

Doulas are allied health professionals and community members. This is reminiscent of a peer support or community-based model.

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Presenter Bio

About Christa

Christa is a passionate doula, childbirth educator and health promotion graduate. She has a Bachelor of Health Science (Health Promotion) from Western Sydney University and is now embarking on postgraduate research studies. Christa is the President and Co-Founder of Doula Network Australia Inc.

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Doula Network Australia Inc.

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Doulas are
not
midwives
in embryo

Poster Presentation
 Christa Buckland
 BHLthSc (Health Promotion)



Doulas are not midwives in embryo – Where do they belong?

Background

The past 30 years or so has seen the emergence of a new role in maternity care. ‘Doulas’ provide emotional, physical and informational support to pregnant women and their birth partner, before, during and after the birth. Doulas are hired privately by the woman or couple.

Research has shown that continuous labour support can significantly decrease interventions and increase maternal satisfaction, particularly when this support is provided by doulas (Hodnett, Gates, Hofmeyr & Sakala, 2013). Doulas have also been shown to improve postpartum outcomes such as maternal-infant bonding (Hans et al., 2013) and breastfeeding rates (Edwards et al., 2013). Therefore, doulas represent a critical (albeit non-medical) role in supporting and facilitating normal birth.

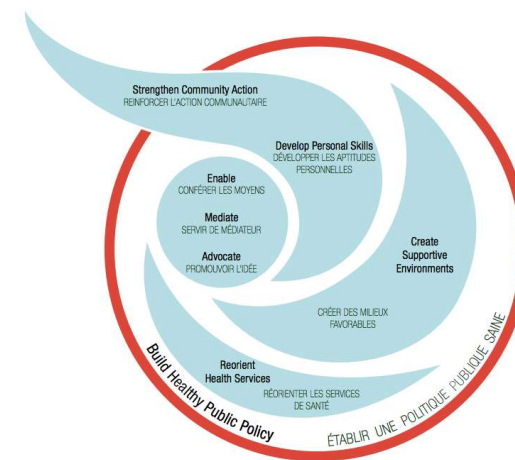
Sounds great! So what’s the problem?

Despite the demonstrated positive outcomes, there remains an unease about doulas, what their role is and where they belong in the maternity system. In particular, some midwives have expressed a general mistrust towards doulas due to a perceived lack of training, blurring of boundaries and the doula role potentially interfering with the relationship between woman and midwife (Stevens, Dahlen, Peters & Jackson, 2011). This perceived overlap in roles implies that doulas are “like midwives” and suggests their inclusion in the birth room is unnecessary and potentially obstructive.

“The role of a doula fits within the paradigm of health promotion and the Ottawa Charter.”

A new perspective

Doulas are not part of the “system” at all and their role is best understood and evaluated from a health promotion perspective. Health promotion focuses on empowering individuals and communities to take control of their health. From this perspective, one can view the emergence of doulas as a manifestation of community action and empowerment. That is, doulas were borne out of a perceived need in the community and this need was fulfilled by



The Ottawa Charter, World Health Organization, 1986.

community members. This closely resembles a peer support or community-based model (HealthConnect One, 2014). This perspective may help to diffuse the tension between care providers and doulas, as it views doulas as part of the community, rather than part of the “medical team”.

Conclusion

Doulas play a critical role in supporting and facilitating normal birth. The role of a doula is most suitably placed within an allied health framework, specifically health promotion. Doulas are not “intruders” in the birth room. Rather, they represent an excellent example of community action and empowerment. This is reminiscent of a peer support or community-based model. They provide a successful and cost effective way to improve health for mothers and babies in Australia. The work of doulas needs to be acknowledged, supported and amplified.