



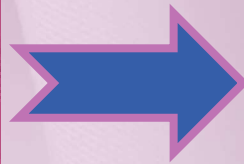
# Community-Based Doula Focus Group

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## Report

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## INTRODUCTION

Many people do not readily recognize the word “doula”; and if they do, the word is connected to an extravagant service. In fact, the Greek word translates to “women’s servant”. The practice of women serving other women in support of childbirth has been going on for centuries, and has no doubt survived the times due to its positive impact on the birthing process. Although doulas do not provide medical care, they are knowledgeable about many medical issues while providing emotional support – all with one goal – a positive and safe birth.<sup>1</sup> Numerous scientific studies have proved a child’s formation begins in the womb from language development<sup>2</sup> to even the roots of human behavior.<sup>3</sup> A study by the National Institutes of Health cited the adverse effects of trauma history on prenatal development<sup>4</sup>, making the stakes very high for the population of people SBCC serves. SBCC supports the idea that early childhood development begins before childbirth as they provide their Community-Based Doula program to mothers beginning in pregnancy. SBCC also offers programs that continue care for families and their children. Mothers can progress to other support programs. Pre-School Without Walls (PWV) is a natural progression of care in their service selection.

### Background & Method

The Community-Based Doula program<sup>5</sup> serves vulnerable women in South Bay, SPA 8. Many of them are unable to access the support they need. Making matters worse, they often times do not have a social or familial network on which to rely during pregnancy, which is also a vulnerable state in and of itself. Quite simply, these women are scared and alone. It is important to understand the characteristics of SBCC’s doula clients to ensure the program services are meeting the population’s needs.

SBCC’s doulas provide the reassuring support these women need to thrive in pregnancy and have a safe delivery, so their babies can have a chance at a better life. They offer the following: education, basic-needs support, medical advocacy, labor and delivery coaching, breastfeeding education and facilitation, and attachment and bonding training. Led by an outside consultant, a focus group was convened to interview current program participants in English to learn the extent to which SBCC’s clients are using their various service offerings and their effectiveness. If the women were not breastfeeding, for instance, then the consultant was interested to know how and why the woman came to their decision. This report explains the impact that the doula program has had on these focus group participants.

Five women attended the two-hour session and were asked questions about various aspects of the doula program’s services. The focus group protocol began with questions about how the women learned about SBCC’s doula program, and what motivated them to use the services. Table 1<sup>6</sup>, at right, shows how many women in the focus group had used a doula before this. Three out of five of them had used a doula for every one of their pregnancies.

*Table 1: Doula Use*

Focus Group Participant	# of Children	# Times Used a Doula	% Doula Used in Pregnancy
#1	4	4	100%
#2	3	1	33%
#3	2	2	100%
#4	1	1	100%
#5	4	1	25%

<sup>1</sup> (American Pregnancy Association, 2019)

<sup>2</sup> (Mann, 2013)

<sup>3</sup> (Hopson, 2016)

<sup>4</sup> (Emma Robertson Blackmore, 2016)

<sup>5</sup> In much of this report, the Community-Based Doula program will be referred to as the “doula program”.

<sup>6</sup> One of the five participants (#5) used SBCC’s doula services after giving birth to her baby.



Questions about delivery preferences, birth plans, and patient rights were asked to determine whether or not doulas had shared information about these topics with their clients and to what extent that information was helpful. Questions about labor and delivery sought information about advocacy. And finally, questions about services used after delivery helped uncover whether or not mothers had breastfed as a result of their doula's coaching, whether their doula provided parenting guidance – especially on attachment and bonding, and whether they would use the program again. The discussion concluded on the topic of suggested improvements. Their responses were both documented through notes typed in live time and captured in audio recording.

The report structure follows services offered before birth, during labor, and early infancy. The findings are summarized in this report, along with the women's opinions about the quality of the services received. Participants' direct quotes are used throughout the report to support themes that emerged from the data.

### Motives for Using a Doula

*% of respondents  
who have used a  
doula for 100% of  
their pregnancies:*

**60%**

Given that 60 percent of the participants have used a doula for every one of their pregnancies, the success of the program is evident by the rate of return of their clients. When asked the reason for using a doula, 100% of the respondents said it was for support. Even though they each sought support for slightly different reasons, it is clear that the emotional support they receive from their doulas is making a positive difference in their perceived experiences.

