

Testimony in Opposition to HB496 and its Substitute

Chairwoman Manchester, Vice-Chair Cutrona, Ranking Member Denson and all members of the Families, Aging and Human Services Committee, my name is Monica Honeycutt and I thank you for the opportunity to testify here today. I am a direct-entry (or traditional) midwife practicing in Northeast Ohio since 2016, and I have caught nearly 400 babies. I attend births both in clients' homes and at the Middlefield Care Center, an exempt Amish birthing center in Geauga County. I serve a wide variety of clients, some from the Plain communities, others not. I am on the Board of Directors of Community Midwives of Ohio and am an officer of the Ohio Midwives Alliance.

My interest in midwifery began when I was expecting my second child. I was looking for a different level of care than I had been offered with my first. I wanted to make my own choices for myself and my baby. I wanted to know who would be helping me birth my baby. I wanted to work with someone I felt I could really trust and who, in return, trusted me to make appropriate decisions. I wanted to feel safe and supported through what I viewed as a normal physiological process. I found all of these things. I found them with an unlicensed midwife. My midwife spent more time with me in our first visit than I had spent with my previous obstetrician through my whole pregnancy. That is not an exaggeration. By the time my son was born, I knew her very well, and she knew me. We had built the kind of relationship that creates the safest and most comfortable circumstances for birth. My homebirths were wonderful. I am so grateful for those experiences. They were my motivation to become a midwife myself.

I believe that I am called to this work of helping women and babies have safe, peaceful, respectful, and minimally interventive births. The arrival of a new baby is a sacred event and should be honored as such. The long-term benefits of midwifery care for both mothers and babies are too many to list here today but cannot be over-stated. I believe this is a point on which most of us on all sides of this issue can agree. As Representative Koehler has stated "The midwives providing care in Ohio are not causing problems – they do not need to be 'fixed'." Which is why I am opposed to HB496 as it is currently written. I have read and studied HB496 as well as the new substitute bill.

While this legislation may have been created with good intentions, as it is written, my concern is that it will cause more harm than good. Of the midwives in Ohio who are currently practicing, about half of them do not meet the qualifications for licensure set forth in HB496. This will quite obviously reduce access, when the stated goal is to do just the opposite. In Representative Koehler's introduction of the bill, he made the following statement. "We want midwifery to flourish. That is the intention of this bill." It will become exponentially more difficult, if not impossible, for midwifery to flourish in Ohio if half of us are transformed overnight into felons. A large number of our senior midwives, those with decades of experience, will not qualify for this licensure currently. They are highly unlikely to jump through all of the regulatory hoops to continue practicing. If we lose them as active midwives, we also lose the wisdom and knowledge that they would pass along to future midwives. This bill as written will essentially kill traditional midwifery, while pulling licensed midwives into a flawed system that, quite frankly, many women are deliberately choosing to avoid.

Licensed midwives are beholden to the board that regulates them, in this case, the Board of Nursing. When birth choices are taken out of the hands of birthing families and placed in the hands of a regulatory board, some freedom is necessarily lost. This becomes particularly problematic when those being regulated have entirely different backgrounds and training than those doing the regulating. Most unlicensed midwives are not nurses. And most nurses are not midwives. Therefore, it is quite illogical for

one to create rules and regulations applying to the other. Traditional midwives and CPMs...not nurses...are the experts in out-of-hospital birth. They are extensively trained to recognize when a pregnancy, birth, or postpartum has become higher risk. They know how and when to facilitate transfer to an appropriate location and/or care provider in those situations. This constant assessment of well-being and recognition of warning signs is what allows out-of-hospital providers to maintain high levels of safety.

I would like to share with you some statistics that challenge the notion that birth would be safer with licensed midwives. New Bedford Care Center is located in Fresno and is one of Ohio's free-standing exempt birth centers. There are no nurses, nurse-midwives, or doctors working there. All births are attended by unlicensed midwives. Some are CPMs, and others are Direct-Entry or Traditional midwives. As of a few days ago, 2062 babies have been born at New Bedford Care Center. They have had one maternal death (due to amniotic fluid embolism, which is a very rare and unpredictable event), they have had 0 fetal deaths, 0 births induced or augmented with pharmaceuticals, and 0 IVs needed. Their transfer rate is 11% and their cesarean rate is 1%. This last statistic is particularly noteworthy given the fact that the overall cesarean rate in Ohio is greater than 31%. Obviously, avoiding so many major abdominal surgeries also avoids the complications that often result from such procedures. Again, to echo Representative Koehler, midwives in Ohio are doing a great job! And they are doing so as *unlicensed* midwives.

I do understand that some midwives would prefer to be licensed. I am not opposed to licensure for those who want it. However, this bill needs to include an exemption for traditional midwives that would allow them to continue to serve ALL women, not only those who qualify as "religious" by some ambiguous standard.

In my view, HB496 is a solution looking for a problem. I urge you all to consider the repercussions this bill will have for many families in Ohio if it is enacted as written. I ask you to reject HB496 and any other bill that will result in loss of birth freedoms now and in the future. Restricting access to traditional midwives is NOT the way to expand midwifery care in Ohio. I ask all of you to please do your part to help preserve the timeless art that is midwifery.

Thank you for the opportunity to share my concerns with this bill. I'm happy to answer any questions from the committee.

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