

The Mothers Who Become the Fix: Why Black Maternal Health Needs Leaders From the Community, Not Just For It

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There's a quiet assumption built into a lot of maternal health work: that the people most affected by a broken system should be its patients, not its architects. That the fix comes from outside a policy, a program, a grant and gets delivered to the community, rather than built by it.

The fifth pillar of the Architect Doula™ Framework pushes back on that assumption directly. Leadership means helping mothers, fathers, and youth become advocates and leaders within their own communities because the people closest to a problem are also the people best positioned to solve it, if they're given the platform.

What Research Actually Says

There's a growing body of research on exactly this idea, and it's compelling.

- **Training builds community leaders.** A study of a grassroots maternal and childhood health leadership training program found that women living in high-risk zip codes who completed the training didn't just gain knowledge they measurably grew in personal capacity and became what researchers call “community brokers,” connecting neighbors to information and services, with individual growth eventually translating into community-level change.
- **Trusted messengers bridge the gap.** A community health worker program in Alabama, designed specifically to address persistent maternal and infant health disparities affecting Black and other marginalized communities, works by training local, trusted community members to bridge the gap between healthcare systems and the neighborhoods they too often fail to reach.
- **Support structures make it last.** Research on sustainable community health worker programs found that when these workers have strong support structures real supervision, regular peer connection, a genuine seat at the care team table the entire model becomes more effective and longer lasting.

The pattern across all of it: this work is more effective, and more sustainable, when it's led by people who share the lived experience of the community they're serving, not just informed by data about that community from a distance.

What This Looks Like in Real Life

Leadership development doesn't require a title or a degree. It requires a pathway:

- **Training** — real curriculum that turns lived experience into a structured, teachable skill set.
- **A platform** — a seat at a table where decisions get made, whether that's a hospital advisory board, a community coalition, or a local policy conversation.
- **Mentorship** — someone already in the work, showing a new leader how to navigate it.
- **Recognition** — treating community leaders as professionals whose expertise matters, not as volunteers doing a favor.

Why This Matters Beyond One Leader

Every mother who becomes a trained community leader multiplies the reach of everything in this framework education, advocacy, connection far beyond her own family. She becomes the person who notices a neighbor going quiet, the one who knows exactly what to say in a delivery room, the one a scared young mother calls at 2 a.m. instead of facing it alone.

That's how a framework built for one family becomes a movement that reaches a whole community.

This is Pillar Five of the Architect Doula™ Framework. Pillars One through Four were Education, Advocacy, Preparation, and Connection. Legacy is next to the final pillar, and the one this whole framework was built toward.

“We don’t just prepare families for birth. We help them design a healthier future one blueprint, one family, and one generation at a time.”

Learn more or follow the work: [[**www.thearchitectdoula.org**](http://www.thearchitectdoula.org)**]**

Sources Referenced

- “Supporting the Development of Grassroots Maternal and Childhood Health Leaders through a Public-Health-Informed Training Program,” *International Journal of Environmental Research and Public Health*
- “A Model for Perinatal Health Equity: A Community Health Worker Program in Alabama”
- “Considerations for Building Sustainable Community Health Worker Programs to Improve Maternal Health,” *PMC*