The qualitative evidence additionally supports what the quantitative data is showing us: this program provides incomparable support to these women. One of them was encouraged to use the service of a doula because she recalled her grandmother's use of a midwife, and the support she received. She needed the support of being able to meet – even in her own home – and to text and call her doula as questions arose. *"It is the best support and I really needed that."* Given her positive experience, she made a little joke to emphasize her enthusiasm for the program. She said she will use a doula for future pregnancies as well given her positive experience: *"She gave me too much confidence, and now I want another [baby]."*

*% of program  
participants who  
would use SBCC's  
doula program  
again:*

**100%**

Another woman told the story of her first child's birth, which was *"traumatizing"*. When she heard that the doula program offers someone to be by your side during birth, advising you of your rights and protecting your wishes, she was on-board. Though her first pregnancy had progressed well, the labor was difficult. It had been important for her to have a natural birth, but she lost much blood. Though she was young and didn't know what to expect, she felt that she was being manipulated by the healthcare staff.

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*"In a sense, it was traumatizing. I remember losing a lot of blood, and the doctor being very rude and nasty [yelling], 'You're gonna have a c-section!' Basically, I felt like I was rushed. I felt like I didn't have a voice – like they just did whatever they wanted with me and however they wanted."*

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It was not an enjoyable experience, and she didn't have her next child until another eight years later. She wanted more children but was put off by her first experience. In the back of her mind, she was anxious and scared about going through the birth process again. This woman appreciates the role of the doula. She sees them as a neutral voice, who does not work for the doctor or hospital, but rather, advocates for the rights of both mother and child.

In this mother's experience, her husband had sided with the medical professionals, accusing her of making unreasonable demands. She knew in her heart she was not being too demanding, and only wanted what was fair for her and her child – and a doctor who would respect her rights. She felt as though she was being pressured to have a C-section she did not want. She feels that if she had had a doula by her side, her wishes for a natural birth would have been taken more seriously.

A third woman in the group sought support from the program for a different reason: this was her first pregnancy. She feared all the myths and stories she heard about pregnancy. She told the group how she appreciates the confidence the doula gives her, debunking the myths by giving her solid information. *"She is always so positive"*, which further built her assurance she can make it through the birth. This mother astutely pointed out that the support she receives from her doula is different from her husband's support. Her husband cannot understand birth the same way her doula does. Not only does her doula empathize with her fears more closely as a woman, she has proper knowledge with plenty of birthing experience. All of those factors weigh heavily in her comfort level.



The focus group leader thought it would be helpful to understand whether or not these participants' friends or families had previous experience with a doula that may have influenced their own decision to use a doula. Four of these five participants were the first ones in their social circles to use a doula. One participant has a friend who used a midwife. With the midwife's assistance, she was able to deliver her children in her own home. They paid for the service, and raved about how it made their birth experience wonderful. While the doula did not offer this mother the experience of birthing at home, she gave her the support and confidence she needed so desperately.

Most of the women had heard about the doula program from within the community – a former co-worker, La Leche League meeting, a patient at the ob/gyn office, and a husband's friend. This shows that SBCC is not only doing such great work that others share their experiences; they are also well connected within the community to receive referrals. For example, a single mother with two children learned about SBCC through a referral from her probation program at Volunteers of America.. She said: *"I feel confident to be by myself. But there's nothing like having someone who's seen me and knows me and knows what helps me. It's a great blessing to have [my doula].... I never even thought I would have a birth plan. I never even thought I could breast feed. I didn't know what that looked like for me."*

SBCC is a valuable member of the greater Los Angeles community, providing much-needed support to a vulnerable population of women. They provide a wide scope of services within the community, spanning care from pregnancy to after birth.



