



## **Promising Results from a Program That Trains Women Leaving Jail to Work as Birth Doulas**

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Women leaving jail or prison often face unique challenges. All must overcome emotional stress and find housing, employment, and health care, just like men leaving prison. In addition, many previously incarcerated women are mothers who must reweave their ties with children and repair social relationships with family and other sources of support.

Many Americans who leave jail or prison end up going back behind bars – and a proven way to reduce such recidivism is to support the efforts of formerly incarcerated people to build self-esteem and find employment as the best route back into regular social routines. To address the special needs of women leaving jail, I have worked with colleagues at the East Bay Community Birth Support Project to offer free community-based training for low-income women and women of color to become “doulas,” or non-medical assistants to help women during and after giving birth. Half of the women helped by this program were previously incarcerated.

### **The Impact of Incarceration on Families**

New arrests after people leave the carceral system lead to a “revolving door” cycle through the justice system, sometimes extending throughout generations of a family. In California over a ten year period, as many as two-thirds of formerly incarcerated individuals end up being sent back to prison. Women are very much at risk because, even though they are arrested for only about 25% of crimes committed in the United States, they represent the fastest-growing segment of those incarcerated in California.

Two-thirds of incarcerated women in California are parents, compared to only half of incarcerated men. Of incarcerated mothers, two-thirds were the sole custodial parent prior to her incarceration. The children of male prisoners usually end up with their mothers, but when mothers go to jail or prison, more than half of their children are placed with a grandparent. Alternatively, the children of incarcerated women may be placed in foster care (this happens to ten percent of incarcerated women’s children, compared to two percent of incarcerated men’s children). Because of these arrangements for their children, mothers leaving jail face additional burdens in reestablishing family ties. For them and their families, avoiding a return to the carceral systems takes on added urgency.

### **Using Non-Traditional Employment to Close the Revolving Door**

In 2013, in partnership with the Birth Justice Project and Black Women Birthing Justice, we developed the East Bay Community Birth Support Project to train low-income women as birth assistants, or “doulas.” One of the goals of this project was to determine if work as a doula – to provide information and physical and spiritual support to new mothers before, during, and after labor and delivery – could help previously incarcerated disadvantaged women avoid returning to prison. This program was designed to allow previously incarcerated

and low-income women of color to learn and grow together, as they developed skills to support other women of color at risk for poor birth outcomes. Nurses led the training in public health doula techniques, and the program was tracked to see if a vocational training program grounded in peer support for previously incarcerated women would reduce recidivism.

For this effort, doula training was chosen for a number of reasons:

- There is an active and vibrant doula community in the San Francisco Bay Area, providing a wide, resilient source of support to program participants.
- Doula work is flexible in terms of client scheduling and work hours.
- In contrast to what happens in other lines of work, clients do not refuse help from doulas with a history of incarceration.
- The Bay Area already has strong infrastructural support for doulas in the form of several volunteer-based services and organizations focused on improving birth outcomes for women of color.

## Promising Results and Next Steps

At the end of the initial funding period, the doulas trained through the East Bay Project had supported over 70 low-income families who would not otherwise have been able to afford this kind of assistance around the birth of a child. Furthermore, none of the new doulas trained and deployed through this program had returned to jail. Of 16 women originally trained, 14 had attended births.

In addition to training and supporting doulas, this program established many community linkages and continued to provide volunteer doula support to agencies. To date, 15 of the 16 doulas have completed their training, and the program has been granted additional funding by the Alameda County Public Health Department. During the summer of 2016, the Roots of Labor Doula Collective will be developed. Participants in that new collective will create and manage doula services, using the new funding to pay for transportation, childcare, and salaries. Some of the new funding will also seed efforts to establish a sustainable project, through nonprofit status or a viable business model. Future evaluations of effectiveness will focus not only on recidivism rates but also on birth outcomes for the mothers and children the doulas serve.

One of the most important recommendations from our 2015 program is that doulas should be classified as community health workers and appropriately compensated for their work. If classified as health workers, they would become eligible for direct employment by organizations that hire community health workers, as well as by private-pay individuals.

This project offers benefits both for keeping women out of jail and for improving community health. As our data show, the peer-to-peer model for training and supporting doulas can empower female former inmates to improve their employment prospects and avoid going back to prison. Our doulas see the program as a gateway to the health professions and, indeed, the East Bay Project and programs like it offer a low-cost way to bolster and diversify the public health healthcare workforce.

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