

Dear Senators,

I am the Coordinator of the Childbirth Education Association, Alice Springs Management Committee. My son was born at home in Melbourne in 2004. Home Birth with an independent midwife is an essential model of maternity care that cannot be substituted. I urge you to ensure that it remains available to Australian women.

In 2004/5 the Northern Territory made it impossible for independent midwives to practice through similar insurance requirements as you are considering in this Bill.

The subsequent provision of a Home Birth Service through the NT Department of Community Health is NOT a satisfactory substitute.

Women in Alice Springs have found that:

- * A public Home Birth Service brings a hospital model of care into one's home. While better than no service (!) - it does not provide fully what many women seek from home birth with an independent midwife.

- * Transfer rates are higher than with independent midwives.

- * Birth education in the community has contracted. Independent midwives are motivated to do consciousness raising around birth. In contrast, midwives employed by the health department have little incentive to run 'birth choices' events.

- * Birth choice has reduced overall.

Independent midwifery offers a personalised model of care that cannot be achieved any other way. It provides holistic care including dimensions that the health system does not offer - emotional, nurturing, psychological, spiritual. Each independent midwife defines these dimensions and character of her practice. The sense of profound meeting between two women - one midwife, the other mother - to make this journey together with baby and family - cannot be truly replicated in the discourse of 'health system and client'.

So, I write this email to you to express my grave 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.

Yours sincerely

Ruth Apelt,

