

Birth Partners

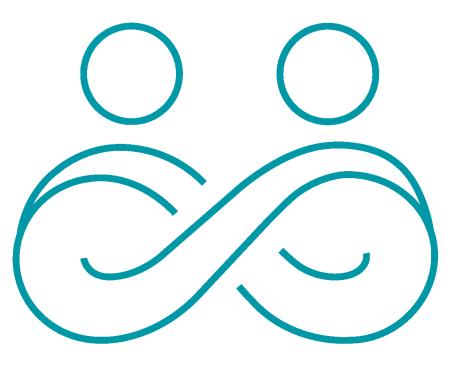
Striving towards equity in obstetric outcomes through culture and languageconcordant doula care

Allison Bryant Mantha MD MPH, Dana Cvrk CNM, Lorie Diaz MD, Mimi Fradinho MD MHCM, Tiwa Lawal MS4, Allyson Preston MD, Caroline Siefken DNP, Nicole Smith MD MPH

October 27, 2022

Problem Statement

Black individuals across MGB have an adjusted odds of unplanned cesarean birth twice that of white individuals, and Black, Latinx and Indigenous individuals leave the hospital exclusively breastfeeding less than half as frequently as their White counterparts. These inequities lead to increased maternal morbidity and mortality, as well as worsened short- and long-term health outcomes in babies.



Year 1 Accomplishments - Overview

MGB Patient interventions:

Birth Partners

- Implemented a 1:1 culturally-concordant doula support program for 40 nulliparous patients at higher than average risk of adverse outcomes across MGH, BWH, NWH, and Salem.
 - Within this pilot, doula support was offered to Black and Indigenous individuals only
- Contracted with 2 Doula agencies to provide cultural and language concordant doula care
- Inclusion criteria initially limited to publicly insured patients. This was broadened to all Black and Indigenous patients in spring 2022.

Empowering the Village

Piloted an online educational program for pregnant patients and their support people.

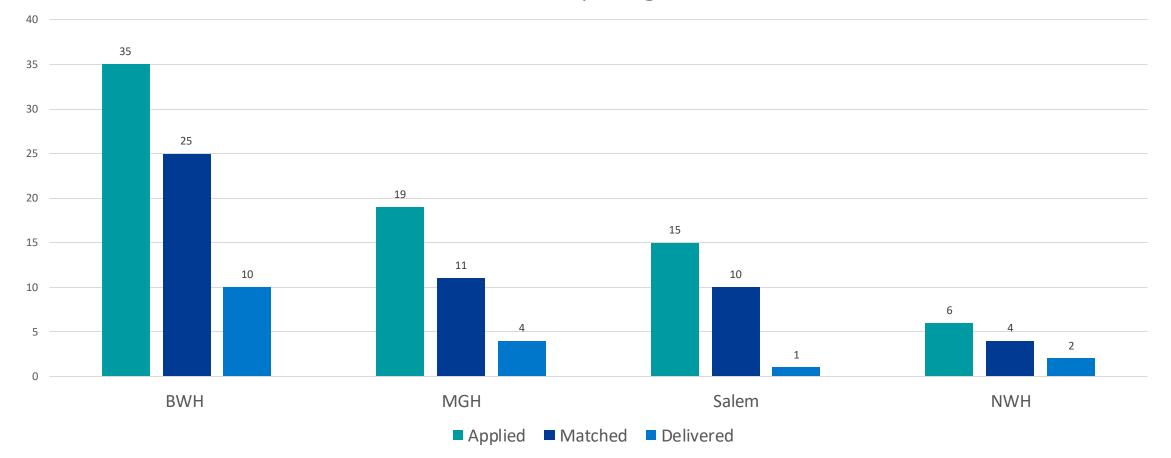
Community intervention:

Birth Partners Scholarship program

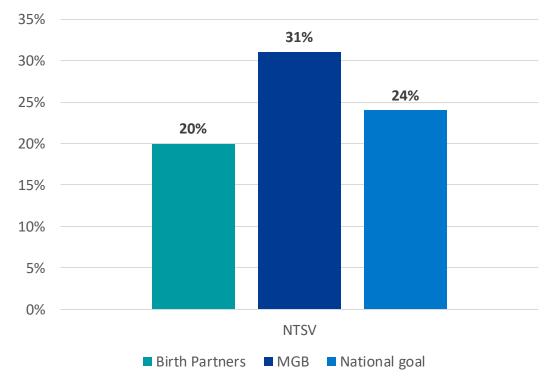
- Launched a scholarship program to support diversification of the doula workforce
- Partnered with a community doula agency to execute scholarship training for 20 diverse doulas UAR Symposium: October 27, 2022

