) and related Bills.

I support a system where all consumers are treated equally, with the same access to funding and the same insurance protection.

I am gravely concerned about the implications in the bill on the rights of women to access professional midwifery care when they choose to home birth. My second daughter Illia was born last October in my Yarraville home. It was a wonderful experience for the entire family and the care, attention and information my wife received from my private midwives was exceptional compared to the care she received in hospital with the birth of our first child. Our first child was born within minutes of arriving at our inner city hospital and my wife was quite traumatised from the experience of nearly giving birth in the back seat of the car in peak hour traffic on Footscray road. Our second child was born within an hour of established labour, safely, calmly, wonderfully in our own home surrounded by family, friends and our midwives who had the emergency equipment they would need in the event of a complication, and with whom we trusted completely.

There are many women who birth like my wife, fast, without warning, and the likelihood is any future labour of Megan's will be shorter than the first two. The risk of her giving birth unassisted in a vehicle or in transit, is so high that the most irresponsible choice we could make would be to attempt to get a hospital once in labour. We felt totally supported and safe with the birth of our last child as our midwives knew my wife's birthing history and monitored her pregnancy diligently. Their knowledge and experience was second to none and they left nothing unchecked. Our first midwife was with us within five minutes of having had gone into labour. These same women visited our home several times after Illia was born to help with post partum care, breast-feeding and infant care. These exceptional women are the definition of continuity of care.

Frankly, I am terrified about the implications of this bill. I am frightened for my wife's own well being and that of any future children of ours.

My personal experience aside, home-birth in a democracy is a right that can not be removed. Women like myself are well researched, educated, responsible and able to make an informed choice. I have found no conclusive evidence that midwife attended planned home birth is more dangerous than a hospital birth, only research that supports better outcomes overall and increased satisfaction at planned home births. If a consumer can elect to have a non essential cesarian despite the numerous risks associated with this operation that same women should be allowed the

right to make an informed judgement about their birthing location, when the risks associated are minimal.

There are many countries that support their home birth midwives and communities, such as New Zealand and the Netherlands. Home birth in these places leads to much less medical intervention and better outcomes for mother and child. Home birth can only be safe if the midwives and hospitals can work together so that transfers can happen swiftly and obstetric care accessed easily if needed, without home-birth will continue, but those who choose it will be discriminated against in their access to medical care. I draw your attention to The Declaration of Human Rights as outlined by the United Nations:

Article 21 states:

(2) Everyone has the right of equal access to public service in his country.

Article 25 states:

(2) Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.

I suggest that the proposed Health Legislation Amendment Bill 2009 breaches these two declarations by denying the home birth Mothers and children equal access to public health services as those who birth in a hospital.

The World Health Organisation states:

"It is safe to say that a woman should give birth in a place she feels is safe, and at the most peripheral level at which appropriate care is feasible and safe (FIGO 1992). For a low-risk pregnant woman this can be at home, at a small maternity clinic or birth centre in town or perhaps at the maternity unit of a larger hospital. However, it must be a place where all the attention and care are focused on her needs and safety, as close to home and her own culture as possible. If birth does take place at home or in a small peripheral birth centre, contingency plans for access to a properly-staffed referral centre should form part of the antenatal preparations."

I implore you to urgently amend this Bill to bring it in line with what is appropriate in a developed country and a democracy. I fear gravely the consequences of a country that forces home birth to become an underground operation, done without proper care and risk management.

I support a system where all consumers are treated equally, with the same access to funding and the same insurance protection.

Yours sincerely

Megan Norgate