



Licensed or Registered?

“Registered” reflects midwifery’s contested past and should be updated to “licensed”

Statutory language in Colorado refers to Direct-Entry Midwives as registrants. This creates confusion for everyone, from consumers, to the midwives themselves, to other providers, legislators and the regulatory agency.

- DORA refers to direct-entry midwives interchangeably as licensed and registered.
- DORA’s Direct-Entry Midwifery Homepage refers to program activities that include “licensing midwives,” where midwives can access “Licensing Services,” and consumers can “Search for a Licensee.”¹
- This confusion leads to a range of barriers. For example, some midwives couldn’t get PPE to protect themselves and their clients because they weren’t listed as “licensed.”²
- This confusion can be cleared up, by simply eliminating the words “register” and “registration” in the statute and replacing it with “license.”
- **Nothing else would need to change.** Since the program already operates as a licensing program³, nothing else would need to change and confusion would be eliminated.

The use of “registrant” is an anachronism that no longer reflects the intention of the program or the contemporary orientation toward occupational licensing.⁴

- 30 years ago, when this program began, the legislative intent was **not** to integrate midwives, but to marginalize them.⁵
- Starting in 1983 several bills were proposed to regulate direct-entry midwives and licensure was originally considered but rejected.
 - The credential, Certified Professional Midwife, was still being developed at that time; education was a big concern.⁶
 - With national recognition of that credential the issue should be conclusively resolved.⁷
- The same year the CPM exam was required for Colorado direct-entry midwifery registrants (2000), the first recommendation in DORA’s Sunset Review was to “...Change Legislative References for Registered to Licensed.”⁸
- Of the 36 states that regulate CPMs, the majority are through licensure.⁹ Colorado is the only one that calls these midwives registrants.¹⁰

Times have changed, the consensus now is that integration of midwifery is better than elimination or exclusion and integration will improve equity.¹¹

- Integration of midwifery is associated with higher rates of spontaneous vaginal delivery, vaginal birth after cesarean, and breastfeeding, and lower rates of cesarean, premature birth, low birth weight infants, and neonatal death.¹² In the Midwifery Integration State Scoring (MISS) system, “licensure” scored highest as a form of midwifery regulation.¹³
- In states with the highest rates neonatal mortality and the lowest MISS scores (where there are also the highest rates of Black births), midwifery integration accounts for 12% of the difference in neonatal deaths.¹⁴
- Women of color who give birth with midwives outside a hospital, experience less mistreatment.¹⁵
- Colorado ranks 21st in midwifery integration with a meager score of 41 out of 100.¹⁶



¹ Available at: <https://dpo.colorado.gov/Midwives>

² This even prevented the Colorado Department of Public Health and Environment from resolving the issue, which had to be resolved through philanthropy (private donors provided PPE for Colorado midwives).

³ **"The Colorado direct-entry midwife registration program is in fact a licensing program."** Colorado Department of Regulatory Agencies, "Colorado Midwives Registration Program, 2000 Sunset Review" October 15, 2000, page 27.

⁴ There has been an increase in licensing since the middle of the last century, and healthcare occupations "feature licensing at particularly high rates." Ryan Nunn, "Occupational licensing and American workers" Brookings Institute. June 21, 2016. Available at: <https://www.brookings.edu/research/occupational-licensing-and-the-american-worker/>

⁵ The law as it was originally enacted went so far as to include a legislative declaration that stated "...the authority granted in this article for the provision of unlicensed midwifery services does not constitute an endorsement of such practices..." C.R.S 12-37-109 (2010). This language was eliminated in 2011. Of course, even before that language was adopted in 1993, the intention was to eliminate midwifery, which in fact, the Colorado legislature did via Senate Bill 640 in 1941, and House Bill 1032 in 1976. See also, Judith Pence Rooks, Midwifery and Childbirth in America, (Temple University Press 1997).

⁶ Extensive historical analysis of bill drafts, on file with Elephant Circle.

⁷ "The Certified Professional Midwife credential, issued by NARM, is accredited by the National Commission for Certifying Agencies (NCCA), the accrediting body of the Institute for Credentialing Excellence... The NCCA accredits many healthcare credentials, including the Certified Nurse-Midwife... The CPM is the only NCCA-accredited midwifery credential that includes a requirement for out-of-hospital experience." <http://narm.org/certification/> Since 2000, midwives registering with DORA in Colorado are required to be Certified Professional Midwives (CPMs).

⁸ See note 2 at page 25.

⁹ CPMs Legal Status By State, The Big Push for Midwives, available at: https://www.pushformidwives.org/cpms_legal_status_by_state

¹⁰ Analysis of laws conducted by Elephant Circle and the Big Push for Midwives.

¹¹ S. Vedam et al., Mapping integration of midwives across the United States: Impact on access, equity, and outcomes. PLoS ONE 13(2): e0192523. (2018) <https://doi.org/10.1371/journal.pone.0192523>

¹² See note 10.

¹³ See note 10.

¹⁴ See note 10.

¹⁵ Birth Place Lab, Impact of Place of Birth on Mistreatment, available at: <https://www.birthplacelab.org/wp-content/uploads/2019/07/Impact-of-Place-of-Birth-on-Mistreatment.pdf>

¹⁶ Birth Place Lab, Midwifery Integration State Scoring (MISS) System Report Card: Colorado, available at: <https://www.birthplacelab.org/wp-content/uploads/2018/02/Colorado.pdf>