

From: [Casey Neary](#)
To: [SLegislation](#)
Subject: Senate Bill No. 2380
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Dear Chair and Members of the House Health Committee:

My name is Casey Lindie, a mom of 2 beautiful children who has lived in Newport with my husband since the fall of 2018. Both my daughter (born July 2023) and son (born August 2025) were delivered at Newport Hospital. When I first heard about the potential closure of the Newport Hospital's birthing center, my immediate reaction was disbelief, followed by anger. At the time, I was pregnant with my son. When I reflect on my experiences at the birthing center, I cannot imagine what it would be like if it were to close. The Birthing Center is a community hub, providing so much more than a safe and compassionate birthing experience (which I know from friends is, sadly, not the norm).

Before my daughter was born, I attended the birthing and lactation classes that were offered at the Noreen Stonor Drexel Birthing Center. During the birthing class, the nurses who instructed the class gave us a tour of the floor, including the delivery rooms. I was blown away by the large, comfortable rooms and the fact that labor, delivery, and recovery all take place in the same room. Leading up to my birth, I felt I was in good hands after getting to know a few of the nurses I met at the birthing and breastfeeding classes. Additionally, the close proximity of the hospital to my house meant I could walk if I had to, which was a comfort to me, especially since my husband owns a business based in Warwick.

Everyone we encountered treated us like family. I vividly remember the incredible support of the nurses who were present when I delivered my daughter, the compassionate care they provided, and the helpful instruction to start my breastfeeding journey. After my recovery, I attended the weekly breastfeeding support group for many months after my daughter was born. I can still remember the first session I attended, just a few days after I left the hospital. I walked in with a list full of questions and left feeling more confident in myself. Words cannot express how thankful I am for those weekly sessions and the nurses who led them.

This past year, my son was born in August (2025). Leading up to my 34 week appointment, I felt less fetal movement. Within 15 minutes of telling my provider that I had felt less fetal movement, that morning I was sent upstairs for monitoring and was able to have an ultrasound done by the on-call doctor. Thankfully everything was okay with my son, and they gave me IV fluids for rehydration.

I went into labor with my son at 35 weeks and had an unexpected birthing experience. I had a precipitous birth and went from 4 cm dilated to birthing my son in 20 minutes. I often wonder what my experience would have looked like had I needed to travel off-island for care. Would he have been born in the car on the way to Providence? Would there have been a bed available in time for me to be admitted, or would he have been born in the lobby? I am very thankful the birthing center was open for the birth of both my children. I am truly terrified by the safety ramifications it could have on so many future mothers and babies if the Noreen Stonor Drexel Birthing Center were to close.

However, this story doesn't stop there. Out of an abundance of caution, my son was transferred to the NICU at Women & Infants in Providence within 24 hours of his birth, and my vitals were stable enough that I was able to be discharged to be with him. While with my son in the NICU, I started experiencing significant abdominal pain. After speaking with my provider at Newport Women's Health, I was advised to be seen at Women & Infants to verify everything was okay. In pain, worried about my son, and freshly postpartum, I waited an excruciating two-and-a-half hours. It was not until my husband asked if I could pump in a private room that I was brought to triage. While I nervously waited to be seen by the doctor, I saw mother after mother come in and join the extremely long wait. One mother had been in a car accident and waited 2 hours until there was availability for her to be seen. I also overheard a story about a mother a few days prior who delivered in the waiting room due to the extreme delay to get a room. Once I was seen by a doctor, I had my blood pressure taken (due to a history of gestational hypertension) and sent on my way.

Later that night, the abdominal pain returned with a higher degree of pain. Because the pain was so significant, I returned to the ER at Women & Infants where I was told the wait would, again, most likely be over 2 hours. My husband called down to the Birthing Center in Newport to see if they could assist. Maeve, one of the nurses present when both my daughter and son were born, answered the phone. She assured us we could come down and be seen right away. We got in our car and drove down, with our newborn son still in the NICU. When we arrived in the ER, we were greeted by one of the labor and delivery nurses, who immediately escorted us up to the Birthing Center. Within 15 minutes of walking in the door, I was seen by the on-call doctor, who was able to quickly and correctly diagnose my complication and find an appropriate resolution.

My story is but one of many. Yet it highlights not only the necessity of keeping an on-island birthing center – the need for which was never more clearly illustrated than when all the bridges connecting the island to the mainland were shut down during the blizzard this February – but the importance of accessible, local care for when complications arise in postpartum. One should not have to travel 45 minutes between Newport and Providence to receive maternity care during pregnancy, labor and

delivery, or postpartum.

For an expecting mother, the amount of anxiety and the constant stream of thoughts about the health and safety of both mother and baby can already feel overwhelming. For those in our community who do not have reliable access to transportation, off-island travel could not only be prohibitively costly, but downright dangerous. I implore this body to do the right thing and protect the families of Rhode Island through the Birthing Center Protection Act and the Rhode Island Maternal Health Improvement and Equity Act.

In conclusion, I write in strong support of Senate Bill No. 2380. Access to local maternity care is a fundamental component of public health infrastructure. When birthing services are reduced or eliminated without meaningful transparency and review, families and communities bear the consequences. I respectfully urge passage. Thank you for your time.

Sincerely,
Casey Lindie