

Community

Impact Report 2023



BE loved BIRTH
BLACK CENTERING

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Photography by

Linda Jones, Birth & Postpartum Doula, Black Woman Birthing Justice Doula Collective.

Photos are all from the complimentary pregnancy photoshoot that is offered to all Beloved Birth Black Centering participants. Big thanks to all of these families for giving us permission to share your gorgeous images!

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Welcome to the 2023 Inaugural Community Impact Report for Beloved Birth Black Centering! This report provides extensive background on our innovative perinatal care program, and highlights impact data, and quality improvement initiatives. The executive summary can be found [here](#)



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A Personal Note

FROM OUR DIRECTOR



Jyeshia Wren, CNM

Midwife & Founding Director

I identify as a Black, mixed-race woman. My mother is white, from the Midwest, while my father was a Black man from New Orleans. I was born in my parents' home in New Orleans. Growing up, I listened to my mother's stories about her prenatal care and birthing experience. She was cared for by a midwife with whom she felt both comfortable and safe. With a smile of satisfaction and a touch of nostalgia, she often recounted how smooth and gentle my arrival was, saying, "the midwife just used some olive oil, and out you came." From those early stories, I grew to see childbirth as a natural physiological process that can be both positive and empowering, and to understand that midwives are experts in supporting this journey.

Growing up I had no idea about the increased level of risk I would face in pregnancy as a Black woman. It wasn't until studying Sociology in college that I learned about America's Black maternal and infant health crisis. I felt horrified

and enraged by the harsh reality of this tragic impact of racism on my community. The realization that racism is threatening our lives while we bring new life into the world felt simply unacceptable. This sparked a fierce determination in me to learn everything I could about this crisis and to find a way to be part of the solution.

I learned that while midwives are indeed critical to high-quality perinatal care, America's current midwifery workforce is both severely understaffed and overwhelmingly white— a direct result of a racist campaign led by white doctors to eliminate Black and other non-white midwives they viewed as competition. This shortage makes it much harder for Black women to access midwives, let alone ones that they feel most comfortable and safe with. The resulting lack of diversity in the midwifery workforce has left the field ill-equipped to address racism-based perinatal disparities. This legacy of injustice ignited my calling to become a midwife and

According to our mamas, we've created a loving, stress relieving perinatal safe space where they feel heard, respected, and empowered.

help rebuild access to high-quality, community-centered, respectful and empowering care that every mother and family deserves.

In 2019, as a midwife in Alameda Health System (AHS), I had the amazing opportunity to join a collaborative working group of passionate and committed perinatal equity advocates, mostly Black and mostly women, from AHS and Alameda County Public Health Dept to design a Black Centering group perinatal care program for our county. As a result, Beloved Birth Black Centering was born and launched in 2020, and I became its founding director. Leading this program has been a tremendous privilege and honor. Thank you to everyone on our team and in our ecosystem who has supported my growth into this role. I am so grateful!

As I sit and reflect on what we've built together since 2020, I'm incredibly proud of all that we've accomplished. The data is in, and it's powerful. According to our mamas, we've created a loving, stress-relieving perinatal safe space where they feel heard, respected, and empowered. And according to an analysis of our health system's clinical data, our Beloved Birth mamas are more likely to carry their babies full-term and birth them at a healthy weight. These are potentially life-saving impacts. Across the country, inadequate access to high-quality, responsive, and respectful care is a primary factor in many cases of Black maternal mortality. And preterm birth and low-birth weight are primary drivers of infant mortality. So we know that we are on

the right track with Beloved Birth, and achieving transformative impacts in our community. I'm excited to share the details of our achievements in this report.

This transformational impact is thanks to Beloved's greatest strength, our people. I'm in awe at the love, brilliance, wisdom, patience, and deep commitment of the amazing humans on our team; our midwives, high-risk pregnancy doctor, public health professionals, doulas, community health worker, lactation specialist, public health and health system leaders, Beloved Birth alumni, and more. In the midst of a crisis fueled by anti-Black racism, our team has remained unapologetically and joyfully who we are, putting our entire hearts into this work of creating culturally reverent and safe perinatal care for our people. And our small but mighty team has done all of this while being significantly short-staffed. I want to take this opportunity to give them their flowers and say thank you! You demonstrate daily that we don't need to be saved by some outside entity. The solutions we need are right here in our community.

One thing that's on my mind a lot these days is the challenge of caring for myself and our team of wonderful Black women in this work with me as we work towards liberation, birth justice, and perinatal equity. Creating Beloved Birth has truly been a labor of love. This work brings a lot of joy and satisfaction, but it's also really heavy for us. As Black women ourselves, we are being weathered by the same oppressive systems that we must work to dismantle in order to create safe perinatal spaces for the Black families in our care. In our capitalist society, underfunded and understaffed health systems and public health departments around the country are overworking and burning out their healthcare providers and staff, all in the name of 'mission-driven care'. But here's the thing, if the mission requires us to sacrifice ourselves for the cause, the mission is profoundly flawed and we have to re-write it.

In the wake of the 2024 presidential election results, we know that the struggle for reproductive healthcare, health equity, and birth justice is going to get harder in the coming years. We are extremely committed to this work and will continue to grow Beloved Birth, but now is also a time for us to double down on our rest and self-care. Audre Lorde teaches us that caring for ourselves "...is not self-indulgence. It is self-preservation, and that is an act of political warfare," (A Burst of Light and Other Essays). In her book, *Rest Is Resistance: A Manifesto*, Tricia Hersey writes that, "We must lighten our loads. Survival is not the end goal for liberation. We must thrive. We must rest."

These messages are so important right now. We have to ensure that we take a holistic view of our work, understanding that our team's health and wellness is just as important as that of our patients, and that they are interconnected. This will require significantly increasing the size of our team so that we can share the load in a healthier way, and invest more time, energy, and resources in our "healing the healers work". I'm happy to share that we have some institutional leadership

and philanthropic donors who share this understanding and will support our efforts toward a system of community-centered perinatal care that is healthy and liberating for us all.

I'm looking forward to this coming year, knowing that we're just getting started. We remain full of love, hope, and big innovative dreams for the future of Beloved Birth. We got us!

Thank you so much for taking the time to learn about our work. We love to make new friends, collaborate, and expand our ecosystem. Please join our mailing list if you want to stay in touch or share any thoughts or feedback with us. We'd love to hear from you.

In solidarity,

Jyeshtha Wren

Midwife at AHS, and Founding Director of Beloved Birth Black Centering & Beloved Birth Collective

Let's Stay Connected!

Scan this QR code to join our mailing list



Our Vision

Beloved Birth Collective envisions a world where Black mamas and families have all the rights, loving care, and resources needed to not just survive, but thrive in pregnancy, birth, and postpartum.

The vision for our work is grounded in the vision of the Beloved Birth Collective, and informed by the birth and reproductive justice frameworks. Inherent within our vision for Black mothers and birthing people is a respect for our right to choose our care team and give birth in the environment that feels safest and most supportive; whether at home, in a birth center, or in a hospital. We are committed to helping Black mothers, birthing people, and families have empowered, liberating and joyful experiences bringing new life into this world.

And we know that in order to realize this vision for Black families, we must also have a transformative vision for our perinatal care

systems. We advocate for a perinatal healthcare system that is made up of well supported midwifery-led, multidisciplinary care teams who reflect the vibrant communities they serve and work collaboratively in integrated and well resourced health systems to provide high quality, community centered care. More specifically we envision a world where...



Midwives are the first line provider for pregnancy birth and postpartum care, are easily accessible in all communities, and supported to provide gentle, family-centered care in all birth settings (home, birth center, and hospital).



Doctors are available for support and collaborative care of high-risk pregnancies when medical complications arise.



Care options include a wide range of services to support holistic wellness like nutritional support, mental health support, massage therapy and other bodywork, prenatal and postpartum exercise, lactation support, doula support, pelvic floor therapy, and more.



Our Reality

A National Epidemic of Preventable Complications

Sadly, the reality we face in this country is far from our vision. Disparities rooted in racism are evident in Black perinatal care experiences and health outcomes. These disparities arise from a mix of structural racism—discriminatory practices that hinder access to essential needs and resources for maintaining good health, such as safe housing, nutritious food, quality education, employment, wealth, and protection from police violence and unjust incarceration—alongside implicit bias and obstetric racism, which refers to the discriminatory treatment by healthcare providers in the perinatal care setting¹. Additionally, the physiological “weathering” caused by the toxic stress of experiencing racism “wears down” our bodies and makes us more vulnerable to health problems². Together, these

factors contribute to the Black maternal and infant health crisis in our country. In the United States, Black women and birthing individuals face preventable complications during pregnancy, childbirth, and the postpartum period, with Black women being 3-4 times more likely to die around the time of birth³. Furthermore, our infants are at a higher risk of being born prematurely and at low birth weight, and they are more than twice as likely to die within their first year compared to White infants^{4,5}—a gap that has remained largely unchanged for over fifty years⁶. Mortality is just the tip of the iceberg; many more Black mothers and birthing individuals endure near misses and traumatic birth experiences marked by disrespect and disregard.

1 Hailu EM, Maddali SR, Snowden JM, Carmichael SL, Mujahid MS. Structural Racism and Adverse Maternal Health Outcomes: A Systematic Review. *Health & place*.

2 Geronimus AT, Hicken M, Keene D, Bound J. “Weathering” and Age Patterns of Allostatic Load Scores Among Blacks and Whites in the United States. *American Journal of Public Health*. 2006;96(5):826. doi:10.2105/AJPH.2004.060749

3 Centers of Disease Control. Pregnancy Mortality Surveillance System. Maternal Mortality Prevention. May 20, 2024. Accessed September 18, 2024. <https://www.cdc.gov/maternal-mortality/php/pregnancy-mortality-surveillance/index.html>

4 Osterman MJK, Hamilton BE, Martin JA, Driscoll AK, Valenzuela CP. Births: Final data for 2022. *National Vital Statistics Reports*; vol 73, no 2. Hyattsville, MD: National Center for Health Statistics. 2024. DOI: <https://dx.doi.org/10.15620/cdc:145588>.

5 Ely DM, Driscoll AK. Infant mortality in the United States, 2022: Data from the period linked birth/infant death file. *National Vital Statistics Reports*; vol 73 no 5. Hyattsville, MD: National Center for Health Statistics. 2024. DOI: <https://dx.doi.org/10.15620/cdc/157006>.

6 Arias E, Anderson RN, Hsiang-Ching K, Murphy SL, Kochanek KD. Deaths: Final data for 2001. *National vital statistics reports*; vol 52 no 3. Hyattsville, Maryland: National Center for Health Statistics. 2003.



Solutions Identified... But Not Scaled

Although the scale of this crisis can feel overwhelming, the good news is that it doesn't have to be this way. There is absolutely nothing wrong with Black women, and we have effective solutions at our disposal. Several empowering strategies have been shown to address racism-based disparities and help Black women and birthing individuals not only survive but thrive during childbirth.

