

Janique Bacharach
Boring, OR 97009

February 25, 2021

Re: Written Testimony in Support of HB2388

Dear Chair Prusak and Members of the Committee,

I am Janique Bacharach, a resident of Clackamas County, Oregon and I am pregnant with my 3rd child and planning a homebirth as my first option for delivery. I would like your support for this bill because I believe it's important for all women to have access to a broader scope of care options for both prenatal care and birth, especially for black, indigenous and women of color.

With my first birth, I risked out of home birth. For my second birth I found that despite having full comprehensive insurance for my family as paid for through my paralegal job with a top law firm, home birth was not covered. Economic sensibility prevailed and I chose the birth plan that was fully funded versus fully out-of-pocket. I knew less about black women dying in hospitals then. As I've learned about the staggering maternal deaths of black women mysteriously irrespective of social, economic or educational status, concern set in and having the option of homebirth became a lifeline for my well-being in this pregnancy. If my body and my midwife can safely get me to the birth of my child at home, I want to have that option over the unknowns of an institution proven to fail women who simply look like me. That is worth more to me than a free birth that my insurance will cover but for the women who don't have that financial freedom, I am here to be one voice.

A midwife from a private clinic attended both of my hospital births in the role of doula. She spared me the most pain of anyone and is why I have complete faith in her assisting me with homebirth (and possibly transfer to hospital) for my 3rd and final pregnancy. My first hospital birth was in 2016. I was having back labor, as my baby was facing the wrong way. My midwife doula suggested an intervention that no one else mentioned, nor would they, due to the high failure rate. The "sterile water papules," a harmless injection for pain relief irrespective of dilation, apparently only works for 30-some-percent of women. It would be another 7 hours before I'd be dilated enough for epidural, so I was glad to have the option because it worked for me in what I would later learn is the hardest labor possible. My son was crashing into my spine but suddenly my labor became manageable. My second birth was in 2018. I experienced severe afterbirth cramping such that I couldn't hold my newborn. I couldn't understand what was going on until finally my midwife doula told me I was receiving Pitocin via the IV in my arm. She asked if I'd like it turned off and with its removal came the ability to hold my son nearly an hour after I birthed him. No one else explained this earlier on or offered relief despite my agony and my cries. She earned my trust again. I deeply appreciated both my hospital births but I would never set foot in a hospital without someone as committed to me and my experience as a doula and without the expertise and unique lens of an independent midwife. It is these same qualities that give me full confidence in my midwife for home and birth center delivery. They know and communicate the risks and they know when to transfer care. It's not all or nothing.

For these reasons, I hope you vote yes in support of HB 2388.