

**Submission to the Community Affairs – Legislation Committee
Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009
and two related Bills**

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Personal Submission

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Introduction...p. 1

My story...p. 2

Conclusion...p. 7

CV...p.10

Nb: I have express-posted the Review a short DVD film of my second daughter Mia's birth, to go with my submission.

Introduction...

I am a mother of two girls, aged four and one. I am a consumer representative on government and hospital committees. For the past five years, I have volunteered thousands of hours with birth advocacy groups Maternity Coalition and Friends of the Birth Centre, campaigning for women to have improved birth choices including birthing in a setting of their choice with a midwife of their choice.

I applaud the Federal Government for their courage in driving the biggest changes we've seen in maternity care in Australia's history.

Providing midwives in private practice with access to Medicare, indemnity and the PBS is a huge breakthrough for Australian women. As I understand, it means that from November 2010 women will be able to claim Medicare rebates for care from a midwife in private practice. That midwife will provide antenatal care most commonly in a community setting or at home, birth care in a hospital and six weeks postnatal care. It may mean that many women who haven't previously been able to access continuity of care with a known midwife, including women living rurally and women wanting to have a VBAC in hospital, will be able to do so.

However, I know many women and midwives across the country who are feeling scared, devastated, frustrated and helpless. Like them, I am concerned that the clash of proposed laws (National Registration and the bills your committee is reviewing) are going to spell the end of homebirth with a midwife in private practice in Australia after July 2010. This may also have ramifications for indigenous women wanting to birth on country with a midwife.

As a matter of public safety, I believe the Federal Government must extend funding and professional indemnity insurance to midwives in private practice providing birth care at home.

My story...



Lily, born at in a hospital birth centre, October 2004.



Mia, born at home with a midwife January 2008.

What follows is the personal story of the births of my two daughters, as evidence of the need to retain women's access to homebirth with a midwife.

In 2003 I was newly married to my husband Paul. Two friends had had very positive experiences of birth and they felt, a consequent confidence in mothering. They both had continuity of care with a known midwife and waterbirths (one in a hospital, one at home).

I researched our pregnancy care and birth options. I decided I wanted what I felt would be safe and nurturing maternity care with a known midwife. Despite being aware of my friend's positive experience who birthed at home with a midwife, I had a pelvic fracture when I was 16 and wasn't sure if this would impact on my labour. The only way I could guarantee hospital care with a known midwife was through a Birth Centre.

However when trying to conceive I found it difficult to guarantee Birth Centre care access, with only two Birth Centres open at the time in Queensland – one in Brisbane and one in Mackay (now there are four including Gold Coast and Townsville). My indignation at this led to me to become actively involved early in my first pregnancy with consumer group Friends of the Birth Centre, lobbying for increased access to continuity of midwifery care in a variety of settings.

I successfully accessed the RBWH Birth Centre for my first pregnancy in a way which is no longer available. I avoided the lottery of access via the oversubscribed ballot system by booking with a private obstetrician who took five women a month and also received antenatal care from two Birth Centre midwives. If I remained "low risk", I would birth in the Birth Centre with one of two known midwives, and only see the obstetrician during birth if I required medical assistance.

I really liked and trusted my three care providers. All of my Birth Centre appointments were at the hospital, about an hour long. My pregnancy with Lily was fairly straightforward, marred only by horrendous morning sickness and a scare that I would be transferred out of birth centre care when Lily was breech (she turned head down at 34 weeks).

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During Lily's birth I was cared for at the birth centre by one of my midwives with my husband and my mother supporting me. I laboured in various active positions and in a birth pool. Twenty-one hours after my first contraction at home, after consultation with

my obstetrician I was transferred out of the birth centre to the birth suites for a ventouse (vacuum) delivery because, as I understand, I actively pushed for more than one hour. I was told afterwards that Lily was born mostly due to my efforts (pushing on my back) with only a small tug on the ventouse.



Lily being routinely suctioned shortly after birth.



My postnatal care from the birth centre consisted of only one appointment with my midwife, at the hospital one week after the birth. We persevered through months of breastfeeding difficulties, out of pocket for several visits to a private lactation consultant.

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At the time I felt like the intervention at the end of Lily's birth had been necessary. Over time, as I learnt more about normal birth, I felt that perhaps the hospital policy of setting an arbitrary time limit on second stage may have been based on a lack of understanding about the breadth of normality. I began to feel that rather than "failure to progress", it might have been "failure to wait". I felt that my body had been cheated out of birthing Lily normally, and she had been robbed of a gentle, loving welcome to the world.

