



*The Association for Wholistic Maternal and Newborn Health
Promoting Mother-Baby Friendly Maternity Care*

Maternal-Child Health Education, Training, Consultation and Support

A SUMMARY OF THE LITERATURE ON COMMUNITY-BASED DOULAS ROLE IN REDUCING PREMATURE BIRTHS

The following is a summary of the literature about the role of doulas in lowering preterm birth. Excerpts and highlights of three journal articles about doula support. Several journal articles are highlighted below.

The Role of the Community-Based Doula

The role of Community-Based Doula support in low income communities as a strategy to lower preterm birth rates is still a rather new and innovative intervention though it is a model being implemented around the country by organizations like the Chicago organization Health Connect One which has helped community-based organizations throughout the U.S. replicate Community-Based Doula programs in disadvantaged communities.

While the literature has documented the benefit of doulas in reducing medical interventions and providing emotional support to women in labor, the Community Based Doula Model has an expanded scope. Community-based doulas work with low income disadvantaged women from minority communities from early pregnancy through early postpartum. In this role, they are community perinatal health promoters. This newer role for community based doulas providing support during pregnancy as well as during labor and postpartum has been reported by community-based doula programs.



The Pasadena Public Health Department, one of three municipal health departments in California, located in Pasadena, has conducted a Community-Based Doula program since 2002 serving low-income Hispanic and African-American and Caucasian women through the health department's prenatal clinic. Through this proposal, we will contribute to the understanding that they play in reducing prematurity. Community Based Doulas provide prenatal education for health behavior modification, support to increase access to community resources and comply with prenatal care, and have an important role providing social support to mitigate the impact of maternal stress which may lead to preterm labor. The literature has shown that social support can reduce stress that often leads to preterm labor.

In addition, Community Based Doulas provide health education. As the March of Dimes has highlighted, some of the reasons for the U.S. high rate of prematurity is due to induction of labor and cesarean section. Doulas have a role to play in reducing premature births resulting from induction of labor. By educating clients about informed consent and refusal they can potentially lower iatrogenic prematurity. The March of Dimes Prematurity Prevention Campaign's recommendation is that women not be induced unless medically necessary, and only after 39 weeks. Doulas can play an important

role in educating clients about medical and non-medical reasons for induction and help them understand the potential risks of induction, the risks of cesarean section and consequences of prematurity on infants.

Benefits of Community-Based Doula Support

Here are some important benefits of an expanded definition of doula support:

Community-Based Doulas serve women in an extended relationship from early pregnancy into early mothering. While doulas have historically been used by middle class insured women for labor and delivery support, a Community Based Doula has an expanded role working with low-income disadvantaged women throughout pregnancy as well as providing support during childbirth and postpartum. There is still just preliminary information from these Community-Based Doula programs on doula support impacting prematurity.

Lowered Rates of Medical Intervention

Klaus, Kennell, Robertson, and Sosa (1986) described the Doula as a lay woman who continuously provides physical and emotional support during labor and birth and serves as an advocate for the mother and family unit.

The original research was conducted by Sosa, Kennell, Klaus, et. al. (1980) in Guatemala. The study's findings revealed a positive effect of this supportive companion (doula) in reduction of perinatal problems, length of labor, and improved mother-infant interaction. The findings also included a potential number of significant perinatal benefits, including less medical intervention, fewer medical complications, shorter labor, and less use of maternal analgesia.



Other researchers have joined the growing body of evidence to suggest significance and value in the presence of a doula during labor and birth. The most recent research was conducted by Hodnett, Gates, Hofmeyr, and Sakala (2004) . These researchers lead by Carol Sakala, from Childbirth Connection, did a comprehensive review of continuous support for women during childbirth. The primary objective of this review was to provide findings from randomized controlled trials that assessed outcomes of mothers and babies when provided continuous care from a doula as compared with usual care. To date, 15 trials involving over 12,000 women are included in the review. Findings from the meta-analysis found that when compared to women who do not have labor support, women with doula (labor) support are less likely to have analgesia or an operative birth or to report dissatisfaction with their experience. These reductions in medical interventions are important as we strive to increase evidence-based practice and improve quality of maternity care in Los Angeles.

