

*ACNJ Lunch & Learn 9/17/25*

# **Midwives & Doulas: Supporting Families Across the Birth Journey**

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**MONTCLAIR STATE**  
UNIVERSITY



FOOD SECURITY IS  
GENDER IDENTITY IS  
RACIAL JUSTICE IS  
ENDING INCARCERATION IS  
SUPPORTING TEEN PARENTS IS  
FREEDOM FROM VIOLENCE IS  
BUILDING FAMILY ON YOUR  
OWN TERMS IS  
ENVIRONMENTAL JUSTICE IS



IMMIGRATION JUSTICE IS  
ACCESSIBLE ABORTION IS  
DISABILITY JUSTICE IS  
SUPPORTING BIRTHPARENTS IS  
PAID LEAVE IS  
QUEER FAMILIES ARE  
SAFE COMMUNITIES ARE  
DECOLONIZATION IS

**REPRODUCTIVE JUSTICE**



# BIRTH CENTER WEEK 2025

SAVE THE DATE!

# BIRTH CENTER WEEK 2025

*WE ARE BELOVED BIRTH*

SEPTEMBER  
14-20, 2025

 BIRTH  
CENTER  
EQUITY

LEARN MORE AT : [bit.ly/bmcw2025](https://bit.ly/bmcw2025)

# WHO'S WHO?



*Doulas are trained, non-clinical support people.*

*Midwives are are highly-skilled clinicians and experts in healthy pregnancy & birth.*

*Obstetricians are surgeons and experts in disease and high-risk pregnancy and complicated birth.*

*A healthy, integrated maternity care system includes a diverse and retained workforce, parity in reimbursement and quality indicators for consumers in NJ.*

# As 'Douglas' Enter Delivery Rooms, Conflicts Arise

Jan. 19, 2004

Hired to Help in Childbirth,

By Suein HwangStaff Reporter of THE WALL STREET JOURNAL

Jan. 19, 2004 12:01 am ET



Gift unlocked article

There's a new work force entering obstetrics wards. They are often strangers to the staff and unrelated to the patients. They aren't licensed and aren't required to have any formal medical training. And they are sparking protests in the medical community.

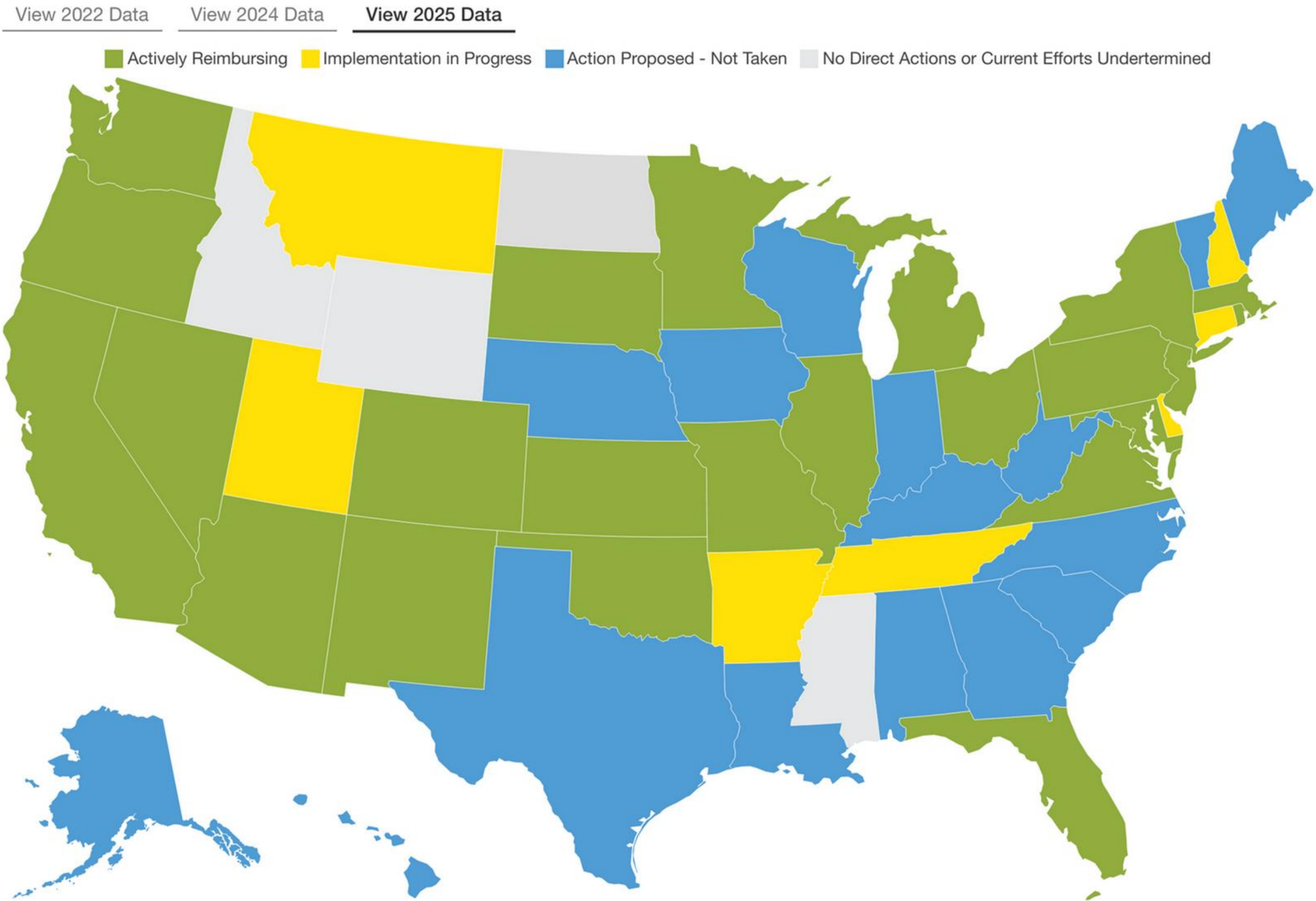
The workers are called doulas.

