

REPORT OF HOMEBIRTH AUSTRALIA NATIONAL CONFERENCE

17 - 22 May, 1982

Middle Park Uniting Church, MELBOURNE

Joan Donley

This 1982 Conference was well organised, comprehensive and stimulating. It was also consciously political. Each Australian state and N.Z. had ample time to present the conditions in their areas with room for discussion and these clearly demonstrated the international organised O&G/government conspiracy against home birth. The experiences in one area laid the basis for future tactics in another and greatly clarified and reinforced the solidarity and determination of all areas to continue the fight for better birth options for the women 'down under'.

As the hostess Melbourne opened the Conference with a report of the Victoria situation. The legal strictures there concerning midwives are the same as in N.Z. - midwives must work under the supervision of a doctor. A quick perusal of their Regulations showed them to be very similar to those in N.Z. In Melbourne there are only two doctors involved in home births - John Stevenson & Peter Lucas, both were at the Conference. Most of the labour support is done by approx 20 birth attendants, mainly CEA members. There are very few midwives involved. The birth attendants are a very responsible and serious group of young women. They regularly attend self-organised workshops involving the doctors and the midwives, wherein they exchange experience, knowledge and support. They hold weekend retreats with lectures on various topics - observations on normal labour, what is abnormal labour, resuscitation of the newborn, etc; they also do extensive self-learning. These workshops have also stimulated cooperation between the midwives and the birth attendants - now both attend each labour. This provides shared responsibility and back-up. The responsibility for the birth is carried by the couple and the doctor. The transition from learning to practice on the part of the birth attendant is decided by both the doctor and the couple.

From the Melbourne parents attending the Conference I gained the impression that as a group they were quite determined to retain the responsibility of birth in their own hands. They were not prepared to yield this to any professional. Birth attendants were just that, yet there was no hostility towards these, and they all worked together well. Probably because of the way in which home birth developed in Melbourne, these couples have made a qualitative leap forward and are determined to accept the responsibility for birth using the professionals in an advisory capacity where necessary. It is only this conviction that birth is a natural function and women are capable of handling it that can withstand the attacks. On the other hand Peter Lucas still found that many women wanted a "homebirth packet", so he had prepared a 'Home Birth Plan' a series of questions to encourage couples to think about the options and responsibilities. Appendix 1

Because of the recent attacks on John Stevenson the Melbourne group have become much more politicised and structured organisationally. They have a constitution and a membership of approx 150. Their Newsletter is published every two months and is sold in health food shops and book shops at .50¢ copy and in doctors' waiting rooms on the honour box system. They have a 'media watch', have had good local radio coverage with talk backs to help people verbalise issues. They have a HB children's play group as well as a parents' support group. Through Peter's clinic they also have a Baby Support group which meets weekly to share baby care problems; every second week they have a guest speaker.

NEW SOUTH WALES.

In NSW midwives can still act as independent practitioners and the seven independent midwives do about 45% of the home births in the Sydney area. However, following the witch hunt against Edith Gosling and her deregistration, the NSW government have prepared new regulations to 'control' domiciliary midwives and this "dangerous fad" - natural childbirth, as one Sydney OB described it. (He didn't say "dangerous" to whom, but obviously the real danger is to the vested interests of the OBs.) Rather than table these new regulations in Parliament the decision has been made to gazette them which will circumvent any parliamentary debate. We should watch that one. The feeling in Sydney is that because of the current changes taking place in hospitals, these regulations will not be brought forward for another year. They are arranging a private members bill to guarantee professional midwives freedom in their profession.

These developments have unified the two Sydney HB support groups - HB Ass'n Sydney (HAS) and HB Associates (HBA). Previously they were divided on ideological lines - one was politically oriented while the other was more into the spiritual aspects of childbirth. However, the NSW Health Commission's stated opposition to home birth and the ensuing struggle to combat the regulations have demonstrated that unless birth options are defended politically, there won't be any legal home birth to be spiritual - and illegal, underground home birth could only be fraught with fear and tension.

Sydney has one of the two Australian OBs prepared to stand against the pressure of their peers and do home births. Paul Sutherland delivers about one-third of his patients at home with midwives. The remainder deliver in the Crown Street Women's Hospital Birth Centre with birth attendants. Recently Paul was "hauled up" for handling home birth referrals to hospital. He was supported by two sympathetic OBs. (This covering home birth referrals to hospital was the issue used in Auckland to eliminate the one OB who used to do home births here.)

