

BARRIER TO CHANGE:

→ **Lack of support for a diverse birthing workforce, including problematic recruitment and lack of support for students in medical and health education programs.**

This document describes actions from the [Birth Equity Action Map](#) that can help to shift current structures that perpetuate a lack of support for a diverse birthing workforce which was identified as a barrier to change using the [Iceberg Model of Systems Thinking](#). Click [here](#) to view these actions in the interactive Birth Equity Action Map.



ACTION



DESCRIPTION



RESPONSIBLE SYSTEM ACTORS

ACTION	DESCRIPTION	RESPONSIBLE SYSTEM ACTORS
<p>Combat bias through training, education, and policy^{3,4}</p>	<p>Combat bias through workforce training, education, and hospital-level policy change. Specifically, this might look like:</p> <ul style="list-style-type: none"> Updating nursing and medical school curriculum Offering trainings (in medical schools and to current providers) that focus on protecting birthing parent autonomy, addressing racial biases, and promoting respectful maternity care 	<p>Health systems, Hospitals, Professional medical associations, Medical and health education programs</p>
<p>Fully integrate doulas and midwives into birthing care teams^{1,3}</p>	<p>Fully integrate doulas and midwives into care teams by assessing and changing policies limiting their involvement, developing strong partnerships between health systems and community-based organizations, and supporting doula/midwife cooperatives and training programs.</p> <p>This must include attention to unintended consequences such as the prioritization of doulas and midwives associated with health systems over community-based doulas.</p>	<p>Community-based organizations, Health systems, Hospitals, Payers, Professional medical associations</p>
<p>Fund efforts to grow and strengthen the workforce^{1,3,5}</p>	<p>Dedicate funding to building a diverse birthing workforce. Specifically, this might look like:</p> <ul style="list-style-type: none"> Funding to grow the birth equity workforce (e.g., midwives, doulas, etc.) Funding for state-level advocacy to improve and expand access to midwives and doulas (e.g., Medicaid coverage, licensing policies, scope of practice, etc.) Funding to strengthen the existing workforce to support providers in becoming birth equity champions 	<p>State and local health agencies, Federal agencies, Private funders</p>
<p>Implement and strengthen team-based care approaches^{3,4}</p>	<p>Implement and strengthen team-based care approaches in order to provide cohesive, collaborative care to birthing people and their families. This should include OBGYNs, doulas, midwives, mental health professionals, pediatricians, community health workers, community nurses, home visitors, etc.</p>	<p>Health systems, Hospitals, Payers, Professional medical associations</p>
<p>Recruit, train, and support diverse provider workforce^{2,3,5}</p>	<p>Recruit, train, and support a diverse community-based birthing provider workforce, including doulas, midwives, lactation consultants, and perinatal mental health specialists. This might include developing interdisciplinary clinical training models and empowering clients and community members to join the birth equity ecosystem through scholarship opportunities, training, and hiring.</p>	<p>Community-based organizations, Private funders, Health systems, Hospitals, Medical and health education programs, Legislators</p>



Funding & Acknowledgements

The Birth Equity Action Map was developed by the Association of Maternal and Child Health Programs (AMCHP), UNC Gillings School of Global Public Health, and Vijaya K Hogan Consulting LLC with funding from the Pritzker Children's Initiative.

Sources

Actions were synthesized from a two-part Systems Mapping to Advance Birth Equity workshop with 48 diverse actors representing federal, state, local, community, and family birth equity partners as well as the following recommended recent sources that have called for specific actions to advance birth equity.

1. Black Mamas Matter Alliance (2023). Black Mamas Matter: In Policy and Practice: A policy agenda for the Black maternal health, rights, and justice movement.
2. Institute for Medicaid Innovation (2023). Innovation in Perinatal and Child Health in Medicaid.
3. National Birth Equity Systems Mapping Workshop (2023). AMCHP Virtual Workshop, May and June 2023.
4. National Partnership for Women and Families (2023). Raising the Bar for Maternal Health Equity and Excellence.
5. New Jersey Health Care Quality Institute and The Burke Foundation (2022). Delivering Better Care: Midwifery Practice in New Jersey.

Participating Organizations (in the workshop or feedback sessions)

- Alliance for Early Success
- Birthing Cultural Rigor, LLC
- BirthMatters
- Black Mamas ATX
- CityMatCH
- Family Solutions: A Program of the SC Office of Rural Health
- Funders for Birth Justice and Equity
- Georgetown University Center for Children and Families
- Giving Austin Labor Support
- Greater Newark Health Care Coalition
- Hand to Hold
- Healthy Mothers, Healthy Babies Coalition of Georgia
- HRSA's Maternal and Child Health Bureau
- Institute for Women and Ethnic Studies
- Intermountain Health RMOMS Program
- Mama Sana Vibrant Woman
- Mamatoto Village
- March of Dimes
- Maternal Health Equity Collaborative
- Maternal Mental Health Leadership Alliance
- Merck for Mothers
- Minnesota Indian Women's Resource Center
- National Healthy Start Association
- National Institute for Children's Health Quality
- National Partnership for Women & Families
- Our Journ3i
- Philadelphia Department of Public Health
- Preeclampsia Foundation
- Rhode Island Department of Health
- Sedgwick County Health Department
- St. Joseph County Department of Health
- Starting Out Right
- The BEE Collective
- The Reilly Group
- Trenton Health Team
- The U.S. Department of Agriculture
- U.S. Department of Labor
- Utah Pacific Islander Health Coalition
- University of Washington's Parent-Child Assistance Program

