

18<sup>th</sup> July, 2009  
Tamara Adams

Ms Claire Moore  
Chair  
Senate Community Affairs Legislation Committee

By E-mail: [community.affairs.sen@aph.gov.au](mailto: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.

I believe that the unfortunate consequence of this legislation, should it go through, will be to drive underground an already marginalised sector of our community.

Homebirth, while it remains legal, is the safest birth option for low-risk women and their babies. (see numerous health studies, World Health Organization data) This is statistical fact, not emotive appeal. I fear that accidentally rendering homebirth illegal through ill-thought out legislation will have unintended consequences for the health and lives of women birthing in Australia.

Women who do not want to break the law will probably seek to have their babies in birthing centres and hospitals, while those who are philosophically against or psychologically unable to face going to hospital may be driven to birthing their babies at home with or without a midwife's support. This to my mind is one of the most dangerous situations that the law could possibly put us in.

Both of my children were born at home, with independent midwives in attendance. The positive outcomes for myself and my new babies are not to be underestimated. Continuity of care, a familiar environment, freedom to choose positions, making sounds without feeling restricted, all

contributed to a birth experience that was highly satisfactory, leading to a faster recovery and smoother post-natal period.

Homebirthers currently receive no government funding for their choices. They support their own birthing choice financially. This is not equality in terms of health care as far as I can see.

Many argue that the numbers of women choosing homebirth are too small to bother with. I ask that you think of every homebirthing family as having a face. People who eat, laugh, talk and hurt just as much as the families and women who choose elective caesarians or who choose birthing centres. We also have extended families, friends and communities who support our choices, or at least support our right to choose for ourselves where to conduct our most formative life-transitions.

We are educated women and families who are making an informed choice as to where to have our babies. At issue here is not whether you think home birth is right, or risky, lovely or quirky. At issue is the fact that our right to choose how to live is being eroded. Freedom of choice is a cornerstone of democracy. Taking away the option of choosing where to birth a baby is taking away a basic human right. To do so by accidentally allowing legislature to erase this right is inexcusable.

Please amend the proposed legislation to either continue to allow Independent Midwives to practice without indemnity, as is currently the case, or legislate to indemnify private Midwifery practitioners and allow them access to the PBS and Medicare systems as you have proposed for their hospital-based colleagues.

Yours sincerely

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