

# Listening to Voices to Guide Quality Maternity Care in Texas

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## KEY TAKEAWAYS

1. Many women report experiencing mistreatment while receiving pregnancy and maternity care, contributing to adverse maternal and infant health outcomes.
2. Respectful maternity care is an approach to pregnancy care and child birth that prevents harm and mistreatment and treats patients with dignity and autonomy.
3. Doulas can play an essential role in building respectful and collaborative care models between patients and providers. Listening to the perspectives of doulas and their clients can help shape new approaches to providing respectful maternity care.

## Background and Definition

**Respectful maternity care is an approach to pregnancy care and childbirth that prioritizes a patient's dignity and privacy, ensures they have the freedom to make informed decisions, and protects them from harm and mistreatment.<sup>1</sup>**

- Examples of mistreatment in maternity care include:<sup>2</sup>
  - receiving no response to requests for help
  - being shouted at or scolded
  - not having physical privacy protected
  - being threatened with withholding treatment
  - being coerced to accept unwanted treatment
  - unexplained deviations from birth plan
- Disrespectful care can lead to adverse maternal and infant health outcomes such as:<sup>1</sup>
  - postpartum hemorrhage
  - physical injuries to the mother or newborn
  - psychological consequences such as post-traumatic stress, suicidal ideation, and feelings of helplessness
- The resulting loss of trust in the healthcare system can prevent women from seeking future health care, increasing the rate of births with attendants who may lack appropriate skills or qualifications.<sup>1</sup>

In 2023, 1 in 5 women in the U.S. and 30% of women of color reported being mistreated during their maternity care.<sup>2</sup>



45% of women held back from asking questions or sharing concerns.<sup>2</sup>



## Doulas and Respectful Care

**There is increasing awareness about the role of respectful maternity care in optimal maternal and infant outcomes, with recognition of the need for guidelines on how to implement respectful maternity care programs.<sup>3</sup>**

- Doula support plays an important role in collaborative and respectful maternity care models as it increases the likelihood a pregnant woman will receive respectful care and have positive birth experiences.<sup>4</sup>

## Hearing from Women, Family Members, and Doulas in Texas<sup>5</sup>

- In September 2024, the Institute for Patient- and Family-Centered Care conducted 90-minute listening sessions to hear the perspectives of women with recent births and their family members.
- 41 people – including women who had given birth in Texas hospitals in the last 5 years, their family members, and community-based doulas serving women in Texas – provided insight.

*Listening sessions were supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services, Blue Cross Blue Shield of Texas, and the UTHealth Houston School of Public Health in Austin.*

## Findings from Listening Sessions<sup>5</sup>

**Participants' experiences giving birth can be summarized into four themes: *Communication, Discrimination, Mistreatment, and Support & Resources.***

### Communication

Some women expressed confusion and a sense of being left out of important decisions, adding that shared decision-making was highly valued when it occurred. When women experienced respectful and supportive care, their birth experience was profoundly impacted.

Women reported having more positive experiences if the healthcare team took the time to educate, explain and involve them when a birthing plan preference needs to be adjusted.

Many women, especially first-time parents or those from underserved communities, felt they lacked the knowledge necessary to effectively communicate on their own with medical staff. Thus, many women reported that their preferences were overlooked or overridden, presenting a lack of autonomy.

Some women reported that doulas played a vital role in supporting their family members who felt lost or uninformed during the process.

### Discrimination

Several participants spoke about feeling discriminated against and being treated differently by medical staff. One doula expressed that involvement of Child Protective Services can be biased, rather than based on actual risk, deepening mistrust in the system.



"They were using medical terms I didn't understand, and they didn't explain the processes to me."

-- Woman

"I felt like they gave me all the attention I needed, and the doctor made sure I understood everything, which relaxed me."

-- Woman



"I think a lot of times, doctors would most focus on the one in labor, but with [the doulas], I think that they were so professional, they were thoughtful that they noticed that I was worried."

-- Father



"...quality care happens between the patient and caregiver before they ever go into birth."

-- Doula

"I love when they come in, and give them the risks and benefits and inform them. The client eventually makes an informed decision because they don't feel pressured or pushed."

-- Doula



"Trauma happens when you don't have control...any bad situation I've seen is because that control is being taken away or assumed you can't be trusted with that control."

-- Doula



"I saw that the White nurses were paying more attention to the White patients."

