

**Proposed Minnesota Public Health Association Resolution:
Endorsing Doula Care for All Birthing Women, Especially Those Receiving Medical
Assistance and Minnesota Care**

WHEREAS, doulas provide continuous physical and emotional support to women during labor and birth, including support for self-advocacy and informed consent¹³; and

WHEREAS, doulas often meet with mothers prenatally and postpartum in their homes, where they offer support and resources for all aspects of a woman's individual perinatal needs and experience^{13, 24}; and

WHEREAS, women who have a doula have up to 50% fewer cesarean sections ^{6,7,8,9,23}; and

WHEREAS, cesarean sections have been shown to contribute to maternal mortality and morbidity ³⁰ and also to preterm birth²²; and

WHEREAS, the cesarean rate has increased every year in Minnesota and the United States for the last 13 years, to rates of 25.5 % and 31.4% respectively ²⁸; and

WHEREAS, cesarean rates are increasing for all groups of birthing women, regardless of age, the number of babies they are having (multiples), the extent of health problems, their race/ethnicity, or other breakdowns²⁴; and

WHEREAS, babies of high risk women supported by a doula prenatally have better birth weights ²¹, and fewer NICU admissions ^{8,9}; and

WHEREAS, women who have doula care are less likely to give birth with vacuum or forceps, have regional analgesia (e.g. and epidural), have any analgesia (e.g., narcotic pain medication), ^{23, 29} or be induced¹¹ thereby reducing the risks, side effects and expense of those interventions; and

WHEREAS, postpartum depression (PPD) is the number one complication of childbirth affecting an estimated 12-15% of all postpartum women²⁴ (8000-11000 Minnesota women annually); and

WHEREAS, PPD impacts maternal adjustment, attachment and bonding ^{1,2,4,5}, and breastfeeding ³, while infants whose mothers are suffering from PPD are more likely to have behavioral, language, and developmental deficits as well as display an increase in depressive symptomology such as irritability, prolonged crying and poor weight gain, ²⁵; and

WHEREAS, doula support during pregnancy and labor has been proven to decrease rates of PPD ^{26,27}; and

WHEREAS, women who receive doula care have an enhanced birth experience and self-image ^{2,3,17}; and

WHEREAS, in nearly every culture throughout history women have been surrounded and cared for by other women familiar to them during childbirth ¹² ; and

WHEREAS, doctors, midwives and nurses have demonstrated appreciation for the extra attention given to their patients and the greater satisfaction expressed by women who were assisted by a doula ¹⁴ ; and

WHEREAS, in the State of Minnesota women have a statutory right to doula care if they choose ³¹ ; and

WHEREAS, low-income women and those without family support benefit most from doula support and benefit most from support persons who are not hospital employees ²³.

Therefore, be it resolved that the Minnesota Public Health Association supports legislation and policies that increase access to and funding for doula care.

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