

bEArthWoRK

**How Counselors, Doulas,
and Birth Workers Enhance
Pregnancy and Motherhood
for Black Women**



**Orchestrated By
Ayanna Robinson, PhD, MPH
Founder of Black Girls
Breastfeeding Club**

Foreward

My name is Ayanna Robinson. I am a mom, a maternal and child health advocate, a public health scientist, and the Founder of Black Girls' Breastfeeding Club, LLC and bEarth Work. **bEarth (pronounced "birth") Work** makes it easier for Black women and birthing individuals to find and book online courses, classes, and support spanning preconception, prenatal, and postpartum health. On bEarth Work, you can access virtual courses/classes created and taught by Black birthworkers, like doulas and lactation professionals, and other healthcare providers.

bEarth Work culminates from over a decade of research, expertise, and passion across maternal and child health. My academic training in public health, as well as, my research, professional experiences, and personal experiences as a mother have prepared me for this work. For example, although I knew before my daughter was born that I would breastfeed, it was not until motherhood that I learned of the extensive breastfeeding benefits for mothers and infants. As a graduate student in public health learning more about social determinants of health and health disparities, I learned about the breastfeeding disparities that exist in the United States and also how breastfeeding protects against a variety of diseases that Black people are disproportionately impacted by.

Much of my personal work since becoming a mom and a public health professional has focused on maternal and child health. My dissertation research, for example, published in journals including [Digital Health](#) and [Journal of Human Lactation](#), applied Black Feminist Theory to explore the breastfeeding experience and outcomes of Black mothers who participate in mom-to-mom breastfeeding support groups on Facebook. I founded Black Girls' Breastfeeding Club in 2016, to provide evidence-based culturally congruent education, tools, and resources to Black women and birthing individuals on breastfeeding and to promote positive breastfeeding norms among Black communities.

My work has expanded over the years to more broadly include other areas of maternal health. At the core, however, is my commitment to addressing health disparities among Black people in the U.S. and abroad. Decreasing the maternal morbidities and mortalities of and improving breastfeeding rates among Black mothers and birthing individuals are the areas of public health

that I am most passionate about. bEarth Work is an extension of my passion and experience working across maternal and child health.

Ayanna Robinson, Ph.D., MPH

Maternal Mortality Crisis

Everyone deserves to thrive during pregnancy and beyond, to experience a healthy prenatal and postpartum period. In the United States, however, [Black women are more than three times as likely to die from pregnancy-related causes than white women](#), the majority of which are preventable.



More specifically, Black women die at a rate of 40 per every 100,000 live births compared to 12.4 White women, according to the [CDC Pregnancy Mortality Surveillance System](#). Like many other health inequities, disparities in breastfeeding and maternal morbidities and mortalities are rooted in complex social determinants of health, driven by racism. Structural racism in health care and social service delivery, for example, leads to poorer quality care among Black women. In addition, due to historical oppression, Black women face higher levels of poverty and decreased access to quality and respectful maternity care, which can worsen birthing complications. However, inequities in mortality levels [cut across class lines](#), with many contributing factors affecting all Black women.

