Dear Maryland State Health and Government Operations Committee:

My name is Jenna Fitzgerald, and I am a Birth Companion with Johns Hopkins School of Nursing. I, along with many of my peers, work with childbearing families in Baltimore City and surrounding areas. For the last year, we have not been accepted in any Maryland hospitals, which has forced us to provide essential care and support via zoom, text, and other virtual platforms. While we have learned to get creative and prepare our families to the best of our abilities without ever meeting them, it is simply not enough. Several of the families that I have worked with over the last year have had traumatic labor experiences or births that did not go the way that they had planned. Due to the restrictions, these families have been forced to manage difficult situations by themselves without the in-person support and advocacy that they deserved from doulas that they trusted. Doulas are essential components of a childbearing family's pregnancy and birthing care team, and research has demonstrated the positive benefits of in-person continuous labor support via doulas. The American College of Obstetrics and Gynecology recognizes that continuous labor support is associated with improved outcomes for women in labor and their infants.¹ Some benefits include shortened labor, decreased need for analgesia, fewer operative deliveries, increased satisfaction of birth experience, less cesarean sections, and higher 5-minute Apgar scores for infants. 1 Not only do these benefits result in better outcomes for families, but less complications also reduce overall health care costs. As the maternal mortality and morbidity rates continue to increase among childbearing persons in the U.S., especially childbearing persons of color, it is imperative that polices support childbearing families, and restricting doula access in hospitals does the opposite. For this reason, I strongly urge you to eliminate restrictions against doulas and ensure that birthing parents are prioritized and supported to the fullest extent.

Sincerely.

Jenna Fitzgerald

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¹Committee on Obstetric Practice (2017). Committee Opinion No. 687: Approaches to Limit Intervention During Labor and Birth. Obstetrics and gynecology, 129(2), e20–e28. https://doi-org.proxy1.library.jhu.edu/10.1097/AOG.00000000000001905