Benefits of Doula Care

**Reduction of Birth Complications**

Doula-assisted mothers were, two times less likely to experience a birth complication involving themselves or their baby

Gruber, K. J., Cupito, S. H., & Dobson, C. F. (2013). Impact of doulas on healthy birth outcomes. *The Journal of perinatal education*, *22*(1), 49–58. <https://doi.org/10.1891/1058-1243.22.1.49>

**Decreased rate of preterm births and low birth weights**

Nondoula-assisted mothers were four times more likely to have an LBW baby than mothers who were assisted by a doula.

Gruber, K. J., Cupito, S. H., & Dobson, C. F. (2013). Impact of doulas on healthy birth outcomes. *The Journal of Perinatal Education*, *22*(1), 49–58. <https://doi.org/10.1891/1058-1243.22.1.49>

**C-sections 25% less likely**

1.     25% decrease in the risk of Cesarean; the largest effect was seen with a doula (39% decrease)

            From [Evidence Based Births](https://evidencebasedbirth.com/the-evidence-for-doulas/) citing <https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD003766.pub6/epdf/full> (last update 2017)

2.     Medicaid-funded births to women with doula support had a cesarean rate of 22.3%, significantly lower than the cesarean rate in the general Medicaid population of 31.5%.
            - about 29% difference
Backes Kozhimannil, Katy et al., Doula Care, Birth Outcomes, and Costs Among Medicaid Beneficiaries, *American Journal of Public Health*April 2013, Vol 103, No. 4., <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3617571/pdf/AJPH.2012.301201.pdf>

**14% reduction in newborn admittance to special care unit**

From [Evidence Based Birth](https://evidencebasedbirth.com/the-evidence-for-doulas/): “The rate of special care nursery admissions was no different between people who received continuous support and those who received usual care.”

From [Joy in Birthing Foundation](https://www.joyinbirthingfoundation.org/): “14% decrease in the risk of newborns being admitted to a special care nursery.” However, they did not say this outcome was best affected specifically by doulas rather than any other type of support

Other websites that cited the 14% said the same thing and reference the Cochrane review (last updated in 2017).

**Breastfeeding Rates**

1.     68% of women receiving doula care and 54% of women receiving standard care were breastfeeding at 6 weeks. In the subset with a prenatal stressor (*n*=63), the doula care group was more than twice as likely to be breastfeeding at 6 weeks (89% vs. standard care, 40%). Breastfeeding at 6 weeks was also significantly associated with timely onset of lactogenesis and maternal report that the infant “sucked well” at day 3.

DC = Doula Care

SC = Standard Care

Setting: regional hospital in Northern California

Nommsen-Rivers, Laurie A. et al., Doula Care, Early Breastfeeding Outcomes, and Breastfeeding Status at 6 Weeks Postpartum Among Low-Income Primiparae., *Journal of Obstetric, Gynecologic & Neonatal Nursing*, Volume 38, Issue 2, 157 – 173 [https://www.jognn.org/article/S0884-2175(15)30173-8/fulltext#s0175](https://www.jognn.org/article/S0884-2175%2815%2930173-8/fulltext#s0175)

2.     While the difference in adolescent mothers was minimal, doula-assisted adult mothers were significantly more likely to initiate breastfeeding.

Adolescent nondoula mothers: 64.4%

Adolescent mothers with doulas: 67.4%

Adult nondoula mothers: 73.4%

Adult mothers with doulas: 90.2%

Gruber, K. J., Cupito, S. H., & Dobson, C. F. (2013). Impact of doulas on healthy birth outcomes. *The Journal of Perinatal Education*, *22*(1), 49–58. <https://doi.org/10.1891/1058-1243.22.1.49>