I confronted and worked through my feelings about my previous birth by attending a Healing from Birth support group run by Birthtalk, a birth support and education organisation based in Brisbane, and run by a registered midwife, childbirth educator and mums.

As we were trying to conceive our second child, I knew that during this next birth I wanted to be in an environment where my body could just do what it was meant to do, where my natural hormonal cascade could happen unimpeded by fear or concern about hospital policies. This time I wanted to birth at home.

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We were blessed to gain the services of a wonderful midwife in private practice. We started care with her when I was eight weeks pregnant. During my second pregnancy I had to work hard to gain a sense of trust in my body's ability to birth. The most empowering thing was my midwife's strong trust in women's bodies and her experience of having seen this and supported this so many times.



My husband and I felt supported by her experience of normal pregnancy and birth. We were glad to have her ability to recognise anything outside of this and have her guidance to consult and refer to other health care professionals where necessary. I chose to have a back-up booking at the Mater Mothers Hospital in case I developed complications during my pregnancy or birth. The hospital didn't require me to get a GP referral, accepting a booking letter from my midwife. If complications had arisen during my labour and I'd needed to transfer, my midwife would have been seen as only a "support person" and not primary care giver, as midwives in private practice didn't have visiting rights.

I needed to see a GP each time I required a referral for a blood or ultrasound test. I am very glad that this new legislation will allow midwives to order tests and also prescribe life saving drugs including syntocinon.

We paid \$4500 for the antenatal, birth and postnatal care provided by our midwife and for care from our second birth support person. We received \$2000 back from our private health insurer Australian Unity, one of the few private health insurers to refund homebirths. However my husband was furious that we were out of pocket for such a large gap, assuming that we would have received a much higher refund had we had care from a private obstetrician. Post-birth he cancelled our private health care. I am very pleased that this legislation will enable Medicare rebates for this care (except as it stands, birth at home).

My husband is a lawyer who has worked in the area of medical negligence. Engaging a care provider without professional indemnity insurance was something we had to think about carefully. In the end we proceeded, trusting our midwife. However we would have preferred the protection of our midwife holding indemnity insurance, via the government underwriting insurance for our midwife, the same as for obstetricians.

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About a week past my estimated due date, my usual evening Braxton Hicks continued throughout the night. At 4am I got up and potted about. At 6am I lay down on the couch and the contractions spaced out to about every fifteen minutes. I rang my midwife at 7am to let her know what was happening. I felt comfortable to continue resting and called her back later. She and her 11 month old daughter arrived at 11am while I was reading a story to Lily on the couch, concentrating and breathing deeply through each contraction. During this time, my husband Paul had stayed home from work and was setting up the birth pool.

By 12.30pm contractions were still about ten minutes apart. My midwife gave me a wonderful, releasing lower back massage. My contractions became stronger, longer and

closer together, every seven minutes. I had a good cry, realizing that things were picking up and that there was no going back. My Mum arrived at this time to look after Lily. They played in different parts of the house, checking in on us occasionally.

At 1pm I quickly ate a bowl of pasta and instinctively moved into a restful position on my right side on the birth mat next to the pool in the kitchen. *(This is the position I lay in at the birth centre at the end of my labour with Lily, while waiting for my obstetrician to arrive at the hospital for the ventouse. I think that the rest allowed Lily to come down the birth canal and is why the ventouse only needed to be gently used to assist her birth).*



On my side, I began the heavy part of my labour. Within twenty minutes my contractions were coming every three minutes and lasting seventy seconds. However I felt like I had some incredible mind power to be able to shorten my contractions if they were "too much". I believe this is because I felt safe and therefore my body was optimally able to produce it's own opiates to counteract the pain.

Our second birth support person and my friend Deirdrie who was taking photos arrived at 1.30pm. By this stage I really needed verbal and physical reassurance to be able to cope. My midwife massaged my back/sacrum between contractions and held my sacral area during contractions. My birth support person held my hands and soothed me with gentle words of encouragement. I had a little vomit and registered that I was in transition.

Just after 2pm I said, "It feels different". They asked how and I said it felt "a bit pushy". Shortly after this my waters broke. My midwife was supporting me, talking softly to me between surges, telling me how beautifully I was doing and how well my body was working.

Around 2.30pm I realized that the birth was close, and that if I wanted to birth this baby as planned in water I needed to move into the pool. I tried labouring in a reclining position, holding onto the hand rests in the pool. I moved into a kneeling position, resting over the side of the pool. Paul held my hands and said "You're doing great". I was vocalizing loudly and deeply with each surge.



