The Doula:

Women's Perceptions of a Supportive Nonmedical Role in Birth and Potential Opportunity

for Changes in Doula Training to Improve These Experiences

Ryan Springer-Miller '17

Self-Directed Major Final Project Proposal

Skidmore College

October 15, 2016

Introduction:

My self-determined major was developed around my dual interests in biology and anthropology, and is centered on the intersection of these two fields with an exploration of non-biological influences on human health and wellness. In my original major proposal, I spoke of a young woman named Alice, whose struggle with fertility was overcome by advancements in science that allowed her to overcome impairments in her own biology so she could become pregnant and give birth to a child. Since the development of this major, the event of childbirth has been a major topic within which I have examined aspects of biology and culture as they relate to health outcomes.

There are many roles involved in childbirth: mothers, babies, doctors, midwives, partners, siblings, parents, and friends. Another role in this event, however, is that of the birth doula. The word "doula" is of Greek origin and translates to "female slave." Today, according to International Doula Institute, a birth doula is "a professional support person trained in the needs of the family during pregnancy and childbirth... [who] offers non-judgmental support, guidance, evidence based education and practical hands-on support during childbirth including comfort measures... [but] does not provide medical care, clinical tasks such a cervical checks or fetal heart tones and does not speak on behalf of the client (International Doula Institute, 2016). In preceding decades, birth doula services have become a more integral part of a woman's birth process and have been shown to enhance the birth experience for women and their families. Furthermore, some studies suggest that working with a doula

during pregnancy and birth have helped to improve maternal-child health outcomes (Scott et al., 1999; Koumouitzes-Douvia, J. & Carr, C.A., 2006).

Overview of the Project:

For my final project, I propose a research study in which I use qualitative interviews with mothers and conduct a review of the current literature on doulas. With this research, I aim to answer two questions: 1) How, according to mothers, is the role of the doula altering the birth experience? 2) What aspects of the doula training are strong in preparing the doula to fulfill the role the mother believes is vital and unique to her birth, and what aspects of the doula's training can be strengthened so doulas can fulfill this role better? To help in answering the second question, I will go through a doula certification course to gain a first hand understanding of what is taught and emphasized during the training and to better understand if and where doula training lines up with mothers' expectations. This project will culminate in a research paper and presentation.

Research Methods and Timeline

This is an inductive study, where rather than testing a hypothesis, I will be analyzing interview data and going through doula training of my own to identify emerging themes on this topic in order to answer my research questions.

The two approaches to this research are equally important to answering my questions. Interviewing mothers about their experiences with doulas, and reading other studies which also look at these experiences will highlight what mothers anticipate and expect their doula can and should be assisting with during birth, what mothers have been satisfied or dissatisfied with during their work with a birth doula, and mothers' overall ideas about the role of a doula in the birth process. By completing the doula training first-hand, I will have access to specific materials and resources integral to the training of doulas. This access will allow me to understand *which* ideals, methods, and topics are emphasized more than others in the training as well as *how* they are emphasized, giving me a primary perspective on the agenda of doula training, and the roles doulas are *trained* to take on during a birth.

This double data collection approach will provide the basis for comparison between doula training strengths and weaknesses in light of mothers' experiences.

Research Paper:

This research paper will take on an ethnographic style, delving into mothers' personal experience-based interpretations of the significance of doula work. The research component of my final project will be done using a literature review of doula work and openended interviews of local Saratoga mothers who have worked with a doula during their birth.

In the spring of 2016, I researched Vaginal Birth After Cesarean Section (VBAC) through qualitative interviews of local mothers who underwent or attempted a VBAC, as well as midwives and doulas who had assisted in a VBAC. Because I have built and maintained professional relationships with the individuals in this birth community, I plan to use the same group of women as my source for interviews about the significance of doula work. I also expect to interview women who did not have VBAC to include a broader range of experiences and perspectives. Interviews will be conducted after the review of the IRB of Skidmore and

interviewees will sign an IRB-approved consent form prior to discussion. A semi-structured, open-ended interview technique allows interviewees to answer in any number of ways including narrative fashion from which common themes and motifs can be pulled. Interviews will be face-to-face, thirty minutes to one hour long, and will be audio recorded. The interviews will be coded and analyzed with similar methods for analyzing qualitative data described by Koumouitzes-Douvia, J. (2006). Interviews will be conducted with no fewer than five women between January 22, 2017 and April 1, 2017 and questions will take the following

format:

- 1. Could you tell me about how you came to the decision to include a doula in your birth?
 - Follow-up:
 - a) How did you come to be aware that a doula was an option?
- 2. Could you tell me about the role your doula played in your birth? Follow-up:
 - a) Could you give me a specific example of how she was able to do that?
 - b) How was this different that what your doctor, midwife, and partner brought to your birth experience?
- 3. What types of initial expectations did you have for your doula? Follow-up:
 - a) How did your doula meet your expectations?
 - b) How did your doula exceed your expectations?
 - c) How did your doula not meet your expectations?
- 4. Based on your experience, how would you explain to a friend the role of a doula?

There have been few studies investigating the perceptions women have of their doula care. One study where women in Sweden were interviewed suggested that mothers view the doula as a "coach" who guides them in their ability to give birth, but also underscore womens' indication that the practice of doulas and midwives is not differentiated wellenough and leads to misunderstanding of the doula's role (Lundgren, I., 2010). This is an example of the type of feedback I am seeking from women, which I can then perhaps consider in terms of how doulas are trained to market themselves, and subsequently provide insight on potential alterations in the training.

