Gaye Demanuele
Midwife in Private Practice
Birthwise Midwives
306 Brunswick St.
Fitzroy VIC 3065
email: ixchel@iinet.net.au

Jan Ireland
Midwife in Private Practice
South Eastern Midwifery Service
19 Wards Grove
Bentleigh East VIC
email: jireland@bigpond.net.au

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The Committee Secretary
Senate Standing Committee on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600

By E-mail: community.affairs.sen@aph.gov.au

Dear Mr Elton Humphery,

Re: Inquiry into Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009 and two related Bills & Amendments

We write to express our concern about the above bills and amendments. We ask that the Senate Standing Committee on Community Affairs blocks passage of the amendments to the midwifery bills.

The amendments would essentially deny the midwife's right to practise midwifery within the full scope of her practice. Midwifery is a profession in its own right. The midwife is recognised as a responsible and accountable professional. Midwives, by definition (ICM 2005), have a duty of care to promote and protect normal physiological processes in birth. Midwives also have a duty of care in the "detection of complications in mother and child, the accessing of medical or other appropriate assistance and the carrying out of emergency measures" (ICM 2005). The midwife is the primary care provider. The midwife is the specialist of normal birth. The doctor, as a specialist of obstetrics, is consulted when variances from normal are detected by the midwife. Doctors do not practise midwifery, they practise obstetrics.

The amendments would place doctors in positions of authority over the professional practise of midwives- the specialists of obstetrics over the specialists of normal birth. They would place one professional group in authority over another, separate professional group. No other profession would be placed in such a position as proposed by these amendments. Effectively, these amendments would displace the midwife's role to that of an obstetric nurse.

Pregnancy, childbirth and the nurture of infants is not an illness (WHO 1985). The midwife provides primary maternity care in partnership with the woman and her family. The only times when doctors are essential in the childbirth continuum are those when medical intervention is necessary. On these occasions, collaboration between midwives and doctors is vital to ensure optimal health outcomes for the woman and her baby. This

is the true spirit of collaboration rather than the inequitable and unfair arrangements being proposed in the name of collaboration.

We believe these bills will restrict a woman's right to access the care provider of her choice to care for her during pregnancy, birth and the early weeks of her baby's life. The excellent outcomes that are currently achieved in partnership between women and their privately employed midwives will no longer be possible under the Government's proposed amendments to the midwifery bills. For evidence of the safety and effectiveness of planned homebirth in Victoria see the Victorian Health Department's Perinatal Data Collection Unit's recent analysis of data from approximately 1000 planned homebirths in Victoria in the past five years.

As midwives in private practice, we are faced daily with the consequences for women and their families of the trauma they have experienced within the maternity care system. A system that fails many families through lack of continuity of care, continuity of care being a primary factor in improving physical and psychological outcomes for mothers and babies, and through high rates of often unnecessary obstetric intervention. We appreciate the government's efforts to improve the health system and specifically, the maternity care system. We ask that in enacting these changes, the powerful and vested interests of the privileged few not be put before the interests of mothers, babies and their families.

Fortunately, as midwives providing continuity of care, we are also privileged to work in partnership with women and their families in helping them achieve empowering birth experiences that optimise their transition to parenthood and new life. This is primary health in action.

We ask that you do not deny women the right to choose primary midwifery care. We ask that that you do not deny the midwife's professional right to the full scope of her practice in caring for women and their babies. We ask that you assert the rights of women to have choice and control over their reproductive health. We ask that you uphold the rights of the midwife within her own profession. Please block the passage of the Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009 and the two related Bills & Amendments.

Gaye Demanuele and Jan Ireland Midwives in Private Practice

## References:

ICM 2005 Definition of a midwife. International Confederation of Midwives.

WHO 1985 'Birth is not an illness'. Fortelesa Declaration. World Health Organisation.