-- Woman

"The nurse said something like, at my age, I was supposed to be in school and not pregnant."

-- Woman

Doulas observed that some of their clients received compassionate care while others faced poor communication, bias, or neglect, often tied to race, insurance status, or other personal factors. This unequal treatment and lack of acknowledgement of personal identities can affect patient outcomes and leave patients feeling alienated or ignored.

### Mistreatment

Some participants reported feeling mistreated, particularly around pain management, forced treatments, delayed responses, intimidation, withholding of information, or a lack of autonomy in decision-making.

Several doulas reported witnessing mistreatment or dismissive attitudes from healthcare providers toward their clients. Many participants expressed that they would have appreciated more attentive and empathetic care, particularly when interacting with doctors.

### Support & Resources

Some women received support from their medical team, but doulas were often a key link between patients and the support systems they needed. Some participants reported that they had to seek mental health support on their own or wanted more follow-up services.

Doulas reported connecting their clients to valuable and needed services, including breastfeeding and parenting support, home visits, mental health services, childcare, food, car seats, diapers, and bus passes.

## Recommendations

### Implementation of respectful maternity care among medical teams can be improved and supported through a variety of strategies.

- Participants' suggestions for improving care often revolved around providers spending more time with patients, listening more attentively, and proactively providing resources.<sup>5,6</sup>
- Examples of tools in maternity care settings that can improve care include:<sup>5,7</sup>
  - Patient preference lists and hospital resource templates
  - Standardized communication boards in birthing rooms
  - Departmental respectful care commitments and training
  - Patient Reported Experience Measures (PREMs)



"I've noticed a distinct difference between clients that are from a different racial or socioeconomic background, versus the ones that are on Medicaid or [public] insurance ... how they get treated, how [doctors] communicate with them, how many options they give them."

-- Doula

"It's assumed that someone with autism isn't going to be someone who's giving birth, who has a family. It's the neglect of those identities, rather than an active hatred of them, that discrimination shows up."

-- Doula



"A lot of the decisions were made for me, like getting on Pitocin, getting an epidural. I didn't want any of that. I constantly question if my son would have been admitted to the NICU if we had done it the way I wanted in the first place."

-- Woman



"I felt like the male doctors didn't take my complaints seriously."

-- Woman

"The communication wasn't there...maybe he was busy attending to other people, but it was very poor."

-- Woman



"I was very depressed, but the doctor helped me get therapy sessions, which I did, and it was helpful."

-- Woman



"I provide a list for my client, but I am almost certain patients without doulas do not get their resources."

-- Doula

- Legislative action can build on previous bills and incorporate novel policy approaches.
  - The 88th Texas Legislature proposed HB 465, which included provisions for funding of Medicaid doula coverage pilot programs.<sup>8</sup>
  - A total of 20 states have fully implemented Medicaid doula coverage through state plan amendments approved by the Centers for Medicare and Medicaid Services, with eight (AZ, CO, DE, IL, KS, MA, MO, NY) implementing within the last year.<sup>9</sup>
  - South Dakota's Department of Social Services announced it would reimburse doula services as part of its Pregnancy Health Home program.<sup>9</sup>
- Financial support for community-based doula training programs can enhance workforce development and expansion.
  - Arkansas created a state university trust fund to offer programs and trainings for maternal health workers, including doulas.<sup>9</sup>
  - Washington funded a doula hub model to provide assistance and training on appropriate billing and Medicaid enrollment.<sup>9</sup>
  - The Blue Cross Blue Shield of Texas Boldly B.L.U.E. (Birthing, Learning, Understanding, Empowering) Initiative supports learning programs for future doulas, community health workers, midwives, and lactation consultants.<sup>10</sup>



## Experts

**Kacey Hanson, MPH**

*UTHealth Houston School of Public Health in Austin*

**Divya Patel, PhD**

*UTHealth Houston School of Public Health in Austin*

**LaToshia Rouse, CD/PCD(DONA)**

*Institute for Patient- and Family-Centered Care*

**Deanna M. Hoelscher, PhD, RDN, LD, FISBNPA**

*UTHealth Houston School of Public Health in Austin*

**Content development and research for this report were led by Kaitlin Brand, Marie Abraham, LaToshia Rouse, and Yuzi Zhang. For further information, please contact [TXRPCNetwork@uth.tmc.edu](mailto:TXRPCNetwork@uth.tmc.edu).**

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