House Bill 496 Opponent Testimony

Chairperson Manchester, Vice-Chair Cutrona, Ranking member Denson and all the members of the Families, Aging and Human Services Committee

My name is Bobbie Boyd. I am a Certified Professional Midwife for 16 years and the Director of the New Bedford Care Center, a free-standing birth center that serves the Plain Communities (Amish & Mennonite) of Coshocton, Holmes, Tuscarawas and surrounding counties. I am a Community Midwives of Ohio board member.

I am a midwife who is for licensure and have been licensed in another state while living and practicing in that state for 3 years. I see the benefits of licensure of ordering ultrasounds, labs and the use of pharmaceuticals.

However today I am testifying as opposed to this bill as it is written today for 2 main reasons.

This bill without an amendment would eliminate and /or criminalize Direct Entry Midwives that would not qualify for licensure. From the midwives I could count this would be about half the currently practicing midwives that would no longer be practicing. Leave a huge hole in the communities they serve. Isn't the purpose of this bill to increase midwifery availability?

Another area of concern with the bill is the licensed midwives being under the Ohio Board of Nursing. Birth is not a pathological event (pathological means disease). Birth is a physiological process (physiological means a normal function, like breathing and digesting). As midwives we are trained to view birth as a physiological process. Also, a big part of that training is recognizing when a pregnancy or birth becomes abnormal. When a pregnancy, birth or postpartum becomes abnormal, we transfer care to the appropriate care provider.

Being under a medical board like the Ohio Board of Nursing would change the landscape for midwives who are trained fully in the physiological process of care. We are not nurses. The Ohio Board of Nursing is an inappropriate place for Certified Professional Midwives. Just as it would be inappropriate for Certified Professional Midwives to be on the board over seeing Nurses. I don't know what it would be like to be a Nurse Midwife in the hospital system but it is certainly different from doing birth out of the hospital. Using pharmaceuticals, reporting to doctors, working with a team of nurses, radiology and labs. Our training is very different.

In the same respect, Midwives and Nurses that don't work in an out of hospital setting wouldn't understand our systems. How can the Board of Nursing regulate midwives that attend births in settings that they are not trained for? Currently in the United States there are only 2 States that use the Board of nursing to regulate Licensed Midwives.

Working with the department of health makes more sense for me. We already to report our statistics to them, hearing screens, newborn screens, heart defect screens and file birth certificates with their oversight.

Having a board of midwives that work in the same settings with a similar educational background would be the most competent board.

To challenge the notion that birth would be safer with licensed midwives, I would like to present the statistics from our birth center. These births were all attended by Direct Entry Midwives and Certified Professional Midwives.

As of today, we have had 2062 births.

We have had 1 maternal death (amniotic embolism, an unpredictable event)

0 fetal deaths

0 births that are induced or augmented with pharmaceuticals

0 births using IV's

Transfer rate of 11%

Cesarean rate of 1%

We do not use nurses, nurse midwives or doctors at the care center.

Statistics prove the safe and effective outcomes of our "unlicensed Midwives".

We are trained in a constant risk assessment of mothers prenatally and during birth and postpartum to ensure these good outcomes. This is what makes non-medical midwives so successful in out of hospital settings. Please don't put licensed Direct Entry Midwives under the Ohio Board of Nursing. We are not nurses and they are not trained to attend births the way that Direct Entry Midwives and Certified Professional Midwives do.

Please don't eliminate or criminalize the Direct Entry Midwife that would not qualify to be licensed. This would be to the detriment to the communities that they serve.