

Alice Campbell and Vaughan Winter

12 July 2009

Ms Claire Moore
Chair
Senate Community Affairs Legislation Committee

By E-mail: community.affairs.sen@aph.gov.au

Dear Senator Moore,

Re: Inquiry into Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009 and two related Bills

I write to express my serious 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 completely unacceptable, 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. This right is enshrined in the legislative frameworks of these countries because homebirth has been shown to be a cost-effective option for low-risk pregnancies and births and which provides optimal health outcomes for women, babies and the community as a whole.

The intersection of this legislation with the national registration and accreditation of health professionals will prevent homebirth midwives from registering. While this consequence may be unintended, it has very significant limitations. The effective criminalization of homebirth under the proposed legislation in Australia appears to directly contradict the spirit (if not the letter) of the International Declaration of Human Rights, and the Convention of the Rights of the Child. This legislation effectively reflects a state of dictatorship which would enable governments to control women's bodies, and seriously interferes with the general rights of women and families to self-determine their own health care options.

We are parents who have chosen to homebirth (in late July 2009). Prior to choosing homebirth as our preferred birthing option we visited and explored all of the available choices in our community. We chose a planned homebirth as our preferred option because of the highly individualized care that an Independent Midwife was able to offer and that the hospital systems (both public and private) were not able to afford us. Since choosing homebirth we have observed many of our friends and acquaintances experience challenges in the hospital system such as:

- effectively being cared for by strangers (professionals who do not know them or their family circumstances);
- being subjected to and forced to have unwanted and un-necessary procedures performed upon them and their babies because of routine hospital policies based on insurance requirements (not the needs of the individual families);
- interference with processes of attachment and bonding and the subsequent effects (esp. post-natal depression and anxiety); and
- constant undermining of their confidence and trust in themselves as new parents.

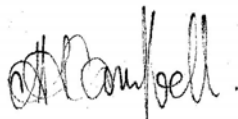
On the other hand, by contracting an Independent Midwife, our experience has been nothing but positive. Our midwife has had the opportunity to come to know us over a period of the last 36

weeks, and as such has been in the best position to monitor and respond to any changes in our health needs or the progress of the pregnancy. She is in a position to make recommendations and clinical decisions based solely on our needs and situation (rather than hospital requirements and routines which may or may not be relevant to our circumstances). She will attend labour with us (regardless of the length of labour, and regardless of whether we birth at home as planned or require transfer to hospital). She will continue to provide a full range of post-natal care following the birth, including assistance with establishing breastfeeding and ensuring the optimal health of our baby.

As a Registered Nurse and former Midwife myself, I am aware that some hospitals are making efforts to band-aid and counterbalance the negative and depersonalized experiences that many women describe. However, the reality is that hospitals vary widely in their ability and willingness to ensure non-medicalised and family-centred care. This is not to suggest that hospital is the "wrong" place for birthing. Instead, it is *imperative* that women and their families have the right to *choose* where, and with whom, they birth – whether at home, hospital, birth centre or otherwise. Indeed, we believe that homebirth should not just be a "choice" for the privileged few who can afford to save for it or (as we have done) "pay it off", but that in fact the government should be making every effort to ensure that all women (wherever geographically possible) have the opportunity to birth in an environment which is appropriate to their needs, in a place where they feel safe, and with a primary care provider who they trust. For some women, this will be hospital and for others it will be in their homes.

For this reason, we ask that you take steps to guarantee that homebirth is protected within the Health Legislation Amendment (Midwives and Nurse Practitioners) and related Bills. We call on the government to ensure that all women and families are treated equally, with the same access to funding, the same insurance protection, and the same rights to determine the care that they receive during a critical time in their lives and those of their children.

Yours sincerely,



Alice Campbell



Vaughan Winter