# NPQIC BRIEF: FINDINGS FROM GROUP-BASED INTERVIEWS WITH BLACK DOULAS

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## BACKGROUND

In Nebraska and the nation, racially minoritized communities experience a disproportionate burden of maternal morbidity and mortality. Research shows that racially concordant doula support can positively impact birth outcomes for patients who identify as non-white. We sought to explore the experiences of Black doulas practicing in the Omaha and Lincoln metropolitan areas to identify opportunities for quality improvements in the clinical setting.



The data revealed 3 main themes regarding the experiences of Black doulas in Nebraska: 1) barriers inhibiting Black doulas in the healthcare setting, 2) facilitators of doula-friendly environments, and 3) coping strategies.

### 1) BARRIERS INHIBITING BLACK DOULAS IN THE CLINICAL ENVIRONMENT

### LACK OF INTEGRATION

- Resistance from healthcare team members
- Barriers to room entry, including operating room
- Insufficient knowledge of doula role among clinicians

#### **ENCOUNTERING PERCEIVED BIAS**

- Stereotyping and personal prejudice
- Professional role questioned or undermined, often in ways linked to racial identity
- Mistaken for family members

## 2) FACILITATORS OF A DOULA-FRIENDLY ENVIRONMENT

#### **RECOGNITION & RESPECT**

Doulas appreciated being seen and recognized as valued members of the healthcare team. Simple acts of acknowledgment, such as eye contact and courteous interactions, significantly impacted their sense of inclusion and worth.

### SHARED PATIENT-CENTERED APPROACH

Doulas emphasized the importance of working with providers who actively listened to their patients without judgement and centered their needs and desires.

### ADVOCACY

When faced with resistance, doulas valued having team members advocate for their presence. This support enhanced the ability of doulas to perform their role and reinforced their sense of belonging.



# **3) NEED FOR COPING STRATEGIES**

Doula work is emotionally and physically demanding by nature. Therefore, doulas often utilize a number of coping strategies to care for their well-being.

- Often, doulas are on call at all hours and spend extended periods providing intense physical and emotional support to laboring patients.
- For those who have experienced their own birth trauma, coping strategies can be even more essential.
- Black doulas sometimes endure additional burden in the form of discrimination or bias.

Doulas highlighted the need for maintaining boundaries and creating support systems to process the complex emotions that arise. Mentorship programs and talk therapy enhance emotional health, while hydration, massage, rest, walking, and maintaining a nutrient-dense diet support physical health.

## **REFLECTIONS:**

## NAMING RACISM AND BIAS

- Racism and oppression faced by minoritized groups on a daily basis have a profound impact on health outcomes.
- Culturally congruent doula support is one way to combat this and improve birth outcomes for Black mothers and babies.
- Clinical teams should work to explore personal biases and systemic racism, and employ mandatory, ongoing trainings to create a safe and welcoming space for all patients.
- Health systems should establish processes to hold team members accountable to infractions.

## **REFRAMING CHILDBIRTH**

The medicalization of labor and delivery can make the birth environment feel impersonal and unfriendly. Hostility among clinical teams can lead to discomfort and have negative impacts on the patient's birth experience and outcomes. Doulas can help bridge the clinical aspect of birth with the emotional and spiritual components. Clinical care teams should prioritize the patient and honor her birth experience. Any power dynamics and inequities that involve doula interaction should be curbed.

#### The results and recommendations from the focus groups should be utilized by hospitals to identify opportunities for quality improvement.

All moms deserve respectful and equitable maternity care that:

- Maintains dignity, privacy, and confidentiality
- Ensures freedom from harm and mistreatment
- Allows for shared decision-making and continuous support during labor and childbirth



