

14th July 2009

Annette Rockley

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 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.

As a direct entry midwife working in rural NSW, I have seen the many challenges that rural women face in accessing any maternity services, including financial difficulty, emotional stress in relation to isolation from their family, friends and community at a time when it is vital to have this support around, and of course the stress involved in birthing in a facility that is unfamiliar and often frightening to the woman, not to mention having to travel long distances in labour to birth. Rural women have few choices when accessing maternity services, and having the option of homebirth would negate many of these issues. Increasing midwifery autonomy to the professional level it warrants by adopting Medicare funding is a wonderful step towards providing women with increase maternity services and therefore choice in the type of care that they want; but the exclusion of homebirth from indemnity and funding is a huge step backwards in providing women with choices in appropriate maternity care.

Yours sincerely

Annette Rockley