Lowered Rates of Cesarean Birth

Cesarean section is associated with significant risks to mother and infant. Los Angeles has a 37% cesarean rate. Vaginal Birth After Cesarean (VBAC) rates are less than 1.4% in Los Angeles County, though Healthy People 2020's goal is 18.3%. "The most serious risk for women undergoing multiple repeat cesarean deliveries is a step-wise, dramatically increased risk of placenta previa and placenta accrete," according to the California Maternal Quality Care Collaborative. The Joint Commission

states, “There are no data that higher rates [of cesarean section] improve any outcomes, yet the C-section rates continue to rise.” (*California Maternal Quality Care Collaborative: California Cesarean Deliveries, Outcomes, and Opportunities for Change in California: Toward a Public Agenda for Maternity Care Safety and Quality*). In Los Angeles County, the rate of Maternal Mortality is 0.32 among African- Americans, and among White it is 0.05. This is the leading perinatal health disparity between Blacks and Whites, according to the American Public Health Association. Infants are more likely to die after the death of a mother. As the studies on continuous labor support in childbirth have shown, obstetric outcomes may improve when a doula is present.

Emotional and Psychological Benefits

In addition, the doula is emerging as a positive contribution to the care of women in pregnancy as well as labor. By attending to the women’s emotional needs, some obstetric outcomes are improved. Women’s satisfaction with their birth experiences and even their self-esteem appears to improve when a doula has assisted them through childbirth as well. Satisfaction and empowerment through childbirth may reduce postpartum depression, and improve self-esteem and lifelong functioning.

Improved Maternal-Infant Attachment

Just as importantly, early mother-infant relationships and breastfeeding are enhanced. Particular emphasis on social support that improves successful breastfeeding and attachment of mothers to infants has also been shown. This is important as we strive to increase rates of breastfeeding in Pasadena, particularly exclusive breastfeeding. Exclusive breastfeeding in Pasadena is only 45% upon hospital dismissal. Doulas and breastfeeding peer counselors have an important role to play in supporting the initiation and duration of breastfeeding.

Benefits to Adolescent Mothers

One of the journal articles exemplifies the positive role of doulas in providing social support among pregnant high risk teens (who are at greater risk for preterm labor):

J PERINAT EDUC. 2005 SUMMER; 14(3): 15?22. PERCEPTIONS OF SOCIAL SUPPORT FROM PREGNANT AND PARENTING TEENS USING COMMUNITY-BASED DOULAS, GINGER BREEDLOVE, PHD, CNM, FACNM

Abstract:

Few studies have examined community-based doula care during the childbearing period. This descriptive study was designed to explore and describe the perceptions of disadvantaged pregnant and parenting teens (N = 24) who received support from culturally matched, community-based doulas. Their reported perceptions included enhanced knowledge about childbearing, support during childbirth, self-care, and early attachment to the newborn. Participants concurred that the community-based doula intervention had a positive impact on their supportive networks. This innovative model can supplement perinatal programs through utilization of culturally sensitive, community-based doulas that provide comprehensive relationship-based caring. The doula’s work involved interacting with and caring for the mother in early pregnancy through the transition to confident mothering.



Doula Support vs. Other Support

The study's third research question (How is support from the doula different from other types of support?) generated the following themes:

- Doulas were of same ethnicity and lived within the community.
- Doulas provided relationship-based caring.
- Doulas served as positive role models.
- Doulas were designated as the participants' primary support during pregnancy, labor, and birth.
- Participants identified the doulas as the primary network of external support that assisted them in the provision of tangible and nontangible resources. Notable value was placed on the nature of the extended relational caring from the doula that began in early pregnancy and continued through early mothering.



Although published studies traditionally correlate doula-associated outcomes with support during labor and birth (Hodnett, 1999; Kennell, Klaus, McGrath, Robertson, & Hinkley, 1991; Klaus & Kennell, 1997; Scott, Berkowitz, & Klaus, 1999), this descriptive study suggests that more comprehensive, longitudinal-based perinatal support has the potential for an even greater impact. This model of community-based caregivers suggests additional benefits of doula support, including sensitivity to culture, identification and response to community sociodemographic barriers, and emphasis on identification of goals with orientation toward a positive future.