THE  
WALL STREET  
JOURNAL.

In 2025

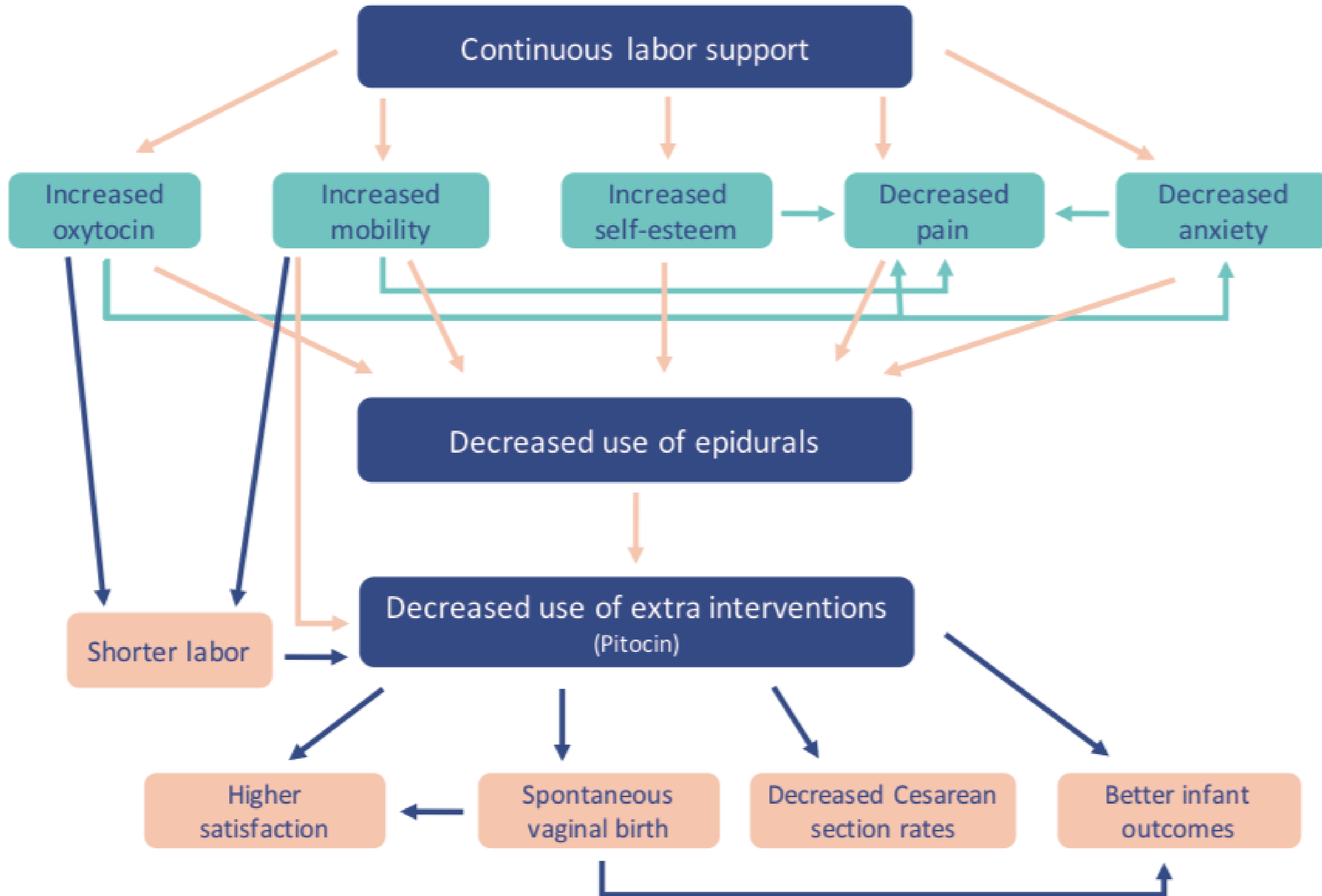
State Medicaid Efforts to Reimburse Doula Care - 2025