These include:

- Midwifery-led group perinatal care
- Racially concordant care

- Wrap around support support
- Childbirth education
- Doula services

While these evidence-based approaches exist, they have not yet been widely adopted across the country. Beloved Birth is committed to addressing this gap within our local community. We believe that with this knowledge of effective solutions, public health departments and healthcare systems have an obligation to implement these strategies to improve healthcare experiences and outcomes for Black women and birthing families.

Our Mission

The Beloved Birth Collective works to empower Black mamas, midwives and community to lead health system innovation & redefine perinatal care for the Black birth justice movement.



Who We Are



Our Ecosystem of Community Collaboration

Our Founding Organizations



The Alameda County Public Health Department (ACPHD) has dedicated over 80 years to enhancing the health and safety of its residents and their neighborhoods. Their mission focuses on partnering with the community to “ensure the optimal health and well being of all people through a dynamic and responsive process respecting the diversity of the community and challenging us to provide for present and future generations.” Within the Family Health Services Division, ACPHD plays a vital role as a co-owner and operator of Beloved Birth Black Centering, providing staff, funding, and the necessary infrastructure to support Beloved's comprehensive wrap-around social support services and funding for program leadership.



Alameda Health System (AHS) is an integrated public health care system that includes three acute care hospitals, an affiliate acute care hospital, a psychiatric hospital, four ambulatory care wellness centers, five post-acute facilities, and the only adult Level 1 Trauma Center and psychiatric emergency department in Alameda County. Midwifery-led labor and delivery services are offered at AHS's Birthing Center at the Wilma Chan Highland Hospital in Oakland. Established in 1864 as the Alameda County Infirmary, AHS has a rich history of serving the community and has built a legacy centered on a mission of “Caring, Healing, Teaching, Serving All.” Under the leadership of the Obstetrics, Midwifery, and Gynecology (OMG) Department, and with support from executive leaders,

AHS collaboratively launched the Beloved Birth Black Centering program in 2020. AHS acts as a co-owner and operator of Beloved Birth Black Centering, providing staff, clinicians, and the necessary infrastructure to ensure quality clinical care services.



The Beloved Birth Collective was established in 2020 as a grassroots community collective to partner with ACPHD and AHS in creating and launching a Black Centering program for our county's publicly insured Black birthing community, leading to the birth of Beloved Birth Black Centering. The Beloved Birth Collective is growing into a non-profit organization committed to the success of Beloved Birth Black Centering and the birth justice movement. As a vital partner, the Beloved Birth Collective plays a key role in ongoing program design and quality improvement, wrap-around support services, and community engagement. Additionally, the Collective creates the community centered group facilitation and childbirth education materials used in this unique perinatal care program, provides professional development for the program's midwives and other team members, advocates for policy changes to support the sustainability of Beloved Birth Black Centering's evidence-based strategies, and serve as a resource for other communities seeking to offer Black-centered perinatal care.



Established in 1991, the Alameda Health System Foundation (AHSF) is a California-based 501(c)(3) nonprofit organization dedicated to promoting health equity within the communities served by AHS. AHSF aims to foster generational health and wealth while enhancing the overall wellbeing of these communities. The foundation actively seeks to generate community support and raise funds for the priority programs of AHS. Since 2021, AHSF has provided support for the Beloved Birth Black Centering initiative through philanthropic fundraising, grants management, accounting, and contracting services.



Established in 2015, the UC Berkeley Wallace Center is a multidisciplinary research and training center focused on reducing maternal and child health inequities, and diminishing the digital divide between those with ready access to the health benefits of technology and those without. The Wallace Center aims to "advance the health of parents, adolescents, and children using technology, innovation, and engagement with patients, users and communities". In 2022 the Wallace Center and AHS's Obstetrics, Midwifery, and Gynecology Department joined forces to create the Quality Improvement for Health Equity in Reproduction (QI4HER+) initiative, a community-university partnership to reduce health disparities and improve health equity in our community. QI4HER+ leverages the Wallace Center's research and evaluation capacity to support impact calculation and ongoing quality-improvement work of AHS's perinatal care services, with a focus on Beloved Birth Black Centering.



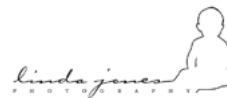
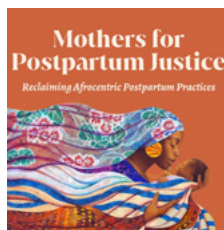
The Lullaby Project, a project of Carnegie Hall's Weill Music Institute, connects Beloved mamas and new parents with professional artists to write and sing personal lullabies for their babies, supporting maternal health, aiding childhood development, and strengthening the bond between parent and child.



Centering Healthcare Institute (CHI) is a national non-profit organization that supports healthcare providers across the country to change healthcare through the CenteringPregnancy group care model. With over two decades of experience as the go-to resource for group pregnancy care, CHI has helped nearly 500 practice sites implement and grow Centering in their communities. As a licensed Centering site, AHS has received support from CHI such as implementation and systems change support, training in group facilitation, and site approval for model fidelity and quality assurance.

Village of Community Partners

Embracing the “it takes a village” philosophy, the Beloved Birth Collective has fostered partnerships with a broad range of local community organizations, entrepreneurs, and care practitioners who are aligned with our values and mission. These essential collaborations enable our program to offer vital holistic wellness services, including fresh produce distribution, postpartum meal delivery, movement and exercise classes, massage therapy, Spinning Babies bodywork, doula support, lactation specialist services, and even photography for pregnancy or postpartum photoshoots.



A Snapshot of Our Beloved Birth Team

At the heart of our team is an amazing group of Black women who are passionate about birth and reproductive justice. Our team includes midwives, family support advocates, doulas, a lactation specialist, a maternal fetal medicine doctor, a massage therapist, a fitness trainer, photographers, and even an artist/illustrator. Many of us are mothers ourselves, in addition to being birth equity strategists, innovators, and community leaders.

Top row, left to right: Amber Bell, AHS Midwife; Briana Wilborn, AHS Midwife; Tia Nomore, Alumni; Linda Jones, Doula, Coordinator, & Photographer; Tanefer Camara, Lactation Specialist; Daphina Melbourne, ACPHD Perinatal Equity Initiative and Reproductive Equity Manager; Rukaiyah Simon, Doula; Christina Thomas, ACPHD Admin.

Bottom row, left to right: Alexis Perryman, Doula; Dr Martha Tesfalul, MFM, AHS via UCSF; Jyesha Wren, Midwife & Program Director; Breanna Pannell, Alumni & Doula, with her baby girl born in Beloved Birth; Danielle Davis, ACPHD Program Manager; Chantal Davis, AHS Midwife.



Our Perinatal Care Clinicians

At Beloved Birth, we know that an essential ingredient in the recipe for high-quality perinatal care is integrated collaboration between midwives and doctors.

We've built an amazing clinician team that collaborates closely to provide the highest quality of care for all pregnancies, whether they are normal or high-risk. At Alameda Health System (AHS) all of our prenatal care, Centering groups, and labor and delivery services at our Wilma Chan Highland Hospital are midwifery-led. As experts in supporting the natural journey of pregnancy and birth, our Certified Nurse Midwives (CNM) are the foundation of our care team; offering holistic low tech and high touch support with a focus on helping our families to

have safe, satisfying, and empowering birthing experiences. In the event of any medical complications beyond the scope of midwifery, our midwives partner with our AHS OB/GYNs and Maternal Fetal Medicine (MFM) doctors to ensure that every individual receives the medical care that they need. This collaborative care model for high-risk pregnancies is further enhanced by having a dedicated high-risk pregnancy doctor serving as our Beloved Physician Lead. Explore this special team below.



Jyasha Wren, CNM
Program Director



Amber Bell, CNM



**Dr. Martha
Tesfalul, MFM**



Beloved Birth has provided advanced training for all of our clinicians to become certified as Spinning Babies Aware Practitioners, equipping our team with skills to better support comfort in pregnancy as well as vaginal birth.



Maya Combs, CNM



Briana Wilborn, CNM



Chantal Davis, CNM



Katiana Carey-Simms, CNM

Our Family Support Advocates

Beloved Birth Black Centering groups are co-facilitated by a dedicated team of Family Support Advocates from our public health department's EmbraceHer team, embedded within Alameda County Health's Starting Out Strong program.



Our Family Support Advocates provide wrap-around social support, care coordination, resource connection and referrals to other Starting Out Strong programs as needed.



Danielle Davis, MPA
Program Manager



Sharae Blache



Monique Houston

Our Doulas

Doulas, labor support people, are also an important part of our care team, and are offered to all Beloved Birth Black Centering participants.

Doulas are provided through the Black Women Birthing Justice Doula Collective, as part of the Alameda County Public Health Department's Doula Services Program.



Linda Jones,
Doula Coordinator, Co-Founder of
Black Women Birthing Justice



Nicole Morris,
ACPHD Doula Service Program
Coordinator



Bria Bailey



Tsadae Neway



Alexis Perryman



Se'Lah Werner



Krista Hayes



Mysti Dyse



Dominique Shaw



Lynessa Flowers



Davon Crawford



Rukaiyah Simon



Breanna Pannell



**Tia Lindsey, AKA
Tia Nomore**

Our Values



**Birth &
Reproductive
Justice**



**Integrated and
Responsive Health
Systems**



Liberation



Holistic Wellness



**Respect & Bodily
Autonomy**



**Appropriate &
Accessible Medical
Intervention**



Intersectionality



Joy

What We Do



Our Solution to Black Perinatal Wellness

Beloved Birth Black Centering is our award winning, 'by us for us' group perinatal care program, honoring and centering Black mothers and birthing people while preventing racism from harming our health in pregnancy and beyond. Beloved Birth is our solution to black perinatal wellness!

Transforming Black Perinatal Care from Within our Public Safety-Net System

We understand that high quality perinatal care needs to be community centered and holistic, providing clinical services as well as connection to resources and referrals to support whole-person wellness in an easy to access way. That's why we designed Beloved Birth Black Centering to be collaboratively co-owned and co-operated by the Alameda County Public Health Department and AHS, rooted in the vision and community-based support of the Beloved

Birth Collective. This partnership has empowered us to transform Black perinatal care from within our county's public safety-net healthcare system, making services more integrated and easier to access for our community. Through this impactful collaboration, we have developed more of a "one stop shop" model of perinatal care where families can get both their clinical care needs met as well as more of their social support needs taken care of.

Built on a Foundation of 5 Powerful Strategies To Help Us Thrive

Beloved Birth Black Centering is perinatal care, and so much more. As a perinatal care program intentionally designed to address racism-based disparities and support Black women and birthing people to thrive, Beloved Birth combines 5 key strategies that we know work. Each one of our evidence-informed strategies has been described as a need and/or preference by Black mothers

and birthing people and/or has been shown in research studies to protect against at least one pregnancy-related complication.

Beloved Birth Black Centering's 5 evidence-informed strategies are...

