IMPACTS OF RACIALLY CONCORDANT CARE ON PREGNANCY EXPERIENCES FOR BLACK BIRTHING PEOPLE

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INTRODUCTION

The Massachusetts Health Policy Commission (HPC), an independent state agency, created the Birth Equity and Support through the Inclusion of Doula Expertise (BESIDE) Program following the allocation of funds for a new investment program from the Massachusetts Legislature. The 2-year program was designed to address maternal health inequities among Black birthing people by increasing access to and use of doula services and prioritizing racial concordance between doulas and patients. Black birthing people enrolled in the program were matched, whenever possible, with a doula who shared a racial, ethnic, or linguistic identity with the patient. This program had the following goals:

- Increase the number of Black birthing people who are informed about the benefits of doula care and offered the opportunity to work with doulas, particularly doulas who are from the communities of (e.g. geographic, cultural) or share lived experience with Black birthing people.
- Improve the prenatal, labor and delivery, and postpartum experience and care of Black birthing people through the support of doulas.
- Embed principles of racial equity and cultural humility in the design and implementation of programs offering doula services.

OBJECTIVES

The BESIDE Program connected Black birthing people with concordant doulas at two awardee sites to improve pregnancy and birth experiences for these patients, who are at disproportionate levels of risk for severe maternal morbidity[1,2] and often report experiencing discrimination in medical settings with predominantly white staff. The evaluation of the BESIDE Program sought to understand, among other objectives, how working with a concordant doula impacted the pregnancy experience of the Black birthing people participating in the program.

STUDY DESIGN

Twenty-one BESIDE Program participants engaged in semi-structured interviews, focusing on how racial/ethnic concordance with their doula affected their pregnancy, labor and delivery, and postpartum experience. For patients who spoke Haitian Creole (n=6), the survey and interview guides were translated, and interviews were conducted by a native speaker.

Primary themes explored in patient interviews included the patients' experiences with feelings of respect, trust, safety, and agency with their health care team; their relationship with their doula; how having a racially concordant doula impacted their pregnancy and labor experience; and experiences with discrimination in medical settings. Qualitative data from interviews with doulas, administrative staff, and clinicians provided additional perspectives on the impact of racial and ethnic concordance on patient experience for Black birthing people. A patient experience committee comprised of Black doulas and patients was consulted periodically for additional insight and cultural context regarding the findings.

Patient experience data was also collected using a survey (n=39) which was conducted from April 2023 to July 2024. In September 2023, a question about racial concordance was updated to be split into three new questions with more precise language about how racial concordance affected patient experience. 58.9% (n=23) of survey respondents responded to this updated version of the survey. A breakdown of the patients who responded to the updated survey is illustrated in Figure 2.

RESULTS

Patients in the BESIDE Program reported highly positive experiences overall. Survey respondents (n=39) reported high levels of safety, trust, agency, comfort, and support throughout their pregnancy. Among patients who responded to the updated survey (n=23), 94% of patients who shared one or more identity characteristics (race, ethnicity, ancestry, national origin, or language) with their doula reported that this shared identity was very important to their overall experience. Because the program was not designed to compare concordant doula/patient pairs with a control group, statistical analysis was unable to show if concordance was significantly associated with a patient's experience of respect, safety, trust, agency, or overall satisfaction with their care, though previous research has demonstrated the positive impact that racial concordance can have on patient experience.[3,4]

In interviews, patients described racial/ethnic concordance as an important factor in positive experiences in the BESIDE Program. Patients frequently described the ease with which they were able to build relationships with their doulas and often used familial terms to describe their relationships with their doulas. Patients and doulas discussed how a shared racial identity provided an implicit shared cultural understanding that made it easier to build a relationship; patients commonly reported feeling understood by their doula or connected to their doula by their shared identity. Patients also felt that having a racially concordant doula helped protect them from being disrespected by having a Black care team member who would take their concerns seriously.

