

17 July 2007
Russel Morris

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

Some may think that homebirth is only chosen by those that are extreme in their viewpoint. This is simply not the case. My career as a fund manager and management consultant have taught me to research ideas thoroughly.

My partner and I did a lot of research before delivering our two children at home.

A couple of points that came out of this research need to be highlighted:

- People who choose homebirth generally accept that they may need to go to hospital if something goes wrong as they do not want to take high risks

- Homebirth is the ONLY way a woman birthing can have the SAME carer with them for
 - 9 months of pre-natal
 - During the birth (obstetricians, on average are present for at most an hour); and
 - Post natal.

Any hospital birth or birth centre does not allow a such a personal relationship to be built for what is one of life's most joyous and intimate experiences.

- Those countries (mentioned below) that embrace home birth with (appropriate hospital backup for possible complications) have the LOWEST infant and maternal mortality rates of any countries in the world

- Responsible homebirthing leads to far FEWER complications, on average, than hospital birthing even after accounting for hospital transfers related to complications

- Many homebirth midwives have far better safety records than obstetricians and come at a fraction of the cost with little infrastructure required to back them up

In short, homebirth offers informed women more safety, intimacy and less interference while it costs the government a fraction of the cost of traditional hospital birthing to provide.

Therefore 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.

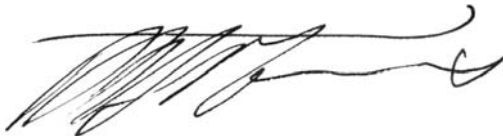
Medicare funding for midwifery care is long overdue. It is not acceptable however to exclude homebirth from this funding and indemnity arrangement. By doing this Australia is totally out of step with nations such as the United Kingdom, Canada, The Netherlands and New Zealand.

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.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Russel Morris', with a stylized flourish at the end.

Russel Morris