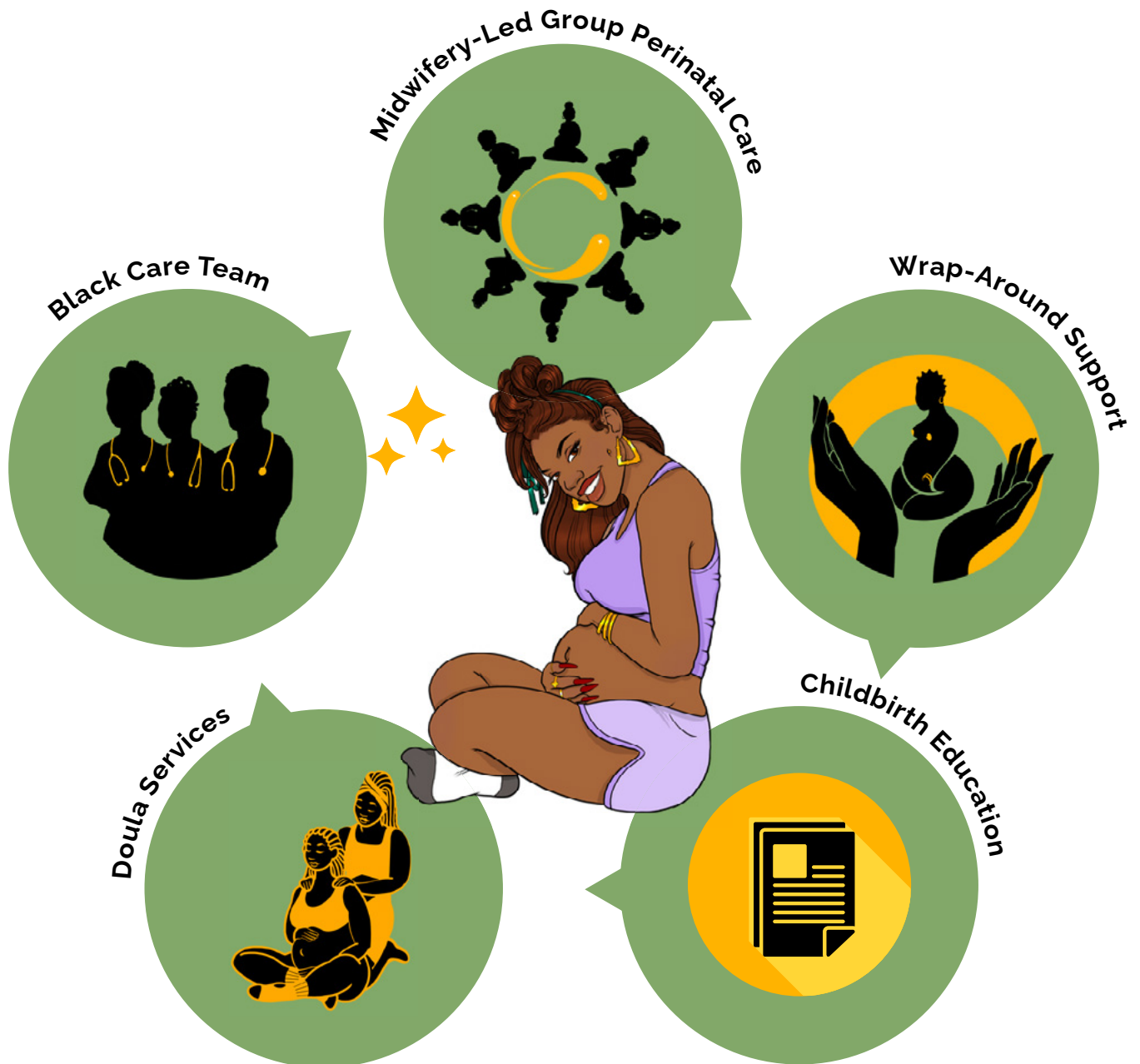
- An all Black care team that shares the lived experience of our community to

support access to community centered, non-discriminatory & respectful care

- Midwifery-led CenteringPregnancy group perinatal care that combines clinical care with group health education and provides built-in community with a group of 8-10 Black mamas due the same month, serving as a "village of support" for each other
- Wrap-around support with holistic wellness services, care coordination, and referrals to

ensure that our families have the resources they need for a healthy pregnancy and postpartum recovery

- Doula support to support birth preparation, provide continuous labor support, and help facilitate postpartum healing and recovery
- Childbirth education activities and materials, created by our midwives and artist to beautifully reflect our community and cover topics that are important to our families



Our Gold-Package of Black Love

Beloved Birth Black Centering is redefining prenatal care with our “Gold-Package of Black Love”, offering comprehensive services for holistic health and wellness during and after pregnancy, provided for free within our prenatal care program.



Therapy

Beloved takes a holistic wellness approach to prenatal care; recognizing that mental health and physical health are connected. We believe that everyone deserves access to therapy to help with stress and mood changes in pregnancy, and to support overall health and wellness. Beloved refers mamas to our public health department's Blue Skies Mental Wellness Team for support.



Calm App

Beloved provides access to the Calm App where our mamas and their families can get access to meditations and mindfulness tools to help lower stress, improve sleep and more.



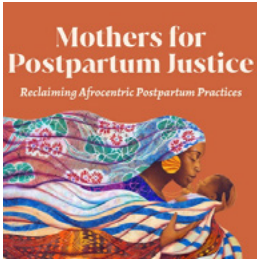
Massage & Body Work

Beloved collaborates with Souly Body to offer pre & postnatal massage, plus Spinning Babies bodywork.



Doula Support

Through Alameda County Public Health Department's Doula Services Program, Beloved partners with the Black Woman Birthing Justice Doula Collective to provide participants with a community doula for support in their pregnancy, birth, and postpartum recovery.



Nourish-Postpartum Meals

To support nourishment, healing, and rest after birth, Beloved partners with Mother's for Postpartum Justice's Nourish program. Nourish provides our mamas with restaurant prepared meals delivered to their homes for 6 weeks postpartum!



Fruits & Vegetables

Beloved collaborates with Mandela Partners to provide bags of fresh fruits & vegetables at our group visits.



Nurture Bag

Beloved partners with Mother's for Postpartum Justice to provide essential supplies so that our mamas don't have to stress about getting what they need for birth and baby.



Lactation Support

Beloved partners with lactation specialist Tanefer Camara, IBCLC, of TLC Consulting & Maternal Healing to provide one on one lactation and general infant feeding support, available as a home visit, on Zoom, or in office.



Photoshoot

Beloved partners with Linda Jones Photography to offer program participants a pregnancy or postpartum photoshoot that celebrates and honors their family.



Movement & Exercise

Beloved partners with Teila of Get Fit By Teila to offer movement and exercise classes after group visits.



Theories of Change



**Black
Maternal & Infant
Health Crisis**



**Beloved Black
Birth Centering**



**Happy & Healthy
Black Birthing
Families**

What is a “theory of change”?

A “theory of change” serves as a visual depiction of the transformation we aim to achieve and outlines our pathway to reach it. Think of it as a change roadmap that details the actions we plan to undertake and connects those actions to the

anticipated impacts and outcomes. Our theories of change guide us in illustrating how Beloved Birth will contribute to resolving the ongoing Black maternal and infant health crisis, paving the way for a future where Black birthing families flourish.



Our Ecosystem Theory of Change

We embrace the perspective that this work “takes a village”, understanding that our whole “ecosystem” related to perinatal wellness will need to be activated, coordinated and aligned to create high quality systems of community centered care for Black women and birthing people.

We embrace the perspective that this work “takes a village”, understanding that our whole “ecosystem” related to perinatal wellness will need to be activated, coordinated and aligned to create high quality systems of community centered care for Black women and birthing people. In 2023 we worked with Project Evident to engage our whole Beloved Birth ecosystem in a co-design process to create a theory of change, centered in the experiences and expertise of our Beloved Birth Alumni. This initiative incorporated one-on-one interviews, an alumni focus group, and a follow-up survey to validate the themes from the focus group, culminating in an Outcomes Summit. Below is a summary of the significant results from this endeavor. This theory of change provides a holistic overview of our work, capturing both clinical care and community/system change efforts. It illustrates how, as all our stakeholder groups—Beloved families, public health, healthcare systems, community birth workers, community partners, and funders—collaborate to advance Beloved’s mission, each group will experience transformative impacts.



○ Beloved works within community and the public health system to implement evidence-based solutions...

Clinical Program Level:

Beloved Birth's perinatal clinical programs, supported by an ecosystem of community collaboration.

Community & system Level:

Beloved Birth's community and health system-level strategy, coordination and advocacy.

generating transformational impacts across our ecosystem...

Beloved's Mission

- Beloved Families
- Public Health
- Health System
- Community Birth Workers
- Community Partners
- Health Funders

○ With the goal of long-term outcomes for Black mothers, birthing people and families, as well as our communities and health systems

For Beloved birth families:

- Better birthing and parenting experiences, with greater respect and empowerment
- Better health outcomes with lower risk of preventable complications

For Community & system:

- Greater understanding of Black Birthing People's experiences, needs, and solutions
- Increased capacity across our ecosystem of stakeholders to support evidence-based care and the birth justice movement

Our Perinatal Care Theory of Change

This theory of change centers on our perinatal care initiative, Beloved Birth Black Centering.

It details how we anticipate the program's five evidence-based strategies will contribute to improved perinatal health equity and wellness for Black women and birthing people. This theory of change was created with our partners at UC Berkeley's Wallace Center for Maternal, Child and Adolescent Health.



Theory of Change:

Beloved Birth Black Centering's Model of Care

Made possible by a strengthened community-centered perinatal equity ecosystem, powered by the Beloved Birth Collective



Mechanisms

Quality & Person-centered Care

- Promoting physiologic pregnancy & birth, & continuous labor support
- Cultivating patient-clinician communication, information sharing, & shared-decision making
- Ensuring respectful, compassionate, & responsive care
- Facilitating safe, timely, & integrated team-based care for normal to high-risk perinatal care

Holistic Social Support

- Cultivating social connection & community
- Providing direct access to holistic wellness services inclusive of nutrition & physical activity supports
- Connection/referrals to community resources
- Providing support & tools for mindfulness, resilience, & self-efficacy

Anti-racist Approach to Care

- Providing culturally reverent care focused on reducing stress and uplifting joy
- Centering racism as a root cause while de-stigmatizing & depathologizing Blackness
- Preventing obstetric racism
- Addressing health-related social needs associated with SDOH, resulting from structural racism



Our Scale & Reach

When we initially launched Beloved Birth Black Centering in October 2020, we offered six groups annually, each accommodating 8-12 participants.

However, due to the vast size of our health system and the enthusiastic interest in this model of care, we scaled up to twelve groups a year starting in September 2023, with one group for each due date month of the year. By the end of 2023, we had provided care for 20 groups and enrolled 213 patients, with 162 patients being "intensively served". We have maintained the schedule of 12 Beloved groups each year, leading to a rapid increase in the number of families we serve. For the latest reach data, be sure to check out our 2024 Community Impact Report (coming in 2025).

