

I have two children, aged seven and three. Both were born in the Canberra Hospital. For both my pregnancies, my sole health carer was a very experienced independent midwife. I believe the care I received from her was far superior to what I would have received from an obstetrician or GP. My midwife visited me at my own home, and spent 45 minutes to an hour with me for each consultation. In addition to routine medical care such as checking the baby's growth, heart beat, etc, she provided expert and considered advice on my own nutrition, exercise and general health care. As the pregnancies progressed, she also discussed with me in detail the process and management of the birth itself - not only in the case of everything going to plan (ie a home birth), but also what would happen if complications arose.

As it happened, I developed complications early in both labours. With my first child, I had a placental abruption (where the placenta separates from the uterus wall) with the very first contraction. My midwife did not even have time to get to my house. I phoned her and said my labour had started with bleeding, and she told me to get straight to the hospital. However, she also went straight to the hospital and met me there. It was her calm demeanor and mediation skills with the hospital staff which resulted in my having the necessary caesarian section under epidural, rather than general anaesthetic. This meant I was able to hold my son as soon as he was born, and breastfeed him almost immediately. Having suddenly lost my dream of a natural home birth, this was very important to me.

My second labour began normally, but stalled after several hours and contractions did not start up again. This time, my midwife was with me at my house, but became concerned about the risk of infection as my waters had broken. Again, she advised going to hospital, this time for induction of labour to re-start the contractions. She remained with me as an attendant throughout the labour, and I gave birth to my daughter vaginally shortly afterwards. Again, it was thanks to the level-headed advocacy of my midwife that I was allowed to proceed with a vaginal birth (rather than being admitted for a caesarian on the grounds that my first child had been born that way).

I want to stress that at no point did my independent midwife behave in a radical, fanatical, politically-motivated or irresponsible manner. She made sensible, timely decisions about my ability to give birth at home, and advised me appropriately. She had an excellent relationship with the midwifery staff at the Canberra Hospital, who respected her knowledge and

experience, and she was of great assistance in the delivery of my children, especially my daughter.

I would like the committee to consider the fact that I received expert medical care throughout my pregnancies, without burdening the public health system. The fee I paid to my midwife was also less than I would have paid for private health insurance and obstetrician's fees.

Currently, the only way for an Australian woman to have a home birth (short of going it alone) is with an independent midwife. If independent midwives cannot get professional indemnity insurance, and if practising midwifery without such insurance is outlawed, then other women will be denied the choices I had in my pregnancies and births. I think this would be very, very wrong, and that there must be a better way to solve this problem. I understand that in Britain, women can choose to birth at home through the National Health system, and be attended at home by hospital midwives. If Britain can find a solution, then surely we can.

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