## SCOPE OF SERVICES



### Antepartum

One immediately connects a doula to labor as they attend the birth to support and guide the mother. In addition to labor doulas, there are antepartum (before birth) and postpartum (after birth) doulas. **SBCC offers their Community-Based Doula program to mothers beginning in pregnancy, during labor, and after birth.** They understand that a child's development begins in the womb. Support and guidance before birth are especially helpful to first-time mothers, those with a high-risk pregnancy, and women who are exposed to trauma and violence<sup>7</sup>. **The doula serves many purposes during this time: pillar of support, empowerment coach, information source, and advocate.**

#### Roles the doula plays antepartum:

- |   |   |
|---|---|
| 1. Provide positive/uplifting emotional support.                | 2. Advise mothers what to expect.       |
| 3. Inform mothers of their rights.                              | 4. Develop a birth plan.                |
| 5. Help monitor pregnancy progress.                             | 6. Accompany mother to doctor's visits. |
| 7. Advocate for their client to receive special treatment/care. |   |

### Support

These focus group participants highlighted emotional support as arguably the greatest need before birth. Facing pregnancy alone can make a mother question her strength. One mother shared how the father of her child wanted her to abort the baby, but that she decided against it, committing to love her baby, and praying for strength. She said, *"I really needed support with a doula. I'm completely by myself in this pregnancy – like completely. Even though the dad lives two doors down, he ignores me like I'm a ghost."* Whether it is your first pregnancy or not, facing pregnancy alone feels overwhelming. She says her doula has coached her to make her emotionally stronger.

For another mother, while not experiencing pregnancy alone, it is her first. There are so many fears associated with the unknowns of pregnancy, and this is felt most strongly during a woman's first one. Doulas are available to their clients day and night to remind these women they are capable of answering the challenges of parenthood. It is not just the information that is given to the woman, but how it is presented. SBCC's doulas are reported by the focus group to be consistently positive and uplifting. They cite this as the most beneficial aspect of their care. *"[They] say all the right words – always positive. That's why I got a doula – because of the support."*

### Empowerment

The doulas are committed to the mother having a positive experience during pregnancy. It begins with gaining the mother's trust by making them feel heard and respecting their wishes. The doula then works to build the mother's confidence by educating her about her rights and helping her develop a birth plan. The focus group women repeatedly cited the birth plan as the best tool to feeling empowered.

<sup>7</sup> (Kenneth J. Gruber, 2013)





During pregnancy, the doula spends the majority of time alleviating their clients' fears by empowering them with information. It is natural that some human experiences will cause fear – for example, going in to the hospital or getting pulled over by the police. In both cases, knowledge of one's rights helps the person to confidently navigate a situation where there are unequal power dynamics. Patients are often intimidated by doctors' knowledge and influence in the hospital setting. For this reason, they may shy away from asking questions, and it certainly makes challenging a doctor's position difficult. The goal of the doula is to make the mother feel confident and empowered.

One of the respondents said her doula made her feel exactly that – confident and empowered to ask questions. The doula encouraged her by emphasizing her right to ask questions and to not feel ashamed in doing so. She was coached that if a doctor or nurse is going to do something to you that you don't have knowledge about, it is well within your rights to ask questions: How will my body react to this? What are the side effects? How will the baby be impacted? Why do I need this? *"I would have that in mind every time the nurse would come. Why? Why? I felt like a little kid, asking 'why' but it's good for me...It helped me a lot."*

### Information Source

The doula is an important source of information. Their numerous experiences have helped to build a vast library of stories to share with their clients. Through sharing these stories, the doula advises her clients of their rights and guides them to discover their preferences. It is most beneficial for mothers to approach birth with some kind of plan – whether it is in written form or formulated in your mind alone.

This was the case for one mother in the focus group, who works in healthcare, and shared her reasons for creating a birth plan but not sharing it with her healthcare providers. She described a healthcare industry culture that is defensive and jaded, making it intimidating to present your birth plan at the hospital. She personally has seen how demanding patients can be; and when they do, the nurses become wary. They begin to treat that patient differently. The nurses may label the patient as 'high maintenance' or worry about a potential lawsuit, and consequently, no longer have a comfortable rapport. She tells the group about an account she witnessed at work:

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*"I've seen how nurses [react] when patients have those type of requests, saying 'I want this. I want that.' And they have a big ol' list of things that they want. I've heard the nurses laugh and say, [in a sarcastic tone] 'yeah, and do you want your coffee with that?!', and they just laugh and they don't want to even go in to help you anymore."*

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This mother did not want to give birth to her child in that kind of environment, setting up her experience for a potential *"fail"*. She also recognized the need for flexibility since things do not always happen according to plan. She felt confident and prepared with the numerous conversations she had with her doula to prepare her for the big moment. She, therefore, decided to follow the plan in her mind, promising herself to speak up at the appropriate times for pain management, breastfeeding right away, Vitamin K for the baby, etc. The exercise of creating the birth plan alone brings clarity to the mother's mind about



her preferences and rights during labor. So, even if she does not end up formally presenting her birth plan to the healthcare team, she is still navigating a plan in her head that positively guides her experience.

