

ADJOURNMENT OF THE HOUSE

HON KIM CHANCE (Agricultural - Leader of the House) [10.25 pm]: I move -

That the House do now adjourn.

Water Forums, Advertisement - Adjournment Debate

HON ADELE FARINA (South West) [10.26 pm]: It has come to my attention that the Leader of the Opposition in the other place has today issued a media statement accusing me of misusing government funds to promote myself in an advertisement for one of a series of community water forums in my electorate. The media release states, in part -

Ms Farina's photograph and contact details have been incorporated into a government-funded advertisement for the water forum.

The claim that the advertisement was government-funded is completely untrue. I paid for that advertisement myself from my electorate allowance, as a service to my electors, to advise them of an important event that I thought many of them might wish to attend. In fact, many did. I am advised that the Leader of the Opposition was told that the advertisement was not government-funded during question time in another place today but he has taken no action to withdraw this totally dishonest media release. I call on the Leader of the Opposition to apologise for making this false allegation against me. While he is at it, he might hurry along the apology owed to me by the member for Vasse for his recent abuse of parliamentary privilege. Mr President, as a result of my recent experiences, I am coming to the view that opposition members in the other place only open their mouths to change feet!

National Maternity Action Plan - Adjournment Debate

HON GIZ WATSON (North Metropolitan) [10.27 pm]: I will take a few minutes of the time of the House to inform members about a function I attended this morning. It was the launch of the national maternity action plan. The national maternity action plan advocates policy and legislative changes so that the community-based midwifery program becomes the accepted model for birthing in Australia. The model suggested to be the template is the Western Australian community midwifery program. It is an excellent program. The information sheet states -

The Community Midwifery Program is a Department of Health WA funded service that provides no-cost, community-based, primary midwifery care to 150 women and their families throughout the Perth metropolitan area.

The Program aims to promote greater birth choices for women in the public health system by providing a safe and responsible homebirth service with continuity of care and carer. The Program's philosophy is that childbirth is, in the majority of cases, a normal life event which left to nature will proceed to an uncomplicated outcome, and that the individual needs of women and their families must be respected and supported. Evidence-based research shows that continuity of care and carer promotes positive outcomes for both mothers and their babies.

The Program statistics show that 84% of women will proceed to a normal, uncomplicated birth. Approximately one third of all normal births on the Program are waterbirths. At 12% the Program's overall caesarean section rate is well below both national private and public rates which are currently 30% and 21% respectively.

That is of major concern. The rate of caesarean sections currently occurring in Australia is well over the World Health Organisation's recommended maximum level of 10 per cent. One of the key issues that the community midwifery program seeks to address is the rate of caesarean sections that is currently being carried out under hospital deliveries. The national maternity action plan of the Maternity Coalition is a blueprint for provision of maternity services in Australia. It calls on the Government -

to provide Australian women with the choice of having a known midwife care for her throughout her pregnancy, labour and birth, and for the first weeks of her life with a new baby through public maternity services.

It continues -

One-to-one continuity of care from a midwife has been shown to be safe, to reduce the need for interventions in childbirth, and to increase women's satisfaction with their experience of childbirth and early parenting.

...

Rates of obstetric intervention in childbirth have risen markedly in Australia over the past 10 years without lowering the maternal or neonatal death rates: in fact, these rates appear to have increased according to the National Health & Medical Research Council.

The national maternity action plan talks about ideal models, and I mentioned the template of the Western Australian community midwifery delivery program. It reads -

The ideal model is one, such as that used in the Netherlands, the UK and New Zealand, where women receive their primary care from a midwife in much the same way as GPs provide primary health care. Where an individual woman or her baby needs specialist care the midwife, like the GP, involves specialists in ensuring the best outcomes for her client.

The point was also made at the launch that, currently, the demand by women who would like to have their birthing experience with a midwife exceeds the availability of midwives at the same cost as the provision of maternity services in the public health system. There was a call to redirect some of the funding that is currently provided for maternity services from the standard health care system into the community midwifery program because there is a proven demand and currently women are unable to exercise their choice if they wish to have a birth with a midwife. Changes also need to be made to ensure that Medicare funding is more readily available for community-based midwifery.

