

Providing services during pregnancy, birth, and early parenting to nurture health foundations that last a lifetime.  
We create the possibility for every parent and child to meet the challenges of life with courage and resiliency.

## Maternal Health

**SB 5702 - [Donor Breast Milk Coverage](#):** Requires health insurance plans to cover donor breast milk for babies whose birth parent is physically or medically unable to produce breast milk or participate in chestfeeding.

**SB 5765 - [Expand Types of Birth Control Prescribed by Licensed Midwives](#):** Authorizes LM's to prescribe contraceptives for their post-partum clients, as well as treat common conditions of healthy pregnancy.

**Invest in Perinatal Support Washington's Parent Support Warm Line:** Expands access for underserved expectant and new parents to mental health services through peer-to-peer engagement and increased public awareness. (request for inclusion in state budget, no bill needed)

## Infant Mental Health, Early Childhood & Early Learning

### Temporary Assistance for Needy Families (TANF):

1. **Remove Time Limit:** Increases benefit access by removing the 60-month time limit for child-only cases where the household has an ineligible parent. (request for state budget, no bill needed, \$424,000)
2. **[HB 1755 Extend Time Limits](#)** during periods of high unemployment.
3. **[HB 1947/SB 5838](#)** Provides a diaper subsidy for those on TANF.

### Early Childhood Assistance & Education Program (ECEAP):

1. **Maintain an enhanced rate for providers:** Fund a per-slot, quality support rate for Early Childhood Education and Assistance program providers (including perinatal health workers in definition). This will help continue child and family assessments, research-based curriculum, and professional development — all items that a grant previously funded. (request for state budget, no bill needed, \$1.3 million)
2. **Minimize learning loss among our youngest learners:** Fund nearly nine weeks of ECEAP during summer 2022. Our youngest learners (3-4 years) lost learning opportunities because of the COVID-19 pandemic and correcting this will take time to overcome. Summer ECEAP will help address this learning loss, reduce isolation and maintain connections to children and families (request for state budget, no bill needed, \$5.9 million)

**Home Visiting:** Ensure the budget includes adequate spending authority for the Home Visiting Services Account, including non-MIECHV programs, as well as a provision directing an equity analysis for the home visiting system. (request for state budget, no bill needed, \$1.5 million)

## Equitable Access to Care

**HB 1881 - [Create Credential for Birth Doulas](#):** Continue to lead advocacy efforts to create public reimbursement for community-based doula work. The next step is to create a Department of Health professional credential to allow doulas to best serve families with disproportionately poor birth outcomes.

**SB 5894 - [Community Health Workers for Relational Health](#):** Fund non-licensed team members – health navigators or community health workers – to help families and providers address social determinants of health and ensure children and youth receive the most timely and appropriate care.

## Justice

**[HB 1725](#)** - Concerning the creation of an endangered missing person advisory designation for missing indigenous persons.

**[HB 1571](#)** - Concerning protections and services for indigenous persons who are missing, murdered or survivors of human trafficking.

# About Open Arms

Open Arms Perinatal Services provides community-based support during pregnancy, birth, and early parenting. We are the leading non-profit providing doula services specifically for families facing poverty in Washington State, serving nearly 300 families every year.

*What is a doula? A doula is a trained health worker who provides physical, emotional, and informational support to birthing people before, during, and after childbirth.*

## Our Approach is Evidence-Informed, Culturally Appropriate, and Community-Centered

- **Birth Doula Services** provide three home visits in pregnancy, support during labor, delivery, the immediate postpartum period, and make at least three postpartum home visits. There is case management by a social worker who provides clients with referrals to other services as needed.
- **Community-based Outreach Doula Services** provides services to birthing people in their own community who need more intensive support from the second trimester of pregnancy and up to two years after delivery. We pair Somali, Latinx, African American, and American Indian/Alaska Native (AIAN) clients with doulas who are culturally and/or linguistically matched whenever possible. Doulas provide support with case management, home visits, labor/breastfeeding support, and parent education. We are nationally accredited by HealthConnect One and use the evidence-based Promoting First Relationships curriculum.
- **Family Support Services** was created to meet the needs of families and connect them with resources for mental health support, housing, transportation, domestic violence, and legal aid.
- **Lactation Support Peer Counselors** provide education during pregnancy and once the baby is born, help initiate chestfeeding within the first 24 hours of life. They conduct check-ins every day for the first week, frequently for the first six weeks, and lactation support continues throughout the first year.

## Maternal & Infant Health Disparities in King County & Washington State

- AIAN, Asian, Black/African American, and Latinx mothers and birthing people are 2.4-3.5 times more likely to report lacking social support than white, non-Hispanic mothers.
- AIAN and Black/African American infants have at least twice the mortality rate of white non-Hispanic infants.
- AIAN infants are 81% more likely to be preterm than white non-Hispanic infants.
- Black/African American and Native Hawaiian Pacific Islander infants are approximately 50% more likely to be preterm than white non-Hispanic infants.
- 8% of AIAN infants and 9.4% of Black/African American infants are low birth weight (LBW) compared to 5.7% of white non-Hispanics.
- Cesarean delivery rates are highest for Black birth givers at 35% whereas the King County average is 29%.

## Our Outcomes

- 95% of our families give birth at full term and healthy birth weight.
- Despite the fact that Open Arms' clients may have other health conditions and risk factors including poverty and trauma, 85% avoid unplanned cesareans.
- 82% are still chestfeeding at six months, compared to King county's rate of 39%.
- Our client retention rate after one year is 72%, compared to 47% for other Washington State programs.