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# Doula Care for Rural Communities and Immigrants and Refugees

The Georgia Doula Study

Presenter: Sydney Comstock, MPH Candidate



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# Agenda

01 Background

02 Georgia Doula Study Overview

03 Resulting Themes

04 Implications and Next Steps

05 Questions and Discussion

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# Study Team

## Co-Principal Investigators

- Dr. Elizabeth Mosley (Emory RISE)
- Ky Lindberg (HMHB)

## Co-Investigators

- Dr. Subasri Narasimhan (Emory RISE)
- Dr. Tiffany Hailstorks (Emory OB/GYN)
- Madison Scott (HMHBGA)

## Steering Committee

- Georgia Doula Access Working Group

## Current Graduate Research Assistants

- Sydney Comstock, MPH Candidate
- Ileana Lopez-Martinez, MPH Candidate
- Claudlyne Bernaus, MPH Candidate

## Former Graduate Research Assistants

- Alyssa Lindsey, MPH
- Ayeesha Sayyad, MPH
- Kaniya Williamson, MPH
- Priya Shah, MPH
- Daria Turner, MPH

# Background

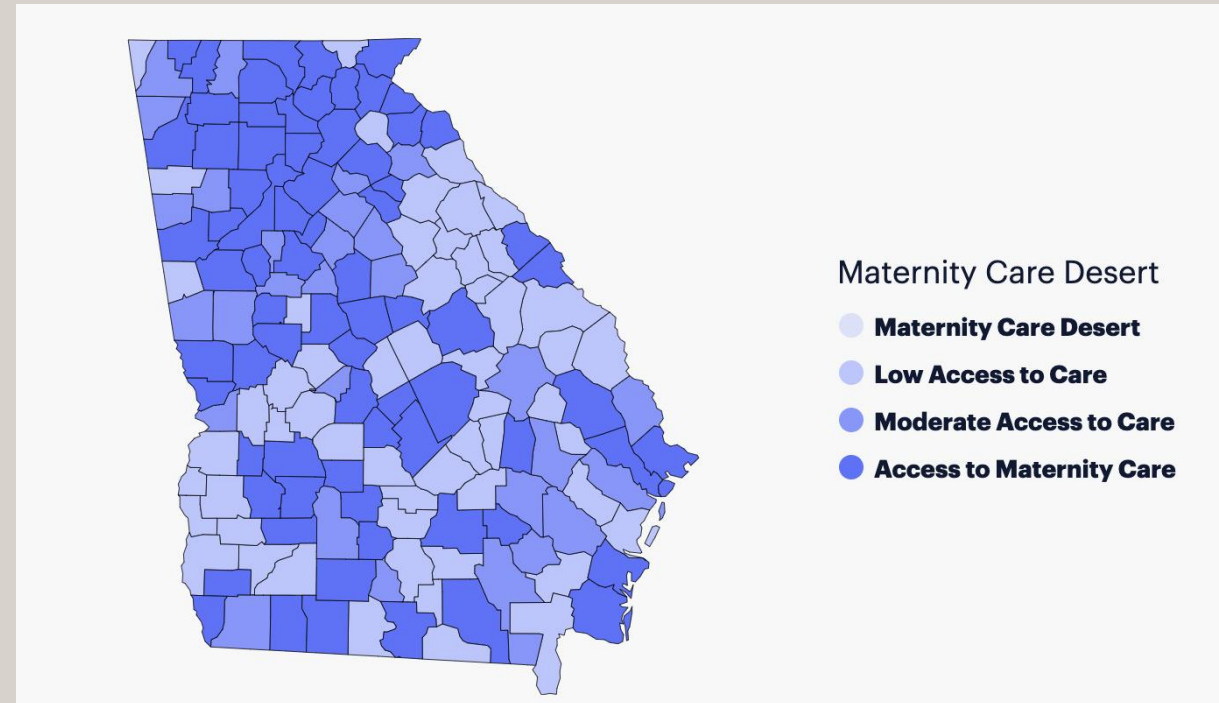


- Doulas are **non-medical** professionals who provide **emotional, physical, and educational support** for individuals **before, during, and after their birth**
- Have been shown to **improve birth outcomes** and **decrease unnecessary interventions** during labor, such as c-sections