Hover over each state to view implementation status of any proposed or implemented action:



Source: This graphic was made using NHeLP's tracking "Current State Doula Medicaid Efforts." For more information including implementation timeline and strategy, summary of implementation efforts, available resources, and training, credentialing, and/or certification requirements please visit: <https://healthlaw.org/doulamedicaidproject/>

# Conceptual Model for Continuous Labor Support (revised 2017)



# Four Key Roles for Doulas

Improving Our Maternity Care Now Through  
*Doula Support*



September 2022



HealthConnect One



National Partnership  
for Women & Families

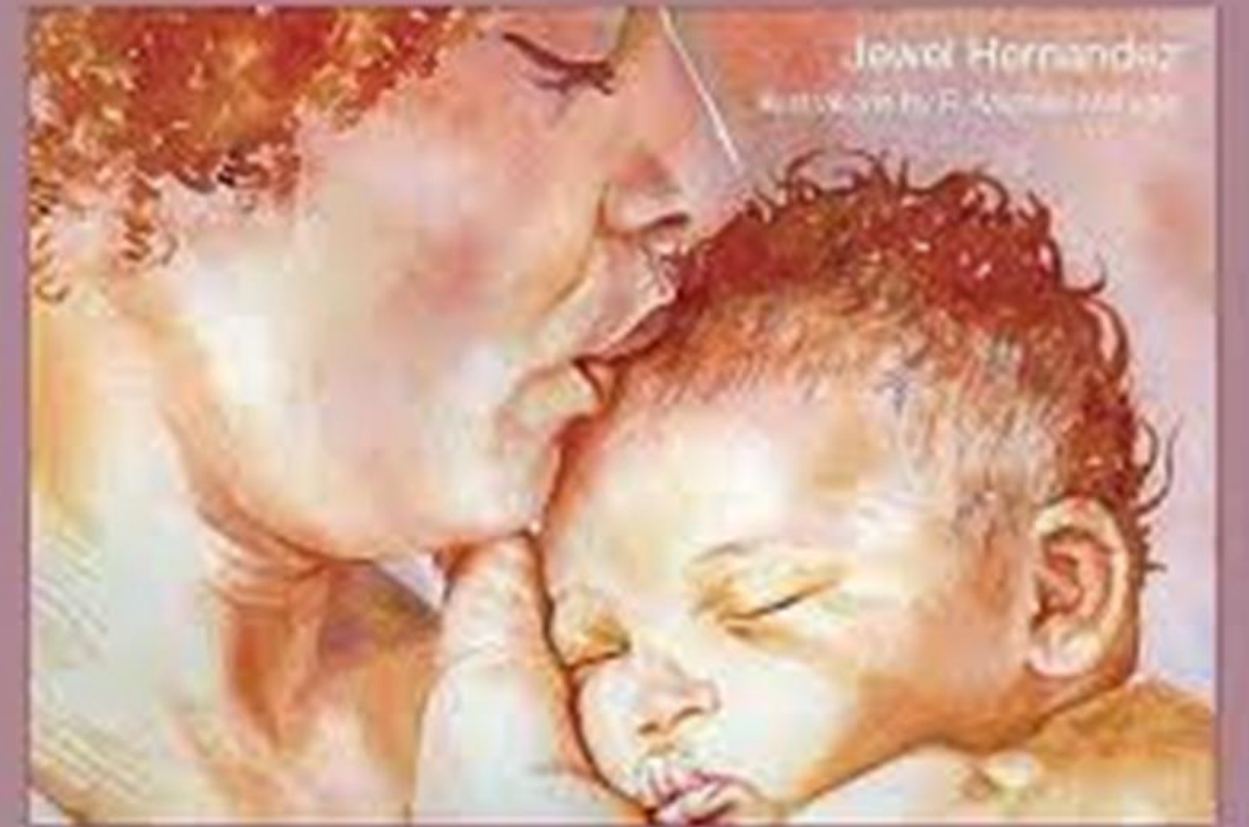


- They **provide information** about childbirth and foster communication between birthing women and people and members of the care team.
- They **play an advocacy role**, helping birthing women and people to achieve their desired experiences.
- They **provide practical support**, through drug-free comfort measures (e.g., with inflatable “birth balls,” hot and cold packs, and position changes) and hands-on support (e.g., massage and acupressure).
- They **provide emotional support** for confidence and a sense of control.<sup>13</sup>



# Doulas are taught to:

- ♦ **Recognize** birth as a key life experience;
- ♦ **Nurture and protect** a woman's / parent's memory of birth;
- ♦ **Maintain an uninterrupted presence** during labor and birth;
- ♦ **Recognize the effect of emotions** on the physiology of labor;
- ♦ **Provide comfort techniques** and promote positions that facilitate progress during labor;
- ♦ **Facilitate** positive communication;
- ♦ **Promote** early breastfeeding and bonding.



*Being Born: The Doula's Role*

*Doulas can not be charged with fixing  
nor saving a broken maternity care system.*

*Doulas can offer support, resources, advocacy and education.*

*Systemic change incorporates doulas but instead focuses on how  
maternity care is delivered, the payment mechanisms and that the  
United States under utilizes the midwifery model of care.*