The Sydney Home Birth groups have become "consumer oriented with no midwives involved." They feel no one can organise their experiences and expectations as they can themselves. As women taking responsibility they feel more independent when they were "free from the pressures and closeness" of the practitioners. To promote this responsibility they have organised a 'Body Awareness Workshop' which will explore body awareness, massage, nutrition, taking blood pressure, listening to the fetal heart, doing urinalysis, how to tell EDD, etc. - without any experts. They have prepared a set of guidelines, 'Choosing a Birth Attendant' (Appendix 2) so women do not give over responsibility to the practitioner. If a woman has been unhappy about her birthing experience she can report back to either of the Support groups. In accepting this responsibility there seems to be a note of hostility towards the practitioners which does not exist in Melbourne. One cause may be the feeling that a group of Sydney HB practitioners "pulled the rug out from under the consumers" by agreeing that the government regulations were acceptable to them. Or do the practitioners feel that they know best and try to impose their concept of a home birth onto the birthing woman instead of letting her do her own thing? I didn't have time to explore the reasons, but surely in the interests of unity in the face of an implacable enemy these problems could be handled within the groups. As the Executive Director of the ACOG urged the membership in fighting the American lay midwives, "It is important for all of us...to remember that the Indians are all outside the stockade and avoid taking shots at each other." And the same applies to us.

The Sydney HB groups joined the struggle to prevent the abrupt closure 29/12/81 of the Crown Street Birth Centre. They joined demonstrations and had members send telegrams of protest to the Minister. The Birth Centre was reopened and a Committee which is 80% hostile to Birth Centres has been set up to look into the matter. A speaker at the demo pointed out that Birth Centres were only set up as a sop to the Health Commission's directive to do something to stem the demand for home birth and that hospital boards and obstetricians were never committed to the idea, as doctors were never happy about control of birthing being in the hands of midwives. Under existing conditions 50% of applicants were screened out on the basis of high risk criteria while 40% of those admitted were transferred during labour to the hospital ward. (HAS Newsletter No 9/1982) The G.P. Secty claimed that "the taxpayer should not have to pay to enable a handful of people to indulge their whims," to which HAS Carolyn Spruell replied in the Australian 10.1.82, "I say to all those mothers 'shut out' of the Birth Centre at Crown Street, now have a home birth and truly indulge yourself and your baby."

Another idea from Sydney was contacting senior citizens as support persons for home birth women post natally.

Also from NSW an experienced midwife, Jillian Brodie, spoke about the 'Birth & Beyond' Centre at Nimbin. Jillian was a tutor to hospital students and a teacher with CEA. This Centre was started by the women with a lay midwife, Carole Elliot who was also an experienced acupuncturist and herbalist. She has gone to U.K. Jillian works with an assistant who receives \$50 of the \$200 the charges. For this she conducts a four-week antenatal course which also discusses the role of emotions and how women can help themselves: labour delivery and five

post natal visits. The assistant also does one post natal visit. She limits the distance at one hour's drive from her home, primiparas at 30 minutes from hospital. She has a young son and does about three deliveries per month. Her address is 'Dungamon' Coffee Camp via Lismore, NSW 2480, phone 066 891334. There are still people in the area doing birth on their own.

ADELAIDE, SOUTH AUSTRALIA.

Home birth is proceeding quietly in S. Australia which is probably why they are having difficulty in keeping a Support group going. After sending out 60 invitations they got a commitment from 4 or 5 although a lot of people were interested and wanted mainly a home birth information centre. (HB is listed in their telephone directory) They have managed to keep people together through picnics and now have a group of 10 who are eager to keep things going. Their midwife, Rosey Smart, holds a monthly film night at her home for the antenatal women but others are also welcome. The other midwife, Julie Pratt also holds antenatal classes, and the two home birth doctors do a six-week preparation course.

They have now formed a group to work on a newsletter while they have another group prepared to get into politicking. There is hostility from a group of doctors and their office nurses and the people are generally conservative. In S. Australia midwives can work as independent practitioners. Rosey charges \$250 for a confinement which includes five antenatal visits. The reps from Adelaide spoke of Rosey in glowing terms. She couldn't attend the Conference as she had ladies due.

PERTH, WESTERN AUSTRALIA

Henny Ligtermoet, the National Coordinator, gave the report from Western Australia. She stressed that the home birth option is in a very critical stage at present - there is a world wide conspiracy against natural childbirth. In Australia the RCOG sent a letter to all obstetricians advising them not to be involved in planned out-of-hospital births. There is pressure from the Health Commissions to prevent medical benefits refunding, so where economic issues are a problem a woman will go to hospital because it is free even though she would rather have a home birth.

