



# Nurturing Care from Within:

## The Transformative Impact of Community-based Doulas in the United States

**Shawna J. Howard, CD (DONA)**

The U.S. has one of the most advanced health care systems in the world yet continues to face significant challenges in reducing disparities in maternal health outcomes. Black, American Indian and Alaska Native women are two to three times more likely to die from pregnancy-related causes than White women.<sup>2</sup> More than 80% of pregnancy related deaths are preventable.<sup>3</sup> Systemic racism is the root cause of disparities in maternal health outcomes and spans income and education levels.<sup>4</sup>

[Merck for Mothers](#) is Merck's \$650 million initiative to help create a world where no woman has to die while giving life. Since 2011, Merck for Mothers has been catalyzing efforts to improve maternal health and reduce disparities in the U.S. by addressing the leading contributors to maternal mortality: poor data on why women are dying; inconsistent obstetric care; the rise in chronic conditions; and limited awareness of the factors contributing to maternal mortality in the U.S., including systemic racism in clinical care. Merck for Mothers is committed to investing in innovative solutions to improving outcomes, through investments like the Safer Childbirth Cities Initiative.

The [Safer Childbirth Cities](#) Initiative is currently funding community-based organizations in 20 U.S. cities to help improve the maternal health outcomes that matter most in their cities. The Safer Childbirth Cities Initiative aims to support community-based organizations in U.S. cities with a high burden of maternal mortality and morbidity to implement evidence-based interventions and innovative approaches to reverse the country's maternal health trends and directly tackle racial inequities in maternal health outcomes. Many grantees are working to improve outcomes through the expansion of accessible community-based doula trainings and support. Community-based doulas are a vital piece of the complex puzzle in improving maternal health equity in the U.S.

# What is a Community-based Doula?

Doulas are nonclinical birth workers who are trained to provide physical, emotional, and informational support to pregnant people in the prenatal, birth, and postpartum periods. Doulas do not give medical treatment and do not take the place of health care professionals like doctors, midwives, or nurses. Instead, during the pregnancy, labor and delivery, and postpartum period, doulas offer extra assistance in the form of social support, emotional support and/or care coordination when medical professionals cannot or do not. Community-based doulas have a deep knowledge of the communities where they serve and a unique focus on culturally congruent care and access inclusivity, while providing the same supports mentioned above at little to no cost. Community-based doulas work to meet their clients where they are with simultaneous efforts to fill gaps of support with resources found within their respective communities. This added layer of support is critical for women of color and women from underserved communities who are significantly more likely to experience inequities like racism and implicit bias in traditional healthcare settings.<sup>5</sup> Community-based doulas give women of color and women from underserved communities a system of support that centers their voices, agency and autonomy over their birthing and parenting experiences.

## Evidence shows that having the support of a doula can help:

- Improve satisfaction with care and birthing experience
- Increase the likelihood of a spontaneous vaginal delivery
- Reduce c-section rates
- Lower rates of preterm birth and low birth weight babies<sup>6</sup>
- Improve patient provider communications<sup>7</sup>

# Community-based Doula Highlights

Supporting community-based doulas is a core component of the Safer Childbirth Cities initiative, an effort to address racial inequities in maternal health outcomes by providing culturally congruent care to women and birthing people. Each organization connected to the Safer Childbirth Cities initiative is unique, but their common thread is engaging their communities through education, advocacy, and the implementation of evidence-based interventions like training and improving access to community-based doulas. Community based organizations like the Tulsa Birth Equity Initiative (Tulsa, OK), the Mississippi Public Health Institute (Jackson, MI), Sisterweb (San Francisco, CA), Urban Baby Beginnings (Norfolk, VA), Trenton Health Team (Trenton, NJ) and Restoring Our Own Through Transformation (Columbus, OH) are working to address unmet need for women of color within their communities.



# Tulsa Birth Equity Initiative

Tulsa, OK • [tulsabei.org](http://tulsabei.org)



**TULSA BIRTH  
EQUITY INITIATIVE**

## Mission

Mission: The Tulsa Birth Equity Initiative (TBEI) equips families in Tulsa to have healthy births with dignity and reduce maternal health disparities. TBEI and collaborators leverage the influence, skills and experiences of local organizations to improve maternal health policies, data systems and service delivery systems for Black, Indigenous and justice-involved women and teens.

## Community Reflections

“There were decisions that I needed to make which I did not necessarily know, but having an advocate (doula) helped me with that and kind of slowed down. She would slow down and explain all the information that was coming from the doctors and she would explain all the information that was coming from the doctors and she would explain it in more simple terms.”

