

# My Doula was Amazing!:

## Perceptions of women supported by a student doula through pregnancy, birth and postnatal care

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In honour of women, for the love of birth

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# What is a doula?

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Doula practice in Australia  
Doula training



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# Defining a Doula

- **A doula, or birth attendant, is a woman offering non medical support and information to parents in pregnancy, childbirth and the post natal period.**
  - **'Doula' is a Greek word that has come to mean "woman's servant".**
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# Doula Training in Australia

- **Studying in Australia varies from state to state and courses range from weekend workshops to the Cert IV in Doula Support Services**
  - **Cert IV (91494NSW) involves 11 core units of competency and 5 specialized doula units**
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# The Project

- 160 women completed postnatal questionnaires after having births supervised by a student doula completing their training at the Australian Doula College
  - Data gathered over 4 years
  - Questionnaire included
    - closed questions
    - open comments
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# Methods

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- Data entered into STATA
  - Quantitative data analysed using:
    - Descriptive values
    - Chi test (categorical)
    - T-test or ANOVA (categorical and continuous)
  - Qualitative data analysed using:
    - Thematic analysis
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# Results

<b>Participant characteristics</b>		
<b>Variable</b>	<b>Number of responses</b>	<b>Mean</b>
<b>Gestation at birth</b>	131	40.0wks
<b>Children</b>	122	1.2
<b>Duration of Stage 1</b>	105	12.6hrs
<b>Duration of Stage 2</b>	106	61.3mins
<b>Duration of Stage 3</b>	98	23.8mins
<b>Attending Time</b>	119	11.4hrs
<b>Intranatal attendance</b>	111	10.6hrs
<b>Postnatal attendance</b>	112	3.9hrs

# Results

Participant characteristics						
Variable	Responses	Number (%)	Number (%)	Number (%)	Number (%)	Number (%)
Partner	123	Yes	No			
		120 (97.6)	3 (2.4)			
Ethnicity	113	Aust born	European	Asian	Other English speaking	Other
		83 (74.3%)	11 (9.7)	7 (6.2)	4 (3.5)	7 (6.2)
Location of birth	130	Hospital	Home	Independent Birth centre		
		115 (88.5)	11 (8.5)	4 (3.1)		
Carer	130	Midwife	Obstetrician	GP	Other/Shared Care	
		80 (61.5)	34 (26.2)	4 (3.1)	12 (9.2)	

# Results

<b>Birth characteristics</b>			
<b>Variable</b>	<b>Responses</b>	<b>Number (%)</b>	
<b>VBAC</b>	89	Yes	No
		14 (15.7)	75 (84.3)
<b>Spontaneous rupture of Membranes</b>	126	Yes	No
		69 (54.7)	57 (45.2)
<b>Stage 3 complications</b>	115	Yes	No
		26 (22.6)	89 (77.4)

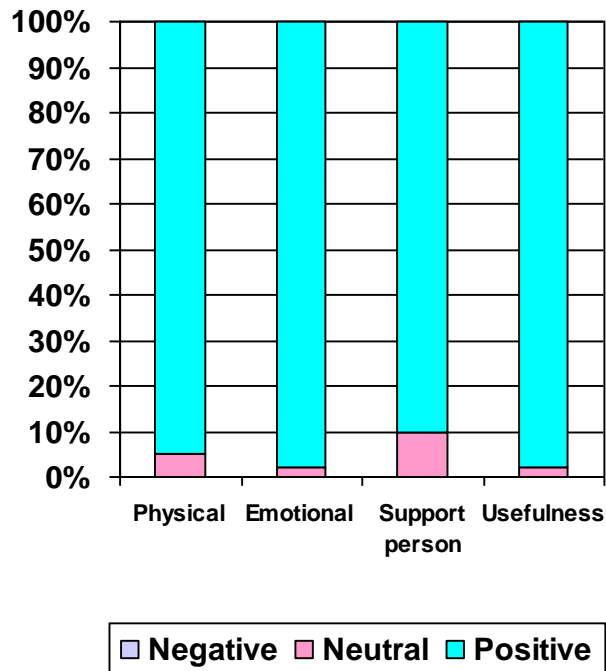
# Results

## Participants' opinion of their doula's contribution

<b>Variable</b>	<b>Responses</b>	<b>More harm than good</b>	<b>Neither helped nor hurt</b>	<b>Did the job</b>	<b>Was more helpful</b>	<b>Outstanding</b>
<b>Physical aspects</b>	141	0 (0)	2 (1.4)	6 (4.2)	46 (32.6)	87 (61.7)
<b>Emotional aspects</b>	144	0 (0)	1 (0.7)	2 (1.4)	34 (23.6)	10 (74.3)
<b>Support person</b>	136	0 (0)	3 (2.2)	7 (5.2)	32 (23.5)	94 (69.1)
<b>Usefulness</b>	141	0 (0)	1 (0.7)	1 (0.7)	19 (13.5)	120 (85.1)