Year 1 Accomplishments – Process Metrics

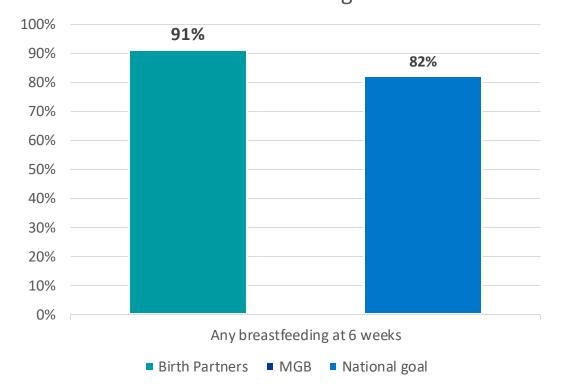
Doula pairings



Year 1 Accomplishments – Clinical Outcome Metrics



Rate of NTSV C section



Breastfeeding

Patient voice – Staff voice

Patient voice:

- "My doula was amazing. I would not have gotten through it as easily without her. I had my baby with no epidural and I felt completely supported."
- "Overall the doula was beneficial and warm and welcoming."

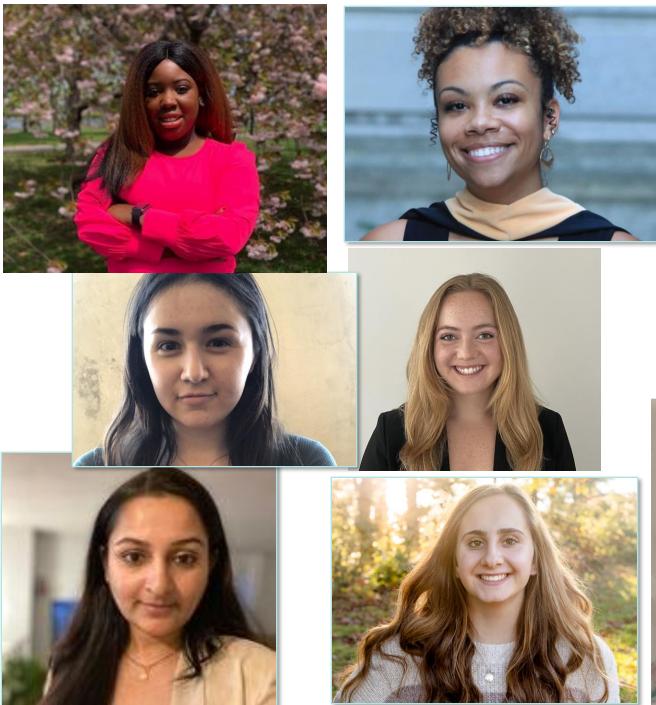
<u>Staff voice:</u>

- "The staff was helpful and supportive to the the doula and patient. In fact the nurse wrote a lovely testimonial about the doulas support and it was sent to the program..."
- "Doulas and patients experience with hospital staff was positive. The staff were amazing and let the doula guide the mom through the birth."

Doula voice:

 When asked about their interactions with medical staff: "Excellent- staff kept me informed and respected my role as [patient's] support person.
We had great communication."





Some of the Doula Scholarship Recipients

Two Brigham and Woman's Employees One medical student Languages Represented: Spanish, Kannada, and Hindi Doulas are already attending births at MGB hospitals!





Year 1 Challenges

- High level of program management and clinical oversight required. Help recruited to increase sustainability.
- Difficulty recruiting for the virtual education program which was ultimately discontinued after the first year.



Looking Ahead: Plans for Year 2

- Decision made to continue the 1:1 doula program. Both doula organizations expressed excitement to continue the program.
- Decision made to continue the doula scholarship program to diversify the local doula workforce in anticipation of expanding the program.
- MassHealth will likely cover doulas starting January 2023. Financial details are currently unclear, but this external funding may allow the program to expand.

Appendix



Team Members

Name	Credentials	Role/Discipline (i.e. hospitalist, nurse manager, analyst, etc.)
Team Members:		
Allison Bryant	MD, MPH	Maternal Fetal Medicine MD
Dana Cvrk	CNM	Midwife
Lorie Diaz	MD	Ob/gyn MD
Khady Diouf	MD	Ob/Gyn MD
Mimi Fradinho	MD, MHCM	Ob/Gyn MD
Caroline Siefken	DNP, RN	Clinical Nurse Educator
Nicole Smith	MD, MPH	Maternal Fetal Medicine MD
Alex Williams	MD	Maternal Fetal Medicine Fellow
Coach:		

