



Disconnects and Digital Divides: Black Women and Birthing People's Maternal Telehealth Experiences during the COVID-19 Pandemic

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Introduction

- Quality and respectful care throughout pregnancy and the postpartum period are critical to ensuring the health and well-being
- COVID-19 social-distancing restrictions have
 - disrupted access to health care services
 - increased the risk of adverse maternal and infant mortality among Black, Indigenous, and People of Color (BIPOC) communities
- Telehealth and other forms of remote services delivery are a promising means to improve equitable delivery of care to communities in the greatest need

Purpose

To explore

- the experiences of Black birthworkers in providing telehealth during the COVID-19 pandemic
- the experiences of Black women and birthing individuals receiving telehealth for maternal care during the COVID-19 pandemic
- benefits to and barriers/challenges with telehealth
- recommendations to improve the telehealth experiences of Black women and birthing individuals

Methodology – Data Collection

NBEC held three online listening sessions each with Black birthing individuals and birthworkers during August and September 2020

Sessions ranged from 60 to 90 minutes in duration and were structured by a facilitator's guide

Methodology – Data Analysis



Sessions were recorded and transcribed verbatim



Each transcript was double coded

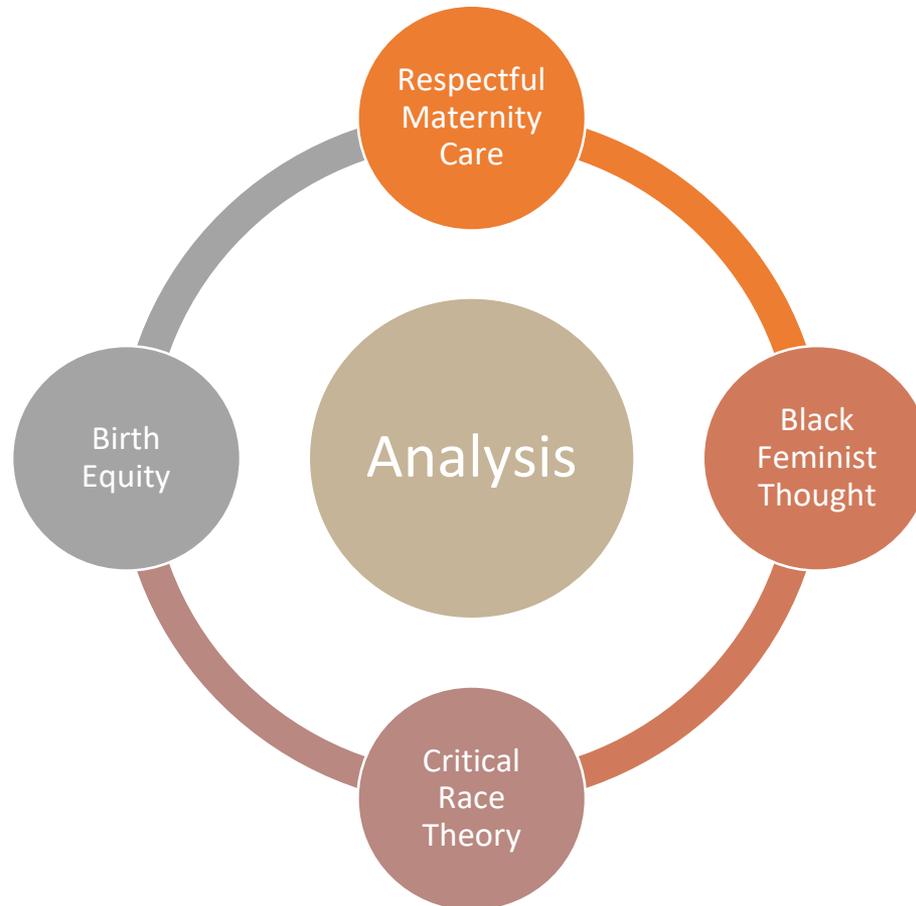


Thematic analysis



Participant feedback sessions

Guiding Frameworks for Thematic Analysis



Findings – Participant Demographics



9

**Birthing
Individuals**

Three months

Pregnancy

Postpartum

Three months

18 

Birthworkers

Type of Birth Work	N*
Community-Based Doula	1
Breastfeeding Peer Counselor	1
Full Spectrum Doula	2
Certified Nurse Midwife	2
Physician/Medical Doctor	2
Registered Nurse	3
Community Health Worker	3
Postpartum Doula	4
Childbirth Educator	4
Birth Doula	6
Other	6