# Results

**Combined opinion of participants regarding their doula's contribution**



For the purpose of correlative analysis, results for the opinions of participants about the work of their doulas was collapsed into the following categories:

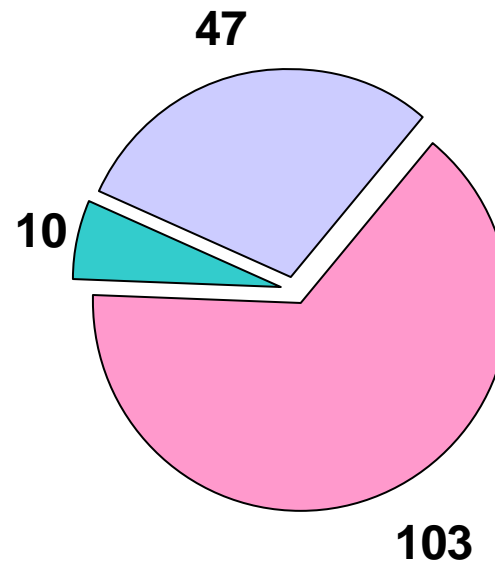
- Negative
- Neutral
- Positive

Variable	Responses	Negative	Neutral	Positive
Physical	160	0 (0)	8 (5)	152 (95)
Emotional	160	0 (0)	3 (1.9)	157 (98.1)
Support person	136	0 (0)	10 (6.3)	150 (93.7)
Usefulness	141	0 (0)	2 (1.3)	158 (98.7)

# Results

Delivery method (n=160)		
Vaginal delivery	103	64.4%
Scheduled c-section	10	6.25%
Emergency C-section	47	29.4%

**% Distribution of frequency of delivery method**



■ Vaginal ■ Scheduled ■ Emergency

# Results

<b>Correlation between delivery method and opinion of contribution</b>				
	<b>Scheduled C-section</b>	<b>Emergency C-section</b>	<b>Vaginal</b>	<b>P-value</b>
<b>Physical</b>	0 (0)	0 (0)	0 (0)	0.695
	2 (4.3)	0 (0)	6 (5.8)	
	45 (95.7)	10 (100)	97 (94.2)	
<b>Emotional</b>	0 (0)	0 (0)	0 (0)	0.351
	2 (4.3)	0 (0)	1 (1.0)	
	45 (95.7)	10 (100)	102 (98.1)	
<b>Support persons</b>	0 (0)	0 (0)	0 (0)	0.250
	5 (10.6)	1 (10)	4 (3.9)	
	42 (89.4)	9 (90)	99 (96.1)	
<b>Usefulness</b>	0 (0)	0 (0)	0 (0)	0.088
	2 (4.3)	0 (0)	0 (0)	
	45 (95.7)	10 (100)	103 (100)	

# Results

<b>Correlation between delivery method and location of birth</b>				
		<b>Hospital</b>	<b>Non-hospital</b>	<b>P-value</b>
<b>Physical</b>	Neutral	6 (5.2)	2 (4.4)	0.840
	Positive	109 (94.8)	43 (95.6)	
<b>Emotional</b>	Neutral	2 (1.7)	1 (2.2)	0.839
	Positive	113 (89.3)	44 (97.8)	
<b>Support persons</b>	Neutral	6 (5.2)	4 (8.9)	0.388
	Positive	109 (94.8)	41 (91.1)	
<b>Usefulness</b>	Neutral	0 (0)	2 (4.4)	0.023*
	Positive	115 (100)	43 (95.6)	

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# Quantitative Summary

- The participants perceptions of their doula were overwhelmingly positive
  - Women had positive perceptions of their doula irrelevant of the type of birth they had
  - Women who birthed outside of a hospital (i.e. birth centre or community) considered the doula to be less useful than women birthing in a hospital setting
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# Qualitative Analysis

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# Overview

- 3 major sub-themes identified under one overarching theme:
    - My doula is amazing!
      - Doula as family support
      - Doula as a source of calm confidence
      - Doula's provision of valuable skills
  - 4 minor themes:
    - Doula as interprofessional liaison
    - Doula has an impact on birth outcome
    - Limitations to doula care
    - My doula positively received by other maternity professionals
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# My Doula was amazing!

