



## Improving Maternal and Infant Care with Doula Support: A New Parent's Reflections

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### Meet Kalesha...

Kalesha Scott is a recent graduate of Central State University with a degree in political science. She is a student organizer working to build a statewide network of colleges and universities to harness the energy of students around issues like higher education, voting rights, and K-12 school funding. Drawing from her advocacy work, she recently wrote an op-ed piece on [Medicaid coverage of doula care](#) which appeared in the Dayton Daily News in June 2021. But more importantly, Kalesha is a new parent of a baby boy, Henry, who was born in June of this year.

Like many, Kalesha's road to motherhood has not been an easy one. She suffered two miscarriages before becoming pregnant with Henry. During her first trimester, she suffered from anxiety, worrying through the beginning months if the pregnancy was viable and if the baby would be healthy. She held off

sharing her good news with family and friends because of her previous experiences with loss.

Many women who feel unheard by their doctors and nurses have voiced a need to improve quality of care in hospital settings, especially women of color who have been historically

### Doula care should be available to all mothers

By Kalesha Scott

When I first found out I was pregnant last fall, I didn't think anything more of it.

As a 23-year-old, I've already suffered two miscarriages — once in high school, and the next one shortly after that. As a Black woman, I'm genetically predisposed to preeclampsia, a fatal condition if left untreated. So was my mother. So my partner and I kept quiet until we were sure the baby would come to term. We had already been through so much pain and anxiety since losing our first child. We're not alone



Scott

— nearly 1 in 4 pregnancies end in a miscarriage.

I'm happy to say I'm going to be the mother of a healthy baby boy who will arrive in mid-June. I'm already thinking about decorating his room and planning his baby shower. Black women with pre-existing health conditions who are currently expecting like me could have this peace of mind, too, if the Ohio legislature passes House Bill 142, which would make doula care

available to the mothers most at risk. Doulas are trained advocates who provide emotional, physical and educational support to women who are pregnant or in their first year after giving birth. As a first-time mom with a history of miscarriage, everything is nerve-racking. My doula Skemie told me I could call her anytime, even late at night. I could ask her anything about my pregnancy, from what I should eat, what I should wear, or even how I should sleep. And while I had a great family doctor, I couldn't call her at 2 a.m. But doulas are expensive. Because they are

essentially your on-call advocate throughout and after your pregnancy, they can often charge up to \$2,000 or more, a luxury most people in my community who are uninsured or on Medicaid cannot afford. Some of us are weighing whether we should save to buy a house to provide stable shelter for our kids or get a car so we can drive them to school and doctor's appointments. The burden of child care, as well as the stress of financially providing for our families, often falls on Black women more than men. So we end up disregarding our own mental health. We often get to

a point where we break down, or worse. Statistics show that Black women are three to four times more likely to die from pregnancy-related causes than white women (during a time when most pregnancy deaths are preventable). I'm fortunate to have a well-paying job that provides me with enough money so I can pay my doula out of pocket. But too many Black women, and women in general, don't have the same privilege. Studies have shown that nearly 60% of pregnant women don't have regular insurance coverage during the nine months of

pregnancy, and half were uninsured at some point in the six months following birth. Passing HB 142 will allow us to take care of all our new moms and babies by covering doula services through Medicaid. We need to normalize caring for Black women and our maternal needs. Our families deserve better. And Ohio can become a model for the nation by passing HB 142 as part of the 2022-23 state budget.

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FROM THE LEFT MIKE PETERS

FROM THE RIGHT LISA BENSON

marginalized by the healthcare system and face systemic barriers to quality care due to explicit and implicit bias. First time mothers have so many questions and concerns every day, ones that need answers and attention for the health and wellness of baby and mom who might otherwise endure significant stress about all of the unknowns and uncertainties. After all, as the saying goes, "you don't know what you don't know." Kalesha spoke of her fear when she didn't feel the baby move and her

confusion when her doctor cautioned her to let him know if the baby's movement didn't feel "right", begging the question from her, "how do I know what 'right' feels like?" Furthermore, women often feel embarrassed to ask their doctor certain questions for fear of appearing silly or uneducated. Friends are great support, but they are not trained experts who can answer questions about pregnancy, especially if they also have never had a child.

