

# Community-Based Doula Training: A Promising Practice for Improving Black Maternal Health

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DOI: <https://doi.org/10.15273/hpj.v4i3.12033>

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## Abstract

**Introduction:** This paper presents findings from an evaluation of the novel community-based Black Postpartum Doula Training pilot project in Regent Park, Toronto. Rooted in the urgent need to address health care disparities and improve maternal outcomes, this initiative seeks to empower Black women to become doulas, health care leaders, and advocates within their own communities.

**Methods:** Analysis of training participant interviews revealed several key themes. This pilot contributes to the growing body of evidence supporting the value of doula care in addressing health disparities, especially among marginalized communities. **Results:** It emphasizes the potential of targeted doula training programs as promising practices for promoting health equity in maternal care. These findings hold implications for future practice, highlighting the role of doulas in combating anti-Black racism and driving structural change in maternal health care.

**Conclusion:** The paper underscores the significance of culturally competent care, advocacy, and self-care in enhancing maternal health outcomes and advancing health equity.

*Keywords:* women's health, health equity, health promotion

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## Introduction

Disparities in maternal morbidity and mortality faced by Black women have long been a matter of concern. This pervasive issue not only affects the experiences of Black women but also reverberates throughout their communities. Addressing anti-Black racism within maternal health care necessitates innovative interventions that empower Black women and allow them to impact the provision of that care for their community. This paper explores the impact of the Black Postpartum Doula Training pilot program in Regent Park, Toronto. This initiative was designed to address the

challenges Black women face when seeking support during the postpartum period. This program enhances the quality of postpartum care by equipping Black women with postpartum doula skills and competencies. It empowers participants to become advocates for change, challenging systemic biases and striving for equitable maternal health care outcomes.

### **Literature Review**

Black women in Canada have long faced profound disparities and inequities in maternal health outcomes. Consider that within Ontario alone:

Black people were at an increased risk of gestational diabetes mellitus, preeclampsia, placental abruption, preterm birth (<37, <34, <32 weeks), spontaneous preterm birth, all caesarean sections, emergency caesarean section, low birth weight (<2500g, <1500g), small-for-gestational-age (<10th percentile, <3<sup>rd</sup> percentile) neonates, 5-minute Apgar score <4 and <7, neonatal intensive care unit admission, and hyperbilirubinemia requiring treatment. (Miao et al., 2022, p. 1)

These disparities create a complex web of challenges that adversely affect Black women, their children, and their communities. The critical health inequality experienced within the Black community in terms of maternal care underscores the pressing need for interventions that can effectively dismantle these systemic barriers.

A novel approach to addressing these disparities involves creating employment opportunities like doula care, as such opportunities have the potential to improve birth experiences, outcomes, and the well-being of marginalized women, who are often at risk of poor birthing experiences and outcomes due to racial disparities (Sayyad et al., 2023). By offering meaningful employment opportunities within the maternal health care sector, particularly to Black women, these initiatives aim to not only mitigate the direct impact of health care disparities but also empower the communities most affected by them. Community-based doula projects have emerged as a pivotal strategy in this context, tailoring doula curriculums to meet the specific needs of specific communities (Campbell-Voytal et al., 2011). These projects prioritize inclusivity, empowering supportive practices in labour and birth and advocating for person-centred care delivered within the community. Such initiatives address the immediate needs of maternal care and foster a more inclusive and representative health care system.

While there is increasing recognition of the invaluable role of Black doulas in addressing systemic racial inequality in maternal care, there remain significant barriers for women of colour to access this profession (Thomas et al., 2023). A qualitative study by Paynter et al. (2022) highlights the critical need for doula programs that are culturally relevant and appropriate for Black and Indigenous communities. In Nova Scotia, women of colour participated in doula training using the standard Doulas of North America curriculum. However, participants identified significant shortcomings, such as the Eurocentric and outdated nature of the curriculum, which failed to include Black and Indigenous perspectives. This raises concerns about the appropriateness of receiving doula credentials through a curriculum that does not reflect these communities' unique experiences and needs. The use of a curriculum from a predominantly white-founded organization highlights the scarcity of culturally sensitive training programs for Black and Indigenous communities in Canada.

Efforts to create culturally relevant doula programs for women of colour have been gradually emerging within and outside Canada (Cidro et al., 2018; Doenmez et al., 2022; Spiby et al., 2015; Stanley et al., 2015). Recognizing the significance of doula support during the postpartum period is vital due to the substantial adjustments and potential health complications faced by birthing parents and infants (Hamilton et al., 2018). However, many doula programs prioritize content related to

pregnancy and childbirth over the postpartum period (Stanley et al., 2015). The existing research highlights the limitations of standard doula programs and provides evidence supporting the benefits of community-based doula training that empowers historically marginalized groups.

