
**Testimony of Amanda Taisey on behalf of the Maine Coalition to End Domestic Violence
In Support of LD 1523, "An Act to Improve Perinatal Care Through Expanded Access to
Doula Services"**

**Before the Health and Human Services Committee
April 17, 2025**

Senator Ingwersen, Representative Meyer, and honorable members of the Health and Human Services Committee, my name is Amanda Taisey, and I am testifying on behalf of the Maine Coalition to End Domestic Violence (MCEDV)¹ in support of LD 1523, "An Act to Improve Perinatal Care Through Expanded Access to Doula Services".

MCEDV recognizes the important role that healthcare providers generally, and doula services more specifically, play for survivors of domestic abuse and violence. Pregnancy itself can be dangerous for survivors; pregnant patients are more likely to die from homicide than any other pregnancy related conditions², and the homicide rate among pregnant and postpartum women in 2020 increased 33% from 2019³. Given this reality, increased access to doula services must be understood as a key component of safety planning and partnership for survivors of domestic abuse and violence.

Doulas have particularly unique opportunities to intervene with people experiencing domestic abuse and, like healthcare providers in a healthcare setting, are among the few people that individuals who are severely isolated and controlled are able to talk to freely. For years, Maine's Domestic Abuse Homicide Review Panel has called on Maine providers to implement effective universal screening for domestic abuse in all health care settings. Universal Education has been nationally recognized as the best practice intervention in health care providers for decades.⁴ As the Panel notes in their 2021 Report⁵ (emphasis mine):

*Conversations between health care providers and patients that include **information and dialog** about abuse within family and intimate relationships have the best potential for reaching victims and offenders with the message that domestic violence is a public*

¹ MCEDV serves and supports a membership that includes the eight regional domestic violence resource centers as well as two culturally specific services providers. Our member programs provided services to more than 12,000 victims of domestic violence in Maine last year.

² "The Biggest Danger During Pregnancy: Homicide." The Crime Report, March 15, 2022. Accessed at <https://tinyurl.com/2w43eeyh>

³ Wallace, Maeve. Trends in Pregnancy-Associated Homicide, United States, 2020. Am J Public Health. 2022 Sep;112(9):1333-1336. doi: 10.2105/AJPH.2022.306937. Epub 2022 Jul 7.

⁴ [CUES Intervention – Health Partners on IPV + Exploitation](#)

⁵ 13th Report of the Maine Domestic Abuse Homicide Review Panel, April 2021: <https://www.maine.gov/ag/docs/DAHRP-Report-for-Posting-ACCESSIBLE.pdf>

health concern. For these conversations to be effective, health care providers and other health care staff require special knowledge and skills, including how to pose sensitive questions, engage in culturally sensitive communication, and in provision of brief interventions and referrals to community-based advocacy organizations.

MCEDV sees doula care as a necessary part of the perinatal landscape in Maine, and over the past year, MCEDV collaborated with Maine Doula Coalition and Community Doulas to develop a four-hour training curriculum specifically tailored to the unique role that doulas play in our State. In March 2025, “Healthcare Response to Domestic Violence: A Foundational Training for Birth Workers in Maine” was offered virtually to doulas across the State to better equip them to recognize and respond to domestic abuse and violence and implement the universal education approach in their work. When asked what they liked best about this training, one doula responded with, “The reminder of how we interact with patients can have either a negative or positive impact on them. The more people talk about it [DV], the more we can help support patients in getting the help and support that they need.”

When services are harder to access under conditions of domestic violence (such as isolation, controlling family finances, the promise that the abusive partner will change and that things will get better), domestic abuse and violence will thrive. When we expand access to doula services, we expand survivors’ options for safety and connection which are key to interrupting domestic abuse and violence.

Thank you for the opportunity to share my perspective with the Committee. I urge you to vote “Ought to Pass” on LD 1523. Thank you!

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