By 3 o'clock, I could reach down and feel my baby's head. Despite lots of preparation during pregnancy, I was still quite challenged by the o-p-e-n-i-n-g required by my body to push my baby out. However I was beautifully supported by my midwife, birth support person and Paul. They were able to provide gentle encouragement and explain exactly what was happening. My midwife said "Just let your body do it...so close now".

I held Paul's hands, strongly pulling them away from each other as I imagined my pelvis opening up. My Mum, Lily and my midwife's daughter came into the kitchen to watch the birth. My perineum started to stretch as the baby's head was born. It stayed crowning on the widest part after the contraction. I looked wildly into my birth support person's eyes. My eyes locked onto hers, I dug deep for strength I didn't know I had and I said "YES! YES!". Her eyes filled with tears, as mine do every time I remember that shared moment. Next contraction the baby's head was out and I heard Lily say behind me "There's the baby!". What wonderful words to hear!

Another contraction at 3.10pm and Mia's body was born, all 8 pounds and 3 ounces of her. My midwife pushed her through the water between my legs and said "Reach down and pick up your baby, Melissa". I looked down, scooped my baby up against my chest and sat back against the opposite side of the pool. Just as I had wished, I had birthed my baby! I looked up at Deirdrie taking photos and said "I did it! I did it!". At the time I felt like I was shouting these words but I've watched the video back and my voice sounds quiet but triumphant.



I said to Lily, "You've got a sister. You're a big sister now!". She said "A big sister! But Mum, I'm still *little!*". I began to have contractions to birth the placenta and Lily asked "Are you going to have another baby?!". I birthed the placenta on a stool thirty-five minutes after the birth. Mia and I were soon tucked up in bed having our first feed.



Our postnatal support was amazing, with many visits and calls from my midwife and birth support person over six weeks. They answered a myriad of our questions about breastfeeding, elimination communication, sleep and our older daughter's processes of accepting her new sibling. We were also greatly blessed to receive nourishing meals and playdates for Lily from my kind friends in the birth reform community.

Shortly after Mia's birth I really felt I would have coped with any outcome because I had such a trusting relationship with my midwife. This would have empowered me to have felt in control of any decision that needed to be made. I really felt that the fact it was the home waterbirth I'd hoped for, was just the icing on the cake.

Conclusion...

I feel like I now truly understand the "secret" for me to better birthing – feeling safe and comfortable to eat, rest and labour *in my own home* and receive care with a midwife with whom I have an intimate, trusting relationship. I believe second time round that these things allowed my body to do what it's made to do. I don't believe that birth is a medical event and in these times of great strain on our health system I don't think my births need to use hospital resources.

My husband and I are undecided if we wish to have one or two more children. I considered trying to fall pregnant by September, in order to be able to birth with a midwife before 1 July 2009. However this would require me to stop breastfeeding 18 month old Mia in order to conceive, and I wish to breastfeed her until she is at least 2 years old, as per the World Health Organisation's guidelines. If these changes proceed unamended, and homebirth with a midwife is not possible after July next year, I doubt I will have anymore children as I cannot imagine birthing in hospital again. It's devastating to feel like the decision to have more children has been taken out of my hands.

My experience of the importance of an empowered, joyous birth continues to drive me to improve our maternity care system through my positions as a Maternity Coalition consumer representative on hospital and government committees. Its hard juggling this work with a young family and often the balance gets out of whack.

But I feel passionately that we need a revolution in birth.

Birth matters. I'm not necessarily talking about the measurable "health outcomes" eg. whether it was a natural birth, caesarean, etc. Ask an 80 year old woman what her

births were like, and what will have stayed with her is how she felt during and after the experience - scared or empowered.

Sometimes homebirth is described as a boutique choice, due to small numbers of women currently choosing to birth at home (although it could be argued this is due to many barriers including women not knowing homebirth is a safe option, and also the current difficulty in finding a midwife).

Why does homebirth matter in the maternity care system? Experiencing homebirth gives a woman a completely different perspective on how birth is designed to physiologically unfold. Those amongst us who have birthed at home have all been personally inspired by the experience of developing a trusting relationship with a midwife of our choice, in our own home. We were given information to make informed decisions during pregnancy and birth and therefore, regardless of our birth outcome, felt in control of our experience. This experience of personal responsibility and empowerment is life changing and few families would return to a different model of care.

That said, home is not the only place to have a great birth and its not for everyone. *But the people who experience it have a real measure for the rest of the system.* And it's important not only that access to homebirth with a midwife isn't denied to Australian women, but that it is broadened to those who cannot currently afford it or know it's a safe option.

Women want safety more than anyone, as it's our body and our babies. A woman's definition of safety is about feeling safe as well as having a safe system of care around us.

