



The Commission on
Women, Children, Seniors, Equity & Opportunity

CWCSEO

Connecticut General Assembly

**Testimony of
The Commission on Women, Children, Seniors, Equity and Opportunity
Submitted to the Public Health Committee
March 17, 2020**

Re: S.B. 1, An Act Equalizing Comprehensive Access to Mental, Behavioral and Physical Health Care in Response to the Pandemic

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

My name is Zaria Smith and I serve as a health policy fellow for the Connecticut Commission for Women, Children, Seniors, Equity, and Opportunity. The CWCSEO serves to inform and engage all policy makers about constituent needs for women, children and their families, seniors and the African American, Asian Pacific-American, Latino and Puerto Rican populations in Connecticut. We are a nonpartisan agency with a data driven, cross-cultural approach to policy innovation and work to eliminate disparities by identifying opportunities, building connections and promoting change. **The Commission stands in support of S.B. No. 1, An Act Equalizing Comprehensive Access to Mental, Behavioral and Physical Health Care in Response to the Pandemic**, with a special focus on Section 10 of the proposal.

According to a 2018 study conducted by the Connecticut Health Association, black babies are 4 times more likely to die before their first birth compared to their white counterparts.¹ Furthermore, black infants are twice as likely to be categorized as having a low-birth weight than white babies.¹ Researchers at Harvard and other institutions have attributed this maternal disparity to the poor social and economic conditions faced by black women in the United States. This phenomenon, also known as weathering, raises stress hormone levels, which results in premature deterioration of the mother's body.² Weathering is not only harming our black mothers but is also killing our black infants.

Evidence strongly suggests that providing doula support through Medicaid is likely to reduce these significant racial health disparities. Use of doula services has been shown to reduce incidences of low birth weight and premature births, result in shorter labor lengths, and decrease pain and anxiety.³ Doula's serve as a protective factor for minority women by empowering them

¹ Becker, Arielle L. 2020. *Health Disparities in Connecticut: Causes, Effects, and What We Can Do*. Connecticut Health Foundation.

² Geronimus AT. The weathering hypothesis and the health of African-American women and infants: evidence and speculations. *Ethn Dis*. 1992 Summer;2(3):207-21. PMID: 1467758.

³ Lew, Samantha. (n.d.) *Doula Care Services in Connecticut [Fact Sheet]*. Health Equity Solutions. 18-20 Trinity Street, 2nd Floor, Hartford, CT 06106



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to make decisions for themselves, and their families. They give *both* parents a voice in the birthing process, while also providing them with the necessary non-medical support to reduce stress and anxiety both before, during, and after the labor.³

While doula's have proven critical in reducing health disparities across the state, access to doula services remains limited without adequate reimbursement. This policy proposal is a crucial first step in advancing health equity by offering a key step towards Medicaid reimbursement. The title protection offered in S.B. No. 1 provides stronger identity and credibility to the profession, and prevents misrepresentation of doulas. As a student of public health, a health equity advocate, and a black woman, I commend the efforts of the proposed study in establishing a state certification process. However, I urge members of the public health committee and the Connecticut General Assembly, as representatives of black mothers and infants across the state, to include the following definition of the term "doula" to ensure that access doula services are provided in an equitable fashion, no matter the circumstance:

"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.

Thank you for the opportunity to submit this testimony regarding the doula profession. In closing, the Commission urges you to support S.B. No 1 to define the doula profession. Please continue to use the Commission as a resource in navigating this important decision.

Sincerely,

Zaria Smith
Health Policy Fellow
CT Commission for Women, Children, Seniors, Equity, and Opportunity