

MESSAGING FOR THE MOMENT:

**Narrative Guide for Advancing Birth Equity in a
Challenging Landscape**



California
Coalition for Black
Birth Justice

Acknowledgments



**Cedars
Sinai**

This guide is supported by
a grant from Cedars-Sinai.



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A special thank you to L.
Norwood & Associates for their
partnership on the Messaging for
the Moment Training and Guide.

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Introduction:

Why This Work, Why Now?

Across California, practitioners working to advance birth equity are navigating a rapidly shifting landscape. Efforts to address racial inequities, particularly those impacting Black maternal and infant health, are facing increased scrutiny, constrained language, and growing pressure to justify their urgency and impact. At the same time, the need for this work remains constant.

The Messaging for the Moment project, led by California Coalition for Black Birth Justice in partnership with L. Norwood & Associates, was designed in response to this moment. Through a practitioner survey and a narrative training that convened leaders across Los Angeles County and surrounding regions, this project assessed how birth equity work is currently being communicated, identified where narratives are falling short, and developed shared language that is culturally grounded and adaptable across environments.

This report is both a reflection and a tool. It captures what practitioners are experiencing while offering guidance that can support partners as they communicate about maternal and infant health in real time.

Realities on the Ground

We surveyed 20 birth equity leaders and practitioners from various California regions to inform the Messaging for the Moment training. Their responses revealed key themes about the realities practitioners are navigating today.

Restrictions and Pressure

Practitioners described a field shaped by urgency and constraint. Many survey respondents described real, concrete consequences: terms they can't use, grants they've lost, contracts requiring language changes. These conditions create additional pressure on those already working closest to the issue.



" I have a federal contract where I cannot say Black, equity, birthing people, or other DEI terms. The work is still Black infant and maternal health focused, but we can't talk about it that way."

Funding Challenges

Other responses revealed that community-based leaders are pressured to describe why funding this work remains crucial and the continued need for long-term investment, especially funding Black-led community-based organizations. Respondents expressed deep frustration with consistently funding large organizations while minimally resourcing the Black-led organizations that are producing meaningful change and results. It is clear that what's needed is more investment and trust.



We know what works. Now the solutions must be scaled in a coordinated effort led by Black women.



During the March 19th training, participants also discussed how some funders are reducing or cutting funding without being explicit about why, leaving birth equity leaders to navigate shifting expectations without clear guidance.



A Narrative Strategy for This Moment

In this environment, the stories we tell and the ways we talk about this issue functions as a tool for alignment and forward movement. Effective messaging right now isn't about finding safer or softer language, but being strategic with what language we use so the work can continue.

Effective messaging in this moment:

- connects Black maternal and infant health outcomes to the systems that shape care.
- pairs urgency with examples of solutions that are already improving outcomes
- allows for flexibility in language while maintaining clarity of purpose
- ensures that community leadership remains visible and central.
- acknowledges the full ecosystem of care, including doulas, midwives, lactation professionals, and community leaders as essential not secondary.
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This approach supports communications across a range of environments, from community-based settings to policy and funding conversations. It creates consistency while allowing practitioners to adapt to the context they are working within.

Putting It Into Practice:

A Messaging Toolkit

The following tools are designed to support real-time communication across different settings. They reflect what practitioners are navigating and provide language that can be adapted without losing meaning and impact.

A Structure for Responding in Real Time

A clear and repeatable structure can help practitioners stay grounded in conversations that feel uncertain or high-pressure. This four-part framework keeps the message focused while allowing flexibility across settings.

VALUE	REALITY	SOLUTION	IMPACT
What do we all agree families deserve?	What is the gap between that value and what is happening right now?	What community-led solutions are already closing that gap?	What becomes possible when those solutions are funded and scaled?

Example — Community Setting:

"Every family deserves safe, dignified care during pregnancy and birth. Right now, Black families are experiencing poorer care experiences. Community-based doulas and midwives are already changing these outcomes in California. When these supports are funded and sustained, families are healthier, and communities are stronger."

Example — Funder Meeting:

"We all want to see California families thriving. The data shows persistent gaps in maternal health outcomes, especially for Black families. Community-led models of care have already demonstrated improvements in key outcomes. Long-term, sustained investment in these organizations is crucial to create the changes we all want to see."

Example — Policy Conversation:

"California has made commitments to maternal health. Now we need policy that funds the models we know are working — doula support, midwifery access, culturally aligned group prenatal care, and guaranteed basic income are all evidence-based, community-driven, and ready to scale."

Adapting Language Across Environments

Birth equity leaders navigate a range of settings, some of which welcome direct, race-explicit language and some that require more flexibility. The goal is not to abandon the truth, but to ensure the message can be heard and acted on in different environments. The table below shows how core messages can remain consistent while language shifts to fit the context.

