

# Barriers and Opportunities: Doula Care in the Age of the Pandemic

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Doulas are trained, non-medical birth workers that play a critical role in supporting pregnant people and new moms. This small but mighty caregiver workforce is strongly committed to providing continuous assistance to laboring people. During the COVID-19 pandemic, doulas faced increased challenges when providing both in-person and virtual care, in addition to barriers that existed long before the pandemic.



**Doulas play a critical and essential role in prenatal, birth, and postpartum care, providing support to pregnant and laboring people in the following ways:**

- **Emotional:** Continuous encouragement and praise, presence during the entire labor and delivery process, supporting the pregnant person through reassurance if/when fear or frustration arise.
- **Physical:** Provide pain relief support through breathing exercises, massage, relaxation techniques, and create a calm birthing environment.
- **Educational:** Provide the pregnant person with evidence-based information on pregnancy, labor and delivery, explain medical procedures before or during labor, provide information about different birthing positions and breathing techniques that can be used during labor.
- **Advocacy:** Act as an advocate for the laboring person and their birth plan, support birthing person's decisions and encourage asking questions.

To better understand these challenges, Health Leads conducted a series of **focus groups with doulas** working in New York City throughout the COVID-19 pandemic. This resource presents the key findings from these focus groups and includes recommendations for how hospitals and institutions can better integrate and support doulas as critical members of a care team. **These insights illustrate the importance of including caregivers, like doulas, in developing person-centered policies for birthing people.**

## Increased access to doula services offers an opportunity to improve birthing outcomes - especially for pregnant people in the BIPOC community

Studies have shown doulas improve birth outcomes by decreasing the number of cesarean sections performed and pain medications prescribed and/or administered. Doula support has also proven to shorten labor and increase satisfaction of the laboring person with their birth process. Despite the obvious benefits, only 6% of births in the United States are attended by a doula. This may be due to the lack of awareness about doulas, high costs of their services, and lack of insurance reimbursement for most patients in New York.

Given the higher rates of maternal morbidity and mortality, low birthweight, and preterm birth that BIPOC women experience, doulas can play a critical role in improving these racial inequities. **Black women in Brownsville are eight times more likely to die during childbirth than white women on the Upper East Side and Black women on Medicaid lack access to doula support. Pregnant people in the BIPOC community could greatly benefit from doula support and yet, have the least access.**



## Uplifting the voices and experiences of doulas to identify opportunities to support caregivers and health equity

Health Leads is committed to programs and policies that support caregiving as a sustainable role, both for paid and unpaid caregivers. We envision a comprehensive and holistic approach to care that increases access to resources that are essential for healthy pregnancies and good birth outcomes within predominantly Black communities. Doulas have deep insight into the maternal health inequities facing their clients and should be given the voice to inform guidance on care, policy changes, and how to address immediate resource needs. While numerous studies provide evidence supporting the value of doulas, like other underrecognized caregivers, they face many institutional challenges to providing care for their clients.

## Approach & Process

New York City offers a number of programs to provide doula services to pregnant people in medically underserved communities at low or no cost. In 2010, the New York City Department of Health and Mental Hygiene piloted the By My Side Birth Support Program (BMS) through Healthy Start Brooklyn. Through these services, which also include birthing classes, breastfeeding support, and resource referrals, BMS's clients had lower cesarean rates, preterm births and low birth weight in comparison to outcomes for birthing people in the same neighborhoods. As a city, New York is working to reduce barriers for pregnant people, such as through city council funding of Healthy Women, Healthy Futures (HWHF), a program aimed at increasing doula access for medically underserved communities. **Yet, these programs are small in scale and cannot address city-wide inequities for pregnant people seeking doula services, especially for clients who are insured through Medicaid and cannot afford the out of pocket cost of a doula.**

## **Timeline of Health Leads' Work and COVID Related Policy Changes Regarding Birthing People**

**March and April 2020:** Governor Andrew Cuomo issues [Executive Order 202.25](#) regarding support people and doulas

**May 2020:** Health Leads, community based doula agencies, doulas, and partners at New York City's Department of Health and Mental Hygiene (DOHMH) identify the need to understand impact of Executive Orders on doulas and their patients

**June 2020:** Health Leads co-develops survey with doulas and DOHMH

**July 2020:** Survey is disseminated to NY metro doula community

**August 2020:** Survey closes and results are shared with doulas and DOHMH

**September 2020:** DOHMH shares survey results with hospital partners and colleagues at New York State Department of Health (DOH)

**December 2020:** NY State Health Commissioner releases additional guidance for birthing hospitals based on doula feedback from survey

**January 2021:** Health Leads and DOHMH identify need to gather additional data on doula support as a follow up to the survey, Health Leads leads focus group co-design with doulas

**February 2021:** Health Leads recruits and train doula facilitators and focus group participants

**February - March 2021:** Health Leads conducts focus groups and identifies themes

**April 2021:** Focus group themes validated with doulas and shared with partners at DOHMH

As COVID-19 infection rates dropped in New York City over the summer and fall of 2020, Health Leads worked to build upon the findings of its initial survey aimed at affecting policy changes at the city and state level. In early 2021, the Health Leads team spoke to doulas to better understand how COVID-19 impacted their experiences providing care and ways to improve their integration into the care team. This work directly links to Health Leads' commitment to drive systems change that focus on health equity through a community-led approach.

