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Gov't Study: Community-Based Doulas Increase Breastfeeding Rates in Low-Income Communities

Breastfeeding is Baby's First Step Out of Poverty

CHICAGO – A new study by the federal government finds that community-based doulas – based on a program started by HealthConnect One in Chicago and now implemented nationwide – dramatically increase breastfeeding rates in underserved communities, where a baby's exposure to breast milk can help mitigate the impacts of poverty.

"Research shows there is no better food than breast milk for a baby's first year of life, but it can be life-changing for a baby born into poverty," said Rachel Abramson, HC One's Executive Director. "The Community-Based Doula Program provides low-income mothers with someone from their community who can help make breastfeeding easier, and guide them toward a healthy pregnancy and a baby who has the ultimate nutritional advantage. This study shows that these community-based doulas can change the way our country cares for our most vulnerable moms and babies, and it can save taxpayer dollars."

U.S. breastfeeding rates are particularly low in disadvantaged communities, where babies are more likely to face health problems. The World Health Statistics in 2010 revealed that 40 countries had better neonatal mortality rates than the United States and 32 had higher rates of exclusive breastfeeding at six months. Furthermore, according to the CDC¹, Non-Hispanic Black babies were almost twice as likely as Non-Hispanic white babies to be born at low birth weight, and Black babies were twice as likely as white babies to die before their first birthday.

Community-based doulas change this trajectory, with an approach that consistently results in high breastfeeding rates and low c-section rates. A community-based doula is a woman of and from the same community who provides emotional and physical support to a woman during pregnancy, birth and the first months of parenting, through home visits and center-based activities. The effectiveness of the program emerges out of the trusting relationship between a community-based doula and her participant, the duration of their relationship, and the continuous presence of the doula during labor and birth.

The study, supported jointly by the U.S. Department of Health and Human Services' Health Resources and Services Administration (HRSA) and the Centers for Disease Control and Prevention (CDC), looked at 8 community-based doula sites around the country assisted by HealthConnect One, and found that 87% of community-based doula clients were breastfeeding at 6 weeks, as compared to 61% of a similar sample.² Even at 3 months, 72% of community-based doula clients were still breastfeeding, as compared to 48% of the broader sample.

These sites were part of a pilot Community-Based Doula Program supported by federal funding, an effort that was championed by U.S. Senator Dick Durbin. The new study concludes that the program was

very successful and should receive additional funding to be replicated nationwide. Congressman Mike Quigley is currently leading the call for bringing the Community-Based Doula Program to dozens of new communities across the country.

“As a father and grandfather, healthy babies have always been one of my priorities,” explained Senator Durbin. “For nearly 30 years, HealthConnect One’s community-based doula program has helped make a healthy start in life possible for so many children and their families. HealthConnect One has developed an innovative program that trains mentors from the community to work with at-risk mothers, many of whom may have nowhere else to turn. The study released today is further evidence that communities nationwide can benefit from this pioneering model.”

Congressman Quigley said, “I applaud HealthConnect One and the Community-Based Doula program for their important work supporting women during their pregnancies, birth and into the early months of parenting. Through peer-to-peer support, this program is successfully helping more women breastfeed their babies, which gives them the best start in life and sets the stage for healthy outcomes down the road.”

Part of the widespread support for community-based doulas comes from the tremendous savings that result from this low-cost way to improve health outcomes. The Institute of Medicine concluded that poor birth outcomes cost \$26 billion annually. Suboptimal breastfeeding is estimated to cost \$13 billion per year in pediatric costs and \$18 billion in maternal costs. This study shows that community-based doulas are helping to lower those costs. And starting a community-based doula program also brings new jobs to underserved communities.

“During this World Breastfeeding Week, we want to celebrate community-based doulas who are helping mothers give their babies the best start at a healthy and successful life,” said Abramson. “We’ve known for years that these doulas are superheroes and we are thrilled that this study recognizes the important role they can play in changing American health and healthcare.”

To read HealthConnect One’s White Paper, “The Perinatal Revolution,” regarding the study initiated by HRSA and the CDC, please click here -

http://www.healthconnectone.org/pages/white_paper_download/362.php

HealthConnect One (HC One) is the national leader in advancing respectful, community-based, peer-to-peer support for pregnancy, birth, breastfeeding and early parenting.

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¹ *Martin, JA, et al. (2010). Births: Final Data for 2010. National Vital Statistics Reports, Vol. 161, Number 1, August 28, 2012, CDC, National Center for Health Statistics.*

² *Using 2008-2010 data from the Pregnancy Risk Assessment Monitoring System (PRAMS) as a benchmark, and focusing on Black, Hispanic, and American Indian WIC-eligible women in states where community-based doula sites were located*