

Dear Senator Mary Daugherty Abrams, Representative Jonathan Steinberg, and Members of the Public Health Committee of the Connecticut General Assembly,

My name is Maura Jo Lynch and I live in Meriden, Connecticut, and will be moving to Harwinton, Connecticut soon. **I stand in support of S.B. No. 1, An Act Equalizing Comprehensive Access to Mental, Behavioral and Physical Health Care in Response to the Pandemic.** I am a member of the Doulas For Connecticut Coalition (aka Doulas4CT) and I am a birth, bereavement and postpartum doula, childbirth educator, perinatal fitness educator, wellness educator and breastfeeding/chestfeeding/nursing educator. I also had the good fortune to teach at Southern Connecticut State University and Central Connecticut State University for several years.

This policy proposal is crucial to doulas in Connecticut. Title protection is crucial and provides stronger identity and credibility, and prevents misrepresentation of the profession. A doula is a non-medical professional trained in childbirth who provides emotional, physical, and informational support to a person who is expecting, is experiencing labor, or has recently given birth. A doula's purpose is to help people have safe, memorable, and empowering birthing experiences.

I began my career as a doula in 2006 and can attest to how much doula support can mean to families. We know from decades of data that doula support means a decrease in the need for interventions and medications during birth. Fewer medications and interventions allow for birthing parents feeling better both physically and emotionally following birth. Fewer interventions also mean lowering risks of complications and iatrogenic (provider-caused or medication-caused) conditions for the birthing parent and the baby. This is important for everyone. To be able to begin actively parenting a baby feeling good instead of unwell or dissatisfied with the birth experience puts the entire family in a much better position, removing so many barriers to a healthy start. A 2016 study concluded, "Based on associations between doula care and preterm and cesarean birth, coverage reimbursement for doula services would likely be cost saving or cost effective for state Medicaid programs. (Kozhimannil et al, 2016)" We also know from research that there are significant mental health benefits to doula support. **These improvements to health and wellbeing are available by adding just one single person into the mix as a family moves through their journey -- the doula.**

And the impact of doulas, in addition to lowering public health costs around preterm births, morbidity and mortality rates can really shine when we begin to specifically discuss the health disparities between white birthing parents and their babies and Black birthing parents and their babies as well as other people of color. I hope by now you are all well aware of this well-studied massive chasm in health outcome rates. Doulas can address and alleviate many of the underpinnings in our current system that lead to these disparities in Connecticut. **Doulas are such a simple and cost-effective measure to improve Public Health. It's time to bring doula care to the forefront in Connecticut.**

Among high-income countries, the United States consistently faces the worst rate of pregnancy/childbirth-related deaths. Connecticut sees substantial and persistent disparities in the deaths of birthing people by race and ethnicity. Black birthing people are three to four times as likely to die during or related to pregnancy than white birthing people, regardless of socioeconomic status. Increasing equitable access to doula care services, especially in under-resourced communities, has been shown to improve outcomes for both birthing people and newborns. Doulas and the care they provide can improve these outcomes.

I have lived in Connecticut for most of my 46 years, I have two children, one is in middle school and one in high school and **health equity in pregnancy, birth, postpartum, newborn care and child health services matter to me because all families need care and support, especially in the Black community. Here in Meriden, I know the neighbors across the street and down the road face**

significant challenges I did not face when I was pregnant, simply due to the way health care is provided to people of color. We can have the exact same educational level, income level and age and yet my neighbor across the street is lucky to have her and her baby *survive* giving birth, a thought that wouldn't occur to me as a white pregnant person at all unless I worked in this field or was aware of this terrible, preventable public health crisis. **And doula support can address this in a meaningful way that is of deep importance to ALL communities in this great state.**

I strongly urge you to support the statute regarding the doula profession at this time to improve public health and reduce health care and public insurance costs. Lines 204-207 show that the term "doula" means a trained, nonmedical professional who provides physical, emotional and informational support to a pregnant person before, during and after birth, in person or virtually.

Lastly, **I commend the efforts of the study** to determine whether the Department of Public Health should establish a state certification process by which a person can be certified as a state doula to ensure no doula be barred from this process. Equity for people who may want doula services and equity for doulas themselves are both a part of this process to ensure better health outcomes and close that chasm of racial disparities in care.

Thank you for the opportunity to submit this testimony regarding the doula profession. In closing, I urge you to support S.B. No 1 to define the doula profession.

Sincerely,
Maura Jo Lynch, MA, SBD, CPFE, CGBE, MCD, MCPD, MCPCD