

Doula Supports Steer Mother's Hard Journey to a Healthy, Happy End



Today, Amiel describes herself as a proud nursing mother of a 17-month-old son. For her family, that's a happy ending to a long and sorrow-filled journey.

Amiel is a community health worker. Before becoming pregnant with her son, she was working at the [Statewide Parent Advocacy Network](#) (SPAN) and trained as a doula as part of its Black Women Supporting Black Women doula program, which is supported by the New Jersey Title V block grant program. However, Amiel never practiced as a doula because she became pregnant for the third time and it was a high-risk pregnancy.

During Amiel's first pregnancy, she carried fraternal twins. While she did receive pre-natal care, her doctor did not provide information about potential risks, such as premature labor or the possibility of a C-section, nor connect her with any support services for breastfeeding. When Amiel experienced cramping at 34 weeks, the on-call OB-GYN, suspecting preterm labor, recommended that she go to the hospital. When the medical staff checked for heartbeats, they realized one of her babies was going to be stillborn.

Amiel had an emergency C-section, and her surviving daughter was transferred to the Neonatal Intensive Care Unit (NICU). Afterwards, the hospital social worker did not wait until Amiel's husband was with her to give

her a box with a footprint and picture of her daughter who died. In lieu of comfort and support, the nurses offered her painkillers. Aware of the risks of addiction, Amiel declined. Despite her initial refusal, the nurses, and even the doctor, kept offering pain medication. Having to answer the same question repeatedly added to her anguish and stress. To date, Amiel and her husband have not opened the box.

It was agonizing for Amiel and her husband to come home from the hospital without their daughter, who remained in the NICU. Hoping she would eventually be able to breastfeed her daughter, Amiel did try to pump milk. However, in dealing with the loss of one baby and lack of breastfeeding support, she was unable to produce enough milk. Missing an opportunity to connect her with lactation support, the pediatrician told Amiel to feed her daughter formula. During her six-week checkup, Amiel's OB-GYN told her to wait six months before getting pregnant again. Even though Amiel followed her doctor's advice, her second pregnancy resulted in a miscarriage.

When Amiel became pregnant the third time, she received doula services from Black Women Supporting Black Women. As part of the New Jersey Title V program's commitment to improving maternal and infant health for women of childbearing age and decreasing racial, ethnic, and economic disparities, the program funds community

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organizations such as SPAN to ensure women of color receive prenatal care and support.

The doula services, which Amiel describes as “mind blowing,” are provided at no cost to families. Two community doulas made sure Amiel, her husband, and their daughter were doing well throughout the pregnancy. They provided information about Amiel’s nutritional needs, helped her cope with and manage her stress about her first two pregnancies and her fear of having another miscarriage, and prepared her for any tests she would need. They even had a private joke about how Amiel enjoyed the super-sugary drink, which most pregnant women seem to dislike, that is part of testing for gestational diabetes.

The doula even discussed with her the items, such as pajamas for herself and a going home outfit for the baby, that, for this pregnancy, she had time to pack in preparation for going to hospital for the birth. The doula and Amiel celebrated this small event, which is easy to take for granted when the pregnancy is not high risk.

When Amiel decided to have a vaginal birth after cesarean, the doula supported her decision, and one was in the delivery room with her, holding her legs during the birth. The doula also empowered her to breastfeed and connected her with lactation support. Breastfeeding support, which is so critical to new mothers, is why Amiel knew there was something wrong with how her newborn son latched on. During her first day home she was able to video chat with her lactation consultant, who realized the baby was tongue-tied, explained the options for feeding, and connected her to the right provider to release the tongue tie.

Amiel and her family are grateful for the investment and commitment the New Jersey Title V program has made toward improving the health of black women and black infant birth outcomes. Not only was it “comforting to have someone who looks like you helping you,” she says, but the doula services helped her family “rewrite the story of their first pregnancy, go home from the hospital with their new baby, and have a happy ending.”

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1825 K St., NW, Suite 250
Washington, D.C. 20006
202-775-0436
www.amchp.org



P.O. Box 37188
Albuquerque, NM 87176
888-835-5669
www.familyvoices.org