Maternal Health Doula Data Source Inventory

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This inventory includes data sources that can be used to study relationships between doula services and maternal and infant health. The fields in the inventory that describe the data sources are detailed below.

Data Source Name - This includes the name of the data source and the link to its main webpage, if available.

Timespan/Periodicity - This provides the timespan of the dataset and how frequently it is updated.

Sample Size - This indicates the number of records included in each dataset. This information is based on publicly available sources.

Federal Initiative - This Yes/No column indicates whether a data source was federally funded or implemented by a federal agency.

Data Steward / Funder - This identifies the lead/funder of the dataset.

Geographical Coverage – This indicates whether the source includes data from single states, multiple states, or all states (national).

Representative at Geographic Unit - This indicates whether data is representative of the geographical unit specified in the Geographical Coverage field.

Developed Specifically for Data Collection on Doulas - This indicates whether the data source was developed expressly for research on doulas.

Data Accessibility - This provides information on whether the data is publicly accessible or restricted use, and additional information on how to access the data.

Observable Doula Variables - This provides information on the types of variables related to doulas available in the dataset.

Details on Doula Variable(s) - This shares additional details on the variables described in the preceding column, including sample questions and details on how the data are captured.

Example Maternal and Infant Health Outcomes - This details the maternal and infant health outcomes available in the dataset.

Patient-Reported Outcomes Included? - This indicates whether or not patient-reported outcomes are available within the data source. If patient-reported outcomes are available, it provides more information on the types.

| | lo. | Data Source Name | Timespan /Periodicity | Sample Size | Data Steward / Funder | Federal Initiative | | Representative of Geographic Unit | Developed Specifically for Data Collection on Doulas | Data Accessibility | Observable Doula Variable(s) | Details on Doula Variable(s) | Example Maternal and Infant Health Outcomes | Included Patient Reported Outcomes |
|---|-----|------------------------|---|-------------|---|-----------------------|--------------------------------|---|--|---|--|---|--|---|
| Т | ype | of Data Sour | ce: Survey | | | | | | | | | | | |
| 1 | - | DONA Master | 2000-2013 Periodicity unknown | N=35,645 | DONA Internation al | No | Unknown | No | Yes | Data is not publicly available. Researchers may need to reach out to DONA International directly about accessing data. Information on availability of line-level versus aggregate data unknown | Received doula services (payment source for doula services). Source of referral to doula. Length (in hours) of doula support | Data on doula variables as well as demographic and perinatal health variables is collected through the DONA birth doula data collection form - which is voluntarily completed by doulas for each birth they support. The data collection form is completed by the doula following a client's birth and then is sent to the DONA International headquarters where DONA volunteers enter data into a Master (electronic) Data File. | Maternal Health Receipt of childbirth education Breastfeeding initiation Obstetric outcomes (e.g., induction, artificial rupture of membranes, receipt of Pitocin or other augmentation, receipt of IV fluids, receipt of epidural/IV pain medication and timing of epidural receipt) Method of birth (spontaneous vaginal, unplanned cesarean, forceps/vacuum) Occurrence of pregnancy-induced hypertension or gestational diabetes Infant Health Infant mortality Fetal monitoring during labor Preterm birth Low birth rate | Yes Labor duration reported by mother to the doula. |
| 2 | | Study | 2009-2014 Follow-up survey for enrolled participants: 1, 6, 12, 18, 24, 30 and 36 months postpartum | N= 3,006 | Eunice Kennedy Shriver National Institute of Child Health and Human Developme nt | Yes | Single state (Pennsylvania) | No | No | Data, codebooks, and survey questionnaires are freely available. Line-level data available to researchers | Received doula services (labor or birth). | Respondents were asked whether a doula or trained labor assistant provided support during labor or birth. | Maternal Health Mode of delivery Psychosocial factors (social support, stress, PTSD, depression) Health habits before and after pregnancy Experiences during pregnancy, labor, and delivery Post-discharge complications Use of birth control post-delivery Infant Health Health of infant Maternal-child bonding Infant development | Yes All outcomes are patient-reported given the interview nature. |

