

To: The Members of the Senate Inquiry into National Registration and Accreditation Scheme for Doctors and Other Health Workers

Submission Regarding: *Proposed Deregistration of Homebirth Midwives*

Hello, my name is Eleanor Marney, and I am a 38-year old mother of four, living with my partner in Guildford, North Central Victoria. I am writing this submission to appeal to the Members of the Senate Inquiry regarding the proposed deregistration of homebirth midwives under new National Registration laws scheduled to take effect in July 2010.

The recently released report of the Federal Maternity Services Review proposes some promising reforms in the areas of hospital midwifery, culturally appropriate care, better access and support for women in pregnancy and postnatally, and a more collaborative approach to relationships between caregivers. What is incredibly disappointing is the fact that while the Review recommends the ultimate goal of 'safe, high-quality and accessible care based on informed choice' (page iii), the Government is prepared in the same motion to strip away a viable and wholly supportive choice for birthing women - that is, the choice of a planned homebirth with a registered, indemnified and qualified homebirth midwife.

If the Federal Government proceeds with the proposals contained in the Review, homebirth will cease to legally exist. This is a blow for women's choice all over Australia. There are a number of reasons why the Inquiry needs to rethink the proposed end to women's access to midwifery care for homebirth, and these are:

1. Minority choice or not, it's still a choice.

A strong point is made in the Report about the small number of homebirths that occur in Australia. The reasons for the small Australian numbers are not explored, in particular problems that most Australian women have in accessing information or care for homebirth in this country, where homebirth isn't normalised to the same extent as countries like New Zealand/UK/Canada/The Netherlands. In fact, in my electorate, there is great support for homebirth - I know of more than a dozen women who have birthed at home in this area in the 2008-09 financial year alone, a significant number when our local hospital takes on approx. 60 births a year. While homebirth may be a minority choice, it is nonetheless still a choice. No comparison is made with other minority choices in the Report, such as caesarean section on request, and there is no consideration of banning these choices. Why ban homebirth?

2. Scientific evidence does not inform the recommendations regarding homebirth.

Although some reference is made to scientific evidence on some issues in the Report, no reference is made to evidence regarding the outcomes of homebirth. Rather the Report refers to 'polarising the professions' (page 21) on the issue of homebirth. So it appears to be purely medical opposition to homebirth that informs the recommendations - to allow less collaborative members of the medical fraternity to 'come to the table' on the expansion of approaches for maternity care. This is unfair to women, and reinforces a subordinate position for midwives relative to doctors by proposing to restrict midwifery practice in line with common prejudices, thereby undermining the relationships the Report

proposes to enhance. The implied strategy seems to be for Government to restrict homebirth midwifery practice, against scientific evidence, against the principle of women's informed choice, and against the safety of determined homebirthing women.

3. The safety of women birthing without a caregiver has been overlooked.

The loss of homebirth midwifery care is undeniably likely to push more women into unattended homebirth. This is unacceptable. Women will continue to choose homebirth, many after hospital trauma. Certainly, if my own discussions with women locally and online are any indication, it is a situation I can foresee in the future in this area, if women are denied access to a high standard of midwifery care in their preferred venue. Women birthing at home without a trained caregiver do so out of desperation, and such a situation would make it even more impossible to regulate safety standards, or provide monitoring or evaluation of homebirth outcomes.

4. Rural women deserve the same choices and better access to care.

The situation for rural women was noted as being of particular concern in the Report - current services and supports were acknowledged to be already 'inadequate to cater for the needs of all women and their families in rural and remote areas'. And yet the Report's proposal for the end of homebirth actually robs rural women further of their access to maternity support. With the closure of over 130 small maternity units across Australia since 1995, homebirth midwives are well-placed to fill the gap; the availability of homebirth may actually help to reduce the numbers of babies born en route to hospital ('roadside births'), the incidence of which has risen to .5% nationally. Given that for women in these areas (like myself), access to hospital services often requires lengthy transit in labour, with uncertain ambulance availability, it seems ludicrous to prevent women from birthing in the warmth and safety of their own homes with a trained professional homebirth midwife.

Finally, the issue at hand is really one of *choice* - all women deserve the freedom to choose where and with whom they wish to birth their babies. The Government must make it clear that the needs, interests and autonomy of women come first. Healthcare policy and services should not be corrupted by the prejudices of those healthcare professions which currently prosper on taxpayer funds.

I have given birth to four sons in my own home, ably assisted and cared for by homebirth midwives each time. I have experienced the gold standard of maternity care. If the Members of the Inquiry fail to recognise the professionalism of homebirth midwives and the extraordinary quality of care that they provide, it will be a sad day for the women of Australia.

Please, act in the interests of choice. Do not deny homebirth midwives indemnity or national registration from July next year.

With thanks for your consideration, and awaiting the results of this Inquiry,

Yours sincerely

Eleanor Marney