

I am writing to voice my strong dissatisfaction at the move of the government to effectively block the work of midwives outside the system and to cut down the choices now available.

I use the words of others to support my own valid personal claim.

Women will continue to homebirth, but will now be forced to do so without the assistance of a qualified professional.” said Ms Caines.

“It is unacceptable and unsafe to force a woman into a choice that is not optimal for her, whether that is a hospital birth or a birth at home without midwifery support. It is absolutely impossible to understand the government’s position on this, other than to say that they have bowed to political pressure from medical lobby groups.”

The National Maternity Service Review received submissions from hundreds of women wanting access to homebirth services. The vast majority of homebirth services are provided by private practice midwives. Removing this option is likely to end access for most women to homebirth. I myself am one who also wrote in and do not understand why this option is being not only discouraged but OUTLAWED – as if women themselves were being pushed into the realm of witches Salem style.

It is interesting to note that the Maternity Services Review Report is the 38th review or inquiry into maternity services since 1985 – An unprecedented number of submissions was received (950) Only 500 were received for the National Health and Hospital’s Reform Commission .Over half (53% of the consumer submissions to the MSR discussed homebirth and yet the MSR did not recommend public funding for homebirth.

It is ludicrous to force women who are candidates for natural birth to be holed up in overcrowded wards such as the Nepean Hospital where roughly 200 babies are born a month and where the morbidity rates are as high as 1 in 100 (a figure just as high if not higher than that for homebirth country wide) and make them try to give birth in 8 hours or try to force them to have elective caesarians to fit in with the stresses of the hospital . This is ridiculously expensive to the taxpayer and removes a woman’s choice and dignity and often ends up in trauma.

If I end up having another child I will not be able to birth in my area ie Nepean or Katoomba (mostly closed maternity ward) and I may either have to more expensively go to another hospital in Sydney away from family and support or maybe illegally have a home birth
WHAT DO I WANT ???

And to quote again : Private maternity care could be more supportive and much cheaper if private midwifery was enabled. Current homebirth midwives are the most experienced in providing 1-2-1 midwifery care. They need to be able to continue to practice to guide the essential reform process.

Many accepted reforms have come from homebirth midwives and women (partners present at birth, use of warm water for pain relief, removing unnecessary and inappropriate routine interventions enemas, shaving, episiotomy)

Why burden the system to breaking point, force women to accept conditions they do not want and lose the precious experience of midwives when all this can be so effectively and easily achieved by allowing midwives indemnity insurance ??

Debbie Reichard