| Sr. No | Data Source Name | Timespan /Periodicity | Sample Size | Data Steward / Funder | Federal Initiative | Geographical Coverage | Representative of Geographic Unit | Developed Specifically for Data Collection on Doulas | Data Accessibility | Observable Doula Variable(s) | Details on Doula Variable(s) | Example Maternal and Infant Health Outcomes | Included Patient Reported Outcomes |
|-----------|--|-------------------------------------|-------------|---|-----------------------|------------------------------|---|--|---|---|--|---|---|
| 3 | HealthCon nect One: Doula data Platform | 2008-2012 Periodicity unknown | N=592 | HRSA | Yes | Multi-state | No | Yes | Currently, the Doula Data platform is no longer active because funding for the community-based doula program ended in 2012. Researchers may need to contact HealthConnect One regarding accessing the data. Information on availability of line-level versus aggregate data unknown | Received doula services (present at birth). Number of prenatal and postpartum visits from doulas. Timing of prenatal and postpartum visits from doulas. | The data was collected from eight community-based doula programs from around the country, six of which received HRSA funding. The process and outcome data were collected by community-based doulas and entered into Doula Data, an online, user-friendly, systematic and comprehensive programmonitoring and evaluation tool. | Maternal Health Adverse pregnancy/birth outcomes Breastfeeding Delivery method Health care utilization postpartum Infant Health Rates of skin-to-skin contact in the first hour of birth Number of pediatric visits postpartum Rates of premature birth Low birth weight | No |
| 4 | Listening to Mothers California | 2016 Periodicity unknown | N= 2,539 | California Health Care Foundation (CHCF) and Yellow Chair Foundation | No | Single state (California) | Yes | No | Datasets from the surveys are freely available to interested researchers via the Odum Institute's Dataverse at the University of North Carolina (search for Listening to Mothers) Aggregate data are available to researchers | Received doula services (prior to delivery, during delivery, or after delivery). | Respondents are asked whether a doula or trained labor assistant assisted with their labor or birth and whether they offered support during pregnancy or postpartum. | Maternal Health Experiences during prenatal, delivery, and postpartum period (e.g., respectful care during birth) Care team and place of birth Maternity care practices Mode of birth Treatment during hospital stay Postpartum experiences Maternal mental health Infant Health Experiences with infant feeding | Yes All outcomes are patient-reported given the interview nature. |

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| 5 | <u></u> | Listening to Mothers National Survey | 2002, 2006, 2013, 2025 is upcoming Periodicity unknown | N (2002)= 1,583 N (2006)= 1,573 N(2013)= 2,400 | National Partnershi p for Women & Families | No | National | Yes | No | Datasets from the surveys are freely available to interested researchers via the Odum Institute's Dataverse at the University of North Carolina (search for Listening to Mothers) Aggregate data are available to researchers | Received doula services (labor or birth). Awareness of doula services. Desire for doula services. | Respondents are asked whether a doula or trained labor assistant assisted with their labor or birth. If a doula was used, respondents are asked to rate the quality of support care they received from a doula from 1 (poor) to 4 (excellent). If a doula was not used, respondents are asked whether they were aware of this type of caregiver during their pregnancy and about their level of understanding of doulas (i.e., clear understanding of doula as a type of caregiver, awareness of doula as a type of caregiver but no clear understanding, no awareness of doula as a type of caregiver). In the 2013 wave of the Listening to Mothers survey, an additional yes/no question was asked to determine desire for doula services. If a respondent indicated that they did not have a doula present at birth, they were asked if they would have liked to have had the care of a doula when they gave birth. | Maternal Health Experiences during: Prenatal period Intrapartum Birth Postpartum period Receipt of respectful care during birth Access to emotional resources Receipt of childbirth education Satisfaction with healthcare received Infant Health Experiences with infant feeding | Yes All outcomes are patient-reported given the interview nature. |

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| | The Pregnancy Risk Assessmen t and Monitoring System (PRAMS) | 2016-2022 Updated annually | Varies by state | CDC | Yes | Multi-state | Yes | No | The dataset can be accessed at no cost. Interested researchers must submit an application to the CDC. Aggregate data are available to researchers | Received doula services (home visitor). | PRAMS Phase 8 Standard Questionnaire (administered 2016-2022) includes two questions regarding doula care. - "Who was the home visitor that came to your home during your most recent pregnancy? (option includes "A doula or midwife"); What kind of home visitor has come to your home since your new baby was born? (option includes "A doula or midwife") New Mexico includes a state- specific question regarding doula care. "During your most recent pregnancy, did you receive any of the following services? (Option includes "doula or midwife support") Even though the data source spans all 47 states, not all PRAMS sites included these questions in their survey. 13 states include a home visitor question in their survey. | Maternal Health Attitudes and feelings about the most recent pregnancy Preconception care Prenatal care Medicaid and WIC participation Breastfeeding | Yes All outcomes are patient-reported given the interview nature. |

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| Тур | pe of Data Source: Claims | | | | | | | | | | | | |
| 7 | Healthcare Integrated Research Database (HIRD®) | 2006- Ongoing Updated Monthly | N> 88 million | Carelon Research | No | National | No | No | The dataset can be accessed for a fee. Interested researchers must contact rwe@carelon.com Information on availability of line-level versus aggregate data unknown | Received doula services. | Use of doulas can be identified in the dataset using the CMS taxonomy code for doula services, unique National Provider Identifier codes for doula, or masked identifier codes of members who received doula care from health plans. | Maternal Health Delivery type Postpartum healthcare utilization Prevalence of postpartum depression and anxiety Severe maternal morbidity Pregnancy complications Comorbid conditions Infant Health Infant mortality rate | No |
| 8 | Medicaid Claims | 1999- Ongoing Updated Quarterly | Varies by state | CMS/CMCS | Yes | Multi-state | No | No | Transformed Medicaid Statistical Information System (T-MSIS) data can be accessed through ResDAC (requires a data use agreement and fee) State-level claims data can be requested through state Medicaid departments (process and fees can vary) Line-level and aggregate data available to researchers | Received doula services (prior to delivery, during delivery, or after delivery). | Doula services in state Medicaid data are coded using Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes. These codes vary slightly by state and may require modifiers for telehealth visits. As of April 2025, 27 states and Washington DC have implemented Medicaid coverage for doula care. | Maternal Health | No |