# Background

## Rural Maternity Care Shortages

- 5 million women live in areas that do not have birthing services, known as maternity care deserts
- Due to care shortages, hospital closures, and less obstetric providers, services in rural areas have become less available to people



Source: March of Dimes, 2022

# Background

## Immigrant and Refugee Maternal Health

- Immigrants and refugees can experience poorer maternal health outcomes than US-born
- They have unique and additional needs during pregnancy, birth, and postpartum
- Doulas can help connect migrant and refugee women in new high-income countries, such as the U.S., with services and support



Source: REUTERS/Go Nakamura

# Study Overview

## Georgia Doula Study

- Community based participatory study co-led by HMHBGA
- HMHB Georgia Doula Access Working Group conceived of this study and they serve as the study's Steering Committee
- Initial aim (Phase 1) was to explain barriers to providing doula care, the benefits, and recommendations on how to improve care
- Phase 2 investigated racism against doulas and their clients as well as full spectrum doula care including abortion
- *Phase 3 is now focused on exploring the benefits, facilitators, and barriers doulas that serve rural and immigrant/refugee communities in GA*

# Study Overview: Community-Based Participatory Research

Increasing Community Involvement, Impact, Trust, and Communication

## Inform

Researchers give information to community

## Consult

Researchers obtain community input periodically

## Involve

Community directly and consistently involved

## Collaborate

Partnership and trust building for mutual decision-making

## Empower

Community makes final decisions with support from researchers



# Study Overview: Timeline

## Phase One



**17 surveys and interviews**

Focus on describing the scope of doula care, explaining barriers and benefits of doulas

## Phase Two



**3 new interviews + 17 re-interviewed**

Focus on racism doulas and clients experience, full spectrum doula care

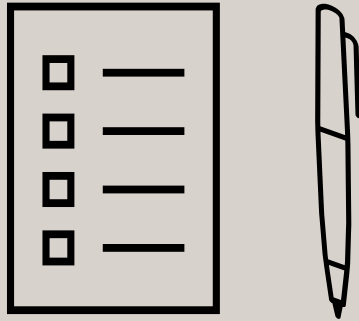
## Phase Three



**Goal: 40  
19 completed**

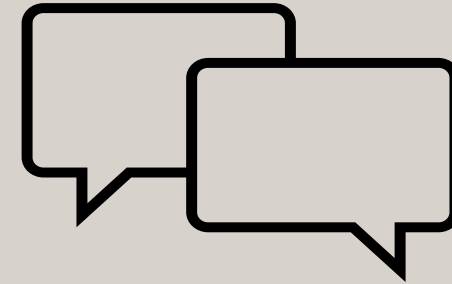
Focus on immigrant, refugee, and rural doulas

# Study Overview: Methods



- **Surveys**

- Demographics, clientele, training, certification, pricing/payment, services provided
- Discrimination, COVID effects
- 24 completed
- Descriptive and bivariate statistics



- **In-depth Interviews**

- Client and provider interaction stories
- Rural doula challenges and facilitators
- Cultural sensitivity and challenges for immigrant and refugee care
- 19 completed
- Transcribed, coded, thematic analysis

# Participant Demographics (Phase 3)

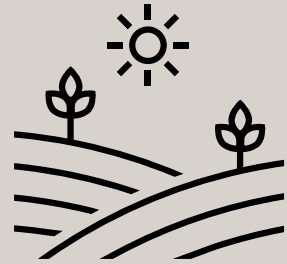
| Race/Ethnicity                | Frequency |
|-------------------------------|-----------|
| White                         | 11        |
| Black                         | 10        |
| Biracial<br>Multiracial       | 2         |
| Middle Eastern and<br>African | 1         |
| Other                         | 1         |
| Age                           |           |
| Under 25                      | 1         |
| 25-35                         | 13        |
| 36-45                         | 7         |
| 46-55                         | 0         |
| Over 55                       | 1         |

| Communities Served               | Frequency |
|----------------------------------|-----------|
| Rural Doulas                     | 14        |
| First Generation Immigrant Doula | 6         |
| Refugee Doulas                   | 8         |

