Re: Inquiry into Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009 and two related Bills It is with extreme dismay and concern that I write to you regarding the detrimental impact of the above bills on the birthing choices of Australian It is my understanding that these bills will enable Medicare women. funding, access to the Pharmaceutical Benefits Scheme and professional indemnity premium support for midwives providing care for women birthing in hospital. Medicare funding for midwifery care is long overdue. However, the plan to exclude homebirth from the proposed funding and indemnity arrangements is discriminatory and completely unacceptable. Progressive nations including the United Kingdom, Canada, The Netherlands and New Zealand support real birthing choices for women as demonstrated by the provision of funding for registered midwives through their national health schemes. Homebirth is a legislative right in New Zealand and the United Kingdom. The proposed national registration and accreditation of health professionals will prevent homebirth midwives from registering in Australia, effectively outlawing midwife assisted homebirth in this country. Ι implore you to include homebirth within the Health Legislation Amendment (Midwives and Nurse Practitioners) and related Bills. I support an equitable health system which enables all consumers and health professionals to have the same access to funding and insurance protection. I write to you as a woman, a health professional, a consumer of private midwifery services, a carer and advocate for women in my professional capacity as a hospital based midwife employed in the private sector. I am а Registered Nurse Division 1 who has recently completed a Graduate Diploma Programme in Midwifery. In the private hospital setting, women do not have access to a known care provider who provides continuous one on one support to the labouring woman. Due to this obstetrician led model of care and inadequate staffing, I have frequently witnessed unnecessary and risky cascades of interventions which place low risk women and their babies at high risk.

Dear Senator Moore

From a personal perspective, I am also a new mother who opted for private midwifery care because I firmly believed that this would be the safest option for me and my baby. This ideal midwifery model provided continuity of care and an intimate, trusting relationship with my care providers. I had a profoundly satisfying experience when I gave birth to my first baby in the comfort, security and familiarity of my home on July 9th, 2009. As a healthy, low risk woman with a normal pregnancy, my partner and I chose to have a home water birth with two professional midwives in attendance. Both these women are competent, compassionate, safe practitioners who have extensive hospital experience and who have both been employed as university midwifery educators. From both a professional and private perspective, I believe that optimal birthing outcomes eventuate when women are able to experience physiological, normal processes with minimal or no intervention,

provided that there are no complications.

I strongly urge you to amend the legislation to enable midwives to continue to practice privately. It is imperative that Australian women have birthing choices including the right to choose homebirth with a professional midwife.

Yours sincerely

Samantha Bastin