

**LOCAL LAWS
OF
THE CITY OF NEW YORK
FOR THE YEAR 2025**

No. 170

Introduced by Council Members Gutiérrez, Menin, the Public Advocate (Mr. Williams), Lee, Louis, Restler, Banks, Hanif, Riley, Farías and Hudson.

A LOCAL LAW

To amend the administrative code of the city of New York, in relation to a citywide doula program

Be it enacted by the Council as follows:

Section 1. Section 17-199.10 of the administrative code of the city of New York, as added by local law number 187 for the year 2018, is amended to read as follows:

§ 17-199.10 Doulas. a. Definitions. For the purposes of this section, *the following terms have the following meanings:*

Birth equity. The term “birth equity” means the concept that conditions to support optimal births should be available for all individuals regardless of social inequities.

Citywide doula program. The term “citywide doula program” means a program to provide doula services at no cost to certain city residents, to train individuals to become doulas, and to foster doula-friendly hospital environments.

Doula. The term “doula” means a trained person who provides continuous physical, emotional, and informational support to a pregnant person and the family before, during or shortly after childbirth, for the purpose of assisting a pregnant person through the birth experience; or a trained person who supports the family of a newborn during the first days [and], weeks, or months after

childbirth, providing evidence-based information, practical help, and advice to the family on newborn care, self-care, and nurturing of the new family unit.

Priority neighborhood. The term “priority neighborhood” means a neighborhood determined by the department to experience significant health and socioeconomic disparities.

Trauma-informed care. The term “trauma-informed care” has the same meaning as set forth in section 17-180.2.

b. *Plan.* No later than June 30, 2019, the department shall submit to the speaker of the council and post on its website a plan to increase access to doulas for pregnant people in the city, including relevant timelines and strategies. In developing such plan, the department shall assess data regarding the needs of pregnant people and may consider the following factors:

1. The demand for doulas in the city;
2. The number of doulas in the city and any appropriate qualifications;
3. Existing city and community-based programs that provide doula services, including whether such programs offer training for doulas;
4. The availability of doula services that are low-cost, affordable, or free to the mother or pregnant person;
5. Areas or populations within the city in which residents experience disproportionately low access to doulas;
6. Areas or populations within the city in which residents experience disproportionately high rates of maternal mortality, cesarean birth, infant mortality, and other poor birth outcomes;
7. The average cost of doula services, and whether such services may be covered by an existing health plan or benefit; and
8. Any other information on the use of doulas and benefits associated with the use of doulas.

Such plan shall additionally list the factors considered in development of the plan.

c. [No later than June 30, 2019, and on] *Program. The commissioner shall establish a citywide doula program.*

1. *Doula training. The citywide doula program shall offer training to individuals to become doulas and offer professional development to all doulas in such program. Such training shall include the following subjects: birth equity, trauma-informed care, perinatal mood and anxiety disorders, navigating the hospital environment, and support services available to low-income birthing people and their families.*

2. *Doula services. The citywide doula program shall offer doula care to residents in priority neighborhoods at no cost to recipients of doula services. Doulas providing services through such program shall have experience in the following subjects: birth equity, trauma-informed care, perinatal mood and anxiety disorders, navigating the hospital environment and support services available to low-income birthing people and their families. Such program shall allow doulas and recipients of doula services to provide feedback on their experience in the program.*

3. *Doula-friendly hospitals. The citywide doula program shall offer certain maternity hospitals in the city, as identified by the department to promote birth equity, technical assistance to foster healthcare environments that are friendly and welcoming to doulas and the families they support. Technical assistance may include assessments, action planning sessions, staff education, developing and implementing doula-friendly policies and practices, and establishing and sustaining referral pathways to the citywide doula program.*

d. *Report. On or before June 30 every year [thereafter], the department shall submit to the speaker of the council and post on its website a report on the following information:*

1. Known city and community-based programs that provide doula services, including whether such programs offer training for doulas;

2. Areas or populations within the city in which residents experience disproportionately high rates of maternal mortality, infant mortality, and other poor birth outcomes; [and]

3. Any updated information regarding implementation of the plan required by subdivision b of this section since the prior annual report; *and*

4. *To the extent such information is available to the department, anonymized information regarding the citywide doula program required by subdivision c of this section including, but not limited to:*

(a) The number of doulas trained through the citywide doula program, disaggregated by race and ethnicity and disaggregated by borough;

(b) The number of doulas who have provided or are providing services through the program, disaggregated by race and ethnicity and disaggregated by borough;

(c) The number of inquiries from pregnant people about the citywide doula program made to the department;

(d) The number of inquiries from pregnant people about the citywide doula program made to local organizations providing doula services, as reported to the department by such organizations;

(e) The number of pregnant people who were eligible for services provided through the citywide doula program but were not served due to inadequate resources, disaggregated by borough;

(f) The number of pregnant people who obtained doula services through the citywide doula program, disaggregated by race and ethnicity and disaggregated by borough;

(g) The number of maternity hospitals the citywide doula program supported with technical assistance pursuant to paragraph 3 of subdivision c of this section;

(h) An overview of subjects covered in the citywide doula program training;

(i) The number of doulas serving in the citywide doula program who are enrolled as providers in the plan for medical assistance established by section 363-A of the social services law;

(j) The rate of pay for doulas in the citywide doula program and efforts made to match the rate to average rates of pay for doulas in the city; and

(k) An analysis of the use and outcomes of the citywide doula program.

§ 2. This local law takes effect immediately.

THE CITY OF NEW YORK, OFFICE OF THE CITY CLERK, s.s.:

I hereby certify that the foregoing is a true copy of a local law of The City of New York, passed by the Council on October 29, 2025 and returned unsigned by the Mayor on December 1, 2025.

MICHAEL M. McSWEENEY, City Clerk, Clerk of the Council.

CERTIFICATION OF CORPORATION COUNSEL

I hereby certify that the form of the enclosed local law (Local Law No. 170 of 2025, Council Int. No. 1285-A of 2025) to be filed with the Secretary of State contains the correct text of the local law passed by the New York City Council, presented to the Mayor, and neither approved nor disapproved within thirty days thereafter.

SPENCER FISHER, Acting Corporation Counsel.