Improving Maternal Health Outcomes through Black Birthworkers

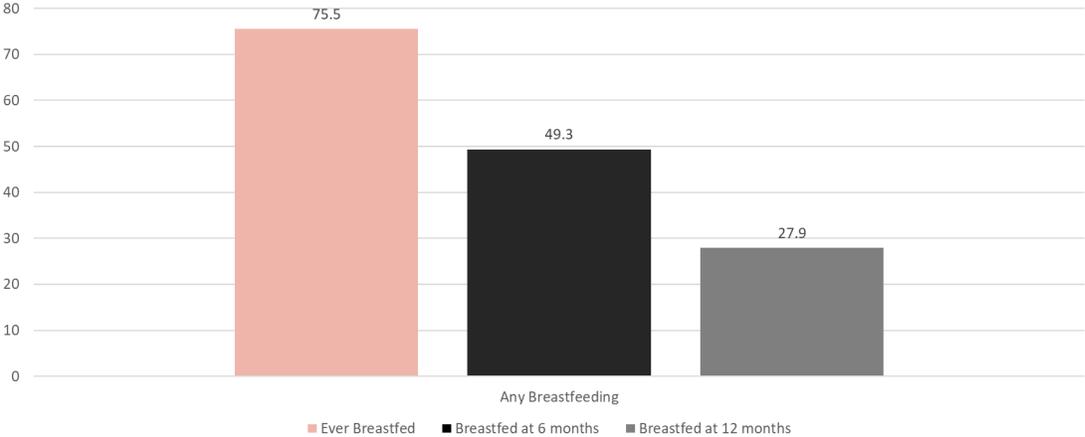
Access to birth workers, through in-person and virtual care, provides critical support that can positively impact birth outcomes. [Several published studies](#) underscore the importance of doulas in improving birth outcomes, for example. Pregnant Black women and birthing individuals can [turn to doulas for support against structural discrimination](#) that can jeopardize their safety. Doulas are birth workers who traditionally assist mothers before, during, and after labor and birth. They are not medical professionals but work in tandem with doctors or midwives to address clients' physical, emotional, and mental needs. Although doula services are not usually covered by insurance, many doulas, especially women of color, are stepping in to serve as [a resource to improve the care and safety of pregnant Black women](#). They can provide childbirth education, help navigate the complexities of the healthcare system, and even connect women and birthing individuals to optimal resources for prenatal nutrition. During appointments and the labor process, doulas serve as advocates and protect clients, for example from unwanted procedures or dismissal of pain, a commonly reported problem during Black women's pregnancy.

Community-level organizations such as Ancient Song Doula Services in Brooklyn work to [make doula care accessible to low-income women of color](#), often through volunteer or sliding-scale services. Public officials have taken note of birth workers' positive influence on mortality rates for Black women and babies, which has led to experimental programs covering doula costs through Medicaid in New York, Minnesota, and Oregon.

Addressing Breastfeeding Disparities through Education and Support

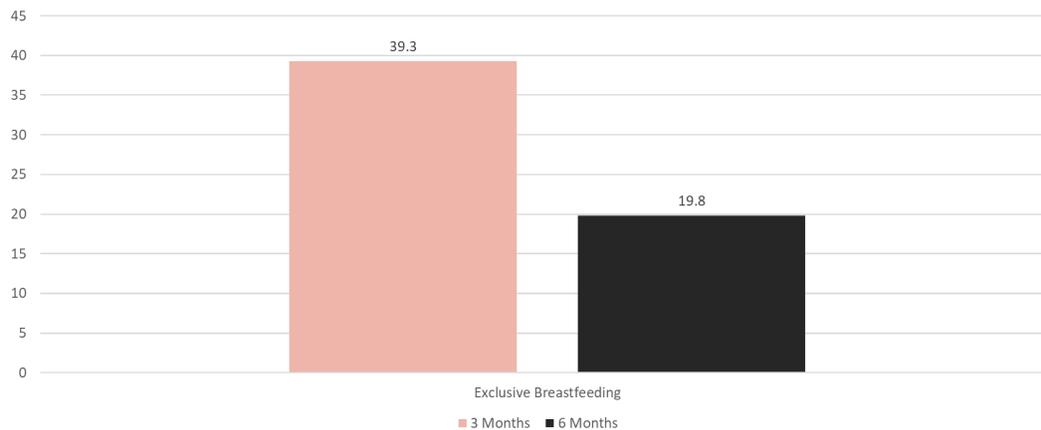
The [American Academy of Pediatrics](#) recommends exclusive breastfeeding (breastfeeding without the supplement of other liquids or solids) for the first 6 months of an infant’s life and the continuation of breastfeeding, along with the introduction of solid foods, for one year or beyond (Of note, WHO recommends two years of breastfeeding or beyond for mothers worldwide in order to receive optimal benefits from breastfeeding). Breastfeeding rates continue to increase in the U.S., including among Black women. In 2013, for example, the rates of “ever breastfed” were at 66% among Black infants. In 2018, 75% of Black infants were “ever breastfed”, receiving breastmilk at some point. By six months, however, less than half of Black infants received breastmilk and nearly 28% received breastmilk at 12 months (Table 1).