That's where doulas come in - and fortunately, Kalesha had a friend who is one. Doulas not only provide



emotional, physical, and educational support to a woman who is pregnant or has recently given birth, but also act as advocates for the women they care for to make sure their voices are heard. She recognized the anxiety Kalesha was experiencing and suggested a doula might be very helpful during her pregnancy. At first, Kalesha felt the cost of a doula was too expensive, because it was not (and still isn't) covered by insurance, but as her pregnancy progressed, so did her anxiety. She decided working with a doula through the rest of her pregnancy would be the best thing

for both her and the baby. Kalesha made the decision to use a doula, and fortunately, she was able to pay out of pocket for doula care services, but many women who would benefit greatly from a doula cannot afford the cost of one.

HB 142, regarding Medicaid coverage of doula care services, would address the issue of cost. This bill is important because it allows more women to have access to evidence-based doula services. The bill was introduced by former Rep. Cawley and Rep. Brinkman, and among other important provisions, it would create standardized training and certification requirements for doulas and also would define scope of care, establish a four-year pilot allowing doula care to be covered by Medicaid, and provide for a pilot project in the Department of Rehabilitation and Corrections for expectant moms.

The doula who Kalesha worked with educated her on what to expect during her pregnancy, as well as the importance of prioritizing good nutrition, healthy behaviors, and alleviating stress. A doula often attends prenatal visits with the pregnant woman and acts as an advocate to make sure the woman's voice is heard and her concerns are addressed. However, due to COVID restrictions that permitted only one support person to attend the appointments, Kalesha attended prenatal visits with her partner and then reported back to her doula the results of the visit and was able to ask her questions about any tests or symptoms she was experiencing. During labor, the doula helped Kalesha stay calm, staying with her and explaining each step of the labor and delivery process. She lessened her pain by suggesting different positions that would make labor easier.

After Henry was born, Kalesha, like many new mothers, had difficulty breastfeeding, wasn't sleeping well, and generally felt run down and experienced chills and hot flashes. The doula visited Kalesha at home and provided basic education in breastfeeding, baby care, and sleep training as well as making sure Kalesha was eating properly and getting enough rest.

Kalesha would strongly encourage anyone who is pregnant to consider using a doula. As a first-time mother she feels she benefited from the level of care and comfort her doula provided as she faced this new experience, but she also believes that any woman who is looking for a more positive birth experience should speak with a doula and inquire more about the services they can provide.

She is also urging the Ohio legislature to pass HB 142, Medicaid coverage of doula care, and to allow women in Ohio the opportunity to access this vital health care option and begin to move the needle forward for maternal health.

### **CDF-Ohio Recommendations:**

- 1. Support HB 142-Medicaid Coverage of Doula Care.** The bill would standardize training and certification requirements, allow doula care to be covered by Medicaid in a four-year pilot project, and set up a pilot project in the Department of Rehabilitation and Corrections for expectant moms.
- 2. Recognize doulas as independent practitioners.** Doulas should act as independent practitioners and not under supervision of a physician or nurse. They are not providing medical or clinical services and are acting in a support and advocacy role for the women they serve.
- 3. Reimburse Doula Care at Market Rates.** Payment levels should be sufficient to support the care provided and attract quality caregivers.



*Children's Defense Fund-Ohio thanks the individuals, families, and health practitioners who have shared their stories for the Child Watch Ohio series and the funders of the Ohio Finish Line project for their support. For more information, please contact Kelly Vyzral, Senior Health Policy Associate at [kvyzral@childrensdefense.org](mailto:kvyzral@childrensdefense.org).*