213

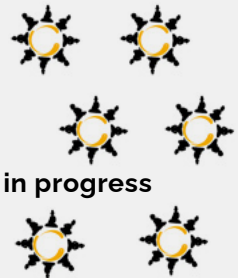
Patient enrolled

162

Patient intensively served

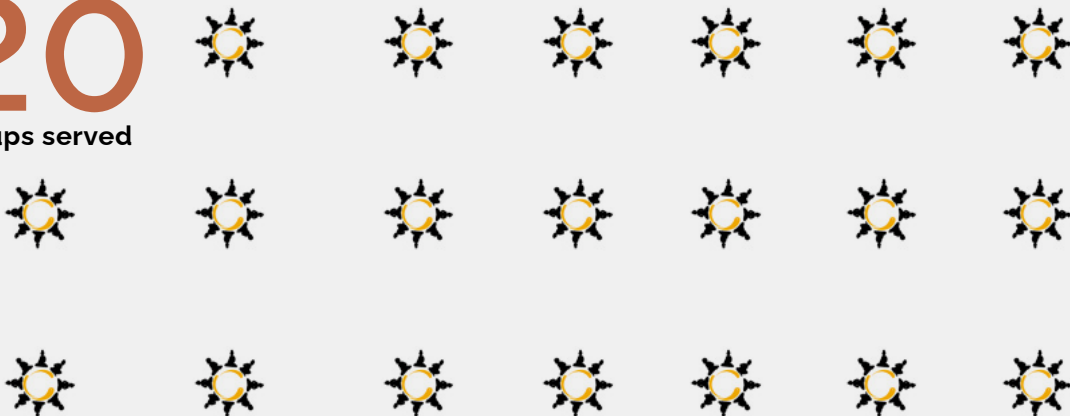
6

Groups in progress



20

Groups served



Who We Serve



Who We Serve

Our Community

Beloved Birth Black Centering was designed by Black women to intentionally address the needs of Black families. We are located in Oakland and serve the surrounding Alameda County. We are proud of and embrace the rich legacy of racial justice and health equity history of Oakland, including the free clinic work of the Black Panthers and more.

Who Can Enroll in Care

Since Beloved Birth Black Centering is a perinatal care program within AHS, our county's safety-net healthcare provider, families must be eligible for MediCal to enroll. Additionally, because our program is also part of the Alameda County Public Health Department, families need to live in Alameda County to utilize our services.



Normal to Medically Complex Pregnancies

Beloved Birth Black Centering offers midwifery-led, team-based care as outlined in our clinician team section. This approach incorporates a built-in Maternal-Fetal Medicine (MFM) specialist for high-risk pregnancies, allowing us to safely support a wide range of pregnancies—from completely normal or “low-risk” to those that are medically complex or “high-risk”.

Through the years of caring for our community in Beloved Birth Black Centering, we have found that many of our participants experience pregnancies impacted by significant medical risk factors or complications, such as high blood pressure, pre-eclampsia, diabetes, anemia, and mood disorders like anxiety and depression. And in fact, midwives and doctors within our health system frequently refer individuals with higher-risk pregnancies to Beloved Birth because we offer an enhanced model of care with services that have been shown to reduce the risk of pregnancy complications, particularly for Black birthing people.

Racial & Cultural Identity

Beloved recognizes and appreciates the diversity of Black peoples that we are and serve. While our team and the individuals that our program is designed to serve share the experience of identifying as African American and/or Black, we come from many different backgrounds and have lots of intersecting identities.

Since the birth of Beloved we have found that all kinds of Black people feel a strong desire to be cared for in this “by us for us” model. We think that this speaks to the strong impact that anti-Black racism has on our lives and health, as well as the therapeutic bonds and unity that we can feel across the African diaspora.

Many Beloved participants are Oakland natives or from the broader California Bay Area. And some are from other parts of the United States

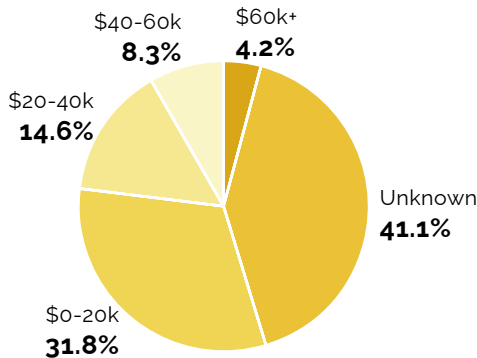
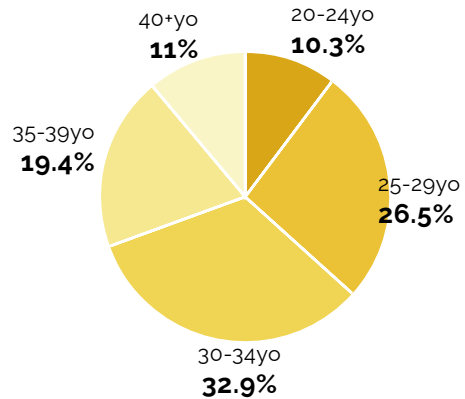
or the world, including African countries like Nigeria, Cameroon, Ethiopia, Eritrea and more (see the pins in the map to the right). Some of our participants identify as mixed or multi-racial, with other racial identities that include Latina/Hispanic and indigenous/Native American. And many of our participants have partners and family members from other cultures and racial groups, adding to the rich diversity of the community that we serve.



Other Demographics

Age

Our Beloved Birth Black Centering groups include mothers and birthing people of all ages. Most participants (63.3%) are over 30 years old.

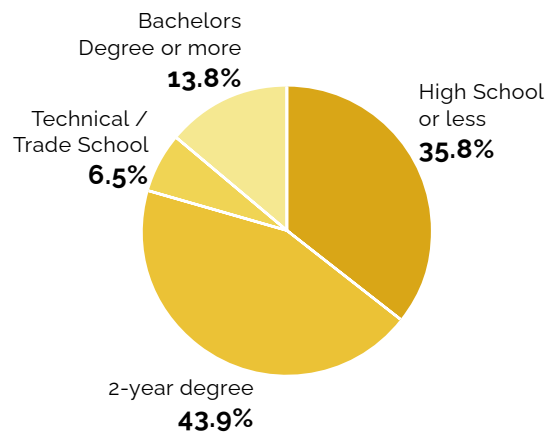


Income

Most of the families we serve experience significant financial stress. On average, 60% of Beloved participants reported that their annual household income was \$60k or less and reported having 2-3 dependents. In Alameda County, the living costs for a family of 3 is approx. \$146k/year.⁷

Educational Attainment

Beloved Birth participants have a wide range of educational backgrounds, and most have some college experience.



7. Economic Policy Institute. (n.d.). Family Budget Calculator. Retrieved August 2024, from <https://www.epi.org/resources/budget/>

Our Impact



Birthing Experiences & Outcomes

Learning About Beloved's Impact on Birthing Experiences & Outcomes

Our Tools & Data Sources

At Beloved Birth, we use multiple tools to help us understand our impact on birthing experiences and health outcomes.

Page 42

Mothers on Respect (MOR) index & Mother's Autonomy in Decision Making (MADM) from The Birth Place Lab

The MOR and the MADM are validated surveys developed by The Birth Place Lab to assess a person's experience of respect and autonomy in their perinatal care. We encourage all Beloved participants to complete these surveys after their birth.



Page 26-31

Theory of Change Co-Design with Project Evident

Through our work with Project Evident to co-design our updated Theory of Change, we learned a lot about the impact of Beloved on our community's care experiences. The data from this work was gathered through a focus group and a survey of Beloved alumni.

Page 46-53

Listen4Good Feedback Survey

We worked with Listen4Good to develop a program feedback survey that is given to all Beloved Birth participants at their last group visit. This survey allows our participants to provide valuable information on their experience in Beloved.

Page 54-56

Clinical Health Outcomes

To understand Beloved's impact on clinical health outcomes we looked at data from our participant's chart in Epic, AHS's electronic health record.





Better Birth Experiences

High Scores on Respect & Autonomy

What are respect and autonomy, and why do they matter?

Respect and autonomy are essential ingredients to safe, high-quality perinatal care. Mothers and birthing people deserve to be treated with respect and have the right to bodily autonomy -- to be able to make their own decisions about their bodies and health care. Measuring levels of respect and autonomy helps evaluate quality of care.



Validated measurement tools from the Birth Place Lab help us measure respect and autonomy

Birth Place Lab (BPL) is a research lab at the University of British Columbia focused on promoting reproductive justice and equitable access to high quality perinatal care. The BPL team includes researchers who are experts in creating reliable “validated” measurement tools, reproductive justice, midwifery, human rights law, and more. As a result of our team’s advocacy, the California Perinatal Equity Initiative added the BPL survey tools for respect and autonomy to the evaluation process for Centering programs that they fund.

MOR & MADM tools



The BPL team developed and validated the Mothers on Respect (MOR) index and the Mother’s Autonomy in Decision Making (MADM) tools.

- The MOR measures the level of respect in interactions between patients and their healthcare providers and assesses the impact of these interactions on a “person’s sense of comfort, behavior, and perceptions of racism or discrimination”⁸.
- The MADM measures how well a person was supported to be a decision-maker in their healthcare⁹.



8. Vedam S, Stoll K, Martin K, et al. The Mother’s Autonomy in Decision Making (MADM) scale: Patient-led development and psychometric testing of a new instrument to evaluate experience of maternity care. PLOS ONE. <http://dx.doi.org/10.1371/journal.pone.0171804>.

9. Vedam S, Stoll K, Rubashkin N, et al. The Mothers on Respect (MOR) index: measuring quality, safety, and human rights in childbirth. Social Science and Medicine: Population Health. <http://dx.doi.org/10.1016/j.ssmph.2017.01.005>.

