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HOUSE OF REPRESENTATIVES
Senate Health Care Committee
April 26, 2023

Chair Patterson, Vice-Chair Hayden, and members of the committee,

I am submitting testimony, as chief sponsor, on HB 2535, also known as our Better Beginnings for Babies bill.

I'm proud to say this bill has earned strong bi-partisan sponsorship in the House, passing out of committee and on the floor with unanimous votes, and it carries on the work of former Representative and healthcare provider Rachel Prusak.

As a pediatrician, I visit newborns in the hospital and I give them their first checkup. I get to pet their hair - when they have hair - and help a family fathom the huge change that now defines their lives. It's one of the best parts of my job.

And in this role, I've occasionally visited the newborns of adults in custody from Coffee Creek Correctional Facility - which I'll call Coffee Creek from here on out - which is a somewhat fraught situation as we contemplate the coming separation of the baby from the mom.

But let's back up a bit. Let's think about the months leading up to the delivery of this precious - dare I say "innocent" - baby. What influence do these months have on the health of this newborn? It turns out, to no one's surprise, that the conditions of pregnancy are incredibly consequential.

I'm sure we all know the importance of high-quality prenatal care (PNC) and its role in ensuring the safe delivery of a healthy newborn. First, there is the medical part, what I consider the relatively easy part: we monitor the baby's growth with an actual tape measurement of the "baby bump" and with ultrasonography, we check mom's blood pressure and blood sugar and blood type to screen for complications that put the baby at risk. We talk about how to ensure the most healthy pregnancy - through vitamin supplements, a diet rich in fruits and vegetables, exercise, and yes, a healthy emotional life. And of course, we discuss the risks posed by tobacco and alcohol and marijuana, and other substances. Yes, when done right, prenatal care goes a LONG way in improving the chances that the baby will be born healthy and on time.

We know that women who are incarcerated have higher rates of baseline medical issues that can complicate pregnancy. And we know that people of color are disproportionately represented in our incarcerated community, and Black women, in particular, experience a higher incidence of

complications and poor outcomes during pregnancy, delivery, and postpartum. And, we see more anxiety and depression among incarcerated women.

However, it is important to note, that when prenatal care is enhanced— when we really engage and support the pregnant person— we can mitigate some of these risks, and improve the chance of a healthy baby at the end of pregnancy.

Here enters the work of a doula, a trained and certified expert that provides physical, emotional, and informational support to a pregnant person before, during, and after the delivery of a baby.

HB 2535 sets up a doula program at Coffee Creek, where the doula (this support person) provides guidance and expertise, joining the person who is pregnant at routine prenatal visits while offering emotional support to the mom. The doula accompanies the mother throughout labor and delivery at the hospital and, then, the doula assists with the pumping and the transport of breastmilk to the baby, through the program called Expressions of Care.

Of course, this care is delivered in a trauma-informed and culturally-specific manner through culturally-specific.

I want to note that we have worked with the Department of Corrections (DOC) and stakeholders on this bill to address concerns from women with lived experience. DOC has been immensely responsive to these concerns and through our work together and supports this bill. The DOC staff enthusiastically testified in the House committee and they have submitted written testimony.

To address these concerns and to prevent future unnecessary harm, HB 2535:

- Specifies when the use of restraints on a pregnant person in a secure or locked hospital facility under the watch of a Correctional Officer is not warranted.
- Requires incidents when restraints are used to be documented, including documentation of how many incidences involving restraints were due to escapes, assaults, or other identified threats to safety and security.
- Requires DOC to develop humane and medically recommended protocols to process postpartum people back into the facility while honoring safety and security concerns.

The protections in this bill provide moms and their babies more opportunities to bond, while also affording them dignity in that process. We must remember that the majority of these women, some of which you will hear from today, are reunited with their children and families upon discharge.

We all share the goal that every single baby has the best start in life, even under the most challenging circumstances.

Adding a doula to the team to provide professional prenatal care, delivery support, and

postpartum services for women in custody will help us provide Better Beginnings for the babies born to incarcerated women.

AND: this will be at no cost to the state and have no fiscal, as DOC has staff to coordinate this care and the doulas will be supplied by outside agencies at no cost.

Please join me in supporting HB 2535.