“Organizations like Tulsa Birth Equity Initiative are trying to close the gap in the medical system and medical care in general, to serve, support and provide women of color.”

“Going into labor and delivery, she (doula) was there helping us. My husband was a little stressed and anxious, but everything was good up until we heard that I had to get a C-section. Knowing that she was there to help him while I was still in the room with the doctors... you just can't put a price on that emotional support”  
-Patient G

# SisterWeb

San Francisco, CA • [sisterweb.org](http://sisterweb.org)



## Mission

SisterWeb and collaborators are increasing Black and Latinx women's access to culturally-, racially- and ethnically-aligned doula care by providing health advocacy, wellness interventions and mental health services before, during and after birth.

## Community Reflections

“I was confused, hurt, and just exhausted, and I didn't want to fight or try to understand. My doula fought for me. As soon as she was included in the phone conversations [with my doctors] and in [prenatal] appointments, the doctors began to treat me better. If I did not have [my doula] I would not have made it through the rough patch of my pregnancy.”



# Trenton Health Team

Trenton, NJ • [trentonhealthteam.org](http://trentonhealthteam.org)



## Mission

Trenton Health Team and collaborators are creating a robust system of data analytics to expand knowledge of maternal health challenges and enhancing doula services to support women experiencing high-risk pregnancies within Black, Latinx and immigrant communities. They are also providing a system of support to improve patient access to community resources.

## Community Reflections

“During this doula-training program, we learned everything from the beginning of life from a scientific perspective to labor massage techniques, medical interventions during labor, and personal care and safety when serving the community. However, what made this training program unique was the added lens of cultural sensitivity when serving our community.”

# Urban Baby Beginnings

Norfolk, VA • [urbanbabybeginnings.org](http://urbanbabybeginnings.org)



## Mission

Urban Baby Beginnings and collaborators are reducing disparities for childbearing women of color by building data infrastructures for state and city officials, strengthening community-based support systems, connecting women to services provided by practitioners of color and raising women’s awareness of the importance of perinatal care.

## Community Reflections

“...I called my doula who helped me, reassured me and guided me through contractions. I went through 6 hours of labor at home, unmonitored, w little to no information on what my body was experiencing. Until I called my doula. I thank God every day that she was a part of my plan. I definitely felt lack of concern by the hospital due to discrimination. I feared the worse being a black woman carrying a life, I prayed and God gave me and my doula the grace to birth my child. I’m forever grateful.”

“Before I trained with Urban Baby Beginnings, I had gone through three doula trainings. For the first time, I feel comfortable supporting someone from preconception until their postpartum period. I am so thankful for Urban Baby Beginnings’ support and belief in the community.”



# Restoring Our Own Through Transformation (ROOTT)

Columbus, OH • [roottrj.org](http://roottrj.org)



Restoring Our Own Through Transformation

## Mission

ROOTT and its partners are creating a model of community-based full-spectrum perinatal support doula care, with focus on Black women who have limited or no access to insurance, to ensure that they receive relevant, consistent, safe, and equitable care.

## Community Reflections

“Client has expressed a deep sense of security and increased knowledge in her care. She was a late entry to our program...and was able to mitigate some potential complications, which she attributed directly to having a ROOTT Perinatal Support Provider. In her words, ‘You saved my life. My husband and I believe you are why I am still here’....”

# Mississippi Public Health Institute

Jackson, MS • [msphi.org](http://msphi.org)



## Mission

Mississippi Public Health Institute and its partners are providing community-based support to pregnant and post-partum women, reducing unnecessary cesarean sections, and decreasing adverse maternal health outcomes through specially trained doulas.

## Community Reflections

“My doula set the mood from birth knowledge to music playlist... and making me so comfortable. She kept my birth team informed... she literally had the nurses and doctor saying my room decor was so nice and that it smelled better than all other rooms on the floor. She even gifted the nurses on the floor and brought them fresh doughnuts the morning of my delivery. If I had to do it all over again... I would want to do it again with [my doula]. She is the absolute BEST. That lady had my best interest from the beginning to end.”

“I want to be what she was to me for someone else.”