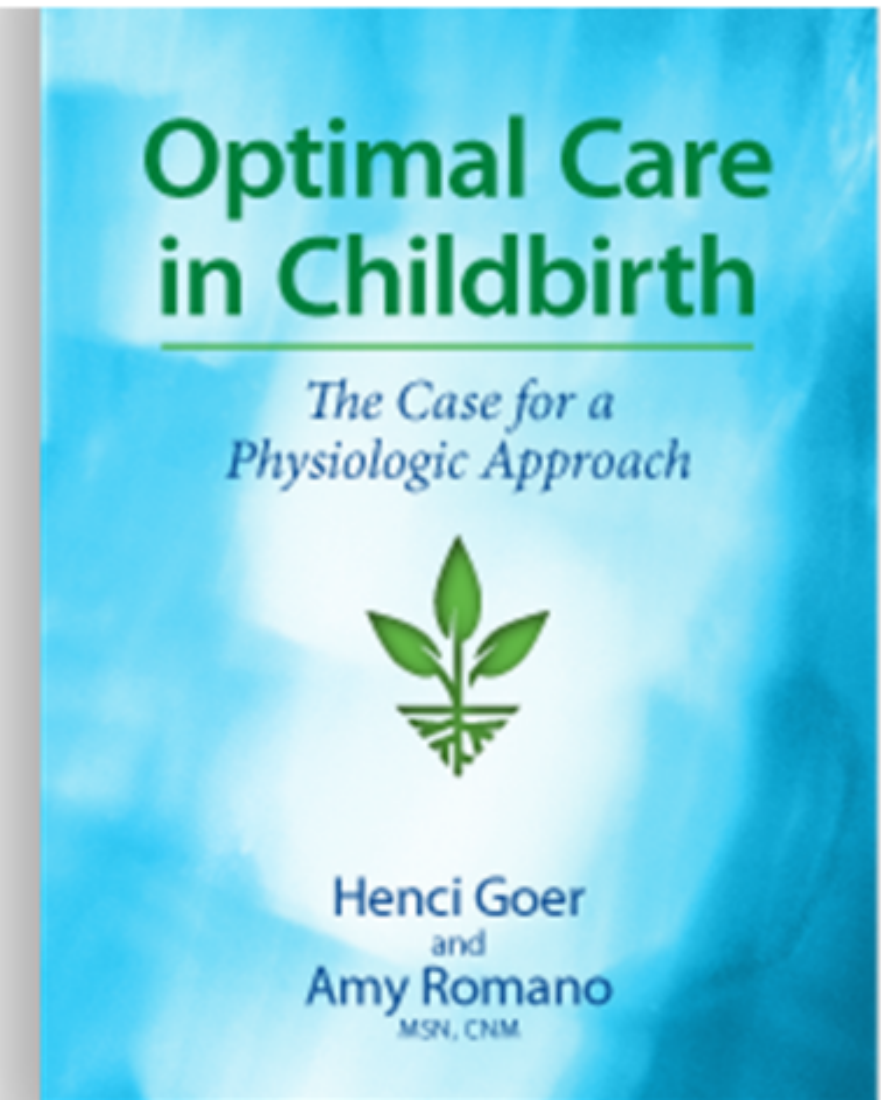
# High quality maternity care

## Overused Procedures

- labor induction
- epidural analgesia
- cesarean section
- rupturing membranes
- episiotomy

## Underused Procedures

- continuous labor support
- measures to bring comfort and promote labor progress
- non-supine positions for giving birth
- early skin-to-skin contact
- interventions for breastfeeding initiation, duration, and postpartum depression



# *Doctors Give Black Women Unneeded C-Sections to Fill Operating Rooms, Study Suggests*

Healthy Black women with low risk factors were far more likely to get C-sections than white women with similar medical histories, a large new study found.



Share full article



156





By Sarah Kliff

Sept. 10, 2024

Obstetricians are more likely to give Black women unnecessary cesarean sections, putting those women at higher risk for serious complications like ruptured surgical wounds.

That's the conclusion of a new report of nearly one million births in 68 hospitals in New Jersey, one of the largest studies to tackle the subject.

Even if a Black mother and a white mother with similar medical histories saw the same doctor at the same hospital, the Black mother was about 20 percent more likely to have her baby via C-section, the study found.