Home birth was first organised in Perth in 1957 and from the start was opposed by doctors, although Perth has the only other OB, Ralph Hickling prepared to do home births and speak out on their behalf. One home birth doctor from Perth said she encountered a lot of pressure from other doctors and remarks about 'death and murder' and she appreciated the support she received from the midwives and the parents.

The W. Australia midwifery regulations are at present very superficial - the midwife has merely to notify the Health Commission that she plans to do domiciliary practice. They are trying to change this to have the midwife ask permission. They are also setting out the international high risk factors to curb the home births. The majority of the Perth midwives work out of the Midwifery Contact Centre. The cost is \$390 - \$350 for the midwife and \$40 for the Centre to cover costs of publications and provision of equipment. However, there has been a split among the Perth midwives which is very unfortunate for the whole home birth movement. Not only does it place a weapon in the hands of the enemy, it is quite irresponsible for one group to try and destroy the image of the other. After so many years of dedicated work Henny was very discouraged by the attacks on the Centre. In fact, she was so upset by the infighting that she resigned as co-ordinator of the Midwifery Contact Centre.

The midwives working from the Centre stipulate that a woman must have household help for two weeks after birth. Also all women, their partners and the midwife sign a form agreeing to transfer to hospital should an emergency arise.

NEW ZEALAND

New Zealand's turn was next. I gave the background of N.Z.'s maternity services, the role of the MSC and their determination to base N.Z.'s maternity services on the U.K. Short Report. and the stringent recommendations in the MSC Draft Report; the role of NZNA in formulating some of these recommendations; the decision of the domiciliary midwives to form their own Domiciliary Midwives Society (DMS) and their application

to join the FOL. Also told them about the report to the Ombudsman and our Conference decision to call for the MSC Report to be submitted to a Parliamentary Select Committee.

It was a nice surprise to meet another N.Z. midwife at the Conference - she was holidaying in Melbourne - Connie Van den Ande and was working at Christchurch Women's Hospital. She told of the hospital policy that if there was an EFM available it was to be used, and of a research study being done by one team - every woman induced at term.

Thursday afternoon there was a discussion on the role of the National HBA. It was agreed that international HB week should again be held from 24 - 31 October. Every centre reported good responses from their many and varied activities, Henny has again taken on the onerous task as National Coordinator. She would really like to receive not only reports and newsletters from all branches, but also news clippings. Melbourne would also like to exchange newsclippings with us. The Melbourne contact is Nola Hardess, 30 Emo Rd, E, Malvern 3145, Victoria. Maybe one of our members would like to take on this job, Henny's address is 14 Shoalwater Rd, Shoalwater, W.A. 6169.

The National HBA are preparing a constitution; the next Conference will be in Sydney, May 1983. It was generally agreed that a national movement was an essential political development to keep us politically aware and to act as a 'political safety valve'. Also needed is a media watch, We need to learn how to reply to criticism as well as being positive and assertive rather than defensive about the attitude that "home birth is socially unacceptable." We need good liaison to support each other and those in isolated areas. We need to organise research and collect statistics. We also need to look at funding.

It was decided that each member state (& N.Z.) by or before July should consider the political tactics available to us, resources available and possible research projects. By August these should be sent to Henny so she can collate them and return the relevant information to all groups by September for use in HB week in October. Would suggest a sub-committee to assess our experience and draw lessons from it and prepared a report.

Direct Entry Midwifery was also discussed - this is a long term project. It was suggested that the Cumberland College of Health Services be approached re setting up a training course.

Unfortunately I missed the Friday session due to a violent tummy bug which struck my daughter-in-law Helen with whom I was staying and also my granddaughter, Tamarin whom I took to Aussie with me. That day they played a tape from Darwin and the Tasmanian repgave their report. Apparently a midwife in Hobart was charged by the Nursing Council with mismanagement over a home birth transfer to hospital. However, it was the OB who had mismanaged the case and the midwife was cleared of the blame the OB had tried to lay onto her. At Devonport, Joie Vanrenen, a midwife has done 12 home births and along with the help of an OB has managed to have a birth centre set up at the local hospital. Present at the Conference was a dynamic young midwife with her baby, Liz Ekins, Albury Rd, Golconda 7254; she has started to do home births.