IDI Birth Doula Certification:

In order to consider the parallels between mothers' ideals for doulas and how doulas are being trained to assist in birth, I will become a certified birth doula through the International Doula Institute (IDI). By completing this certification, I can have first-hand knowledge of the ideals, values, and skills that doulas are being taught. IDI provides a selfpaced, online course for training. The course is taught by doctors, midwives, nurses, and doulas, and has nine sections, each with multiple lessons within. The nine sections are 1) Understanding of your Job 2) Birth Stories 3) Overall Knowledge of Pregnancy and Childbirth 4) Step-By-Step Guide to Prenatal Appointments 5) Common Interventions 6) On-Call and At the Birth 7) Emotional Intelligence and Communication Skills: Being an Example of Love and Empathy 8) Professionalism 9) Construction of the Doula Business. Required reading for this course includes the following five books:

o Ina May's Guide to Childbirth by Ina May Gaskin

o The Thinking Womans Guide to a Better Birth by Henci Goer

o Pushed by Jennifer Block

o Pregnancy, Childbirth and the Newborn by Penny Simkin

o Emotional Intelligence 2.0 by Travis Bradberry

In addition to reading assignments the lessons in the IDI course incorporate video responses and essays. In the video posts, I am asked to practice explaining what my own role as the doula is, and provide responses to sample questions I would likely hear from clients. Similarly, I will write two essays. The first asks me to answer the question from a client, "What should I expect when I arrive in labor at the hospital?" The second prompts me to answer the question from a pregnant woman, "Why should I get a doula? What is the value in having a doula during my birth?" Following completion of the nine sections and additional assignments, I am taught strategies for marketing myself as a doula to the community, and starting my own doula practice or joining up with an existing organization. These lessons and assignments are particularly useful for my consideration of what ideas doulas have of the role they are supposed to play in birth. A final exam concludes the course, and a passing grade is required for certification.

IDI aims to train doulas in a style in which the ability to demonstrate skills is emphasized more than just memorization of information. For this reason, IDI grants a oneyear period after certification is earned to help newly trained doulas to obtain clients and be reviewed by at least two of them. I propose that between January 1, 2017 and May 1, 2017 I will complete and pass the IDI doula certification course.

Future Directions:

As I begin to learn about others' interpretations of and experiences with doulas,

explore studies addressing this topic from other parts of the U.S. and the world, and simultaneously go through my own doula training, I will be able to supplement the growing knowledge of doula work. I can do this by providing an analysis of the congruencies between the skills and roles doulas are taught to be able to assist in birth, and the expectations of the mothers they serve. Parallels between mothers' expectations and perceptions of the doula with the reality of what doulas can bring to a birth based on their training is an aspect of doula work that has not yet been assessed in the doula literature. Future directions for doula studies are not limited to alterations and enhancements of training. Review of the potential economic impact of birth doulas and access to doula care of varying demographics is another possible topic for exploration. It has been suggested that doula care may aid certain communities who have the least amount of access to it (Breedlove, G., 2005; Kozhimannil, K.B. et al., 2013; Hans, H., 2005), and consideration of the ways in which doula care could be made available to those populations would be a step in the right direction in terms of efforts to provide equal and quality healthcare.

Closing Remarks:

It is clear that the presence of doulas during birth has significance for mothers and families, and this project aims to determine what aspects of doula work are unique and most valuable to the birth experience, and how doula training can be structured to best prepare doulas to fill these roles and provide services accordingly. Through fieldwork, I hope to gain and share insight on how a sample of mothers and doulas believe that a non-medical support role during birth improves the mother's birth experience. By becoming a doula myself, I look forward to becoming a part of this community and having first hand access to the resources doulas learn from. On my way to a medical profession in neonatology, pediatrics, or obstetrics, doula work will provide me with a unique background that will broaden my patient-care skillset in a medical field. Along with the career - developing benefits of this project, there are also gains to be had through collaboration with a part of the larger Saratoga community. In addition to the academic value of this project, working in the field and community I'll be serving as a doula, provides practical experience and insight into my research and contributes to the ways in which Skidmore gives back to the Saratoga community. The emphasis on maternal-child health in our society and the resources allocated to this important subset of the community yield profound opportunities for doula work from a public health standpoint, as their impact has been largely noted by the health professions community. This certification course and research study have a focus that is central and relevant to my self-directed studies at Skidmore, and I am eager to shed light on the vast and unique impacts that a doula, a nonmedical support resource, can have on the biological event of pregnancy, birth, and early maternity.

References:

- 1. Breedlove, Ginger. "Perceptions of Social Support from Pregnant and Parenting Teens using Community-Based Doulas." *The Journal of perinatal education* 14.3 (2005): 15-22. Web.
- 2. Hans, S. "Doula Support for Young Mothers: A Randomized Trial." *Final Report, The Maternal and Child Health Bureau Research Program, HRSA, DHHS* (2005)Web.
- 3. Koumouitzes-Douvia, Jodi, and Catherine A. Carr. "Women's Perceptions of their Doula Support." *The Journal of perinatal education* 15.4 (2006): 34-40. Web.

- 4. Kozhimannil, Katy Backes, et al. "Doula Care, Birth Outcomes, and Costs among Medicaid Beneficiaries." *American Journal of Public Health* 103.4 (2013): e113-21. Web.
- 5. Scott, Kathryn D., Phyllis H. Klaus, and Marshall H. Klaus. "The Obstetrical and Postpartum Benefits of Continuous Support during Childbirth." *Journal of women's health & gender-based medicine* 8.10 (1999): 1257. Web.
- 6. Lundgren, Ingela. "Swedish Women's Experiences of Doula Support during Childbirth." *Midwifery* 26.2 (2010): 173-80. Web.