The Secretary Senate Community Affairs Committee PO Box 6100 Parliament House CANBERRA ACT 2600

Inquiry into National Registration and Accreditation Scheme for Doctors and Other Health Workers

Dear Committee Members,

I am extremely concerned about the proposed Health Legislation Amendment (Midwives and Nurse Practitioners) Bill 2009 which would deny privately practising (homebirth) midwives the right to legally practise their profession from 2010. I strongly believe that families have a right to choose how and where they give birth, be it home or hospital. I am a mother of three, all of whom were born at home under the expert care and guidance of a fully qualified, registered private midwife. My children are now young adults aged 27, 25 and 23.

There are a number of reasons that I chose homebirth.

- 1. I was healthy and had no complications during my pregnancies, and my pregnancies were all full-term.
- 2. I had confidence in the medical practitioners (family doctor and midwife) who supported my decision to birth at home.
- 3. During my pregnancy I developed a relationship of trust with my midwife and I knew the health professionals who would be assisting me in childbirth, as opposed to being attended to by strangers in hospital.
- 4. When I went into labour I didn't have to be transported to a hospital, but was able to remain in the comfort of my own home.
- 5. My children were born into the environment in which they would grow up in, rather than being born into an unfamiliar environment in which they would be much more susceptible to risk of infection from others.
- 6. I received comprehensive post-natal care from my midwife in my home
- 7. Giving birth was very much a family affair and didn't require me being separated from my family and home environment.
- It seemed logical to stay at home hospitals are for those who require medical attention. I am yet to be convinced that giving birth requires medical intervention unless there are complications.

In short, there was no need to go to hospital. Having said that, I am fully aware that there are instances in which going to hospital to give birth makes sense. I do not believe, however, that this is a good enough reason to take away the freedom to choose where a woman gives birth.

Perhaps one of the most compelling arguments for supporting privately practising midwives is the cost that homebirth saves state health departments. Hospital resources are already stretched, so the option of outsourcing midwives to provide maternity care (including birthing) in private homes would take pressure off state resources. The risk of infection in the event of any outbreak which occurs on a mass scale in a hospital environment is significantly reduced. There is less temptation to carry out unnecessary medical intervention, which often leads to further complications requiring medical attention, thereby placing more pressure on hospital resources.

I would suggest the government looks at models of birthing around the world, such as The Netherlands, New Zealand, Canada and UK. In all these countries private midwives enjoy the same medical indemnity and recognition as their hospital counterparts. All trained midwives are experts in their field and as such should be treated as professionals who are capable of advising

and supporting families on all birth-related issues, regardless of whether they choose to birth at home or in hospital.

I urge the committee to seriously consider the likely impacts that these proposed amendments will have. It will undoubtedly lead to a rise in unassisted births, thereby increasing the risk of unnecessary birth-related deaths. The homebirth option will simply be driven underground and this is a totally unacceptable situation in an advanced country such as Australia.

Yours sincerely,

Ms. Louise Blair

9 July 2009