The additional operations on Black patients were more likely to happen when hospitals had no scheduled C-sections, meaning their operating rooms were sitting empty. That suggests that racial bias paired with financial incentives played a role in doctors' decision-making, the researchers said.





## Consider this:

- + doulas are a historically-disruptive, peer-to-peer, volunteer group
- + new + unprecedented interest in integrating doulas as a professional workforce where retention is valued
- + INTO the systems of care they were traditionally tasked with preventing/mitigating harm
- + conflicts arise in aligning incentives + interests
- + BOTH/ALL are true within a new paradigm.

# The State of Doula Care in NYC, 2025

New York City Department of  
Health and Mental Hygiene



## PLAN FOR IMPROVING ACCESS TO DOULA CARE IN NYC

The NYC Health Department's work to improve access to doula care comprises five key components:



**Increase access to doulas in underserved communities.**



**Build doula capacity.**



**Make hospital environments more welcoming to doulas.**



**Amplify community voices to help expand access to doula services.**



**Improve data collection.**



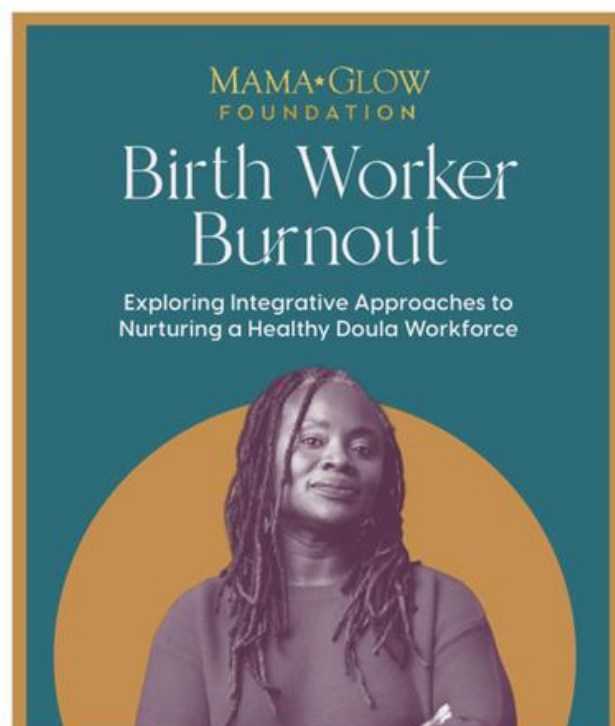
# California Doula Workforce Analysis 2024