*Not mutually exclusive

Findings – Black Women and Birthing Individuals

Theme 1. Positive and negative of experiences with pre-pandemic maternity care

Range of positive and negative experiences Black women and birthing individuals encountered prior to the COVID-19 pandemic

“Like I was pressured a lot into getting an epidural. Um, I was threatened that if I didn't go through with it, my husband wouldn't be able to go with me to, um, if like they will have to do a C-section and they say, “Well, he won't be able to come in if you don't get an epidural.” So, it was just a lot. And I was like, I'm not doing the hospital again. I'd rather do birth centers and go that, that route.”
– Michelle (Listening Session 1)

Theme 2. Barriers/Challenges receiving maternal care during the pandemic

Range of maternal health care barriers and challenges experienced by Black women and birthing individuals during the COVID-19 pandemic

So, they required me to have a blood pressure cuff at home and a scale... I had to take my blood pressure while I was on telehealth with the midwife, and then also jump on the scale just so they could get my vitals. For me, going through that process, I just thought about what if somebody didn't have access to a blood pressure cuff at home or a scale at home? That could be a potential barrier for them in the experience.”
– Mia (Listening Session 2)

Theme 3. Navigating social and emotional needs during the pandemic through self-empowerment and support

Descriptions of how Black women and birthing individuals navigate their social and emotional needs during the COVID-19 pandemic

“Um, I already, we were talking about Black maternal health and mortality and all these things. So, when you hear about these statistics and you try to empower yourself with tools to not fall into one of those news stories, one of them is making sure that you have other people that can advocate for you as well, rather, a partner or doulas or someone else.”
–Toyin (Listening Session 1)

Theme 4.
Dissatisfaction with
medical care and
seeking alternatives

Range of dissatisfying
experiences Black
women and birthing
individuals had with
maternity care

“Um, so it would be great if there was just a little bit of a slowing down for patients around or, or someone’s saying, “What are your questions? What are your concerns?” Like what is the birth plan that you would like? Those are the questions my doula asks me, but my health care standard healthcare providers don’t ever ask me that.” -Cherrice (Listening Session 1)

Theme 5.
Telehealth benefits

Descriptions of benefits
Black women and birthing
individuals experienced by
receiving maternity care
via telehealth

*“I wouldn’t personally prefer it, but I guess it would provide more flexibility. So at least you might not have to take off work or take away time from doing other tasks. The phone is always with you, so I definitely feel like it provides a lot more flexibility and freedom with your care.”
-Mia (Listening Session 2)*

Theme 6.
Telehealth
perception and
experiences

Descriptions of Black
women and birthing
individuals’ perceptions
and experiences with
receiving maternity care
via telehealth

“Prior to COVID, in my office visits were lengthy. [inaudible 00:43:14] 30 to 45 minutes. Everything just seemed a little bit more relaxed. It didn’t seem like the doctor was rushing in or rushing out, or even the assistant that was helping. I feel like with COVID, everybody’s... it’s okay. People want to minimize so their risk, so their interaction with you is much shorter. After COVID, it just was too quick. 10 to 15 minutes, you might as well double park.” -Angela (Listening Session 2)

Theme 7.
Improving
telehealth
experience

Recommendations to
improve Black women and
birthing individual’s
experience receiving
maternity care via
telehealth

“...to provide the tools that are needed to make these checkups work...not everybody can afford a Doppler or blood pressure gauge or anything like that....If you can’t have the visit in person, provide the tools that are needed to succeed in your visits” – Toyin (Listening Session 1)

Findings – Birthworker Themes

Theme 1. Disruption to provision of care during the pandemic

Descriptions of birthworker experiences in providing Black maternal health care during the COVID-19 pandemic, including the impact of the pandemic on their work and their clients and barriers

*"I would say, which becomes a barrier for me is how do I effectively serve you when I cannot be in the support position that I once could be, because I can't physically be there and you have to kind of choose who's going to virtually be there. So that's something that I've seen. That's been, um, been quite a challenge during this time, during the COVID pandemic time."
-Imani (Listening Session 2)*

Theme 2. Barriers to providing Black maternal health care before pandemic

Description of barriers to Black maternal health care provided prior to the COVID-19 pandemic

*"Um, compassion is not there, um, is strictly about them filling their pockets. And so that's why I stepped in, um, in the background, gaining all this knowledge from them. I'm just blown away at how they are claiming to serve a vulnerable population, but the compassion isn't there. So for, for me, I would say the barrier is representation. We need to have more of us serving in these seats and more of us having our hands on that knowledge and passing it down to our communities because we know what we need."
-LaToya (Listening Session 2)*

Theme 3. Inequities and discrimination in Black maternal health care

Descriptions of inequities in Black maternal health care driven by dominant cultural discrimination and racism

"Because living day in and day out as a Black woman, causes a lot of stress on the individual and the men. And we won't forget them, but I think that not enough is being done to address those issues and they are serious issues. The COVID virus brought it all out...the inequity of the healthcare and also how people of color are treated going to these places." – Ebony (Listening Session 1)

Theme 4.