However, this study suggests findings that should be further investigated. For example, is there an association with the extended care of community-based doulas and perinatal outcomes (e.g., preterm birth, infant birth weight, maternal attachment, breastfeeding, and self-esteem)?

This is an area where maternal-infant health advocates in Los Angeles could make a significant contribution to the understanding of how doulas can impact premature birth.

This study suggests that the adjunctive role of community-based doulas is vital and serves as a primary support to disadvantaged teens. Doulas provide comprehensive models of maternity care that include appropriate and sufficient psychosocial support, especially for those with identified inadequate support. Community-based doula models can contribute to increasing power within and among the population living in fragmented communities.

Unfortunately, publicly funded perinatal care seldom includes this type of support. Since 2002, The Pasadena Public Health Department located in Pasadena, Ca through its prenatal clinic and Black Infant Health Program has integrated a volunteer doula program into standard case management and prenatal care programs. A further opportunity to expand the role of community-based doulas in providing support to disadvantaged high-risk populations is needed. Reducing America's high incidence of preterm births and low-birth weight infants in teen populations must also include recognizing how environmental, social, and behavioral patterns influence maternal stress. Daily stress and limited support experienced by women living in poverty are commonly associated with expensive negative effects on the childbearing process.

This study recommends further considerations for the development of and financial support for the community-based doula. As a woman recruited, trained, employed, and residing within the community, a doula provides unique support unmatched by other maternity, health, or social-service

providers. Sustaining rights for all women to be adequately supported (to “mother-the-mother”), especially in vulnerable populations, may be one approach to improve the health and future of at-risk families.

Doula Support and Health Outcomes

Another article of interest is summarized below:

J PERINAT EDUC. 2006 SUMMER; 15(3): 25-33. DOULAS AS COMMUNITY HEALTH WORKERS: LESSONS LEARNED FROM A VOLUNTEER PROGRAM, LISA KANE LOW, PHD, CNM, FACNM, AMY MOFFAT, MAA, AND PATTY BRENNAN, BA

Abstract:

Doulas, women who primarily provide social support during childbirth, have been associated with a number of positive health outcomes. Because the primary model of practice for doulas is a fee-for-service model in which families privately hire a doula, many expectant women who could benefit from doula support are unable to access the service.

The Doulas Care program, located in Ann Arbor, Michigan, represents one model in which doulas provide services without charge. Despite the positive health benefits associated with doulas, the women who have the least amount of resources and are most likely to benefit from doula care are the least likely to receive doulas' services (Lantz et al., 2005) As a result of this disparity, the Doulas Care program was formed in an attempt to provide doula support to socially and medically at-risk women at no charge. The Association for Wholistic Maternal and Newborn Health based in Los Angeles also has a sliding scale fee for doula support, and offers volunteer doulas for women on Medi-Cal free of charge.



Summary

The maternity care team in the United States has expanded in the last decade with the addition of doulas, who represent a growing group of paraprofessionals. The work of doulas is most commonly focused on providing social support solely during labor and birth. In the broadest sense of the role, a doula is a community health worker who provides skilled and intimate continuity of care throughout the childbearing year. This includes support during pregnancy, labor, and birth, as well as assistance during the transition to parenthood in the initial postpartum period. A doula does not perform clinical tasks or provide medical care; instead, she focuses on emotional and social support for the childbearing woman and her family. The use of doulas is an innovative option to address complex health problems during pregnancy (e.g., preterm labor, low birth weight, and postpartum depression) that have multiple contributing etiologies beyond biological factors. For example, doulas may provide education, logistical planning, and social support to help reduce stress associated with preterm labor. Stress has been shown to be associated with preterm labor, but it is not something that can be reduced when family support is limited or home responsibilities are demanding. Thus, a doula's support can be vital.