By Alexis Robles-Fradet

## PLAN FOR IMPROVING ACCESS TO DOULA CARE IN NYC

The NYC Health Department's work to improve access to doula care comprises five key components:

-  Increase access to doulas in underserved communities.
-  Build doula capacity.
-  Make hospital environments more welcoming to doulas.
-  Amplify community voices to help expand access to doula services.
-  Improve data collection.



**BUILD DOULA CAPACITY:**  
“As the demand for doula care increases, it is important to develop and foster a strong doula workforce, particularly among community doulas serving marginalized communities, through trainings, professional development, mentoring, and equitable pay.”



August 22, 2022

## The Birth Doula Workforce in the U.S. Rapid Response Brief

Grace Guenther, MPH, Paula Kett, PhD, MPH, RN, IBCLC, Susan M Skillman, MS, Bianca K Frogner, PhD,  
University of Washington Center for Health Workforce Studies

## Evidence-based implementation

1. Include communities & doulas of color as equal partners in policy and financing decision-making
2. Acknowledge systemic racism as the cause of racial health disparities to create an appropriate scope of work for doulas
3. Clarify the role of the doula
4. Educate all stakeholders on the role of the doula
5. Promote mutual respect between providers and doulas
6. Create sustainable models of doula employment

Bohren et al, Cochrane synthesis, 2019; Van Ejik, J Perinatal Ed 2021; Van Ejik, Health Equity, 2022; Marshall, Matern Child Health J, 2022; Neil et al, Obstet Gynec, 2021; Khaw et al, BMJ Glob Health 2022; Ogunwole et al, Womens Health Issues, 2022



# COMMUNITY-BASED DOULA TRAINING PROGRAM

**Strengthen Your Community, One Birth at a Time**  
**Now Accepting Applications**

**DEADLINE: September 26, 2025 at 11:59 PM Eastern**  
**Apply early, as applications are reviewed on a rolling basis and space is limited.**

*The PMCH 2025-2026 community-based doula career-development training is open for those who reside in and will serve families who live in SUSSEX, HUDSON, and UNION Counties. While others may apply, priority will go to residents of those three counties.*

questions?  
email

[ProfEd@pmch.org](mailto:ProfEd@pmch.org)

*Please note: Our clinical partners, where we conduct our clinical experiences, require submission of an immunization record, including but not limited to MMR, Varicella, Hepatitis B, Tuberculosis, Influenza (flu), TDap, and COVID-19 vaccines and/or titers to show immunity. We cannot guarantee that those who do not have documentation of immunizations/titers will be able to fulfill the requirements of the certification. They will also request a background check and a drug screening.*

**To apply, click here or scan the code.**



## CORE COMPETENCIES FOR CBD TRAINING



These competencies were created collaboratively by HC One partners and stakeholders to standardize and elevate community-based doula care.

### Community-Based Doula Training Topic Sessions

Session 1: Getting Acquainted

Session 2: Communication

Session 3: Attitudes, Beliefs, and Values

Session 4: Adolescent Development

Session 5: Pregnancy

Session 6: Birth as a Life Event

Session 7: Prenatal Community-Based Doula Work

Session 8: Labor and Delivery-Part I

Session 9: Labor & Delivery-Part II

Session 10: Doula Support during Labor and Delivery – Part I

Session 11: Doula Support during Labor and Delivery-Part II

Session 12: Obstetrical Routines, Interventions, and Alternatives

Session 13: Unexpected Events

Session 14: Loss

Session 15: The Postpartum Period: The Baby

Session 16: Postpartum Period: The Mother/Parent

Session 17: Infant Capacities

Session 18: Breastfeeding

Session 19: The Context of Community-Based Doula Work

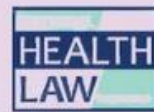
Session 20: Looking Backward To Move Forward