Beloved Birth Participants Report High Levels of Respect & Autonomy in Care

Figure 1. Mother's Autonomy in Decision Making Scale, Beloved participants (n=47) March 2023-February 2024

Autonomy in decision making scale

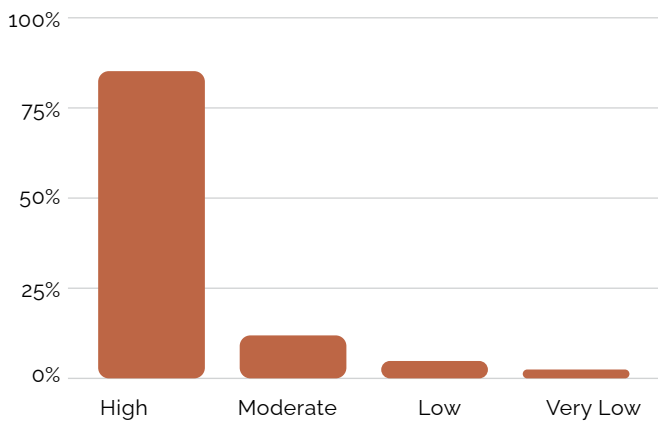
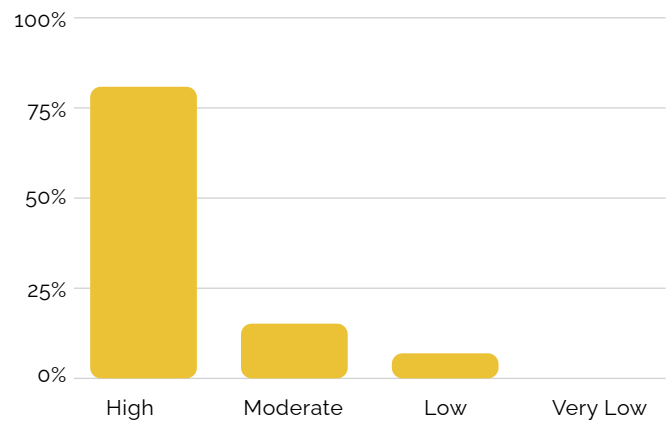


Figure 2. Mother's on Respect Index, Beloved participants (n=51) March 2023-February 2024

Respect Index



Alumni Voices Make It Evident That Beloved Is On The Right Track

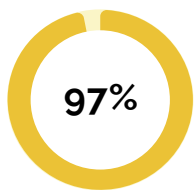


In 2023, we partnered with Project Evident to co-design an updated Theory of Change for Beloved Birth. Together we held a focus group with 11 Beloved Birth alumni where they talked about how participating in Beloved Birth impacted their experience of their perinatal care, both in their group prenatal visits with Beloved providers, and at AHS's Wilma Chan Highland Hospital with our labor and delivery providers and staff (a m racially diverse). Themes were identified from what the alumni shared, then those themes were validated through a survey to a larger group of alumni.

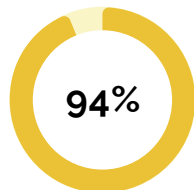
This survey asked alumni who didn't participate in the focus group how much they agreed with the themes that had emerged (using a likert scale question format). In other words, did the themes from the focus group resonate with the wider community of Beloved alumni? Were the impacts described in the focus groups experienced by the rest of Beloved participants too? Through the survey results we discovered was that there was a really high level of agreement on the impacts of getting care in Beloved Birth Black Centering.



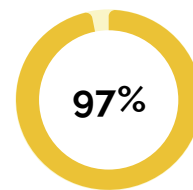
Experienced Less Racism, More Autonomy & Respect



...experienced feeling less racial bias with healthcare providers

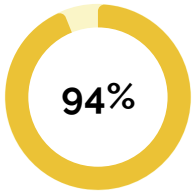


...experienced feeling more empowered, more respected, and more in control of their healthcare decision making

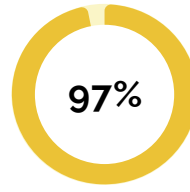


...experienced healthcare providers respectfully helping them make decisions for their care

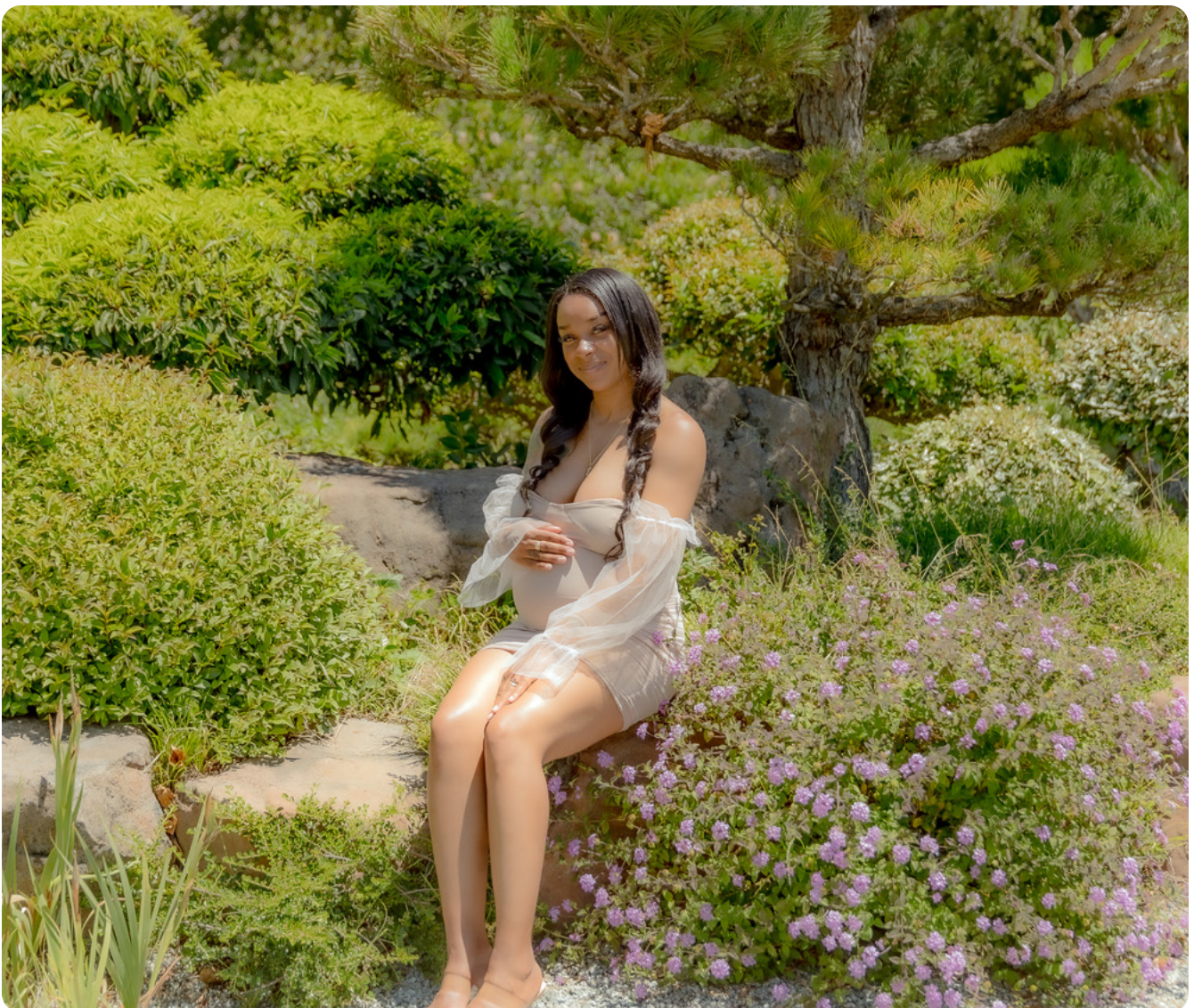
Experienced Less Racism, More Autonomy & Respect



...experienced having higher expectations of their healthcare providers, and feeling more able to hold providers accountable to providing high-quality care



...experienced feeling that there were accountability measures (both formal and informal) embedded in the system; with mamas noticing that participation in Beloved seemed to trigger improved care experiences



Data Source

Beloved Birth Black Centering - Theory of Change Co-Creation Alumni Focus Group & Survey, in collaboration with Project Evident. (Focus group = n of 11; survey = n of 36). 2023



Listen4Good Feedback Survey

Listening, Learning & Being Accountable



Listen4Good (L4G) helps organizations develop high-quality listening and equity-driven feedback practices through client feedback surveys and accountability loops. Listen4Good surveys include a set of core questions that all organizations are required to include in their feedback survey.

In 2023 Beloved Birth joined Listen4Good and created an L4G Program Feedback Survey to:

- Uplift the voices and expertise of Black mamas and birthing people
- Promote better understanding of patient experiences of our care
- Support ongoing quality improvement work
- Ensure accountability to community needs

Details on Beloved Birth's L4G Survey:

- Anonymous, 15 question survey
- Mix of multiple choice and short answer
- Takes less than 15 minutes to complete
- Respondents receive a \$25 gift card

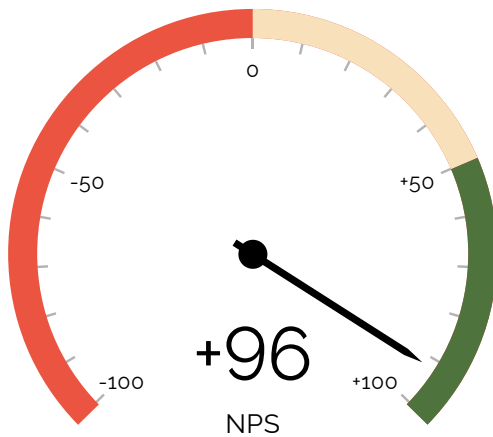
Details on the L4G Survey Data Presented Here:

- N= 50, and included Beloved Birth Alumni from 2020-2023
- This round of analysis was done in partnership with UC Berkeley's Wallace Center

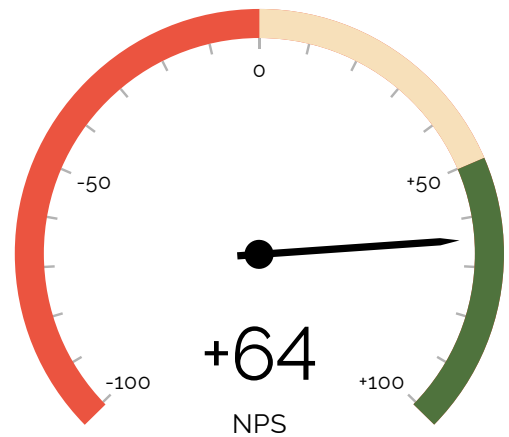
Beloved Far Exceeds Average Healthcare Net Promoter Scores

The "Net Promoter Score", aka "NPS" gives important insight into a person's experience and satisfaction with services. "NPS" can vary a lot by the type of industry. Among 150K organizations the average "NPS" was +32, compared to +96 for Beloved!

Q: How likely is it that you would recommend Beloved to a friend or family member?



Beloved

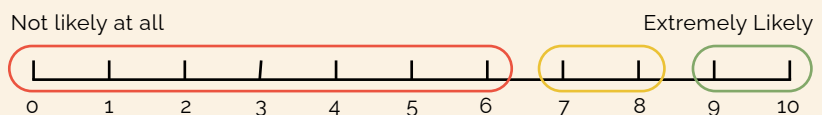


Healthcare

The average "NPS" for 300+ health-related organizations that have worked with Listen4Good was +64, compared to +96 for Beloved!

How do I interpret the "NPS" ?

