



# The Roles of Doulas in Maternal Health Outcomes

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## Abstract

Maternal health outcomes within the United States reflected a significant increase in 2023, following a continued flat rate in the years prior to the COVID-19 pandemic. This increase is extremely distributed in the Southern States and among populations with limited access to health services. Many programs and interventions have been utilized to improve such outcomes, and among those being used are the use of doula services. This mini review takes a look at the current state of maternal mortality rates and the integration of doula services into the medical model, observing for a positive impact on maternal health outcomes.

## Introduction

Mortality rates and outcomes continue to increase throughout the southern states and southern communities within the United States, at an unexplained rate. States and communities with improved outcomes have been found to have one common intervention: the recognition and use of doula services. States in the south (Alabama, Arkansas, Georgia, Louisiana, Mississippi, North Carolina, and Tennessee) report pregnancy-related deaths at least twice as high as states with the lowest rates [1]. Medicaid enrollment patterns show that the southern states have invested less in maternal health, with fewer states expanding Medicaid eligibility in the midst of many obstetric units in rural hospitals having to close. This leads to an increased probability of mothers not having access to obstetric service providers in some communities [2]. This gap in such services can be strengthened by perinatal professionals like doulas, at a much affordable cost ratio. Doulas provide advice and support before, during, and after birthing. Often, there is a space that a mother traditionally journeys through with only the support of the environment the expecting mother resides. An environment that

exists outside of the healthcare system they are served by, if those services are accessible to the mother at all. Doulas can function as advocates, navigators, and in many cases, prevention specialists. In a 2022 survey, following a 2021 Supportive Birth Collaborative (SBC) in a US hospital, there was a significant improvement in patient outcomes because of the clinician-doula trust relationship focus of the program. The relationship between the doulas and the clinicians has long been one of the problems with such a system change and acceptance of doula services into the traditional medical model. Many of the clinicians in SBC reported having a limited understanding of a doula's role [3].

In 2020, the Centers for Disease Control and Prevention data on maternal mortality from 38 United States showed that 63 percent of deaths occurred within the first-year post birth [1]. This is a period when most mothers receive limited direct care from their clinicians, if they have not been completely discharged from the need for maternal services. This led to the supportive policy backing the need for Medicaid enrollment for up to a year for states offering

the extension. The development of the doula-clinician relationships and trust-building can play a significant role in addressing this gap that often leads to post-birth complications. One doula home visits intervention study was associated with positive care behaviors for new infants in a randomized controlled trial conducted within the state of Illinois. Results of the study showed that the intervention group mothers were likely to participate in a birth preparation class, less likely to use epidurals/pain medication during birth, and more likely to initiate breastfeeding [4]. Such engagement, initiated and encouraged by doulas, played a big role in gaining knowledge from pre-birth that could be utilized in postpartum. Another tri-state retrospective cohort study (California, Florida, and a northeastern state) was conducted from 2014-2020, using Medicaid claims. The study compared maternal health outcomes for women receiving doula services and for women who did not receive doula services; women receiving doula services were 52.9 % less likely to have a cesarean delivery and 57.5% less likely to experience postpartum depression/anxiety [5]. Doula/clinician partnerships resulted in a higher reduction in the odds of cesarean delivery.

## Conclusion

Research supports the idea that doulas have an impact on maternal outcomes. The federal government now supports programs and training opportunities for the doula workforce and stands with healthcare service programs/providers integrating

doula services into care models. Some states provide Medicaid, and some employers' plans now provide coverage for such services [6]. Sixteen states currently provide Medicaid reimbursement for doula services, showing a head start in policy formation that leads to improving maternal outcomes in a nation on the brink of an epidemic in many of its southern states.

## References

1. Eugene Declercq, Laurie C Zephyrin (2025) Maternal Mortality in the United States (Commonwealth Fund, July 2025).
2. Knocke K, Chappel A, Sugar S, De Lew N, Sommers BD, et al. (2022) Doula Care and Maternal Health: An Evidence Review. (Issue Brief No. HP-2022-24). Office of the Assistant Secretary for Planning and Evaluation U.S. Department of Health and Human Services.
3. Myrick JC, Schneider L, Gebel C, Clarke K, Crawford S, et al. (2024) The system can change: a feasibility study of a doula-clinician collaborative at a large tertiary hospital in the United States. *Implementation Science Communications* 5(1): 144.
4. Hans SL, Edwards RC, Zhang Y, (2018) Randomized Controlled Trial of Doula-Home- Visiting Services: Impact on Maternal and Infant Health *Matern Child Health J* 22 (1): 105-113.
5. Falconi AM, Bromfield SG, Tang T, Malloy D, Blanco D, et al., (2022) Doula care across the maternity care continuum and impact on maternal health: Evaluation of doula programs across three states using propensity score matching. *EClinicalMedicine* 1(50) 101531.
6. Corallo B, Tolbert J, Saunders H, Frederiksen B (2022) Medicaid Enrollment Patterns During the Postpartum Year.

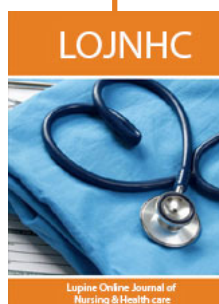


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