Doulas in training/ in formation are also required to complete a range of practicum experiences that include: prenatal childbirth preparation classes, breastfeeding class/support group, 3 prenatal observations, 3 birth observations, 3 postpartum observations



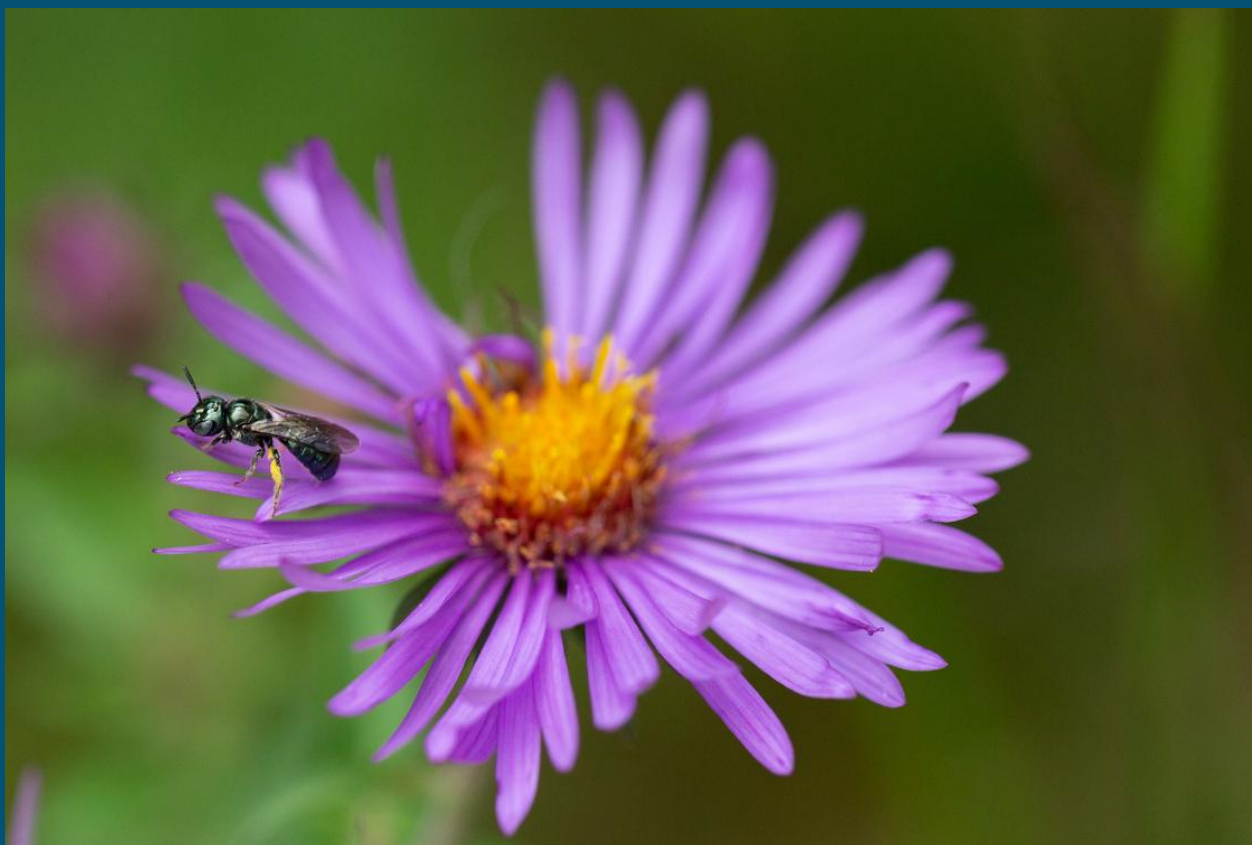
NEW REPORT

## Improving Our Maternity Care Now Through Doula Support



HealthConnect One®





**“Practice corporeal politics.**

**Power wants your body softening in your chair and your emotions  
dissipating on the screen. Get outside.”**

**ON TYRANNY**

TWENTY LESSONS  
FROM THE  
TWENTIETH CENTURY

**TIMOTHY SNYDER**



**MONTCLAIR STATE**  
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**I support  
community-based  
doulas.**

COMMUNITY DOULA WEEK