

Dear Co-Chairs Greenlick and Thompson and members of the House Health Care Committee,

My first child was born by unnecessary cesarean operation. This procedure left me with Post Traumatic Stress Disorder and more than \$15,000 in hospital bills.

With my second pregnancy, I chose to give birth at home, not in spite of my cesarean but because of it. If midwifery care hadn't been available to me, I would have had an unassisted childbirth with possibly devastating consequences as it was my midwives who were able to assess that I needed hospital care and insisted that I transport to the hospital, where I received a second cesarean. This one was necessary. I had pulled a 3cm hole in my uterus.

Pregnant a third time, I wanted to give birth in a hospital. But in spite of the fact that cesareans increase the risk of maternal death three-fold, every hospital refused to allow me a trial of labor. My options were to submit to being tied down and cut open or to give birth outside of a hospital. Because a midwife was willing to attend me, I did not give birth alone. I had a safe home birth and my child and myself are healthy and thriving.

Amnesty international reports that the US maternal mortality rate is higher than 49 other countries. With 99% of women giving birth in hospitals, clearly responsibility cannot be put solely on the midwives shoulders.

I appreciate any efforts to bring transparency to maternity care. But with our lives, and our babies lives on the line, any restrictions to access the maternity care of our choice is dangerous. Legislating midwifery care makes me very uncomfortable. But if you insist on passing a bill that imposes restrictions on midwifery care in Oregon, I ask that in the very least it: 1) Restore autonomy to the midwifery licensing board. 2) Include an exemption for traditional midwives. If licensure, now or in the future, restricts midwives from attending specific types of birth (VBAC, breech, twins) and legislation is not simultaneously passed that forces hospitals to attend to these women without tying them down and cutting them open, women like me will be forced to give birth at home unattended.

Furthermore, as a business owner and Oregon taxpayer, I ask that you consider how we can provide more access to midwifery care for families. Our neighbor, Washington, is doing this now because of patient satisfaction and cost-savings. You can read more about this here: http://www.huffingtonpost.com/john-weeks/homebirth-david-versus-th_b_1372854.html

Respectfully,

Roanna Rosewood