NPS = % Promoters - % Detractors



● Detractors

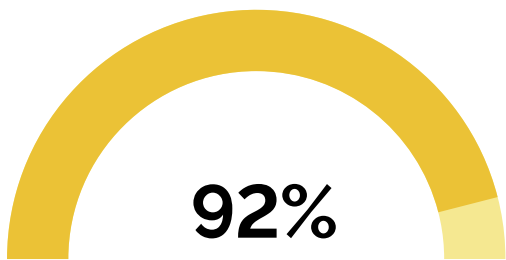
● Passives

● Promoters

High Scores Across All Core Quality Questions

Q:

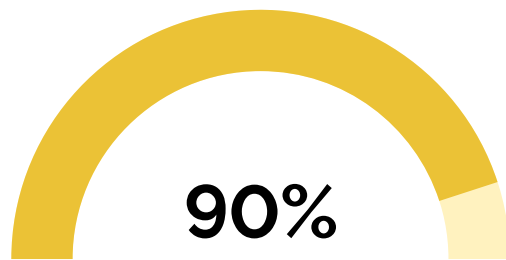
Overall, how well has Beloved met your needs?



very well or extremely well

Q:

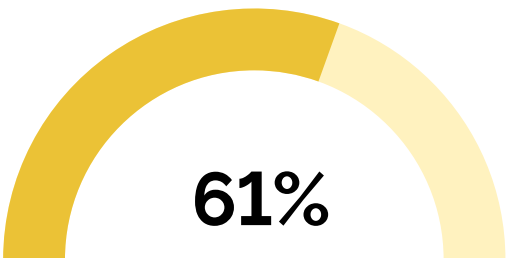
How easy is it for you to get services at Beloved?



very easy or extremely easy

Q:

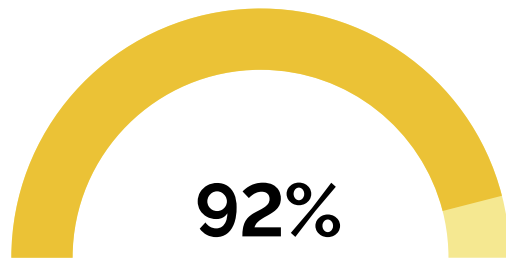
How connected do you feel to other mamas/members in your group at Beloved?



very connected or extremely connected

Q:

How often do Beloved healthcare providers and staff treat you with respect?



usually or always

Rooted in the Needs of Black Women and Birthing People

Beloved Birth Black Centering is rooted in the needs of Black woman and birthing people, and is good at providing safe and respectful care, creating supportive community, and sharing information and resources. We know this from listening to our community. And thanks to our Listen4Good survey we also know that of all of

our many wrap-around social support services, our participants appreciate the childbirth education, doula support, essential supplies, meals, and fresh produce the most. The image below is a visual representation of this Listen4Good survey response data.

Q:
What is Beloved good at?

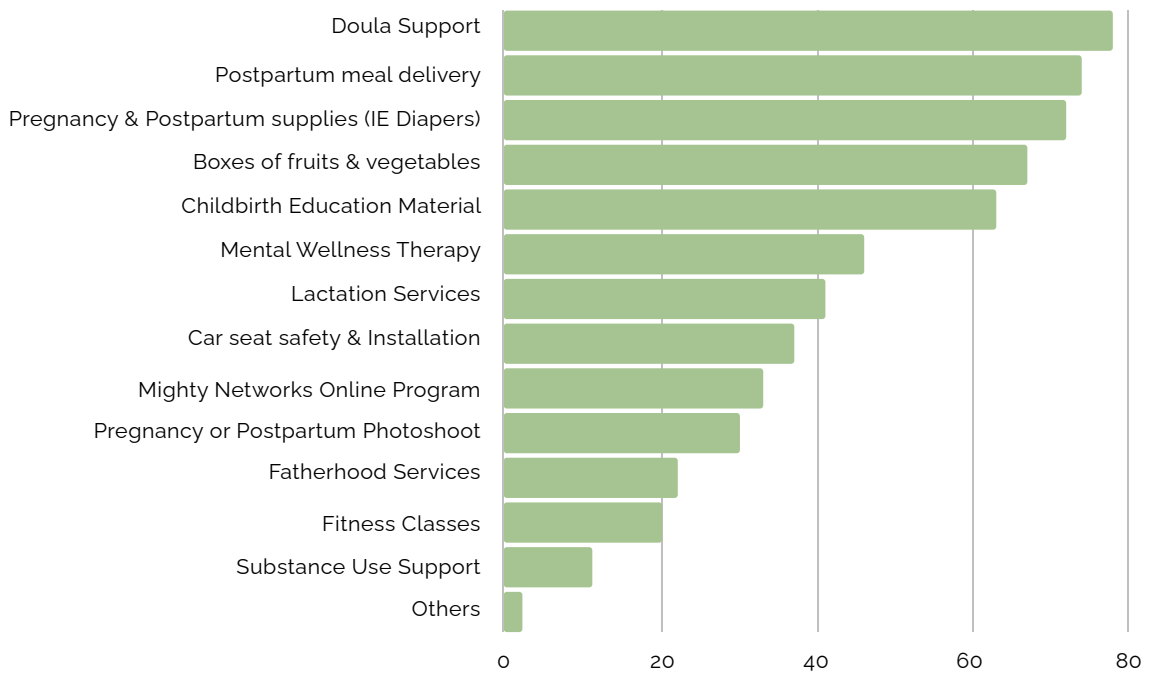
Q:
What were the top 5 wrap-around services?

Q:
What do Black women & birthing people need?

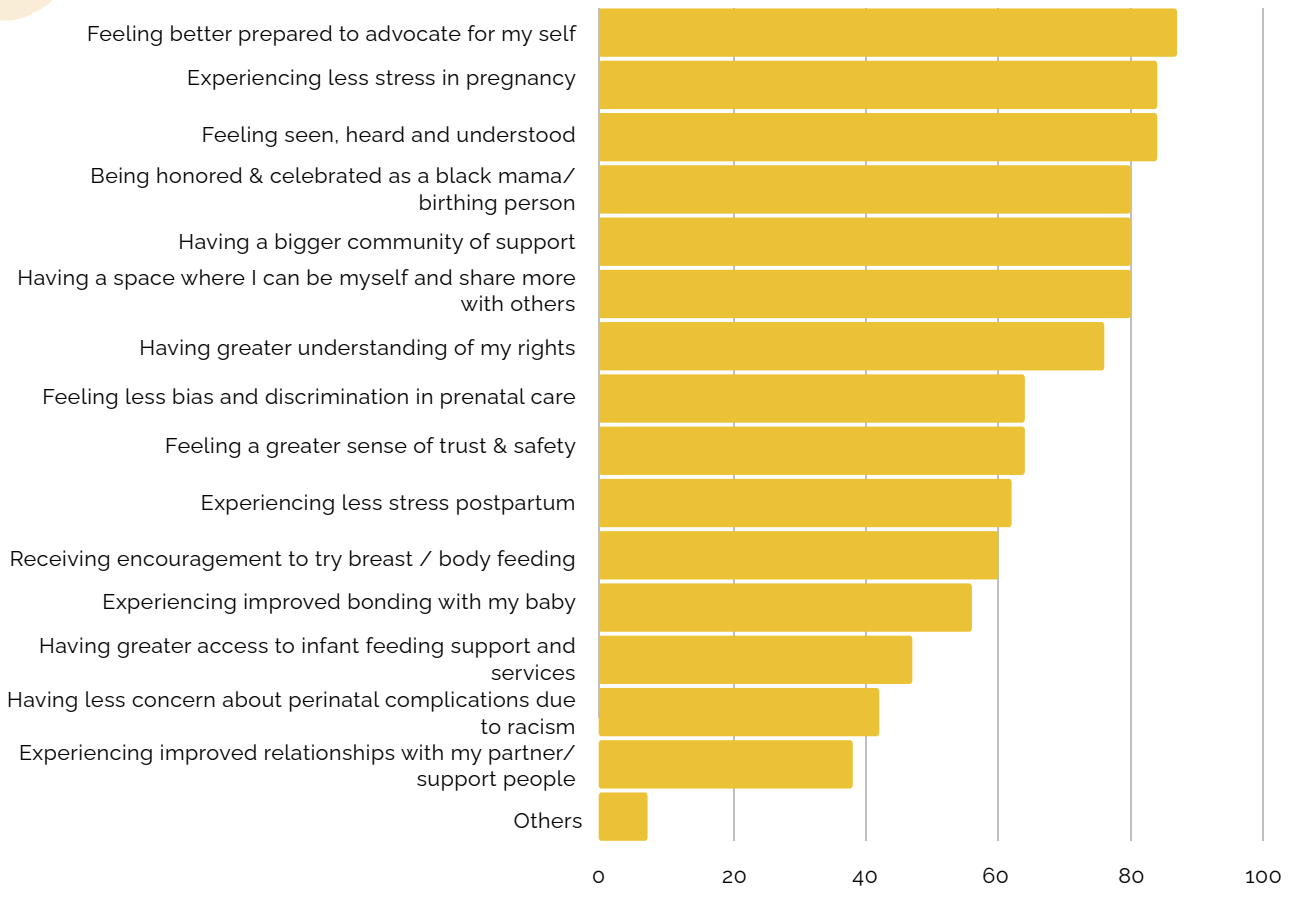




Q: What were the top 5 most beneficial services in Beloved's "Gold-Package of Black Love" perinatal care program? (check only 5)



Q: What impacts of having group prenatal care with other Black mamas/ birthing people did you experience? (check all that apply)



What are Beloved Mamas Saying

Q: What is Beloved good at?

Providing overall care and knowledge to black pregnant women

Literally everything, the care, the providers, the community

Creating confident informed mothers that are able to advocate effectively for themselves during pregnancy

Good at teaching everything we need to know about pregnancy, birth and postpartum recovery.

Mental and emotional support. Tools and resources for pregnancy care and advocacy. Making me feel safe

Making mothers and expecting mothers feel heard

Q: In general, what do Black women/birthing people need to have a healthy and happy pregnancy, birth experience, and postpartum recovery?

Support, community, knowing their rights... everything that Beloved is offering

Great Care from black providers and allies

A great support system - strong foundation at the hospital that assist to mothers and baby's needs specially and knowing that black woman can birth the way that suits them best and not in environments that don't suit them or make them feel unsafe

"Sense of belonging, community, and information to make well advised decisions that align w/ them! Also mental wellness check in's & genuine support"

Everything that Beloved provides

They need love and understanding and support

Alumni Feedback on Quality Improvement

Q: What could Beloved do better?

Most alumni felt like Beloved was already doing everything well and that there was no need for improvement. Those alumni that did have suggestions for improvement shared that they would like the program to extend farther into the postpartum period, for group visits to be longer than two hours, and for some of the program's benefits and resources to be better communicated.

Q: In what ways can we improve the structure & flow of the group visits, starting from check-in to the end of your visit?

Beloved Birth alumni shared that they would like more time to cover important topics.



Q: What barriers, if any, were there to participating in the Mighty Networks online program?

Most Alumni (71%) reported not experiencing any barriers to participating in the Mighty Networks online program home.

Q: What topics do you wish were given more time in Beloved's education and group activities?

Beloved Birth alumni shared that they would like mental health/depression, postpartum care, and breastfeeding to be given more time in Beloved's education and group activities.

Q: What services would you add to Beloved's "Gold-Package of Black Love" perinatal care program?