- The overall message from the data is that they valued the presence of their doula:

*“I consider myself blessed to have such an amazing person in my life sharing my precious birth experience and believing in me”*

*“During labour she was a shining light and she has given me the world in so far as how proud I am of getting what I wanted for me, my partner and my baby. She is magic!”*

*“[Doula] was so amazing and powerful during my birth. She was a vital part of my success...thank you so much!!!”*

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# Doula as family support

- The women consistently saw that their doula undertook a valuable role of not only supporting themselves, but also their family unit

*“ [doula] gave my husband, mother and myself so much support and confidence”*

*“[doula] provided a wealth of emotional support to each of our family throughout labour”*

*“Choosing to have a doula helped both my husband and I to relax and feel supported emotionally and physically in the weeks prior to and during the birth”*

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# A source of calm confidence

- The participants often described perceptions of their doula providing calm and confidence

*“It was wonderful to have such a calm and reassuring person present”*

*“[doula] calmed me down and I was able to give birth with the one person I trusted”*

*“she helped me through the most confronting period of my life by supporting me as I asserted myself in a way I’d previously have found terrifying”*

*“The birth was a very positive experience in spite of emergency caesarian. This was mainly due to [doula]’s calming and experienced presence”*

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# Doula's provision of valuable skills

- This theme describes learnt skills, traits and abilities demonstrated by a doula. Examples of skills valued by respondents include:
    - Breathing skills
    - Complementary therapies e.g. acupuncture, massage, reflexology, homoeopathy, aromatherapy
    - Filming
    - Counting contractions
    - Prenatal and intranatal discussion and information
    - Listening
    - Supporting technical aspects of birth e.g. lotus birth, home birth
    - Domestic duties
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# Doula's provision of valuable skills

*"From forming the birth plan through to executing it, without it I would not have gone through the labour so smoothly. Her massage and essential oil has certainly worked well on me. At the peak of contractions she 'hmmmm'ed with me and it made me feel that I was not alone."*

*"Her breathing techniques were my life saver."*

*"[doula]'s skills were invaluable. The pre-birth meetings really helped [partner] and I to prepare. If she did not have the answer to our question she either had the resources available to find the answer or she would get back to us - we appreciated her honesty and efficiency."*

*"She got cups of tea and snacks and did lots of little but important jobs."*

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# Doula as interprofessional liaison

- Participants often described valuing the contribution of their doula in negotiating and communicating with other staff within the hospital setting

*“She is a team player so my partner, midwife and myself all felt very united during the labour and beyond”*

*“...the communication between the nurse and [partner] and I (via [doula]) has helped us enormously – the explanation of medical terms and support of natural birth”*

*“we felt she was a mediator between us and the hospital with its policies”*

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# Doula has an impact on birth outcome

- Participants often expressed a belief that the doula's presence had a direct effect on the birth outcome

*“Her suggestions on how to minimise the labor pains were also very helpful and it made it possible for us to have a normal vaginal delivery”*

*“We couldn't have achieved the fantastic birth we did without her help”*

*“I am quite sure that without [doula]'s involvement, the birth would have involved a great degree of intervention (including post-birth) and a greater recovery period for both mother and child” (partner)*

*“I know I would not have achieved a VBAC without her”*

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# My doula was positively received by other maternity professionals

- Participants also commented that the actions and conduct of their doula changed the perceptions and opinions of other health professionals regarding the value of doulas

*“Our doctor said that he would recommend doulas to his patients after this experience (or words to that effect)”*

*“One midwife told me that she changed her perspective toward a doula because she was very impressed by [doula]”*

*“[Doula] was great with hospital staff including my obstetrician...who thought [doula] was most helpful and supportive”*

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# Limitations to Doula Care

- Limitations to the value of doula care were also mentioned and included:
    - ❑ Insufficient public knowledge
    - ❑ Restricted access to theatre
    - ❑ Rapid births resulting in doula not attending
    - ❑ Complications resulting in alterations to birth plan and doula unable to attend
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# Qualitative summary

- Doula's were positively received by the women, their partners and the health professionals involved
- The women valued their doula's technical skills as well as their manner

*“I truly believe that if a Doula were a drug it would be unethical not to use it”*

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# Limitations to study

- Questionnaires were completed by the women
    - Potential recall bias
    - Untrained in medical terminology
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# Future directions

- Case-control study
    - Doula support vs no doula support
    - “Trained” doula vs “untrained” doula
  - Refinement of survey tool including (not limited to) structured questions regarding
    - Interface between doula and health professionals
    - Specific questions for partners
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