# Resulting Themes

## Theme One

Rural birthing people have knowledge gaps about birthing options

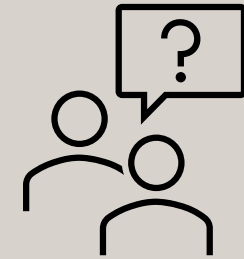


## Theme Two

There is a lack of doula access in rural areas

## Theme Three

Immigrants and refugees face issues with interpretation services and culturally sensitive perinatal care



## Theme Four

Doulas are uniquely suited to provide improved advocacy to support the specific needs of immigrant and refugee pregnant people.

# Theme One

There are knowledge gaps for birthing people in rural areas around their birthing options, including doula care.

“When I moved to Georgia and was in the hospital, I just felt like there was an extreme lack of options and my clients were being pressured into all kinds of things.”

**P029, A white, birth doula**

Interviewer: “What other challenges have you seen for rural communities?”

Participant: “...lack of prenatal education, lack of knowledge of options in birth scenarios...”

**P038, A Black, full-spectrum doula**

# Theme Two

There is a lack of resources and access in rural areas for alternative birthing options including doula care.

There's a lack of services locally. They usually have to travel more significantly to get those services.

**P030, A white, prenatal, birth, and postpartum doula**

**P032, A white, birth doula**

"I live in coastal Georgia and mostly Florida. There are no other doulas...one of the biggest impediments to my career as a doula is that I'm solo."  
"I live in a doula desert"

"Where I live in Augusta, there's only one home-birth midwife. Yes, within two hours, there's one. Women need options..."

**P029, A white, birth doula**

# Theme Three

Immigrant and refugee birthing people face challenges with interpretation services and culturally sensitive perinatal care.

I think speaking for speaking on behalf of the refugee community, I think if we have - if the service is available in Korean, we have an interpreter available, that will be so much better for the pregnant mom.

**P025, An Asian, postpartum doula**

**P031, A Hispanic, Birth doula**

That was scary. She wasn't very far from bleeding out. Unfortunately, it happens a lot. Her mom was also my client. Her mom had a baby about two months before she did. Again, doesn't speak English, ignored in the triage room.

# Theme Four

Doulas are uniquely suited to provide improved advocacy to support the specific needs of immigrant and refugee pregnant people.

“I use my knowledge as a doula. I know in their previous pregnancies and deliveries outside of the United States and I know how it’s done in the United States, so I try to interpret that thing...Actually, I introduced the rights. I teach them the rights here because they have more rights, more freedom to ask about what they want during labor.”

**P026, A Middle-Eastern, birth doula**

**P035, A black, birth and postpartum doula**

“I remember supporting a mom at the hospital with her birth plan, but the team didn’t actually consider the plan. They just picked maybe one or two things and then that’s it. Even though the mom was asking or asked for things she preferred on her plan...”



# Implications

- Need to increase community awareness of doulas, particularly in rural areas and among immigrants and refugees
- Must expand doula workforce capacity in rural areas, including training opportunities and pathways for payment
- Culturally-sensitive doula care is needed, from immigrants and refugees in those communities
- Doulas serving immigrants and refugees have a unique opportunity to bridge and advocate



Source: Holly Stapleton for The Lily

# Next Steps

- **HMHB Medicaid doula pilot** including rural and immigrant/refugee communities
- **Free Doula Training Opportunities**
  - For example, anti-racism training, which will be launched next year
- **GA Doula Access Working Group**
  - Continuing to work on hospital integration including in rural areas
  - Representation from immigrant and refugee organizations



Routes to Success for Medicaid Coverage of Doula Care:  
An Issue Brief

Source: California Preterm Birth Initiative

Thank you for your attention!

Thank you to HMHBGA, our participants, and the Georgia Doula Access Working Group!

Any questions?

Read more about our study at:

<https://www.elizabethannmosley.com/projects>

# Sources

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