Experiences in providing telehealth

Descriptions of birthworker experiences in providing Black maternal health care during the COVID-19 pandemic

"I think for some of the moms, it's a bit of a challenge who aren't necessarily used to all of the technology. And so sometimes instead of it just being, you know, a Zoom, it's just a phone call, you know, just going over the information as if they were in front of me. But just knowing that we don't have face-to-face interaction it gets better when I do stop by their homes to drop things off because they see me, they feel comfortable, they share a little bit more during those times, and then for, for other families, it works well. So, I really just think it depends on the technology experience of the family."

-Rebecca (Listening Session 3)

Theme 5.

Barriers to and benefits of telehealth

Perceived benefits of and barriers to providing telehealth by birthworkers

"I feel like telehealth has modernized my practice, um, in the sense that I have another way of connecting with patients, especially younger patients. I know this is primarily for OB care, but from the GYN perspective, you know, I've been able to provide contraceptive counseling to my younger patients. Um, and, and that has been instrumental that I'm just a video chat away. Um, and, and the barrier of having to schedule an appointment, come to an appointment, et cetera, has been eliminated."

-Christina (Listening Session 1)

Theme 6.

Recommendations to improve the telehealth experience of Black women and birthing individuals and Black birthworkers

Recommendations to improve Black women's experience receiving maternity care via telehealth and Black birth workers experiences providing maternity care via telehealth

"We're in the community, we're doing work that a lot of these white-led organizations won't do, but also don't have the cultural competency to go into these neighborhoods to actually do the work... So I would really love to see more of the funding centered around and being intentional in saying Black led, Black woman-led, you know, because it just becomes like a free for all, for everybody to put their name in a hat. Um, and when you start getting down to the root of who's getting what it's always our organizations to be able to receive the last little bit of money that's left... but then all the burden is placed upon us to do the work with little to nothing." - Rebecca (Listening Session 3)

Recommendations

Recommendations to Improve Care provided by Black Birthworkers

Integrate telehealth into patient records and automate prompts for direct referrals to social services

Provide birthworkers a livable wage, subscriptions for virtual platforms, and telehealth tools

Invest in Black birthworkers and community-based Black women-led organizations to have the greatest impact and expand the provision of maternity care services to populations lacking access (including low-income, Black and Brown undocumented, limited tech literacy, etc.)

QUALITY OF CARE

- Practice cultural humility and recognize the specific issues Black women and birthing individuals encounter during pregnancy and postpartum
- Provide translators during telehealth visits for patients
- Practice active listening during appointments
- Build rapport and exemplify the following characteristics: genuine, empathetic, engaging, open, and honest
- Provide individualized care
 - Providers should be informed about the patient's medical history, any existing conditions, or medical concerns
- Provide birthing individuals tools to successfully engage in telehealth (Wi-Fi [e.g., hotspots], Electronic devices, medical equipment [e.g., blood pressure cuffs, dopplers, scales])

DECISION-MAKING

- Provide client-centered and client-led services where clients lead decision making about their care
- Respect patient autonomy and offer hybrid models of care (e.g., combination of in-person and telehealth)
- Incorporate various modes of communication (like text messages and phone calls, in addition to Zoom), as preferred by clients in order to "meet them where they are"

EDUCATION

- Educate providers about quality and respectful maternity care
- Educate providers on the detrimental stereotypes of/assumptions about Black women that contribute to their dehumanization as well as Black women being ignored and disrespected by their providers while receiving care
- Provide education to clients so they are empowered to advocate for themselves and to make decisions about their care
- Provide education to patients on how to use telehealth equipment and technology
- Develop tools to navigate through health care systems and self-advocate for health care needs and desires
- Acknowledge how racism (in all its various forms), as well as other intersecting oppressions (e.g., gender identity and expression, sexual orientation, class, citizenship, ability), impacts the care that Black women receive

Thank You

