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Division of General Obstetrics and Gynecology Department of Obstetrics, Gynecology & Reproductive Sciences

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www.umm.edu/womenscenter

Chair Kelley, Vice Chair Feldman Maryland State Senate Finance Committee:

Continuous labor support has been associated with improved birth outcomes including shorter labors, a decreased need for pain medication, a decreased risk of non-medically indicated Cesarean and increased probability of being satisfied with the birth experience. These effects are augmented when this support is provided by a doula. Qualitative research in a study population of racially and ethnically diverse individuals who received doula care revealed that doulas provided them with agency, personal security, informational support, and connectedness. Due to financial barriers, those individuals who could most benefit from a doula are also the ones least likely to be able to avail themselves of this service.

The Department of Obstetrics, Gynecology and Reproductive Sciences at the University of Maryland School of Medicine is committed to visible action to ameliorate the impacts of social determinants of health, including systemic racism and gender inequity on birth outcomes. We thus support SB 503, which is designed to increase access by low-income women to a service that may help improve birth outcomes and reduce health disparities. Not only are doula services shown to be effective in improving birth outcome, a recent study showed that certified doula services being covered by Medical Assistance Programs would also likely be cost effective.

While we are in support of evidence based practices that improve maternal and child outcomes, it is critical to ensure the program undergoes vetting of participating doulas. This is necessary to ensure that they are certified under existing, established, quality doula certification programs such as DONA International. It is also critical that the role of the certified doula as a support person and not a medical care provider remains very clearly defined in the legislation, within the medical team and to pregnant people. The proposed legislation contains language to this effect. We would oppose any move to amend this Bill to remove the language that establishes this vetting process or the requirement of certification by an approved certification entity. We would also oppose any legislation that does not clearly define the role of a certified doula as a non-medical support person.

We appreciate your consideration of SB 503 in support of Medical Assistance Coverage for certified doula services.

Sincerely

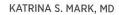
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