Core Message	More Direct Language	Adaptable Language (Restricted Settings)
Unequal outcomes in maternal health	“Black women are more likely to experience complications and receive lower quality care.”	“Some families experience higher rates of complications and face barriers to receiving consistent, high-quality care.”
Need for targeted investment	“Targeted investment in Black maternal health is necessary to improve outcomes.”	“Investment is needed to ensure families facing the greatest barriers can access consistent, high-quality care.”
Role of systemic factors	“Systemic racism impacts how Black women experience care.”	“Differences in how care is delivered and accessed contribute to gaps in outcomes.”

Adapting Language Across Environments CONT.

Core Message	More Direct Language	Adaptable Language (Restricted Settings)
Importance of community-based care	“Black-led, community-based models are improving outcomes.”	“Community-based care models are improving access, trust, and outcomes for families.”
Urgency of the issue	“Black maternal health is a critical and urgent issue.”	“Improving maternal health outcomes is a critical priority for families and communities.”

Avoiding Common Pitfalls

Certain messaging patterns can make it harder for audiences to connect with the work or understand what is needed. Small shifts in language can strengthen clarity, credibility, and impact.

Pitfall	Less Effective Language	Stronger Approach
Overly technical or academic language	“We are addressing perinatal morbidity disparities through targeted interventions.”	“Too many families are not getting the care they need to stay healthy during pregnancy and after birth. Expanding access to supportive care improves outcomes.”

Avoiding Common Pitfalls **CONT.**

Pitfall	Less Effective Language	Stronger Approach
Leading with the problem only	“Maternal health outcomes are getting worse.”	“Too many families are not receiving consistent, high-quality care. Community-based support models are improving outcomes and expanding access.”
Repeating oppositional framing	“This issue is not just about individual behavior.”	“Maternal health outcomes are shaped by access to care, quality of support, and the resources available to families.”
Centering institutions over communities	“Our program delivers services to improve outcomes.”	“Community-led care models are strengthening support for families and improving how care is experienced.”
Vague or abstract language	“We need systemic change.”	“We need to expand access to midwifery care, doula support, and postpartum services that families can rely on.”

Knowing Your Audience

Birth equity leaders communicate with many different audiences, and each one requires a different entry point. The table below is a quick reference for the core audiences practitioners encounter, what they tend to care about, and how to lead the conversation.

Knowing Your Audience **CONT.**

Audience	What They Care About	How to Lead	Watch Out For
Funders	Outcomes, evidence, sustainability, ROI on investment	Lead with proof: community-led models are producing results. Connect investment to long-term impact.	Assuming they understand the ecosystem. Name the models, name the organizations.
Policymakers & Legislators	Constituent impact, cost savings, political viability	Connect Black maternal health to broader family and economic stability. Use values language: every family deserves safe care.	Jargon and movement language. Keep it grounded and specific to California.
Clinical Partners & Health Systems	Patient outcomes, liability, quality improvement, evidence base	Lead with shared goals: better outcomes for patients. Emphasize that community-based models reduce burden on systems.	Framing that sounds adversarial. Focus on partnership and what the data shows.
Community Members & Families	Safety, dignity, access, being seen and believed	Lead with values and lived reality. Speak directly. Name what is happening and what is available.	Clinical or policy-heavy language. This audience needs practical information, not frameworks.
Media	Story, conflict, human interest, newsworthiness	Center real stories and real stakes. Offer birth equity leaders as spokespeople. Connect local to statewide or national trends.	Over-amplified “doom and gloom”, or “death and “dying” narratives. Our stories are not for people to consume Black-pain but to drive change.

Moving Forward:

Clarity, Strategy, and Alignment

Practitioners advancing birth equity are not only delivering care and support. They are navigating complex systems, shifting language expectations, and increasing pressure to justify work that communities already know is necessary.

This moment requires more than consistent messaging. It requires strategy.

Clear, grounded narrative helps ensure that what families are experiencing, and what communities are building, remains visible even as language shifts. It creates alignment across partners, strengthens credibility in decision-making spaces, and supports practitioners as they move between environments that require different approaches.

At the same time, this work is not happening in a neutral landscape. Practitioners are making real-time decisions about how to communicate in ways that protect their work, sustain resources, and continue showing up for their communities. The ability to adapt language without losing meaning is a critical part of that strategy.

This guide is intended to support partners in carrying that clarity forward. Not as a script, but as a shared foundation that can be adapted across spaces while staying rooted in the same purpose.

Advancing birth equity is part of a broader effort to repair longstanding harm and invest in the health, safety, and wellbeing of Black families. The way this work is communicated will continue to shape how it is resourced, supported and carried forward.





California

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California Coalition for Black Birth Justice
Created and developed by L. Norwood & Associates**