The doulas, administrative staff, and clinicians who were interviewed also described the positive patient impact of racially concordant doulas. They reported that patients with racially concordant doulas appeared more engaged with clinical care throughout their pregnancy. Based on their experience in the BESIDE Program, program staff and clinicians expressed hope that the practice of providing racially concordant doulas would become more widespread.

FIGURE 1. BESIDE Patient Survey Responses (Experience with Health care Team and Doula)

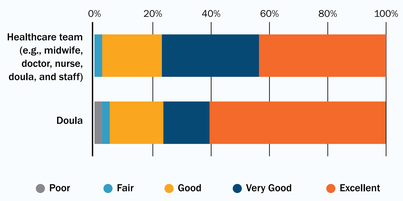

FIGURE 2. BESIDE Patient Survey Responses (Racial Concordance)

Note: As described in the Study Design, in September 2023, a survey question about racial concordance was updated to be split into three new questions with more precise language about how racial concordance affected patient experience. 23 patients responded to this updated survey. Of the 23, 17 reported sharing a racial, ethnic, or cultural identity with their doula:

15/17 or 88% shared racial identity

7/17 or 41% shared ethnic identity

3/17 or 18% shared ancestry

6/17 or 35% shared national origin

9/17 or 53% shared language

who shared an identity with their doula reported that it was **IMPORTANT** or **VERY IMPORTANT** to their overall experience

FIGURE 3. Selection of quotes from BESIDE interviews

"It's **comforting** when somebody looks like you, because you know they kind of went through similar situations as you... possibly could have gone through similar situations as you... and maybe similar upbringings as you... you just automatically **feel much better** and it almost feels like **family**."

– BESIDE DOULA

"I was completely floored because it was basically offering somebody of color to actually be part of my care team, which for me, **felt more safe**... I was definitely more inclined to have somebody of color on my team to **support me**."

– BESIDE PATIENT

"I felt like **I need another Black person with me**... sometimes I felt like White people don't care about Black kids or babies."

– BESIDE PATIENT

"As a person of color, when I go to medical appointments and my medical provider is white, I have to code switch, and I have to become more professional. It's **not as comfortable** going in and talking to a medical professional when they don't **look like you**."

– BESIDE PATIENT

CONCLUSIONS

Racial concordance played a significant role in enhancing the birth experience for Black patients in the BESIDE program. Surveys of BESIDE patients, program staff, and clinicians generally found that when matched with a racially concordant doula, Black patients had a person on their care team to whom they could relate through shared lived experience, and who many patients felt would be more inclined to take their medical concerns seriously. As a result, doulas and patients were able to form strong trusting relationships quickly. The relationship between doula and patient provided a sense of safety to patients, who could rely on the doula for support and advocacy for their needs with the clinical team.

Concordance with a doula may be an especially effective mechanism for providing perinatal support for historically marginalized patients like Black birthing people. The doula's role is to serve as a patient advocate, who works with their patients on a more personal level than a clinician might. In 2023, 21% of Black women nationally reported experiencing some form of unfair treatment from a health care provider due to their racial or ethnic background.[5] Results from the BESIDE evaluation suggest that having a trained professional who shares patients' racial identity as a support person during a physically and emotionally turbulent time such as pregnancy and labor can be a powerful tool in fostering the confidence, knowledge, and trust that allow patients to advocate for themselves and ensure a positive birth experience.

Limitations: These findings are from an evaluation of a program implemented at two sites in Massachusetts, including a convenience sample of participants; while they suggest a promising avenue for care delivery transformation, they are not necessarily representative of Black birthing patient experiences more broadly.

POLICY IMPLICATIONS

As doula work continues to expand and be implemented in more hospital systems, prioritizing racial concordance between doulas and patients may be utilized to improve birth outcomes for Black birthing people. The benefits of racial concordance may also be seen with racially concordant clinicians; hospitals should support efforts to build racially, ethnically, and linguistically diverse clinician teams to provide safe and respectful care.

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