Table 1. Rates of Any Breastfeeding among Black Children born in 2018



Although breastfeeding rates among Black women have increased, they remain below recommendations from national and international health organizations to receive optimal benefits. Furthermore, while any breastfeeding yields positive health benefits for mothers and babies, the importance of breastfeeding exclusively and breastfeeding duration are also important factors for optimal benefits. The evidence on breastfeeding benefits highlights the dose-response relationship between breastfeeding duration and its protective effect against numerous health outcomes. For example, the greatest reduction in sudden infant death syndrome (SIDS) risk is observed among exclusively breastfed infants. In 2018, about 40% of Black infants were exclusively breastfed through three months and a little less than 20% exclusively breastfed through six months (Table 2).

Table 2. Rates of Exclusive Breastfeeding/Chestfeeding among Black Children born in 2018



The “why” is always important when highlighting health disparities because it shifts the blame from the populations and allows us to look at the circumstances and systemic issues that lead to these outcomes. For example,

barriers to breastfeeding for Black mothers and birthing individuals can be best explored within the socioecological model, and include:

- socio-cultural norms and attitudes,
- embarrassment with public breastfeeding,
- returning to work,
- self-efficacy,
- lack of social support
- Inequities in the quality of healthcare and social services within communities, including apathy and lack of support among healthcare providers (Less than 2% of IBCLCs in the U.S. are Black, contributing to gaps in receiving culturally congruent lactation education and support.)

[Pregnant mothers who receive breastfeeding education](#) from lactation professionals are more likely to breastfeed. The findings from research studies also suggest that Black mothers are usually knowledgeable about the benefits of breastfeeding, but need more practical information on how to breastfeed and how to overcome challenges.



Birth Work Options

<https://classes.bearthworkapp.com/>

For those who may be considering incorporating birth work into their pregnancy plans, there are a variety of options to consider:

Birth Doula

Birth doulas work with clients before, during, and after labor. Doulas who specialize in working with low-income women of color often provide assistance with the health care system, nutrition, and other natal-related essentials.

Postpartum Doula

Postpartum doulas assist mothers with transition just after birth, [focusing on](#) recovery from the birth experience, nursing, and infant bonding. Birth doulas often transition into postpartum doulas.

Family Life Doula

Bringing a newborn home shifts existing family dynamics. Family life doulas help siblings and non-birthing parents with the transition at home.

Bereavement Doula

A bereavement doula provides support to families in the tragic event of pregnancy loss.

Midwife

Many Black women have experienced [trauma in traditional medical settings](#) that exist within a sometimes racist system that undervalues their pain and experiences. A doula can help navigate and advocate in the face of structural barriers in these settings, but some women may also choose to opt-out of the traditional hospital birthing experience altogether. Certified nurse-midwives are advanced practice registered nurses who can deliver babies in the safety and privacy of one's own home, or at a birthing center or hospital. (Note: [Midwifery laws vary from state to state.](#))

Monitrice

While doulas are essentially labor support persons and midwives are primary care providers, monitrice offers a blend of the two. They offer similar services to doulas but have training that allows them to perform some clinical assessments such as vaginal examinations and blood pressure checks. Monitrice is especially helpful in allowing women to labor at home as long as possible.

Lactation Consultant

A lactation consultant is a board-certified health professional who provides breastfeeding education and support, addresses breastfeeding challenges, and works with a mother to develop a plan to reach personalized breastfeeding goals. There is a range of other lactation support professionals, including Certified Lactation Counselors and peer counselors.

A part of the solution to addressing maternal morbidities and mortalities among Black women and birthing individuals is to expand access to evidence-based, culturally relevant information and high-quality professional care and support made accessible to Black women and birthing persons, specifically initiatives that invest in and center the knowledge and skills within Black communities. Birthworkers can be viable alternatives or additions to healthcare for Black women and birthing individuals. On [bEarth Work](#), you can find online classes from birthworkers, like the professionals listed above, who can assist you along with your pregnancy and postpartum journey.