The most common response to this question was "nothing", but some alumni did make some suggestions for more services to add to Beloved Birth including:

- More mental health support
- More newborn care information, including parenting classes
- More holistic wellness services, including exercise/movement
- More resources related to childcare, transportation, and fatherhood supports



Better Birth Outcomes

On a Health System Level

One of the racism-based disparities that we focus on addressing at Beloved Birth is infant mortality. Across the United States, Black babies are twice as likely not to survive their first year of life; and two important complications contributing to this preventable infant mortality in our Black community are being born too soon (pre-term) or too small (low-birth weight). Beloved is helping

to set our babies up to survive and thrive by increasing their chance of being born full-term at a healthy weight.

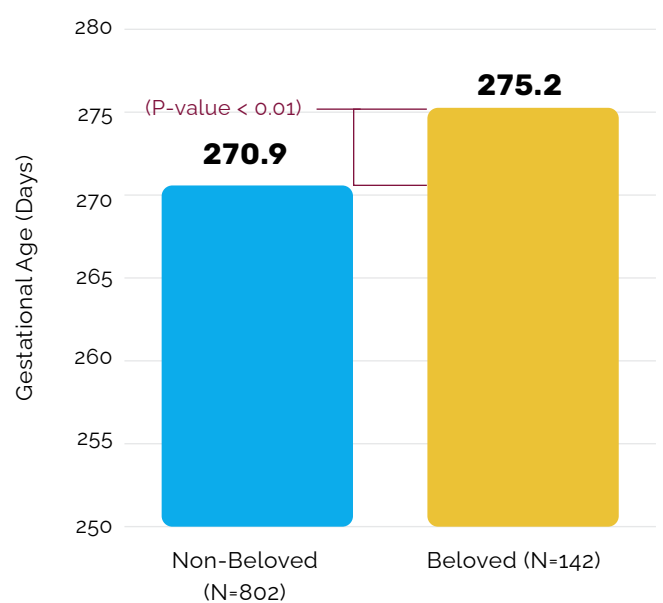
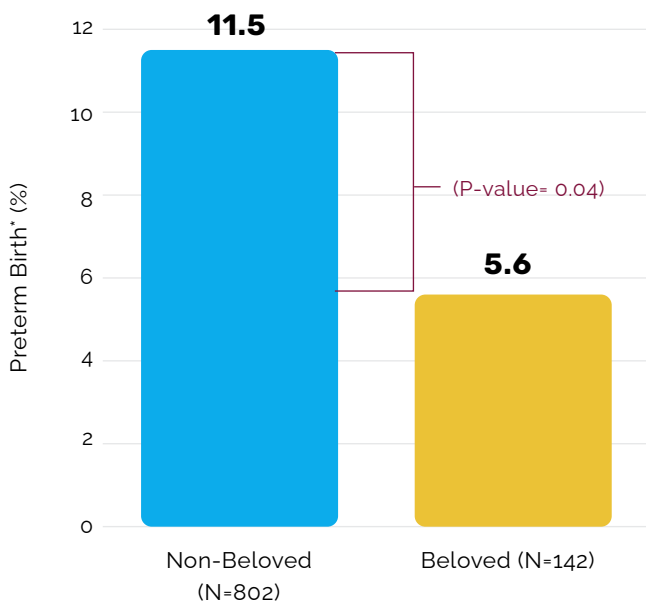
The graphs below demonstrate this impact within our health system, and the graphs on the following page show that this impact is consistent with our county wide data as well.

The preterm birth rate for Beloved Black babies was 5.6% compared to 11.5% among Non-Beloved Black babies delivering at AHS

Beloved Black babies were born significantly later compared to Non-Beloved Black babies delivering at AHS

Preterm Birth Rates among Black Births Delivered at AHS, 2021-2023

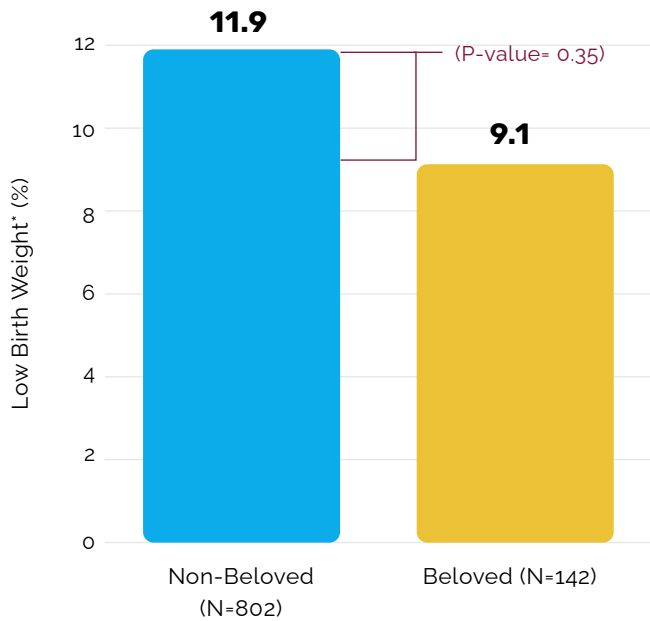
Average Gestational Age among Black Births Delivered at AHS, 2021-2023



*Preterm birth defined as births < 37 weeks

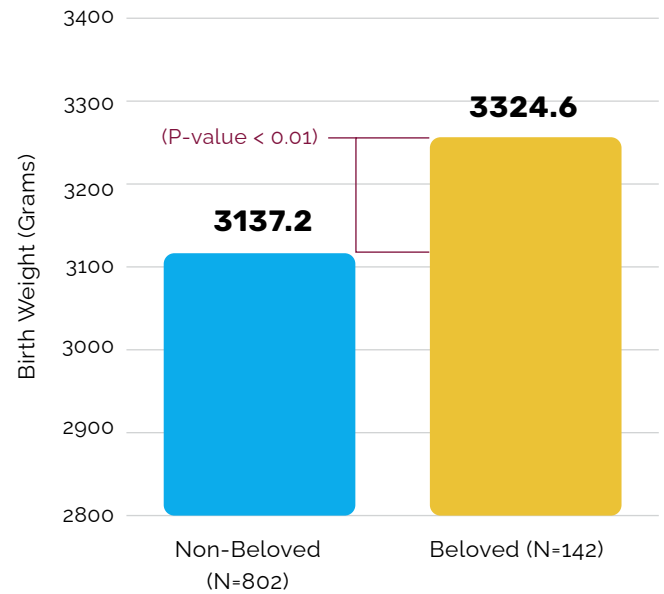
The low birth weight rate for Beloved Black babies was 9.1% compared to 11.9% among Non-Beloved Black babies delivering at AHS

Low Birth Rates among Black Births Delivered at AHS, 2021-2023



Beloved Black babies were born significantly heavier compared to Non-Beloved Black babies delivering at AHS

Average Birth Rates among Black Births Delivered at AHS, 2021-2023

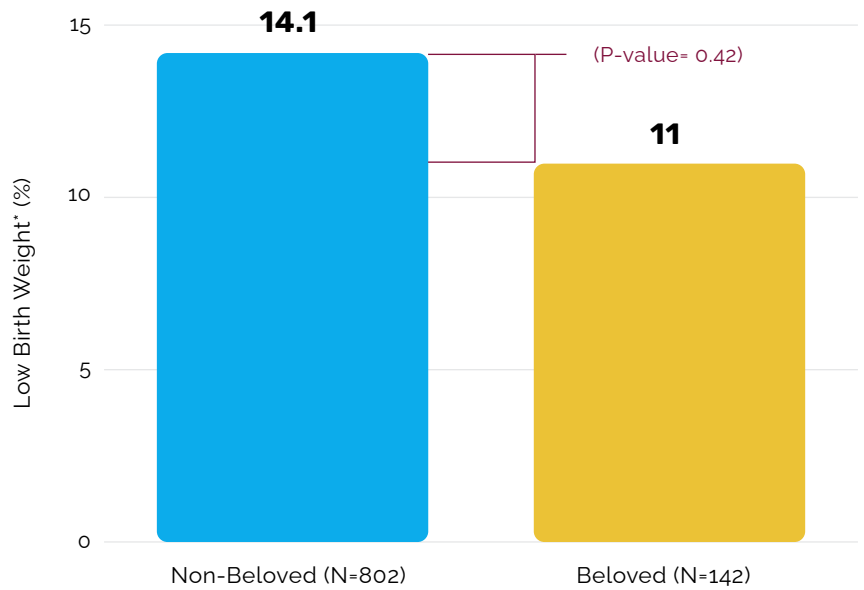


*Low birth weight defined as weight at birth of < 2500 grams

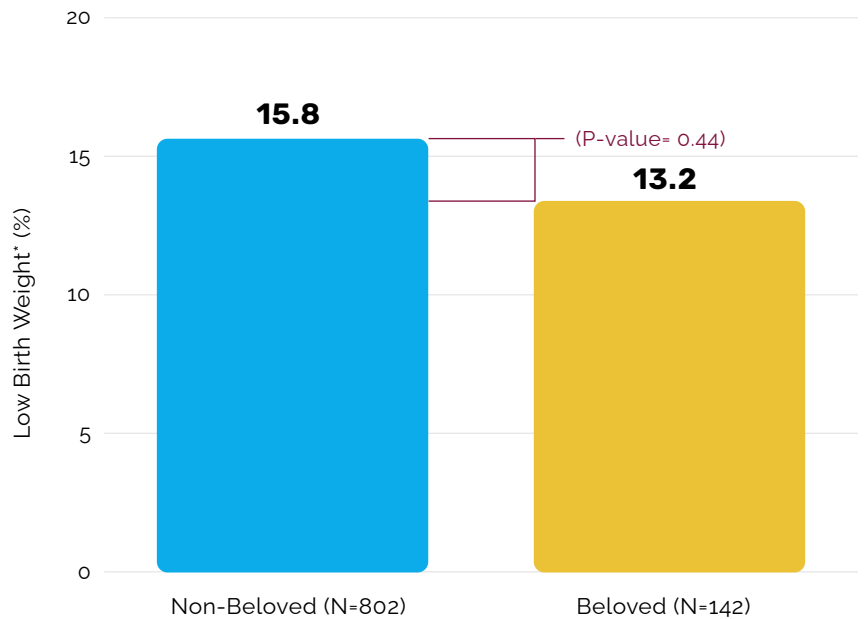


On a County Level

The **preterm birth rate** or **Beloved Black babies** was **11%** compared to **14.1%** among **Non-Beloved Black babies** who were on **Medi-Cal** and delivered in **Alameda County**



The **low birth weight** rate for **Beloved Black babies** was **13.2%** compared to **15.8%** among **Non-Beloved Black babies** who were on **Medi-Cal** and delivered in **Alameda County**



*Low birth weight defined as weight at birth of < 2500 grams

*Rates for preterm birth and low birth weight among Beloved delivered in Alameda County, both within and outside of AHS

What's Next



Community Centered Quality Improvement & Growth

We are committed to ongoing, community centered quality improvement. We are continually growing and evolving our work, informed by our community's wisdom and feedback, as we strive to make Beloved Birth Black Centering the best perinatal care program that it can be, and achieve perinatal health and wellness in our community.