### **Development of the Black Postpartum Doula Training Program**

Central to the Regent Park program's success was the development of a culturally relevant curriculum. The curriculum aimed to bridge the gap left by many existing doula training programs, which often lacked consideration for the distinct experiences and needs of Black mothers. The curriculum was underpinned by a deep understanding of the structural and systemic challenges Black women face in maternal health care. The culturally relevant curriculum was designed not only to acknowledge these challenges but also to confront and challenge anti-Black racism head-on. The program was structured around six crucial competencies, designed to bolster parent-centred physical and emotional assistance, emphasize the significance of self-care, promote advocacy with support, enable safe referrals, foster the ability to identify supportive solutions, and provide skills for aiding household organization and management. These competencies formed the backbone of the training, which was delivered using a combination of in-person and virtual sessions.

### **Evaluation Methods**

#### **Participants**

This evaluation focused on individuals who had completed the Black Postpartum Doula Training program in Toronto. Participants consisted of individuals who had recently undergone the training. While demographic data were not collected from interviewees, it is reasonable to expect that all participants identified as Black, as this was a prerequisite for attending the training.

#### **Data Collection**

Data were collected through semi-structured interviews or written responses to questions provided to participants in advance. The questions explored various aspects, including participants' skills and competencies acquired through the training, their learning objectives, personal and professional outcomes, understanding of the doula role, and any challenges encountered during the training. Interviews were conducted one-on-one via video conferencing. The interviews were audio-recorded with participants' consent to ensure accurate data capture. Written responses to the questions were also accepted via email.

#### **Data Analysis**

Thematic analysis was the systematic approach to examine the qualitative data derived from interviews and written responses. This process entailed multiple stages: first, becoming acquainted with the data by reviewing transcriptions to comprehend participant viewpoints. Next, initial codes were generated by identifying and labelling text segments conveying meaningful concepts pertinent to the pilot program evaluation's objectives. These codes were then organized into potential themes, reflecting their relevance. An iterative process of collaborative review and refinement among the evaluation team further enhanced theme accuracy and relevance. Finally, each theme was defined and named to encapsulate distinct aspects of participants' experiences and perceptions regarding the training program. The results of this thematic analysis were subsequently presented coherently, supplemented with participant quotes to exemplify key findings. In essence, this method facilitated a comprehensive exploration of participant perspectives, effectively capturing insights on the program's outcomes and efficacy while allowing flexibility in data collection to ensure participant comfort and a holistic understanding of their viewpoints.

## Results

Our pilot evaluation revealed a transformative training program that influenced personal and professional identity, addressed racial health care disparities, prioritized self-care, professionalized the doula role, and empowered the Black community. These themes highlighted the program's potential to drive positive change in maternal health care and social equity (Ottley et al., 2023).

### **Intersection of Personal and Professional Identity**

One prominent theme that emerged from participant interviews was the intricate interplay between personal and professional identity among doulas. Many of these individuals were mothers and immigrants who had experienced childbirth and motherhood in foreign settings. Their personal journeys profoundly shaped their identities as doulas, emphasizing the unique connections they brought to their work. However, balancing personal healing with professional growth created tension, as some trainees voiced that they sometimes struggled to engage fully in the training while managing emotional vulnerabilities. This made it difficult for some trainees to maintain progress in both areas, slowing their ability to absorb professional competencies and highlighting the need for more mental health support to assist trainees in navigating both personal and professional development.

### **Addressing Racial Health Care Disparities**

The interviews shed light on the existence of racial disparities in health care, particularly concerning Black mothers during childbirth. Doulas' narratives exposed systemic biases and institutional racism present within the health care system, underlining the critical role doulas played in mitigating these biases and advocating for the well-being of Black mothers.

### **Self-Care as Vital Resistance**

A theme that resonated strongly with trainees was "Self-Care as Resistance." They emphasized the newfound significance of self-care as an essential tool for effective caregiving, countering burnout, and resisting societal pressures that demanded continuous giving without replenishing one's own resources.

### **Professionalizing the Doula Role**

Another recurring theme was the professionalization of the doula role. Doulas spoke of the transformation of their role from primarily providing support to being recognized and respected as professionals in their field. This shift validated the importance of doula services in maternal health care and created career opportunities within their communities, enhancing their professionalism. However, trainees also expressed concerns about how their roles as culturally competent doulas would be received and integrated within the existing health care system. Many, motivated by personal experiences of anti-Black racism in health care settings, voiced apprehension and uncertainty about whether the skills they gained in the program would be respected and valued by other health care professionals.

### **Empowering the Black Community**

The program's role in empowering the Black community, particularly in areas like Regent Park, became evident. Training Black women as doulas empowered them as health care leaders and contributed to improved health care outcomes within their communities. This initiative addressed intersectional health care challenges, benefiting marginalized communities and working to reduce health care disparities.

## Discussion

The findings of our pilot evaluation underscore the transformative potential of the Black Postpartum Doula Training program in addressing the unique challenges faced by Black women during pregnancy, childbirth, and the postpartum period. Beyond the immediate impact on doulas and the mothers they serve, these insights hold significant implications for future practice, particularly in the context of combating the pervasive impact of anti-Black racism and fostering structural change within maternal health care.

