Stanford
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Early Childhood x Bridgeport, CT

Advancing Community Solutions: A Spotlight

By Mark Swartz



This spotlight explores how a new program is challenging long-standing barriers to maternal health in the state of Connecticut. When people with lived experience acquire professional certification, their perspectives can help shift systems.

Community health workers serve on the front line of health care as liaisons between communities and hospitals. Doulas accompany birthing people and empower them to advocate for themselves. A trailblazing new program at Gateway Community College in New Haven, Conn., combines prerequisite training for doula certification with instruction toward becoming a community health worker.

The combination does more than blend job skills. It professionalizes the health care workers who stand up for women during pregnancy, labor, and postpartum and, in doing so, makes birthing people feel they have agency in their own care. According to the Institute for Medicaid Innovation, "This model of care combines the expertise of doulas with the community connections and cultural congruity of community health workers."

Two Types of Maternal Health Support

Research shows doula care improves health outcomes and leads to more satisfying birthing experiences. Connecticut is joining other states in allowing Medicaid to pay for doulas (read more), but Cynthia Hayes, who's known as the "Doula Godmother," notes that it took years of advocacy to achieve that goal. "We had to change laws and policies in order to create better access. We also have to make sure that the environment is safe for doulas and that they are appropriately compensated for their contribution."

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> **Cynthia Hayes, known as the 'Doula Godmother'**

Hayes codesigned the program with Milagrosa ("Millie") Seguinot, executive director and a founding member of the Community Health Workers Association of Connecticut. The Fairfield County Community Foundation provided financial support for the doula/community health worker training.

Community health workers have been shown to improve access to services, increase screenings, and foster better understanding between community members and the health and social service system, among other effects. Seguinot explains that training people with firsthand community experience means families of color have an advocate in the delivery room who looks like them.

"The community health worker has the knowledge of the community that is related to challenges," Seguinot says, "and we can identify the social determinants of health that are affecting the community because they have been affecting us as well." This kind of empathy has been shown to make a difference all along the continuum of care.

Seguinot says that when she started talking to Hayes about the joint program, they had an immediate meeting of the minds. "We will continue bringing in more individuals who are interested in doing this work. That's how we make the changes in the community, by becoming voices for mothers so they receive the service they deserve."

One Participant's Story

After going through the program at Gateway, Sereader Holly secured a position at Bridgeport Hospital as a community health worker at Yale New Haven Health, the same place she worked as

a unit secretary for 20 years. She says this is the first time she feels her voice is being heard in the hospital – either as a patient or as a staff member.

When her second child was born prematurely, Holly was an employee of the hospital, but she didn't feel respected by medical staff. "They were whispering instead of informing me of what was going on with my body. I was so scared, but because I didn't want to be seen as the angry Black girl, I did whatever they said. I didn't want them to take my baby away." Her son is now grown and works as a solar panel engineer.

It is this type of shared experience that earns professionals like Holly the trust of her patients.

Bridgeport and Beyond

These health supports came about through a landscape analysis and listening sessions conducted by Bridgeport Prospers (a place-based initiative of United Way of Coastal and Western Connecticut) to better understand the community's most pressing concerns. Addressing racial disparities and maternal health was a key driver to these community-based interventions and supports provided through the Bridgeport Baby Bundle, which Katerina Vlahos, executive director, Bridgeport Prospers, describes as "a framework for prenatal and postnatal services, including parent education, child development support, early language and literacy tools, and social-emotional learning."

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> **Milagrosa Seguinot, executive director of the Community Health Workers Association of Connecticut**

Noting that their work is guided by the StriveTogether Cradle to Career Network's theory of action, Vlahos say, "The combined program and collaborative action between partners (to transform systems) is improving maternal health, kindergarten readiness, postsecondary enrollment and completion, and employment outcomes for Black and Brown families within the city."

In Connecticut, as in many other states, Black and Hispanic populations are underrepresented in the health care workforce. Increasing the share of health care workers of color matters

because the research shows Black patients have better outcomes when treated by providers who look like them. “If I’m with a Black birthing parent,” Hayes explains, “and the nursing staff is Black, there’s more confidence and more trust.”

Cultural Change

Why do these supports matter? The answer goes beyond improving treatment for birthing people. In addition to the strong association between maternal health and child health in the first five years of the child’s life, such programs propel cultural change, shifting the longstanding health care culture that contributes to the United States having the highest infant mortality rate and the highest maternal mortality rate among developed nations.

Vlahos points to studies showing that health care providers often underestimate or dismiss the pain of Black patients, leading to disparities in pain management and treatment. “We have often heard from Black moms that they felt dismissed or judged when sharing their level of pain,” she says.

> **“By merging community health workers and doulas, we really represent the community.”**
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> **Milagrosa Seguinot, executive director of the Community Health Workers Association of Connecticut**

“How wrong can you be?” Seguinot marvels. “We all suffer the same way. Do not look at the skin color to decide if the person will tolerate pain better than others.”

“Patients of color are not being heard,” she asserts. “That's the main problem. The community is the expert; hospitals simply provide services based on what they think is needed, but they don't have the correct information if they don't pay attention to the community.”

Hayes maintains that systems need to change, arguing, “It’s not just about adding a few doulas. You have to make sure that it's a culturally congruent situation. Educating families is part of the change, too, so that they have better discussions with their medical providers and can make informed decisions.” She sees dialogue as the key to mutual understanding, saying, “Doctors and other providers know best about certain terminology and procedures. They know how to

prescribe medicine, but I know something about what information the family should get so they can feel confident and have a better discussion."

"By merging community health workers and doulas," Seguinot adds, "we really represent the community."



This Spotlight is part of the Stanford Center on Early Childhood's new initiative to advance early childhood systems solutions. Communities everywhere are turning their focus to ways in which they can support young children and the adults in their lives. Early Childhood X (ECX) was created to celebrate and amplify these transformative place-based efforts. To read more ECX publications, visit earlychildhood.stanford.edu/publications.

About the author: Mark Swartz is a regular contributor to Early Learning Nation. The author of the children's books Werner Herzog Eats His Shoe, Lost Flamingo, Magpie Bridge and The Giant of the Flood, as well as a few novels, he lives in Takoma Park, MD, with his wife and two children.