Members will be aware that in the past 12 months or so there has been a lot of difficulty gaining indemnity insurance for midwives, which has impacted particularly on the provision of midwifery services in the country.

I encourage members to familiarise themselves with what this national maternity action plan proposes so they can understand that the provision of choice in how families wish to birth their children is very important and can also have a very positive impact on health outcomes. For the interest of members, I seek leave to table a copy of the national maternity action plan and encourage members to support the push, which I do not think is a party political issue. I hope that all members will get behind encouraging a community-based approach to childbirth that allows families who wish to take up that option a greater opportunity to do so on an equal costing with the more medical model for childbirth.

Leave granted. [See paper No 247.]

Mr Allie Scott, Southern Senior of the Year - Adjournment Debate

HON BARRY HOUSE (South West) [10.35 pm]: I say a few brief words about an outstanding senior citizen from Busselton who was yesterday acknowledged as the winner of the Southern Senior of the Year, Allie Scott from Busselton. Mr Scott is 90 years old. He was nominated for this award by Barry Blaikie, a former member of the other place. I was very pleased to be a referee in his nomination. Allie Scott has had a long involvement in the local community. He is still active on his farm, which at 90 is some achievement. He has been active in sport, bushfire brigades and many other local associations over many years, and a long-term Busselton shire councillor.

In recent years, the focus of his community involvement has been as the chairman of the Busselton jetty management committee. He has done an outstanding job in that role, which he has held for about 15 years. Together with other people from the local community, including Roy Morris, Trevor Fitzgerald, Sheryl Watson, Terry House and Ross Bromell, he has steered that project and provided a terrific result for the local community. That will come to a climax in May next year when the underwater observatory and associated facilities are anticipated to be opened. The underwater observatory will take advantage of the magnificent coral formations underneath the end of the jetty. The jetty is about two kilometres long and reputed to be the longest wooden structure of its type in the Southern Hemisphere. There have been significant achievements along the way, and the project has had the advantage of state, local and federal government funding. It is worth noting that the underwater observatory will come to pass in its complete form only as a result of the committee recently receiving the last \$400 000 from a federal government source. That, combined with other state and local government funding, will complete the project. It has been the icing on the cake and will enable the facility to be built to completion. Combined with the jetty interpretive centre and various other jetty upgrades that have taken place over the years, the observatory will create a magnificent and internationally acclaimed tourism facility for Busselton and the south west. I rang Mr Scott yesterday morning to wish him well for the award function in Bunbury, which I unfortunately could not attend. He told me that the number of people who use the jetty interpretive centre have exceeded expectations and that it is an outstanding success in all facets.

Allie Scott is the heart and soul of the Busselton jetty management committee. He provides the history, energy and focus for its activities. He has been a tireless worker and advocate at all levels. The success of the venture is due in no small part to Allie's contribution. He is a fitting winner of this award. It is fair recognition for his outstanding contribution over many years. I take this opportunity to record that valuable contribution in

Hansard. He was recognised as the winner from a strong field of contenders, and I understand the regional winners are then judged on a statewide basis.

It is worth mentioning that the Western Australian Seniors Awards were initiated in Bunbury by Chris Mills from Golden West Network Pty Ltd, who still reads the weather on GWN, and Tony Ashbolt, who at that stage was the manager of the Lord Forrest Hotel in Bunbury. I see on the program that GWN is still a sponsor. This program has support across the board from many other corporate sponsors as well.

I am pleased that these awards have endured over the years, and I am especially pleased that somebody of the calibre of Allie Scott has been duly recognised for an outstanding contribution to his community over many years.

National Maternity Action Plan - Adjournment Debate

HON PETER FOSS (East Metropolitan) [10.40 pm]: I am glad that Hon Giz Watson rose this evening to mention the national maternity action plan. I had not been aware of it until the dinner break this evening when I went to the Strangers Bar and was accosted by a midwife. She was the midwife who delivered my second and fourth children. She introduced me to all the other people there, who said that they were celebrating the national maternity action plan. The reason that I was very pleased to meet those people is that I have had a long association with the midwives of Western Australia because, as I said, this midwife delivered two of my children. In fact, my second son was her first home delivery in Western Australia. I would hate to think how many more there were between her first home delivery and the delivery of my third son. My third child was also born at home, but we had another midwife for that delivery.