Our program's emphasis on training Black women as doulas represents a crucial step toward addressing disparities in health care access and outcomes. Black women, who have historically been marginalized within health care systems, are uniquely positioned to bring about positive change. By equipping them with the skills and knowledge to serve as doulas, we empower Black women economically and enable them to become advocates and leaders within their communities. This empowerment contributes to dismantling systemic barriers and promoting health equity, ultimately serving as a model for future initiatives.

Doulas play a pivotal role in challenging the impact of anti-Black racism within health care. Through culturally competent care, advocacy, and support, doulas can effectively mitigate the adverse effects of racial biases on the well-being of Black mothers. Our findings emphasize the importance of culturally sensitive care and the advocacy role that doulas can fulfill in addressing health care disparities. By nurturing a diverse doula workforce that is reflective of the communities they serve, we can work toward dismantling systemic racism within maternal health care.

Beyond the individual and community levels, our program's broader social impact is evident. By targeting marginalized communities like Regent Park, we contribute to reducing health care disparities and enhancing the well-being of vulnerable populations. The program's role in bridging the gaps in fragmented health care systems and coordinating care transitions further underscores its potential to drive structural change. This commitment to addressing health care disparities aligns with the broader goal of fostering a healthier, more equitable future for all Canadians. That said, funding remains a significant barrier to expanding these programs in Canada. The federal government could consider adopting an approach similar to the United States, where since 2013, individual states have implemented Medicaid coverage for doula services, recognizing their role in improving maternal health outcomes (Chen, 2022).

In Ontario, integrating doula care for Black women and birthing people into health care teams could be a crucial step toward achieving the objectives of Ontario's Black Health Plan. This plan, designed to address the significant health disparities faced by Black communities, emphasizes improving access to preventive and primary care as one of its core priorities (Ontario Health, 2023). By including doula care under the Ontario Health Insurance Plan (OHIP), the province would align with Pillar 2 of the Black Health Plan, which focuses on Equitable Health System Recovery, specifically targeting the health inequities experienced by Black populations. Expanding access to doula services through OHIP funding would not only improve Black maternal health outcomes but also help reduce the systemic barriers Black women face in the health care system.

The Black Postpartum Doula Training program, funded by the City of Toronto, demonstrates how local initiatives can address systemic disparities in maternal health care. Collaboration across all levels of government is essential to reducing Black maternal morbidity and mortality. The program aligns with the city's anti-Black racism priorities, as outlined in the most recent Toronto Public Health strategic plan (Toronto Public Health, 2024). In a report from the Institute on Municipal Finance and Governance, Dr. Loh highlights the role of municipal health agencies in enabling broader change, noting that "municipalities sometimes act as first movers, setting precedents later adopted at the provincial level"; he references the Smoke-Free Ontario Act, which followed city-level smoking bans (Eidelman et al., 2022, Executive Summary section). Similarly, this pilot program can set a

precedent for expanding access to doula care for Black women. Municipal public health departments should collaborate with Black-led, Black-serving organizations to implement targeted doula programs by providing grants to support the training and deployment of Black doulas. By partnering with community organizations, municipalities can also run advocacy programs to raise awareness about the need for Black doulas, making them an integral part of public health strategies to support the health and well-being of Black women and children.

### **Conclusion**

The evaluation of the pilot training program for Black postpartum doulas in Regent Park has shown promising initial results. By cultivating a workforce of doulas equipped to address the unique needs of Black mothers, the program actively contributes to combating anti-Black racism in maternal health care. To further advance this work, it is recommended that future research be conducted as a pragmatic clinical trial. This type of trial would allow for the measurement of the impact of doula care on improving health outcomes for Black mothers. A pragmatic clinical trial would generate robust, actionable evidence for policy-makers and health care providers, informing decisions about the broader implementation of culturally competent doula care. This next step is essential to ensuring that the approach can be effectively integrated into health care systems, leading to sustainable improvements in maternal health for Black women.

### **Acknowledgements**

We extend our deepest gratitude to Jordyn Gibson and McKenzie Watson, whose unwavering dedication and leadership were foundational to the creation and implementation of the Black Postpartum Doula Training pilot.

We are also grateful to the Leading Social Justice Fellowship (LSJF), now the Leading Social Justice Collective, co-hosted by United Way Greater Toronto and the University of Toronto's School of Cities, for their support throughout our journey. Special thanks go to our LSJF mentor, Sophie Duncan, for her invaluable guidance and insights, which have enriched our work and helped shape its direction.

This pilot program was generously funded by the City of Toronto.

### **Impact Statement**

This promising pilot brief report focuses on examining the experiences of Black trainees in a newly developed community-based doula training program. It explores how this pilot training program has the potential to reduce racial health care disparities and empower Black women as advocates within maternal health, fostering a healthier, more equitable future for Black women and their families.

### **Conflict of Interest**

The Authors declare that there is no conflict of interest.

### **Author Note**

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