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Summary of the Rigorous Research on Community-Based Doulas

Community-based doulas are social-service professionals who provide non-clinical emotional, physical, and informational support to expectant parents. Community-based doulas offer support during pregnancy through the postpartum period, from 6 weeks to 12 months. Community-based doulas differ from lay doulas and other birth doulas because they are specifically trained for culturally sensitive care and focus on expectant parents who are more likely to experience discrimination and racism in traditional healthcare settings.

Additionally, community-based doulas are more likely to be people of color and often have shared experiences with their clients. Doulas support their clients by providing childbirth education, helping them navigate the health care system, advocating for them throughout the perinatal period, and connecting them with community resources.



EMERGING EVIDENCE FOR IMPACTS ON CHILD AND FAMILY WELLBEING

Because community-based doulas are specifically trained for culturally sensitive care and to focus on expectant parents who are more likely to experience discrimination and racism in traditional healthcare settings, the evidence also suggests that the involvement of a community-based doula may decrease disparities in birth outcomes for mothers and infants. Further research is needed to determine whether community-based doulas can contribute to reductions in maternal mortality and morbidity.

States can support community-based doulas by offering reimbursement for services through Medicaid and private insurance, offering workforce support such as grants and scholarships for trainings, expanding access to community-based doula care through state registries or awareness campaigns, and leveraging funding to support community-based doula programs. Partnership with community-based doulas in the state is essential to the success of any support strategy.

EVIDENCE-BASED POLICYMAKING

The Prenatal-to-3 Policy Impact Center at Vanderbilt University analyzes rigorous evidence to determine which policies are proven to produce positive outcomes for young children, their families, and society. A comprehensive review of the evidence reveals that community-based doulas are an effective strategy to improve child and parent health and developmental outcomes.

RIGOROUS STUDIES FIND THE FOLLOWING IMPACTS

Community-based doulas improve birth outcomes.

- Decreased rates of preterm birth by 8 percentage points.
- Decreased rates of low birthweight by 8 percentage points.
- Decreased NICU admissions by 5 percentage points.
- Decreased epidural use by 11.4 percentage points.

Community-based doulas increase attendance at medical appointments and childbirth education classes.

- Increased attendance at four or more well-child visits within the first 6 months of life by 10 percentage points.
- Increased attendance at a maternal postpartum visit within 60 days of delivery by 10 percentage points.
- Childbirth education class attendance increased by 40.5 percentage points.

Community-based doulas help foster nurturing and responsive child-parent relationships.

- Increased parental guidance and encouragement towards infants at child age 4 months.
- Increased mothers' prompt response when infants were upset at child age 4 months.
- Increased mothers' engagement with infants in stimulating activities such as reading to them, playing peekaboo, and playing with toys at child age 3 months.
- Increased safe infant sleep practices among mothers by 9.4 percentage points.

Community-based doulas improve child health and development.

- Increased breastfeeding initiation rates by 7.0 and 14.3 percentage points.
- Decreased nonbeneficial feeding practices that involve giving infants popular but nutritionally deficient food by 12.3 percentage points.

For more information on community-based doulas:

- Refer to our comprehensive evidence review for additional detail on and citations for the above-referenced studies: <https://pn3policy.org/policy-clearinghouse/community-based-doulas/>.
- Refer to our Prenatal-to-3 State Policy Roadmap for state progress and variation: <https://pn3policy.org/pn-3-state-policy-roadmap-2024/us/community-based-doulas/>.
- Refer to our state policy lever checklist for necessary considerations to maximize the effectiveness of community-based doulas: <https://pn3policy.org/state-policy-lever-checklist-doulas/>.