Saturday a.m. there was a meeting with home birth doctors With everybody contributing a list was made of problems encountered by those wanting natural birth. Here's the list:

- 1) Hostile opposition from organised OBs and allied organisations;
- 2) Fear from doctors and hospital people; fear of birth & peer press
- 3) Ignorance from the media and the public; (ure.
- 4) Inadequate training - training is for trouble not for natural birth.
- 5) Inadequate education of expectant parents, medical people and the community;
- 6) Sexist (anti-feminist) attitudes;
- 7) Poverty - people need money, houses, decent jobs;
- 8) No refunds through medical benefits;
- 9) Not enough home birth doctors and midwives;
- 10) Profit motives and vested interests;
- 11) Disturbs well-established medical relationships.

Present at this session was an OB, Percy Rogers (call me Perce) who had set up the Melbourne Royal Women's Birth Centre. He outlined the ways OBs had gradually assumed control of birth - through the development of

such things as the obstetric forceps, chloroform, blood transfusions, antibiotics and now the new technology. He ended by saying birth is a perfectly natural function and women had been doing it for centuries without help from obstetricians. I was sitting next to him so I told him about one of our leading OBs who said "women just had to become aware that birth is not a normal physiological function, at all." He just snorted. He came to the Conference to solicit support for the Birthing Centre which was threatened with closure and which, he said, was being attacked because it "undermined existing medical relations." The hospitals, he claimed, belonged to the women, not to the doctors or the hospital boards. He felt the Birth Centre had helped to improve conditions on the labour ward. Although women are supposed to be able to have the kind of birth they want at the Birth Centre, he told me he had to sit with a woman for 8 hours to protect her from the staff who had given her sedation she didn't want. Perce suggested uniting with other like-minded groups such as Nursing Mothers etc. He invited me to visit the Birth Centre, but I didn't have time. Maybe next year, although there is talk that the Royal Women's Hospital is to be replaced by a modern structure in one of the outer suburbs despite the lack of funds for health services.

There was a film evening, which I missed due to the transportation problems. The CEA Nimbin film, 'Birth & Beyond' was shown. Also the recently completed film of Henny's antenatal classes. There is another film available on squatting births among the natives in Brazil. This is available from Dr Clarko, Moyses Pociornik, Curitiba, Brazil. I don't know the price, but suggest we enquire.

Doris Haire, 439 East 51st Street, New York, N.Y. 10022 plans to visit Australia in 1984. Suggest that we contact her and see if she can include N.Z. in her itinerary.

Henny had a good book stall well supplied with NAPSAC publications. I think we should purchase the whole set for our library. Two other books available through NAPSAC are 'The Confessions of a Medical Heretic' and 'Mal(e)practice: How Doctors Manipulate Women', both by Robert Mendelsohn, M.D. published by Contemporary Books Inc, 180 North Michigan Blvd, Chicago, Ill, 60601.

There were no reps there this year from Canberra (their midwife, Lorraine Pollock, is 'retiring' as she got married and they are looking for another one to handle their 50 births p.a.) nor from Queensland, but home births are gaining in strength there also.

Henny and I finally had a get-together after the Conference. She and her husband Paul drove their camper van around and parked it in the yard of my son and daughter-in-law, Patrick & Sandra. They had dinner with us and Henny and I talked far into the night and again the next morning while Paul kept checking their get-away time with little success.

And finally, the Australasian Nurses Journal, Box 197, Port Adelaide, S.A. 5015, Managing Editor, Edna Davis, overseas sub \$8 p.a. Well worth subscribing to. Henny has articles in it frequently.

The Melbourne Homebirth Group deserve a vote of thanks and congratulations for their excellent organisation and hospitality. Very many thanks. Am looking forward to seeing you all in Sydney next May.

Dear Lyn:

First re film our video is still in the putting together stage - not done it will be some time yet. Then 'Five Women Five Births' available P.C., or Naps Film Library we want to promote modestly making last night one April 88 (33yr premenstrual) Bonham announced that in case of disaster if the "preserved" women are home birth we would be up for "manslaughter". All women it seems must be dead of the "dangers of h-b". On other hand we would be back to 5th year and student (Toni Kjelstrom - Community Med) lives. When from 1:30 to 4pm. arranged it.

Had a good response.

Carrie Vander Hout went to Thames to see PPHN Harrison - PPHN didn't show up finally met Harrison who told her home birth wasn't in in Thames or anywhere in NZ.

had had 2 nearly dead men to resuscitate + transport
He not only from S.A. & a member of Special his a bloody head too

Will send Clarence a copy of this when I get the Appendix
Revised -

Regards

Jim

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