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Increasing Access to High-Performing Maternity Services: Doula Support

Operational Guidance

This operational guidance series identifies four elements of high-performing maternity services that hospitals and health systems can incorporate or expand to rapidly improve maternal and newborn health: midwifery care, community birth settings (birth centers and home birth), doula support, and services of community-based perinatal health workers.¹

These models have an impressive track record vis-à-vis standard maternity care (see below). They all prioritize individualized, relationship-based care and support that is respectful, dignifying, and trustworthy. This includes recognizing the considerable physical, emotional, and social challenges that many families face, and offering holistic services in response.

When community-based and -led, these models typically offer culturally congruent services and are exceptionally valuable to communities of color and other historically marginalized groups experiencing racism and other forms of discrimination.

Doula Support Improves Outcomes

Doulas are non-clinical birth workers who support childbearing women and families. Birth doulas provide emotional support, comfort measures, information, and advocacy for achieving the birthing person's goals during labor and birth. Others also provide similar support during pregnancy and the postpartum period, called the "extended model."

An increasing number of community-based doulas support childbearing families, and a growing number of state Medicaid programs are either covering doula services or are preparing to do so.²

Evidence demonstrates the benefits of doula services. Although birth doulas are not clinicians, high-quality evidence finds that childbearing people who have doula support when giving birth are:

- More likely to have a shorter labor and a spontaneous vaginal birth
- Less likely to use pain medications

- Less likely to have a cesarean birth
- Less likely to rate their childbirth experience negatively ³

More and more doulas provide an “extended” model, offering similar support during pregnancy and in the postpartum period in addition to childbirth. This longitudinal support can lower the risk of preterm birth and low birthweight babies.

Many birthing women and families want access to doulas. Interest in doula services appears to be on the rise. A statewide survey of Californians who gave birth in 2016 found that 57 percent expressed interest in doula support should they give birth in the future. This degree of interest far exceeds current rates of access and use.⁴

Resources to Increase Access to Doula Support

- **The Birth Doula Workforce in the U.S.: Rapid Response Brief (2022)**
Summarizes available information about the doula workforce, including training, payment, and financial sustainability; pandemic and other stressors; and policies and programs to increase access to doula support.
▶ <https://familymedicine.uw.edu/chws/wp-content/uploads/sites/5/2022/08/Doula-Workforce-RR-2022.08.22.pdf>
- **Doula Medicaid Project**
Aggregates extensive resources, including doula-related efforts of state legislatures, archives of state and federal bills, many resources describing doula pilot programs in California, doula survey results, and the growing number of California and national reports and other resources.
▶ <https://healthlaw.org/doulamedicaidproject/>
- **Improving Our Maternity Care Now Through Doula Support (2022)**
Describes doula support models, evidence about doula support, and state policy variation. Features resource directory and policy recommendations for increasing access.
▶ <https://nationalpartnership.org/wp-content/uploads/2023/02/improving-maternity-doula-support.pdf>
- **Private Insurance Coverage of Doula Care: A Growing Movement to Expand Access (2023)**
While doula benefits through private insurance are limited at present, states can increase access by requiring insurers to offer this benefit.
▶ <https://healthlaw.org/private-insurance-coverage-of-doula-care-a-growing-movement-to-expand-access-2/>

Endnotes

¹ National Partnership for Women & Children. *Improving Our Maternity Care Now*, September 2020, <https://nationalpartnership.org/health-justice/maternal-health/improving-our-maternity-care/>

² Carol Sakala and Rachel Wei. *Improving Our Maternity Care Now Through Doula Support*, National Partnership for Women & Children, September 2020, <https://nationalpartnership.org/wp-content/uploads/2023/02/improving-maternity-doula-support.pdf>

³ *Ibid.*

⁴ Carol Sakala, Eugene R. Declercq, Jessica M. Turon, and Maureen P. Corry. *Listening to Mothers in California: A Population-Based Survey of Women's Childbearing Experiences*, National Partnership for Women & Children, September 2018, <https://www.chcf.org/wp-content/uploads/2018/09/ListeningMothersCAFullSurveyReport2018.pdf>

Find detailed recommendations and more resources at nationalpartnership.org/raisingthebar

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