

Jasmine Henderson's Testimony:

Hello, Chairwoman Manchester, Vice-Chair Cutrola, Ranking Member Liston, and Members of the Families, Aging, and Human Services Committee, Thank you for allowing me to submit written testimony to the committee. My name is Jasmine Henderson, and I am a caretaker , organizer and the Director of Policy and Social Impact at the Ohio Women's Alliance.

The Ohio Women's Alliance is a reproductive justice values-aligned organization that builds capacity towards progressive change and equity through a base-building alliance of women and femmes rooted in self-determination on all levels of life, including birthing. Ohio Women's Alliance supports HB 142, a safe birthing bill and all efforts to increase positive birthing outcomes for Black, Indigenous, and people of color.

My work revolves around the survival, education, and protection of womxn of color across the state of Ohio, and the facts are clear. In Ohio, we must collectively work together to not just *ensure* but *secure* positive birthing outcomes for birthing parents and their children, Black women, who are dying at a rate that is 2.5 times higher than white women. Black women account for 34% of all pregnancy-related deaths, while only accounting for 17% of all pregnancies in Ohio.

As the committee knows from the sponsored testimony given by Representative Crawley, there are 810 pregnancy-related deaths in the state of Ohio in 2019. Between 2012-2018, 57% of all pregnancy-related deaths were preventable. The March of Dimes released their Preterm Birth Report Card in 2019, stating that preterm birth rates have worsened for the 4th year in the state in a row for Ohio. The preterm birth rate moved from 9.36% in 2015 to 10.02% in 2018, acknowledging that preterm birth is the most significant indicator for a child's survival in their first year of life. The racial disparities between the preterm birth rate for Black babies are 14.3%, while the preterm birth rate for White babies is 5.1%. There are only five states with a higher infant mortality rate.

Medical professionals are to protect positive birthing health outcomes for parents and their children. We must acknowledge the systematic barriers such as race, sex, and economic status that stop Ohioans from achieving complete birth equity for all parents and children, no matter their race or where they were born. HB 142 allows people who historically cannot afford doula services, especially Black women, to determine positive healthcare outcomes before, during, and after birth. This safe birthing bill acknowledges healthy birth outcomes for parents and children and goes beyond doctors, nurses, and other medical staff's expertise. This bill recognizes that birthing parents have the right to decide the necessary physical, emotional, and psychological support and advocacy resources in their birthing plan.

I want to thank the committee Chairman, Vice-Chair, Ranking Members, and all the members for the opportunity to submit written testimony for the Families, Aging, and Human Service Committee and the chance to testify in support of House Bill 142. I am a strong proponent of the passage of this safe birthing bill to provide a pathway to make doula services a recognized

profession in Ohio and create a path for positive outcomes for birthing parents and children within the state of Ohio.