The goal of Community-Based Doula Support Programs is to improve the maternal and child health outcomes of at-risk populations by meeting the emotional and physical health needs of culturally diverse populations of low-income women and adolescents with at-risk pregnancies. To accomplish this mission, Doulas Care matches women who are low-income and pregnant and who are socially and/or medically at risk with a volunteer doula who will provide education and support throughout pregnancy and childbirth and into the postpartum period.

The doula services provided in the Ann Arbor program included the following:

- Transportation to prenatal visits;
- Accompaniment to prenatal classes;
- Prenatal home visits;
- Answers to questions about pregnancy, childbirth, and parenting;
- Education to promote healthy behaviors throughout pregnancy;
- Support during labor;
- Assistance with breastfeeding, if needed;
- Home visits during the postpartum period;
- Availability by phone for any questions.

The value of the findings of this study is in their application by other organizations that may be interested in developing Community-Based Doula Programs. Community Health Promoters or paraprofessionals working as community advocates have been shown to have a positive effect on outcomes for selected populations of childbearing women (Norr et al.,

2003). Models promoting the combination of these roles have received little research attention in the literature, but they represent an opportunity to maximize the positive effect of social support as an intervention to promote positive health outcomes for childbearing women and adolescents. An organization is emerging, with leadership provided by the Chicago Health Connection (the originators of a community-based doula model), to bring greater attention to Community-Based Doula programs and the extended role they can play in improving outcomes for all childbearing women. Yet, clearly, a need exists for expanded educational offerings for doulas who combine the roles of community health promotion and outreach and doula support.

How Support Given by Doulas Differs From Other Maternity Care Providers

Another study of interest:

MIDWIFERY. 2011 AUG;27(4):525-31. EPUB 2010 SEP 17.

AFTER PRAISE AND ENCOURAGEMENT: EMOTIONAL SUPPORT STRATEGIES USED BY BIRTH DOULAS IN THE USA AND CANADA. GILLILAND AL.

Summary:

Nine different strategies were distinguished which Doulas utilize. Four strategies (**reassurance, encouragement, praise, explaining**) were similar to those attributed to nurses in published research. Five were original and described as only being used by doulas (**mirroring, acceptance, reinforcing, reframing, and debriefing**).



Conclusions:

It appears these strategies as extremely meaningful and significant with their ability to cope and influencing the course of their labour.

Implications for Practice:

It appears that Doulas provide intricate and complex emotional support skills when providing continuous support for women in labour. Application of these skills may provide an explanation for the positive 'doula effect' on obstetric and neonatal outcomes in certain settings.

Summary

There are only a few studies on the role of community based doulas in reducing premature birth and more community-based research is needed to increase the understanding of the role community-based doulas can play in reducing the impact of health inequities in maternal and infant health.

FURTHER RESEARCH

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**ABOUT THE
ASSOCIATION FOR WHOLISTIC MATERNAL AND NEWBORN HEALTH**

<http://WholisticMaternalNewbornHealth.org>

AWMNH is a 501 (c) (3) non-profit public charity 509 (a) (2) located in Los Angeles, California. Comprised of maternity care professionals, we are working to improve pregnancy outcomes and the experience of childbirth for all women. Our goal is to raise awareness of the profundity of pregnancy and childbirth to transform women, families and communities. Our mission is to eradicate perinatal health inequities and disparities through evidence-based maternity care, education and support services for families. Our grass roots, community-based approach support direct-service providers to promote the health of mothers, infants, and families.

As advocates for mothers and babies, we seek to ensure that each mother is treated with dignity and respect during her pregnancy, childbirth and postpartum periods. We promote a self-growth approach to pregnancy; a special and unique time in a woman's life. We acknowledge that childbirth can be viewed as a sacred rite of passage, when entered into with courage and reverence, facilitated by sensitive, compassionate and skilled care-providers.

Our intent is to mobilize the perinatal community to implement culturally appropriate Wholistic approaches to perinatal health with the goal to improve outcomes and quality of maternity care in all settings: clinics, hospitals, birth centers and domiciliary settings.

We are dedicated to helping families have empowering, satisfying and joyous experiences from conception through gestation, childbearing, breastfeeding and early parenthood. We are inspired by the potential of childbirth to transform women's lives, families and communities.