Check out the following pages to learn about 6 areas where we focused our quality improvement efforts in 2024: Beloved Alumni Council, communication regarding program services, mental health and wellness, Centering Parenting adaptation, supporting vaginal birth with Spinning Babies, and data systems optimization.

Beloved Alumni Council



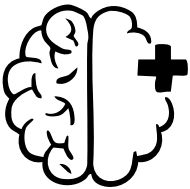
We are very excited to announce that we are establishing a Beloved Alumni Council, set to launch in 2025. This council will invite and compensate former participants of Beloved Birth Black Centering to join a group of approximately 10-12 alumni, serving as a community advisory board. This council will contribute to ongoing co-design and quality improvement of Beloved Birth. Beloved recognizes that those most impacted by a problem are best positioned to create effective solutions, so it's essential that we create structures that empower Black women and birthing individuals to develop their own solutions and guide health systems in implementation and quality improvement. If you are a Beloved Birth Black Centering alumni, look out for a text message at the end of 2024/start of 2025 with more details and a link to express interest in participating.

Improved Communication



In light of the feedback gathered from alumni in our Listen4Good survey asking for improved communication of Beloved's many services, we have developed a "Gold-Package of Black Love" checklist. This one-page handout provides participants with an overview of all 10 of Beloved's wrap-around support services, along with straightforward instructions on how to access each one. Additionally, we are working on a companion guidebook that will offer more in-depth information about each service.

More Supports for Mental Health



Through our 2023 Listen4Good feedback survey, we learned that our families want more support for mental health and wellness. This is particularly significant given the current state of maternal mental health across the nation and the specific stressors rooted in anti-Black racism that Black women and birthing people encounter. In the United States, perinatal mood disorders rank among the most common complications during pregnancy and childbirth. According to the Centers for Disease Control and Prevention (CDC), mental health conditions—such as depression, anxiety, suicide, and substance use disorders—are now leading contributors to maternal mortality. Additionally, similar to other major pregnancy complications, racism-based disparities in the diagnosis and treatment of maternal mental health issues are well-documented. The March of Dimes indicates that 40% of Black women experience maternal mental health symptoms, nearly double the rate of other demographics, and that almost half of these women don't get the support and treatment they need. Moreover, the California Department of Public Health reveals that Black women in our state are twice as likely as white women to be diagnosed with prenatal depression. Furthermore, prenatal depression rates are 1.6 times higher for MediCal insured individuals compared to those with private insurance, highlighting the extra burden that economic stressors puts on mental health.



Mindfulness and meditation are effective strategies for alleviating stress and enhancing mental health and wellness. Our Beloved Birth team recognizes the importance of these tools within our community, and we are dedicated to making mindfulness support and resources more accessible for our team and the families we serve. In 2024, we began integrating more mindfulness practices into our team meetings to help "heal our healers" and improve our team's capacity to share these practices with those in our care. We also infused more mindfulness into our group perinatal care visits and provided access to the Calm mindfulness and meditation app



for our team and program participants, giving our community an extensive library of mindfulness resources at their fingertips.

Another exciting enhancement to Beloved Birth is the introduction of the Lullaby Project. Our Centering Pregnancy program at AHS has partnered with Carnegie Hall and Noe Music to incorporate Carnegie Hall's Lullaby Project into our group perinatal care programs. The Lullaby Project pairs musicians with families to create original lullabies for their children. This uplifting work demonstrates the healing power of music and has been shown to positively influence symptoms of perinatal depression and loneliness, perinatal mood disorders, parent-child attachment and bonding, language development, social connections, and feelings of joy and trust. In 2023, AHS began piloting the Lullaby Project in our Spanish language Centering program, and in 2024, we included it in two of our Beloved Birth Black Centering groups. The impact of this experience has been beautiful, and we are exploring ways to make the Lullaby Project a permanent feature of our Centering services.

Keep an eye out for a video we created that highlights our work with the Lullaby Project.

While we are really happy with the progress we have made this year in addressing mental health and wellness, we recognize that there is still so much more to be done to meet this significant need. We continue to actively seek additional ways to enhance and expand our support for mental wellness.

Beloved Adaptation of Centering Parenting



Our Beloved Birth families are asking for more group care, support, and resources in the postpartum period. We are responding to this need with an exciting new Beloved adaptation of CenteringPregnancy. Centering Healthcare Institute, the national organization that licenses Centering group care sites, describes their CenteringParenting model of care as "a family-centered way to get care for moms, babies, and families." CenteringParenting features group visits through the first 1-2 years postpartum, allowing CenteringPregnancy participants to stay together as they receive group check-ups for both baby and mom/birthing person.

This CenteringParenting adaptation is especially important for our Black community. Across the US, Black women and birthing people are 3-4x more likely to die from pregnancy-related causes, most of these deaths are preventable, and a large portion of these deaths are happening in the first year after birth, after their postpartum care has ended. And with primary care appointments

often being hard to get and requiring long wait times, many of our mamas are facing a dangerous gap in care during this vulnerable postpartum period. We are co-designing our Beloved adaptation of CenteringParenting with our community to directly address these serious challenges, and support our mamas to not just survive, but thrive postpartum.

Supporting Vaginal Birth With Spinning Babies



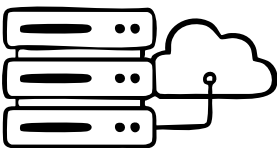
Across the country, Black mothers and birthing people are facing a higher risk of cesarean section than other groups, with doctors more likely to recommend surgical births for us. As with the other complications disproportionately impacting our Black birthing community, the root cause is racism. While cesarean sections are sometimes the safest option, it's important that they are only done when they are truly needed to protect the health and safety of the mother/birthing person, baby, or both. Because cesareans are major surgery, they come a more difficult recovery process and risks to the health of the mother/birthing person, the baby, and to future pregnancies. When listening to mamas in our Beloved Birth Black Centering visits, we hear them overwhelmingly expressing a strong desire to birth vaginally and to avoid surgery. Given this national disparity and the priorities expressed by our community, it's important that our Beloved Birth Black Centering care team has all the support they need to help our families have smooth vaginal births whenever possible.

Spinning Babies® is a physiological approach to preparing for and caring for birth. Spinning Babies was created by a midwife and teaches parents and birth professionals how to better understand the physiology of birth and provide tools and techniques for supporting it's success. The "spinning" part of Spinning Babies refers to the turning/spinning that babies need to do to successfully navigate their way through the pelvis, and many of the tools provided in this framework for birth support involve using positioning of the mother/pregnant person and massage/bodywork techniques to help create more space for the baby and ease the labor process for both mother and baby. These low-tech, high touch techniques can be a game changer for laboring mothers and birthing people.

In January of 2024 we sponsored a 1 Day Spinning Babies workshop for our Beloved Birth team in addition to nurses from our labor and delivery team at AHS's Wilma Chan Highland Hospital. This workshop served as an important opportunity for continued education and skill building, and for interdisciplinary team building.

Then, in March of 2024, we sponsored the 4-Day Spinning Babies Aware Practitioner certification training for eight of our Beloved Birth team members (all six of our midwives, our high-risk pregnancy doctor, and our massage therapist/bodyworker who is also a doula. Before our certification there was nobody in our AHS Obstetrics, Midwifery & Gynecology team with the Spinning Babies Aware Practitioner certification, so now our Beloved Birth team serves as an incredibly valuable resource not just to our Beloved Birth families, but to our entire health system and community. Since becoming certified, our Beloved Birth midwives have helped our AHS Midwifery service begin the work of mainstreaming the Spinning Babies framework and techniques in our labor and delivery unit, significantly increasing our hospital's capacity to support vaginal birth. Now there is a Spinning Babies Quick Reference Guide in every labor room, triage room, nurses station, and provider room. More midwifery and Spinning Babies techniques are being incorporated into our labor management protocols, and our midwives are leading skills practice for our midwives, nurses, and doctors. We will continue to invest in this important work, and will monitor trends in our rates of vaginal births and cesarean sections in the coming years to help measure our impact.

Data Systems Optimization



In 2024, our team at AHS launched a project aimed at optimizing data systems to improve the success and scalability of Centering group care within our organization. Our health system has committed to advancing CenteringPregnancy as our primary model for perinatal care; however, this necessitates significant restructuring of our Epic electronic medical records (EMR) system. While Epic is a leading EMR platform with lots of great functionality, it is mainly designed for one-on-one patient visits. Our AHS Centering team is leading the way in developing innovative Epic solutions to support group care, enhancing our efficiency, and enabling us to gather data that will help us assess our impact on our community's health outcomes and effectively communicate this to stakeholders. This optimization for group care will not only revolutionize our operations in Oakland but also has the potential to benefit thousands of hospitals nationwide that use Epic and want to improve health outcomes in their communities by implementing and scaling up group care models.

Join Us

Beloved Birth Black Centering is a local solution for a national problem. According to our mamas, we've created a loving, stress relieving perinatal safe space where they feel heard, respected, and empowered. And according to an analysis of our health system's clinical data, our Beloved Birth mamas are more likely to carry their babies full-term and birth them at a healthy weight. With inadequate access to high-quality, responsive, and respectful care being a primary factor in cases of Black maternal mortality around the country, and preterm birth and low-birth weight being primary drivers of infant mortality; Beloved Birth is creating potentially life saving impacts.

There are nearly 25,000 Black births in California a year and over 500,000 Black births in the US annually. All of these families are at increased

risk of receiving disrespectful, discriminatory or otherwise inadequate health care, and experiencing preventable complications due to the impacts of racism. All of these families deserve to survive and thrive in pregnancy, birth, and postpartum. All of these families deserve access to care like Beloved Birth Black Centering's "Gold-Package of Black Love". Beloved Birth is demonstrating how community centered, midwifery-led perinatal equity innovations can be a game changer for our Black birth families and help us finally move the needle on the Black maternal and infant health crisis. We will continue to nurture and grow this model of care in Oakland and Alameda County, and explore ways that we can help other communities around the country develop their own local implementations of these powerful strategies.

Let's Stay Connected!

Scan this QR code to join our mailing list

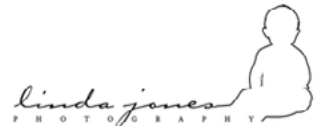
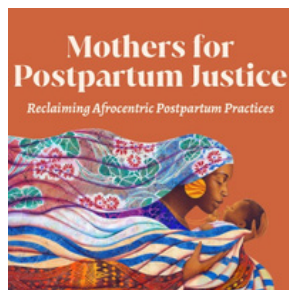


Thank You

Big thanks to our community, partners and funders!

Beloved Birth Black Centering is a labor of love that is made possible by the openness of our Black mothers and birthing community, collaboration and investment of our partners, and the trust and generosity of our philanthropic funders. Thank you! We are truly grateful!

Thank you to our Partners



Thank you to our Funders

