

the development of the baby, birth plans, and mechanism for coping with the pain. They become the mother's advocate, cheerleader, and support system during labor. After the birth, they offer lactation advice, parenting skills, baby-soothing techniques, and in the case of SFS, a Moby Wrap baby carrier, which quickens mother-baby bonding while creating ease around necessities such as public transportation.

Doula services usually cost \$300 to \$900, out of reach for a majority of low-income mothers. Many mothers considered high-risk because of mental and social issues often fall into this low-income bracket.

"America's medical system is not set up to give these mothers the time they need," says Jennings Gray, Director of Nurse Family Partnerships, one of 13 care partners who refer clients to SFS. "Doctors and nurses don't have time to learn a woman's background, traumas, fears, and needs, but doulas become a trusted friend. Our clients who have a doula say they don't feel alone or scared during labor, even with a multitude of strangers coming and going in the delivery room."

Support and trust aren't all these doulas offer. The positive birth outcomes they empower ripple into the larger fabric of the community.

"Many of the women we work with never had a voice or a choice, often victimized as children and into adulthood," says Chelsea. "As we educate them about their options and support their choices, they make better decisions during the birth process. They regain their voice in the delivery room and take it into the rest of their lives."

According to Nurse Family Partnership, high-risk women with doulas have better birth outcomes. They have fewer premature births, rates of induction, and Caesarian sections. This means decreased NICU stays, postpartum hospital care and overall Medicaid costs. The new mothers also report having less postpartum depression.

SFS is proud to report that all of their teen clients have graduated from high school, many have left or have constructively altered abusive situations, and others have found systems of support to overcome addiction. These successes start from a seed—the seed of a new story that is often very different from the disempowered tales of their mothers, sisters, and friends.

Maggie Henderson, a SFS Birth and Postpartum Doula, says it this way: "When a woman feels supported and empowered in her birth experience, she is going to feel more empowered as a parent. That confidence will influence her, her child and the whole community."

Eighteen doulas volunteer with SFS. Many of them have day jobs as social workers, psychologists, or teachers,

which is helpful when pioneering strategies for this demographic. "We can't use a technique developed for a 30-year-old middle-class woman with a 12-year-old girl, a survivor of rape or a family of eight living below the



Chelsea Kouns, Program Director

poverty line," says Chelsea. "Our task is to take what we learned in doula training and apply it to these intense situations."

Each volunteer is given a mentor, and the volunteers meet monthly to discuss challenges and breakthroughs.

"I'm continuously impressed by these volunteers' compassion and courage," says Cheryl Orego, the Program Advisor for SFS who helped initiate the program, trains doulas, and has over 22 years in childbirth education and 30 years in public health education. "What we need now is more funding to not only support our doulas but to reach more mothers-to-be."

To learn more about Start from Seed, including their new tiered system for all mothers, visit startfromseed.org.