

To the respected members of the Senate,

I am a father of four children, all of whom were home births, to two mothers (*sequentially*, not *concurrently* - just thought I should add that).

In my opinion, the current process by which independent midwives are being "restricted" if there has been an initial complaint against them is totally unacceptable and unjust. No conditions should be placed on any midwife before an investigation has taken place if there is a concern.

To do so is to effectively put the midwife's external practice "on hold" until the decision to investigate is decided, and constitutes a potential punishment for deciding to transfer a patient into the hospital system in a time of need. I'm sure you'll agree that shouldn't be a factor in such an important decision during a birth.

I have grave concerns that at any time after a transfer, done with the patient's best interest at heart, a midwife could find her registration under immediate restriction and this would exclude her from continuing to be the main care provider for *other* patients, as well as immediate post-natal care of her transferred patient.

Given that practicing midwives always have a stream of clients at late stages of birthing, this also would mean her subsequent patients would be scrambling to find another midwife late in their term of pregnancy – a stressful experience for a late term mother expecting the midwife to be there for the "big day".

One of the main benefits of homebirthing and long term midwifery is the continuation of care a dedicated midwife provides to the family expecting the birth, and subsequent to the birth. Suddenly suspending a midwife totally interferes with this important continuity of care.

In my own personal experience, a local hospital staff member who is antagonistic to the practice of homebirth in our region has made such a complaint, causing my partner and I to decide to birth our fourth child at home unassisted by the midwife who had

helped us with our third. Thankfully it was my fourth and we were comfortable with the process, but a first or second time homebirther might not have made such a decision.

The issue is particularly important in regional areas where there are very few practicing home birth midwives. In our case there was only one other homebirth midwife available, and his workload and location were both issues of concern for us – “would he be double booked? Would he be able to make it in time?”... so we decided to birth unassisted. Thankfully it went well, but I would have much preferred to have the midwife we already knew and trusted in attendance.

In terms of concern regarding the suitability/expertise of midwives, I assure you a women contemplating a homebirth is the most “discerning customer” you could expect to meet. If the midwife is not capable, she won’t be practicing very long. Word of mouth counts for a lot in this line of work – mothers always talk birth stories. There are few jobs more demanding, or more rewarding, or more scrutinized by the clients. If you ever have the opportunity I encourage you to assist at a home birth - it’s an enlightening experience.

I request that an urgent review of this process takes place immediately and that some balance be restored. Midwifery and homebirth is not a crime, and when practiced with a clear view of the risks and benefits, with good advice from a capable midwife, calmly and with acceptance in the family and community, it has potential to alleviate some of the workload on our strained hospital system. Better yet, it can provide women and families a more comfortable birthing process in familiar surroundings, with personal responsibility and control, and yet experienced medical attention on hand if needed.

The current system easily allows for misuse, with no consequences for “spurious” reporting. While I’d like to think the hospital system is accepting of homebirth generally, I know from public discussion there are some practitioners who are against it, for reasons other than the patient’s best interest it would seem. One would reasonably expect Obstetricians to have a “business case” against homebirth, purely on that dimension of their

practice, not to impugn their motives in general.

I am proud of my children and their homebirths, and the mothers (2) who did the hard work and trusted me to help - though filling the pool in time is no small task!

Please ensure homebirthing is a reasonable and accepted option for Australian families who choose this path.

I attach a photo of my children, because this is what the whole debate is about. Enjoy.

Kind regards

Steven G Stanley