

13th July 2009

Mrs Samantha Mansfield

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 am a mother of two young children, both born at home. I am also currently a privately practicing Midwife providing a homebirth service to local families and have done so for the last three and a half years. I have also worked at the Maternity Unit at the local regional hospital since becoming a midwife in 2002, but not since giving birth to my second child in March 2008.

Presently this calendar year, I have 13 clients 'booked' for a homebirth. There are 3 other privately practicing midwives in our area at present and we are all friends and colleagues and provide support and a back-up service to each other. We all have a good professional working relationship with local GP Obstetricians who provide us with medical back-up should we require their input in the event of a pregnancy or birth straying from 'normal midwifery' practice.

At present in the South West of WA, around 35 women choose to birth at home with a Registered Midwife. Many others would like to birth at home, but simply cannot afford to do so. Women birthing at home in my area do so at their own expense (\$2500-\$3000), with no reimbursement from either Medicare or their Private Health Funds. BUT, at least they have the choice to birth at home if they are able to afford it. This choice will not be available to the community as of next July unless the two Bills currently before the Senate are amended to include homebirth.

I write to express my 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. This will not help me as a professional and competent Midwife, nor will it help the families in my area that choose to birth anywhere other than hospital! It is of particular relevance to communities such as the one in which I live, that is, out of the metropolitan area. Being a country area, there is no birth centre or Government-funded 'Community Midwifery Program' outside of Perth. Maternity care options in our community are already severely restricted, and if homebirth is "outlawed", then there will be no 'choice' at all other than to birth in hospital.

Medicare funding for midwifery care is long overdue. It is not acceptable 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 United Kingdom, 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 such as myself from registering to practice. 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.

Women who choose to birth at home do not make such a decision lightly and are usually extremely well informed and take full responsibility for their health and that of their baby. Women who want to birth at home will continue to do so, only they may be forced to do so without a registered Midwife. This will of course lead to an increase in morbidity and mortality if they have to labour and birth without a Midwife there to monitor progress and the health of the mother and baby.

I support a health system where all consumers are treated equally, with the same access to funding and the same insurance protection.

I feel very sad and frustrated that such a basic human right can be essentially taken away from pregnant women and their families. I am also very unhappy about the prospect that I may not be able to provide continuity of care to homebirth families in my community as of July 2010. I choose to work as a "Midwife in private practice" because of the relationships I form with my clients, the rapport and trust that is established throughout the pregnancy, the flexibility of my work hours that suit my own family needs and the availability and option to birth in water, just to name a few! I could talk for hours on the benefits of my job as I am very passionate about it, and I feel that I am in a very privileged position to be sharing such a special time with families.

Furthermore, if I was to have more children myself, I cannot imagine birthing in a hospital unless it was medically necessary, and I know from personal experience that working in a hospital maternity unit is nowhere near as rewarding for me as a Midwife.

I urge you to consider the rights and safety of all mothers and babies who have and will continue to choose to birth at home, as well as the Midwives who are ready, willing and able to support them in their choices.

Thank you for your time and consideration.

Yours sincerely

Samantha Mansfield.