

20 July 2009

Joseph and Florence Stephen

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

Ms Claire Moore
Chair Senate Community Affairs Legislation Committee

Dear Ms Moore

As Australian citizens in a democratic country, we are opposed to the government's intent to override the choices of informed and educated women by outlawing homebirth in Australia after July 2010 because of the National Registration and Accreditation Scheme for Doctors and Other Health Workers. This law is NOT to improve the safety of births but to take away a woman's choice to give birth at home. An excerpt from the World Health Organization's Summary of Research on Place of Birth: "It has never been scientifically proven that the hospital is a safer place than home for a woman who has had an uncomplicated pregnancy to have her baby. Studies of planned home births in developed countries with women who have had uncomplicated pregnancies have shown sickness and death rates for mother and baby equal to or better than hospital birth statistics for women with uncomplicated pregnancies."

Neonatal deaths at home are given media attention because homebirths are automatically subject to a coronial inquest but neonatal deaths in hospital are rarely investigated. Birth is a natural process and should not be treated as an illness. It is true that a small number of births have complications but outlawing homebirth is not going to make such births safer. A woman concerned about her higher risk will choose to give birth in hospital, afterall, a mother is by far the one with the best interest of her child at heart. A mother with a low risk pregnancy should have the choice to birth at home with a trained midwife present if they wish. As the legislation now stands, after July 2010, registered midwives will be unable to attend a homebirth since they will be unable to obtain indemnity insurance. Please either amend the legislation to exempt independent midwives from having to be insured or, more reasonably, allow midwives to obtain indemnity insurance when attending homebirths.

Removing the right for a woman to give birth in the safety and familiarity of her own home with her family around her because of a perceived small risk is utterly hypocritical considering a woman has the right to abort her baby at home using the RU486 drug which also has its risks. If this law is truly about safety then the results of the World Health Organization and other corroborating results regarding homebirth should be adequately considered rather than just the biased brute force of heavy-weight obstetricians who have their own agenda and are naturally opposed to both midwives and homebirth. If the government can fund a woman's choice to terminate her baby at home, surely it can also fund a woman's choice to birth a live baby at home, or at least make it legal!

Here are just ten of the corroborating citations on the safety of homebirth:

1. "Every study that has compared midwives and obstetricians has found better outcomes for midwives for same-risk patients. In some studies, midwives actually served higher risk populations than the physicians and still obtained lower mortalities and morbidities. The superiority and safety of midwifery for most women no longer needs to be proven. It has been well established." (Madrona, Lewis & Morgaine, *The Future of Midwifery in the United States*, NAPSAC News, Fall-Winter, 1993, p.30)

2. "In the U.S. the national infant mortality rate was 8.9 deaths per 1,000 live births [in 1991]. The worst state was Delaware at 11.8, with the District of Columbia even worse at 21.0. The best state was Vermont, with only 5.8. Vermont also has one of the highest rates of home birth in the country as well as a larger portion of midwife-attended births than most states." (Stewart, David, *International Infant Mortality Rates--U.S. in 22nd Place*, NAPSAC News, Fall-Winter, 1993, p.36)

3. "The international standing of the U.S. [in terms of infant mortality rates] did not really begin to fall until the mid-1950s. This correlates perfectly with the founding of the American College of Obstetricians and Gynecologist (ACOG) in 1951. ACOG is a trade union representing the financial and professional interests of obstetricians who has sought to secure a monopoly in pregnancy and childbirth services. Prior to ACOG, the U.S. always ranked in 10th place or better. Since the mid-1950s the U.S. has consistently ranked below 12th place and hasn't been above 16th place since 1975. The relative standing of the U.S. continues to decline even to the present." (Stewart, David, *International Infant Mortality Rates--U.S. in 22nd Place*, NAPSAC News, Fall-Winter, 1993, p.38)

4. The Texas Department of Health's own statistics show that midwives in Texas have a lower infant mortality rate than physicians. (Texas Lay midwifery Program, Six Year Report, 1983- 1989, Bernstein & Bryant, Appendix VIII, Texas Department of Health, 100 West 49th St., Austin, TX 78756-3199.)

5. "Mehl and his colleagues (1975, 1977) reviewed the medical records of 1,146 home births attended by five home delivery services in northern California between 1970 and 1975. These investigators provided detailed descriptions of demography (e.g., urban or rural), attendants, population served, process of care, outcomes, and complications. The incidence of various events among home births was compared to the incidence of similar events in the birth population of the state of California or as reported in the literature. No maternal deaths were noted, and the perinatal mortality rate of 9.5 per 1000 births was lower than the California average." (Research Issues in the Assessment of Birth Settings, Institute of Medicine, National Academy Press, Washington, 1982, p. 76)

6. From the same source (Figure 1, p. 175): In the state of Oregon from 1975-1979, there were approximately 3-4 neonatal deaths per 1000 births in homebirths attended by midwives, as opposed to approximately 9-10 deaths per 1000 births for all residents. The same figure indicates approximately 5 infant deaths per 1000 births in homebirths attended by midwives, as opposed to approximately 12 deaths per 1000 births for all residents. (Research Issues in the Assessment of Birth Settings, Institute of Medicine, National Academy Press, Washington, 1982, p. 175)

7. "Of the 3,189 midwife-assisted deliveries studied, episiotomies were done on 5 percent of the women, the Caesarean section rate varied from 2.2 percent to 8.1 percent, and perinatal mortality (the number of babies who die during or shortly after birth) averaged 5.2 per 1,000. Compare these numbers to those for New Mexico obstetricians and physicians during the same period: nearly routine use of episiotomies in many hospitals, a Caesarean rate that varied from 15 percent to 25 percent, and a perinatal mortality rate of 11.3 per 1,000. Looking at these numbers, Rebecca Watson, the maternal-health program manager at the New Mexico Department of Health commented, 'I sometimes wonder why [we bother compiling statistics on midwives], since their statistics are so much better than everyone else's.' " (Sharon Bloyd-Peshkin, *Midwifery: Off to a Good Start*, p. 69, *Vegetarian Times*, December 1992)
8. Records kept from 1969-73 in England and Wales indicate still birth rates of 4.5 per 1000 births for home deliveries as opposed to 14.8 per 1000 births for hospital deliveries. (*The place of Birth*, Sheila Kitzinger & John Davis, eds., 1978 Oxford University Press, pp. 62-63)
9. "In The five European countries with the lowest infant mortality rates, midwives preside at more than 70 percent of all births. More than half of all Dutch babies are born at home with midwives in attendance, and Holland's maternal and infant mortality rates are far lower than in the United States..." ("Midwives Still Hassled by Medical Establishment," *Caroline Hall Otis, Utne Reader*, Nov./Dec. 1990, pp. 32-34)
10. 'Mothering Magazine has calculated that using midwifery care for 75% of the births in the U.S. would save an estimated \$8.5 billion per year.' (Madrona, Lewis & Morgaine, *The Future of Midwifery in the United States*, NAPSAC News, Fall-Winter, 1993, p. 15)

Yours sincerely

Joseph and Florence Stephen