

Chairwoman Manchester, Vice Chair Cutrona, Ranking Member Denson, and Members of the House Families, Aging, and Human Services Committee, thank you for the opportunity to provide proponent testimony on HB 496.

My name is Angela Campos. I am a mother of three children whom my husband and I raise outside of Cincinnati. I am also a licensed Registered Nurse in the state of Ohio. After spending many hours researching the risks and benefits of hospital versus homebirths we opted for midwifery care from a team of Certified Professional Midwives for our second and third children. We could not have been more pleased with this choice and the exceptional care provided to our family during each pregnancy, delivery, and postpartum.

When my husband and I elected to switch to midwifery care for the birth of our second child we spent a lot of time talking with other families in the homebirth community and interviewing midwives. It was important to us that we got to choose where to birth and what provider we used. We extensively vetted the training and skill sets of several local area Certified Professional Midwives and felt confident in their ability as qualified providers however it became immediately apparent that in making the choice to birth at home we would not have equal access to routine testing, scans, medications, and treatments should we need them. Because of this void we had to hunt for a licensed provider who could order some of these things and used that provider in parallel to our midwives. It wasn't easy to find someone willing to provide this prenatal care with our second child and was even more difficult with our third, not to mention the extra time and costs to us. We felt it was important so we made it work but not all families have that privilege. One of the cruxes of midwifery care is that mothers remain low risk and midwives be able to identify concerns early before more extensive intervention is needed. I kept asking myself why all of those routine things had to be so difficult. HB 496 ensures that families have the right to decide where they birth, with competent, safe providers who have oversight and accountability for safe practice. The reality is that families will continue to choose midwives whether they are licensed or not, but not all will have the knowledge or tools to weed out untrained midwives or seek the parallel care I value so much as a nurse myself. HB 496 gives midwives legal access to routine screening tools, emergency medications, and treatments needed for early intervention. It ensures families receive true informed consent about their care and provides midwives with legal protection in their practice. Another question we kept coming back to was what would happen if we needed to transfer to the hospital. I needed to know that if we transferred we would be met with open-minded, cohesive care on the other end. HB 496 builds safe pathways for transfer that require hospital staff and EMS to recognize midwives as legal providers. This kind of collaborative care only stands to swiftly uphold the safety of all involved. The journey through all of this planning and information seeking with our second child solidified homebirth as the right choice for our family, despite the few extra hoops we had to jump

through. When we learned we were expecting our third baby we knew we would again birth at home and we welcomed him just recently in March of 2022 with both of his big siblings by our side. Perhaps one of the things we value most is the personalized care we receive prenatally and postpartum. They know my diet, my supplements, my activity level, etc so when small issues arise they can swiftly make suggestions to remedy things that fit our lifestyle and values. I know that we can make the best decisions for our family because of the informed care they provide. In planning for our third birth I learned that if we elected for vitamin K to be given to the baby we would have to either ask our Pediatrician to order it for us or drive to Kentucky where our midwives could then legally care and administer it. Despite having a very collaborative Pediatrician, their practice would not allow them to order it for us so at just two days postpartum we packed our new baby in the car and drove across the river into Kentucky to meet our midwife and receive his dose of vitamin K. We felt it was important for him to receive the medication but I would be lying if I didn't consider declining it because of the inconvenience. HB 496 would allow midwives to legally carry these sorts of medications families may elect and eliminate disruptions in postpartum recovery. I believe the postpartum care provided by my midwives positively impacted my recovery with each of my babies. I was less stressed, had adequate breastfeeding support, was better nourished and rested, and we were able to immediately bond as a family.

It is for these reasons that I am in support of HB 496

Angela K Campos