# What Community-based Doulas Need

While the recognition of doula services is increasing throughout healthcare systems, there are still many obstacles to fully integrating doula care into existing hospital infrastructure. The attitudes toward doulas range from strong support to a lack of understanding regarding their complementary role alongside other healthcare providers. To fully integrate doulas into the healthcare system, it is important to address issues that impede their impact such as accessibility in a variety of birth settings, as well as autonomy and collaboration with other healthcare providers. In a doula friendly birth setting, the scope of a doula should be understood, and their services supported as an integral and chosen member of the birthing person's team.<sup>8</sup>

Adequate funding is a persistent issue that impedes doulas' ability to expand their work without livable wages and creates limited sustainability.<sup>9</sup> Lack of comprehensive insurance including private and Medicaid coverage with access to reimbursement for doula services, puts doula care out of reach for many families, particularly those who are underserved and people of color. However, Medicaid coverage of community-based doula support is increasingly recognized as a promising model to improve maternal health outcomes and health equity, while also potentially reducing costs.<sup>9</sup> Currently, there are twelve states that are reimbursing for doula services in Medicaid. These states include California, Florida, Maryland, Michigan, Minnesota, New Jersey, Nevada, Oklahoma, Oregon, Rhode Island, Virginia and Washington, DC.<sup>11</sup> As conversations continue and policies are developed and implemented community organizations and doulas should remain at the center of decision making.

## Conclusion

Supporting community-based organizations offering doula services and training exemplifies a proactive approach to bridging gaps in perinatal care. By investing in these organizations, we strengthen the network of care available to pregnant individuals, particularly those from marginalized communities, ensuring that they receive culturally congruent care and personalized support.

Promoting sustainability and ensuring livable wages for community-based doulas, allows them to continue providing essential emotional, physical, and informational support to expectant mothers without sacrificing their own well-being. The call for payer reimbursement and the expansion of Medicaid coverage to include doula services is an essential stride toward making these services accessible to all, irrespective of socio-economic backgrounds. Furthermore, the creation and ongoing support of comprehensive policies centered around maternal health reflects a commitment to addressing the existing disparities and challenges in perinatal care. These policies can serve as a catalyst for transformative change, fostering a health care landscape that is equitable, compassionate, and responsive to the diverse needs of all pregnant individuals.

Inspired by the unwavering commitment of community-based organizations, and propelled by initiatives like Safer Childbirth Cities, Merck for Mothers envisions a future where the needs of mothers and birthing people are prioritized. Reaching this goal will require collaborative action and unwavering dedication, as we strive to ensure that every individual embarking on the journey of parenthood does so with the support, high quality care and the dignity they deserve.



# References

1. Maternal mortality. (2023, February 22). World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/maternal-mortality>
2. Infographic: Racial/Ethnic Disparities in Pregnancy-Related Deaths .... (n.d). <https://www.cdc.gov/reproductivehealth/maternal-mortality/disparities-pregnancy-related-deaths/infographic.html>
3. Four in 5 pregnancy-related deaths in the U.S. are preventable. (n.d). <https://www.cdc.gov/media/releases/2022/p0919-pregnancy-related-deaths.html>
4. Systemic racism, a key risk factor for maternal death and illness. (n.d). <https://www.nhlbi.nih.gov/news/2021/systemic-racism-key-risk-factor-maternal-death-and-illness>
5. Gomez, Manchikanti, Anu et al. (2021, October 14). "My 9 to 5 Job Is Birth Work": A Case Study of Two Compensation Approaches for Community Doula Care. <https://scite.ai/reports/10.3390/ijerph182010817>
6. National Partnership for Women & Families (2018). Continuous Support for Women During Childbirth: 2017 Cochrane Review Update Key Takeaways. The Journal of perinatal education, 27(4), 193-197. <https://doi.org/10.1891/1058-1243.27.4.193>
7. Amram, N. L., Klein, M. C., Mok, H., Simkin, P., Lindstrom, K., & Grant, J. (2014). How birth doulas help clients adapt to changes in circumstances, clinical care, and client preferences during labor. The Journal of perinatal education, 23(2), 96-103. <https://doi.org/10.1891/1058-1243.23.2.96>
8. Community Based Doulas and the Medicalization of Birth. (2020, September 14). <https://www.healthconnectone.org/wp-content/uploads/2020/02/CBD-MedofBirth-FINAL-1.pdf>
9. Sustainable Funding for Doula Programs. (2017, June 26). [https://www.healthconnectone.org/wpcontent/uploads/2020/09/Sustainable\\_Funding\\_for\\_Doula\\_Programs\\_A\\_Study\\_single\\_51.pdf](https://www.healthconnectone.org/wpcontent/uploads/2020/09/Sustainable_Funding_for_Doula_Programs_A_Study_single_51.pdf)
10. Community Based Doulas and the Medicalization of Birth. (2020, September 14). <https://www.healthconnectone.org/wp-content/uploads/2020/02/CBD-MedofBirth-FINAL-1.pdf>
11. Current State Doula Medicaid Efforts. (2023, July 31). National Health Law. <https://healthlaw.org/doulamedicaidproject>