

Dr. Anne Marie van Hengel

44 Tide Mill Rd.

Portland, Maine 04102

April 17, 2025

Senator Ingwersen, Representative Myers, and Members of the Committee on Health and Human Services

c/o Legislative Information Office

100 State House Station

Augusta, ME 04333

***Re: Testimony in Support of LD 1523 – “An Act to Improve Perinatal Care Through Expanded Access to Doula Services”***

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Senator Ingwersen, Representative Myers, and Members of the Committee,

My name is Dr. Anne Marie van Hengel, I am a Fellow of the American College of Obstetrics and Gynecology. I bring over three decades of experience supporting individuals and families through pregnancy, labor and birth. I now focus on advocating for improved perinatal outcomes across the State of Maine.

I am writing in strong support of LD 1523: An Act to Improve Perinatal Care Through Expanded Access to Doula Services.

Today, Maine faces serious and intersecting challenges in maternal healthcare:

- The closure of multiple birthing units across the state
- A shortage of OB providers and maternity care professionals, especially in rural areas
- Persistent racial and geographic disparities in maternal outcomes

These challenges in Maine reflect a broader national crisis. The United States continues to rank among the worst high-income countries in perinatal morbidity and mortality. Maternal mortality rates are unacceptably high—and rising—particularly for Black and Indigenous birthing people. We are failing too many families during one of the most vulnerable times in

their lives. Addressing this crisis requires bold, community-rooted solutions—and doulas are a critical part of that response.

Doulas provide continuous, non-clinical support throughout pregnancy, labor, and postpartum. Their presence has been proven to reduce cesarean rates, decrease reliance on pain medication, shorten labor, and improve birth satisfaction. Doulas also enhance communication between patients and providers and offer vital support during the vulnerable postpartum period.

Maternal mental health is an urgent and growing concern. Up to one-third of birthing people report their birth as traumatic, and one in seven experience postpartum depression. The Maine Maternal, Infant, and Fetal Mortality Review panel has identified mental health conditions—including perinatal mood disorders—as one of the leading causes of maternal mortality in the state.

Because doulas often care for their clients in the home, they are uniquely positioned to recognize early signs of serious postpartum issues—including mood disorders and physical complications such as postpartum hypertension. Their ability to notice changes, offer guidance, and connect clients to medical care when needed makes them a vital part of a comprehensive maternal health strategy.

Importantly, the federal Transforming Maternal Health (TMAH) grant, which Maine recently received, aims to improve maternal health outcomes by expanding access to evidence-based, community-rooted care models. Increasing access to doulas—especially for marginalized and rural populations—is a key component of that mission. LD 1523 directly supports the goals of the TMAH grant, and MaineCare reimbursement is essential to the sustainability and success of this work. Without structural support like insurance coverage, we risk falling short of this opportunity to truly transform perinatal care in our state.

This effort is also aligned with national priorities. The 2022 White House’s Blueprint for Addressing the Maternal Health Crisis identifies expanding access to community-based supports like doulas as a core strategy to reduce disparities and improve outcomes. The Blueprint emphasizes the need for culturally congruent care, investment in a more representative perinatal workforce, and ensuring that all birthing people have access to respectful, quality support. LD 1523 gives Maine the chance to lead the way by putting those priorities into action.

Critically, LD 1523 would not only increase access to doulas for MaineCare recipients—it would also help grow and sustain the doula workforce statewide. Currently, many doulas—

particularly those serving low-income, rural, or BIPOC communities—are underpaid or providing unpaid services. Reimbursement through MaineCare would help build a diverse, community-based workforce that reflects and understands the populations it serves.

Over time, I've seen physician attitudes toward doulas evolve. Where there was once skepticism, there is now growing recognition of their value—not only to patients, but to the care team as a whole. Doulas can serve as a bridge between birthing people and clinicians, helping to foster trust, clarify goals, and reduce misunderstandings in emotionally charged moments. When doulas are welcomed as part of the care team, everyone benefits—especially the patient.

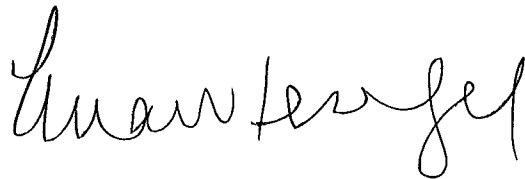
I believe deeply that every birthing person deserves support, safety, and dignity throughout their journey. Doula care is evidence-based, cost-effective, and profoundly human. It strengthens families, supports medical providers, and improves outcomes.

I respectfully urge you to support LD 1523 and take this important step toward improving perinatal care in Maine.

Thank you for your time and for your commitment to maternal and infant health.

Sincerely,

Dr. Anne Marie van Hengel

A handwritten signature in black ink, reading "Anne Marie van Hengel". The signature is written in a cursive, flowing style with a large initial "A".