There are consumers who use and strongly support the present homebirth system of midwives in private practice, particularly in regards to it empowering women to make informed choices. *These consumers' experiences and needs must be protected in reforms to broaden midwives' way of working to their full scope of practice.* There is a real fear amongst women and midwives that care is being defined by the hospital-centric view of birth and vulnerable to the changing whims of powerful players at each service or in policy.

This has the potential to be a midwifery workforce issue too. I know many women who have been inspired to become midwives because of their experience of birth at home with a midwife. I know prospective/current midwifery students who were becoming midwives in order to attend homebirths are questioning whether they should start/continue studying. We also don't want to lose the wisdom of homebirth midwives – I have heard of some who, if these laws pass unamended, may retire or move overseas.

I don't want everyone to choose to birth at home, or even with a midwife. I was able to research, and make an informed choice for our care. I want other women to be able to make an informed choice and access this care if they wish.

Like UK and New Zealand government policy, every Australian woman should be able to choose care with a care provider of their choice, including a midwife, in her preferred setting.

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After much lobbying by consumers, midwives and other health professionals, the Federal Government is dismantling the barriers to good midwifery practice. These barriers include:

- funding (to ensure the money follows the birthing woman throughout her pregnancy, birth and postnatally)
- an unsupportive regulatory system

- lack of visiting rights
- lack of prescribing rights
- lack of professional indemnity insurance

These barriers need to be dismantled in every practice setting, including at home. It is not acceptable to exclude homebirth from the new funding and indemnity arrangements.

Despite studies proving safety and mothers wanting this choice, the intersection of these draft Bills with the proposed legislation for national registration and accreditation of health professionals will prevent homebirth midwives from registering. I believe this to be an unintended consequence and against the intention of both processes to protect public safety.

I ask that you take steps to include homebirth within the Health Legislation Amendment (Midwives and Nurse Practitioners) and related Bills.

This is not just about homebirth – its about personal responsibility, access to evidence-based care options, informed choice and human rights.



MELISSA FOX

- 32 years old
 - Married, two daughters (4 years old and 18 months old)
 - Active maternity services consumer since April 2004
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CURRENT consumer representative positions:

- **Chair**, National Consumer Advisory Committee, Australian College of Midwives (since Feb 07)
- **Consumer representative** (Maternity Coalition), Clinical Governance Advisory Committee, Mater Mothers Hospital's maternity policy committee (since Sep 07)
- **Member**, Health Consumers Queensland (HCQ) Ministerial Advisory Committee (since Sep 08)

Previous consumer representative positions:

- **Member**, Health Quality & Complaints Commission's Consumer Advisory Committee (Sep 06 – Aug 08)
- **Consumer representative** (Maternity Coalition), Neonatal Policy Committee, Mater Mother's Hospital (Apr - Aug 07)
- **Consumer representative** (Maternity Coalition), Midwifery Group Practice Working Group – Planning, Implementation & Evaluation of new midwifery model, Mater Mothers Hospital (Jan 06 – Jul 07)
- **Consumer representative** (Friends of the Birth Centre Inc), Birth Centre Implementation Project, Consumer Participation Working Group, RBWH (Jul – Dec 05)

Previous organisational positions:

- **National Vice-President**, Maternity Coalition, Australia's umbrella maternity consumer organization www.maternitycoalition.org.au (Dec 07 – June 2009)
- **Vice-President**, Qld Branch, Maternity Coalition (Nov 06 – Nov 07)
- **President**, Friends of the Birth Centre Inc, support & lobby group for parents who have birthed through the Birth Centre at the RBWH www.fbc.org.au (Nov 05 – Apr 06)
- **Consumer Board Member**, National Executive Committee, Australian College of Midwives (Nov 05 - Nov 06)
- **Organising committee**, Friends of the Birth Centre 10th BIRTHday Celebration, Roma St Parklands (Jun 05)
- **Vice-President**, Friends of the Birth Centre Inc (Jan 05 – Oct 05)

Presentations:

- **Presentation: "Consumers don't bite: consumer representation, a key to reform"** with midwife Michelle Kelly, Womens Hospitals Australasia Conference, Sydney (Oct 08)
- **Presentation: "Consumer Participation in Action"** with midwife Katie Waters, Future Directions in Midwifery: A Shared Vision, Mater Mothers Hospital Education Seminar (Sep 07)
- **Presentation: "Birth Reform Downunder"** Bay Area Birth Information, San Francisco, USA (Sep 06)
- **Presentations: "ACTIVE consumers at EVERY level: the key to service reform" & "Mothers, Midwives & the Media"**, Australian College of Midwives Queensland State conference "The Power, Passion & Practice", Rockhampton (Jul 06)