When I became Minister for Health, midwifery as a profession had to a large extent been pushed behind that of obstetric general practitioners and obstetricians. The home midwifery profession was in considerable difficulty because it had received no increase in the amount of money that could be claimed back from private health insurance, and it certainly had very little that could come under Medicare. On the other hand, the profession's costs had risen over the years. Therefore, I made an arrangement whereby we could involve home midwives in being employed through the hospitals but they could still continue to do their work in the homes of individual women; therefore, financially, they were able to continue practising their profession.

I have tried to give considerable encouragement to home midwifery over the years. Obviously, it is not for every woman, but there should be an appropriate response. It is unfortunate that all too often women who see a GP or an obstetrician end up with a hospital obstetrician or GP obstetrician-based delivery, when that really is not a necessity. An extraordinary thing has happened. Western Australia is making a leading contribution to community midwifery, whereby children are delivered in the home. Western Australia is seen as a leader in the way it has supported that at a government level. At one end we are making remarkable improvements.

However, Western Australia also has one of the highest intervention levels in Australia - historically, that has always been the case in Western Australia - and, in fact, Australia has had one of the highest intervention levels in the world. By the way, I should say that the interventions are not in any way related to home births; they are due to the fact that there are interventions in hospital births. I hope that there will be a change of attitude on the part of obstetricians. I have always tried to suggest to specialist obstetricians that they have appropriate roles to play, provided everybody works out what they should be doing. It is all too unfortunate that women who could easily have had a normal birth at home - and at all stages it was obvious that it would be a safe birth at home - go to the hospital and end up with massive intervention. Caesareans are far too common in this State. Inductions seem to take place with enormous regularity, particularly towards an approaching weekend, and interventions in other ways, such as episiotomies and vacuum and forceps extractions, happen with far too great a regularity in Western Australia and in Australia as a whole. Interventions such as those often lead to an unfortunate birth experience for the mother involved, and quite unnecessarily so. Of course, this can lead to some uterogenic damage and disease. It seems extraordinary that, in the name of caution, uterogenic problems occur.

I am pleased that Western Australia has been seen as a model in the area of community midwifery. I am also pleased that Hon Giz Watson was invited and went to the launch of the national maternity action plan. I would not have minded an invitation myself, but I did not get one. However, I was pleased with the reception I received when I did walk in on it. They certainly appear to be pleased with the results. I hope they are successful in promoting the plan, and that we see a change in attitude towards birth in Western Australia. I believe that the area of community midwifery has gained a great deal of acceptance and a real place in Western Australia.

HON LOUISE PRATT (East Metropolitan) [10.45 pm]: I also acknowledge the community midwifery program and the excellent work of the midwives and their supporters in putting together the national maternity action plan. It was my pleasure to host them for drinks at Parliament House this evening to acknowledge their hard work in putting together the national maternity action plan. The community midwifery program provides

women and their families with the opportunity to choose continuous care with a registered midwife throughout pregnancy, birth and postnatal periods. Women can choose to give birth at home or in hospital. The program is funded through the Department of Health in Western Australia. Fortunately, women who are able to participate in this program pay no costs other than the medical fees of their backup doctors.

One particular issue concerning community midwives takes me back to a situation that arose at about this time last year when professional indemnity insurance for midwives was withdrawn. It looked for a while as though this would seriously affect Western Australia's unique community midwifery program. The Department of Health worked to identify alternative insurance at that time, but nothing was located. Fortunately, a medium-term solution was found, but we will need to continue to work to find an ongoing solution to this issue. The medium-term solution was for King Edward Memorial Hospital to employ the community midwives so that they could obtain insurance via the Government's insurer, RiskCover. By doing that, we were able to maintain this vital service for women and their families.

It was my absolute pleasure to meet with those women this evening and hear about their excellent work, and particularly some of the stories they told me about childbirth. I find being a member of Parliament to be a pretty privileged position, but the way these women spoke about their work - of being invited into the intimacy of that family experience of childbirth - demonstrated what an absolute pleasure and privilege it is to them. They work hard to service their clients - they are often on call 24 hours a day. It is indeed a very difficult lifestyle for them. It is a vocation and calling for which I acknowledge my utmost respect.

Question put and passed.

House adjourned at 10.48 pm
