

MENDS

Resource Sheet

Establishing racially and culturally concordant perinatal care programs

This document provides additional information and resources about the following community-generated recommendation for hospitals:



“Create funds to support programs like EMBRACE, Black Centering, or MANA that care for our communities.”

The Current Challenge:

Comprehensive and continuous prenatal and postnatal care is critical to improving patient satisfaction, trust, and clinical outcomes, especially among minoritized populations.¹⁻⁴ Therefore, efforts to improve the hospital birth experience should also account for the broader context of care across the perinatal period.

In recent years, alternative models of prenatal care – also known as enhanced prenatal care – have gained traction as a way to improve patient education, provide enhanced social support, and increase clinical efficiency. For example, group prenatal care has demonstrated the ability to foster greater peer connectedness, empowerment, and satisfaction with care.⁵⁻⁷ **Although individual prenatal care remains the standard practice, the American College of Obstetricians and Gynecologists (ACOG) notes that group models increase time for education and peer support, and may be beneficial or preferred for certain patient populations.** Early observational studies have shown associations with reduced preterm birth, lower neonatal intensive care unit admissions, and improved birth weights, particularly for Black birthing people, though evidence remains limited.^{6,8,9} Racially and culturally concordant care – where patient and provider share a racial or cultural identity – has also been associated with improved patient satisfaction, trust, and perceived quality of care among patients of color, particularly Black women.^{3,10} In fact, one study found that the majority of Black women would choose a racially concordant prenatal provider if possible.¹¹

How the MENDS Community Recommendations could help

Some hospitals, like the San Francisco General Hospital and Trauma Center (SFGH) and UCSF, have had programs such as EMBRACE and CenteringPregnancy that have provided racially and culturally concordant group prenatal, perinatal, and postpartum care.^{12,13} In our sessions, there

was strong support for these programs, and a recommendation for similar programs to be established at each hospital birthing facility where they do not already exist. Participants also pointed to the value of community-based doula programs, such as M.A.N.A Pasefika and SisterWeb, to provide racially and culturally concordant care before, during, and after birth. This recommendation highlights the need to engage community partners in developing approaches that ensure all patients receive high-quality perinatal care.

Implementation Considerations & Strategies:

Community experts strongly recommended that local hospitals find ways to fund and support programs like those described above. To accomplish this, maternal health leaders and advocates will need to partner with hospital leadership at different levels as well as other relevant organizational entities to find sustainable funding. Learning from leaders of programs like EMBRACE and BlackCentering—exemplars of regional hospital-affiliated racially and culturally concordant group prenatal care programs—will likely be very useful for this work. In our current political context, there are likely new barriers to providing population-focused perinatal care resources. However, there are steps that can be taken in the interim for facilities to invest energy, effort, and expertise into initiatives that can connect patients prenatally with concordant care.

Interim strategies to address the community’s articulated need for racially and culturally concordant prenatal, perinatal, and postpartum care may include the following:

- **Find ways to lay the groundwork for such programs at your facility.** Steps may include:
 - Advocating within your unit and facility to promote knowledge and buy-in regarding a future racially and culturally concordant group prenatal care program
 - Bringing in speakers for Grand Rounds or informal educational programming to spread appreciation and awareness of the benefits of such programs.
 - Bringing representatives from community organizations that provide racially- or culturally-concordant perinatal services or resources onto a hospital-based advisory board.
- **Connect your patients with other racially and culturally concordant care opportunities.** These may include:
 - Partnering with projects like the Pregnancy Pop Up Village that has brought together community organizations, healthcare organizations, and City services to provide a “one-stop-shop” for pregnant Black individuals and their families.
 - Advertising the presence of such programs on patient-facing materials and connecting patients with them.



- Discovering and advertising other services that could support subgroups within your patient population.
- **Publicize available community grant funding to community-based organizations that provide racially and culturally concordant prenatal care:** Many hospitals have grant funding available for community-based organizations on an application basis. We recommend ensuring that applications for such funding are well advertised through trusted community channels so that they are accessible to organizations such as SisterWeb and M.A.N.A Pasefika that provide regional racially and culturally concordant prenatal and doula care.
- **Disseminate information on racially and culturally concordant prenatal care programs to all patients.**

Resources

In the current political era, these example programs may be in transition or may be harder to learn about via websites. We encourage interested parties to reach out to local directors of these programs or to MENDS study personnel who may be able to provide information and introductions.

- [EMBRACE](#)
 - UCSF-based initiative that has provided racially concordant group prenatal care for Black women
- [CenteringPregnancy](#)
 - SFGH-based initiative that has provided racially concordant group prenatal care for Black women and monolingual Spanish speakers.
 - Centering programs exist at a number of Bay Area hospitals; population-concordant programming could be built onto these programs.
- [BElovedBIRTH BlackCentering](#)
 - Alameda Health-based initiative that has provided racially concordant group prenatal care for Black women.
- [MANA Pasefika](#)
 - Community-led culturally concordant doula program that was created by and for Pacific Islanders of Melanesian, Micronesian, and Polynesian descent.
- [SisterWeb](#)
 - Community-led culturally concordant doula program which, among many offerings, has had a program to provide community doula care at no cost to Black pregnant women and birthing people in San Francisco.



- The SF Family and Pregnancy Pop-Up Village
 - Monthly “one-stop-shop” event that has brought together a group of SF city agencies, healthcare organizations and community-based organizations committed to improving care access, experience and outcomes for Black pregnant residents and families in San Francisco.

Note: This is a dynamic resource sheet that will evolve as more evidence becomes available on interventions that support this recommendation. Last updated January 2026.

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