Health Leads conducted a series of focus groups with 16 doulas working across the five boroughs. Participating doulas ranged in racial and ethnic background, as well as practice locations and populations they serve. We focused on their experience of providing care during the pandemic, which has exacerbated the existing obstacles doulas face while supporting their clients.

### **The focus groups were centered on:**

- Incorporating principles of human centered design and community based participatory research
- Training six doulas to facilitate virtual focus groups over zoom
- Using focus group questions that were developed and tested with doulas
- Sharing and validating focus group themes with four of the doula facilitators
- Compensating all doula facilitators and participants for their time and participation



## Findings & Recommendations

### Implementing Consistent Policies in Alignment with State

**Law:** While the Governor of New York issued an executive order clarifying that doulas can be present at births during the COVID-19 pandemic and the state released additional guidance as law, hospital policies varied by institution. The focus group participants found that the lack of standardized policy often impacts their ability to do their job. From the perspectives of our participants, hospitals need to implement consistent policies that align with state guidance and law.

### Creating Policies that Center the Wellbeing of Caregivers:

One challenging COVID-19 related policy implemented in various hospitals was doulas being unable to leave the labor and delivery room once they enter, preventing them from taking a break, getting food or practicing self-care for hours or even days. Doctors and hospital staff are free to walk in and out of patients' rooms and work in shifts. Doulas should have the same freedom of movement in the hospital as other staff members.

**Reducing Inconsistent Screening Policies:** During the pandemic, hospitals are more adamant about doulas providing documentation to prove they are trained birth workers. To enter the hospital, doulas shared a common experience of hospital staff or security guards questioning their credentials. To attend a birth, doulas must be trained but are not required to be certified. Although it is reasonable for hospitals to know who is entering critical places, they should implement a consistent approach to grant entry to caregivers to support their clients. Most importantly, policies should explicitly address racial biases. During the focus groups, white doulas shared that they had not faced this barrier before the pandemic and some still do not receive significant push back from hospital staff. One doula reflected on her experience and said, "I'm sure Black doulas face that constantly with or without a pandemic, just being disrespected and like you don't belong here."

**Working as a Team to Provide Patient Centered Care:** Focus group participants were concerned that medical providers and nurses are uninformed about doulas and the scope of their work. This has led to doulas feeling unwelcome or dismissed as an essential part of the childbirth process, causing a disconnect between the doula, client and medical staff. Doulas emphasized wanting to have a "team approach" where the entire care team works together to support the laboring person. Respect for the doula, patient, and medical team, and open communication between medical staff and doulas are crucial to a positive birth experience.



In the middle of the night, Jazzmin Brown drove an hour to bring her laboring client and their partner to the hospital. As her client was checking in, the nurse asked to see Jazzmin's documentation and after providing her proof of doula training she was still asked for additional credentials. The birthing room was ready but her client refused to be admitted without Jazzmin, who was waiting to get approval from a supervisor. Faced with the scenario that she would be unable to support her client, Jazzmin spoke up and told the nurse that as a Black doula, supporting a Black client, "people who look like me and her are dying at a record rate." Jazzmin used this strategy because she feels that "no one wants to talk about race." Because they advocated for themselves, Jazzmin was allowed to accompany her client and provide continuous support throughout the birth. What started out as a combative episode ended in a beautiful birth experience. Doulas are often put in the position where they are forced to negotiate with hospital staff just to be able to do their job, their role is not well understood, and they are not always seen as an integral part of the care team.

## Conclusion

Centering the needs of doulas and identifying the barriers they face when providing support is critical to Health Leads as we advocate for sustainable caregiving policies. Every birthing person should have a doula to support them throughout their labor if they choose and it is crucial to make doula services more accessible in every community - particularly communities of color where maternal health is continually impacted by systemic racial inequities. Doulas deserve to support their clients with dignity and in collaboration with the medical care team. Our focus group findings revealed that many of the systemic and institutional barriers to providing care predated the COVID-19 pandemic and were exacerbated during the time of a health crisis. Members in the medical and public health field have an opportunity to advocate for the doula community - to ensure that every pregnant person can access their services to have a healthy birth and every birth worker is able to provide their vital support without obstacles.

### ABOUT HEALTH LEADS

Health Leads is a national non-profit organization working toward a vision of health, well-being and dignity for every person in every community. For over two decades, we've worked closely with hospitals and clinics to connect people to essentials like food, housing and transportation alongside medical care.

Today, we're partnering with local organizations and communities to address systemic causes of inequity and disease — removing the barriers that keep people from identifying, accessing and choosing the resources everyone needs to be healthy.

For more information visit [www.healthleadsusa.org](http://www.healthleadsusa.org) or email [info@healthleadsusa.org](mailto:info@healthleadsusa.org).

