

## *Opinion / Perspective*

# **Building a Hybrid Model of Birthing Support for Black Families**

By Elisha Jaeke, BS and Jessica Olson, PhD, MPH

During my first week of medical school, I began the all too familiar process of cold emailing. Having spent the past year working in public health and community outreach in Oakland, CA, I was now blindly seeking mentorship and opportunities to connect with the Milwaukee community. Dr. Jessica Olson immediately stood out as someone I could learn a lot from. Serving as an Assistant Professor in the Division of Community Health within the Institute for Health and Equity, Dr. Olson wears many hats. When we met, though, it became evident that she was most excited about her work with community partners. After describing my desire to work toward health equity and interest in the field of Maternal and Child Health, a smile lit up her face as she exclaimed, “You need to meet Ms. Blackwell!”

### **Ms. Dalvery Blackwell and the African American Breastfeeding Network (AABN)**

Ms. Dalvery Blackwell, an international board-certified lactation consultant, is a community legend. For the past twelve years, Ms. Blackwell has served as the Executive Director and Co-Founder of the [African American Breastfeeding Network](#) (AABN) – an organization dedicated to enhancing and improving parental and infant health. I had the honor of meeting Ms. Blackwell a few months ago and, even though our meetings were virtual, her warmth and passion radiated from the screen. It was clear that a large part of her life’s work is serving the community, and I was eager to assist in any way I could.

AABN was created to normalize breastfeeding by eradicating stigma, providing support, and increasing knowledge of breastfeeding rights in public, professional, or educational settings. Culturally relevant programming from AABN begins with prenatal education and support that extends through the postpartum period for the entire family. By providing breastfeeding education, support, and services—especially for families at risk for prematurity and negative birth outcomes—AABN is working to improve the health of mothers and infants in Milwaukee.

After learning of my interests, Ms. Blackwell invited me to an upcoming panel she would be serving on: [Black Birth: A Maternal Health Conversation and Resource Fair](#).

## **The Experience of Black Birth in Milwaukee**

That Saturday, I found myself at the Black Historical Society, surrounded by individuals passionate about serving Milwaukee mothers and eradicating maternal health disparities. The event included a screening of the documentary [Black Birth](#), followed by a panel discussion by Black OB/GYN physicians, public health workers, and other pregnancy professionals. *Black Birth*, directed by Haimy Assefa, shares the stories of Black expectant mothers as they navigate the joys and challenges of pregnancy. Throughout the poignant film, the medical implications of racism in the United States are top of mind; Black women are three times more likely to die from complications of childbirth than white women. This large gap continues to widen as a mother's age increases, and these disparities are independent of socioeconomic status and educational attainment.

I grew up in the town of Hartford, WI. In this rural, predominantly white area just thirty-five miles from Milwaukee, not only are mothers less likely to die, but babies are far less likely to be born prematurely. Startling disparities in premature birth exist between Black and white families. Prematurity is the leading cause of infant mortality in Wisconsin, and while about 5% of white infants are born prematurely, over 15% of Black infants are. This large-scale problem requires broad solutions, like more broadly addressing the health impacts of racism in the United States. It also requires the grassroots work that AABN provides each day to its clients.

## **AABN's WeRISE Doula Program**

When the pandemic began, referrals to AABN's services tripled. The overwhelming demand for support as well as the inherent dangers of providing intimate, culturally responsive care during a pandemic could have been a devastating combination to Black birthing families and Black birth workers. However, Ms. Blackwell quickly assembled her network of supporters and applied for funding to train more doulas and birth workers.

The [WeRISE Program](#) was rapidly launched, and twenty-five African American doulas were trained to provide labor and delivery support and to protect both themselves and the families they serve from COVID-19. WeRISE doulas provide remote/virtual support, are trained to be up to date on hospital policies, provide back-up plans for families, and advocate for their comfort and safety during the birthing process.

Surprisingly, WeRISE doulas found that access to remote/virtual care was preferable for some birthing families. They have begun assessing the benefits of remote support to build a new, hybrid model of care that combines the best of in-person and virtual support for Black birthing families. Their continued efforts to provide outstanding birthing support hold great promise to eradicate the disparities in infant mortality between Black and white infants.

## COVID-19 and Pregnancy/Postpartum Care Survey

To further improve these hybrid approaches to pregnancy and postpartum care, I have joined Dr. Olson and Ms. Blackwell's team to assist in the distribution of a survey to better understand diverse reproductive experiences throughout the COVID-19 pandemic. While Dr. Olson is skilled in survey design and analysis, and Ms. Blackwell knows the community she serves incredibly well, neither had extensive experience with Qualtrics. I found I was able to meaningfully contribute to the team using my skillset to strength and simplify their data collection approaches. By gathering preliminary data about the in-person and remote pregnancy and postpartum experiences of birthing people, providers, and relevant organizations, we hope to develop tailored support for AABN clientele and expand this standard of quality care to all birthing people.



**An AABN Focus Group in 2018**

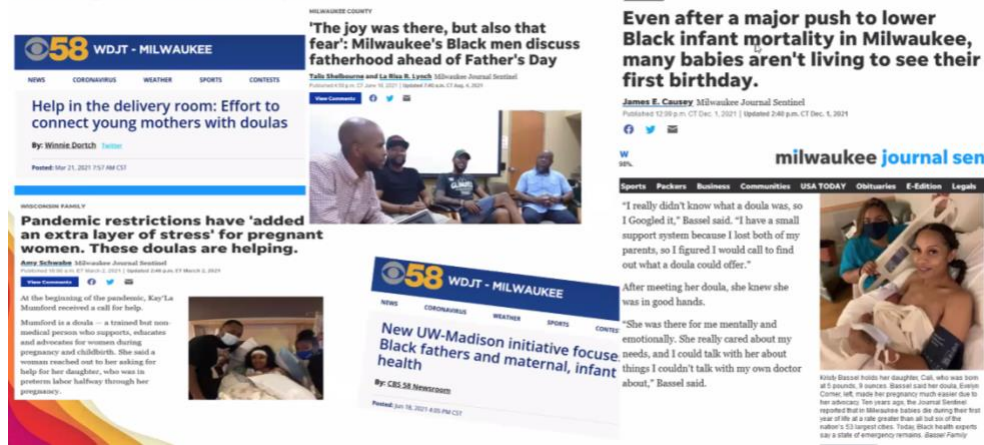
If you had a baby since 2021, are a provider of pregnancy/postpartum services, or work for an organization that does so, we would love to hear how COVID-19 has shaped your experience by taking part in our survey. Please reach out to me at [ejaeke@mcw.edu](mailto:ejaeke@mcw.edu) for more information.

## In Gratitude to AABN and Ms. Dalvery Blackwell

I am so grateful to my mentor, Dr. Jessica Olson, for recommending me to join the project and to Ms. Dalvery Blackwell for graciously welcoming me to the team. AABN is such an extraordinary organization, and I am eager to contribute what I can to support them throughout the next four years and beyond.

Please consider supporting the AABN mission by donating directly at <http://aabnetwork.org/donate>. To stay informed on AABN's important work, subscribe to the Mocha Milk Newsletter at [AABNetwork.org](http://AABNetwork.org).

## Sharing Our Mission Impact



## AABN Mission Impact Throughout 2021 in the Media

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