

15th 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 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.

Whilst I am supportive of Medicare funding for midwifery care I am extremely concerned that homebirth is excluded from this funding and indemnity arrangement. This exclusion takes away the freedom of choice that all women deserve when choosing a model of birth care.

Giving birth is a powerful and important event in the life of a woman and the newborn baby – and more women are coming to the understanding that the circumstances of birth can have a profound impact on the baby's health and emotional wellbeing, as well as on the relationship between mother and baby. Unnecessary interventions, being treated as just another patient instead of a woman who understands what she is doing, not being allowed to make decisions based on her own knowledge and values, all undermine the birth experience and can have long lasting consequences – such as lower breastfeeding rates, higher instances of post natal depression and even problems with bonding/attachment between mother and baby, which can impact on the mother/child relationship for the rest of their life.

Birthing in hospital does not mean that a woman cannot have a natural birth where she is in control of making the decisions that affect her. However, under this medical model of care, many women find that the decision making process is taken from them by their care provider(s) and they come out of the birth feeling extremely disempowered. Many birthing decisions made by care providers in hospitals are based on hospital policy, or on financial premises based on the number of beds or staff available – this is not an appropriate decision making process for the powerful ritual of birth.

Homebirth midwives get to know their clients and allow each woman to make her own decisions regarding how she would like to give birth. They recognize that birth is a safe and natural process and in most cases a woman does not need interventions, if she is allowed to trust herself and birth in a way she is comfortable with. These midwives also provide guidance if there are potential difficulties, and will transfer the woman to hospital if further medical care is needed – the midwife's concern is for the health and safety of mother and baby and would never put either at unnecessary risk.

To take this option away from women, by introducing the proposed legislation and the national registration and accreditation of health professionals, is a blatant disregard of the right to choose a care provider and model of care that suits each woman's needs. While homebirth is not for everybody, and many would still choose a hospital birth, it is vital that an alternative to the medical model of birth exists, as birthing in an environment not of her choosing can be detrimental to the physical and emotional health of a woman and her baby.

Of even greater concern is what this legislation will do for women who feel that the medical model of birth cannot meet their needs at all – these women may feel the only option is to birth at home without any medical support at all – which puts them and their babies at even greater risk and could have tragic consequences.

In my own experience, I have had 2 hospital births and 1 homebirth. The hospital births were full of interventions which I now understand to have been largely unnecessary – in one case contributing directly to an emergency Caesar. After each birth I struggled internally for many months with the contradiction between the joy of my baby and the pain and disempowerment that the births (and every memory of the birth processes) instilled in me. In contrast, my homebirth was private, safe and intervention free. My midwife provided excellent care throughout my pregnancy and I felt confident in my ability to birth naturally, with her there to assist if any complications occurred. After the birth I had some minor complications which she was able to deal with thoughtfully and professionally, and I felt empowered and respected as a woman throughout the entire pregnancy and birth. I feel that my baby was brought into the world under the best possible circumstances and my memories of the birth are tied up with the joy of this baby and my relationship with her.

My choice to have a homebirth was reached after doing extensive research into the safety of natural birth and looking into the options available to me in the hospitals that I could have attended – all of them would have insisted on interventions that would have reduced my likelihood of having a natural birth (due to my previous caesarean) – and I firmly believe that a natural birth, where possible, has immeasurable advantages for both mother and baby.

I also know women who have desperately wanted to have a homebirth but have been prevented by the cost or the lack of availability of independent midwives. These women have gone on to birth in a hospital setting but have continued to mourn the loss of privacy and empowerment that they desired for their baby's birth. This proposed legislation will swell the ranks of these women and can only have negative effects on the parenting culture in our country. Allowing homebirth midwives professional indemnity and the ability to register will provide a much desired service, at an affordable level, for many more women than currently choose this option.

It saddens me greatly that the option to have a gentle, safe birth at home could be jeopardized by financial interests and institutionalized beliefs. I feel uncomfortable at the thought of my children growing up in a world where decisions are made on these premises, and I trust that the Australian government will remember that human rights are more important than money. All parties need to work together to ensure that our future – the babies who are yet to be born – has the chance to be birthed safely, and in a way that does not compromise the mother's values or rights.

Homebirth midwives are committed and well-trained professionals who are passionate about a woman's right to choose what is right for her. Just as hospital midwives are long overdue to be covered in Medicare funding and indemnity insurance, the Australian values of equality and fairness insist that homebirth midwives be granted the same status, and women around the country be allowed the freedom of choice.

Yours sincerely

Anne Louise Regan