### Advocate

The focus group participants report that their doulas attend doctors' visits with them. This is especially helpful if the mother needs an intervention that may not be supported, and needs an advocate to validate her request. If the doula is unable to attend a doctor visit with her client, the respondents reported having preparatory conversations prior to the appointment, coaching them on questions to ask the doctor. The participants also reported feeling that the doctors seem wary of the doulas, and even discourage a mother from having her doula present at visits.

When the pregnancy is complicated by risk, treatment approaches can vary from the birth plan. One mother in the group explained how losing her first baby at 38 weeks has labeled her subsequent pregnancies as high-risk. For this reason, she felt a stronger need to have a written birth plan in place. *"It's just so helpful because you have a voice and a plan and you feel empowered."* With the stakes already being so high, she wanted everyone *"to be on the same page"*, because her current fetus is breached.

The act of creating the birth plan with her doula also helped her to stand firm in her rights. This mother was naturally on higher alert than most patients due to her previous still-born birth. She was anxious about the health of her baby, and her doula helped to enforce her rights with the doctor. *"So I think that helped me to know my rights. Having the heart monitor on was so important to me, and I knew that I could have it on and at a certain volume I could hear the heart of the baby. That helped me a lot...So, having my birth plan has empowered me."* Because of her doula's advocacy, she was granted the equipment necessary to listen to her unborn child's heartbeat, which helped her relax and feel in control.

Unfortunately, doctors do not always comply with a mother's request to have a doula present during visits. This same mother was saddened that her doctor would not wait for her doula to join them during the external cephalic version procedure to turn her breached baby. It was a procedure that made her very nervous and she wanted her doula's support. The feeling of being 'shut-down' by a doctor is not uncommon as was evidenced by the multiple similar stories heard from the group. One woman wanted to talk to her doctor about vaginal birth after C-section, but she was *"afraid to say something because I don't want to get him riled up."* Her doula reminded her of her right to ask questions, making her feel confident to ask her question at the next visit.



### Labor & Birth

Whether it is a client's first or fourth baby, the doula's presence during labor is valuable since every birth is different. Because a doula does not practice medicine, they cannot give direct medical advice. Rather, their role during birth is closer to that of an advisor or guide, a moderator, and even a communication facilitator. Their knowledge and experience can help inform their client about their rights and choices – as well as the risks, benefits, and alternatives to a procedure. Acting as an intermediary in this way helps reduce miscommunications between the client (and her family) and the doctor (and his team). This translates to more positive birth outcomes – higher



birth weight, less birth complications involving mother or baby, and more likely to initiate breastfeeding.<sup>8</sup> Continuous doula care during labor has also been scientifically linked to less intervention during labor. Citing statistics in Table 2, at right, the International Childbirth Education Association (ICEA) believes that “doulas provide a bridge in the maternity care gap”.<sup>9</sup> SBCC fills the important gap in care for continuous labor support, **making their clients feel prepared for labor and ready to breastfeed after birth**. Just as prenatal advocacy was important, **advocacy** in the hospital is vital for support.

**Table 2: ICEA Statistics**



### Feeling Prepared

After months of emotional support, information-gathering, and doctor’s visits, the preparations give way to the monumental flash of birth. So, the focus group facilitator asked the pointed question about whether or not the participants felt prepared for their baby’s birth as a result of their doula’s support and knowledge. Of the four women who used SBCC’s Community-Based Doula services before birth, every one of them felt prepared for labor because their doulas had given them the appropriate information and at least had preferences in mind if not a formal birth plan.



One first-time mother told the group how grateful she was to have had her doula’s support:

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*“At the beginning when I didn’t have a doula, I was scared about it. I was nervous about it because this was my first one. I had never had a baby; so, I was like, ‘How am I gonna do it?’ Well, after I had a doula, she helped me through everything.”*

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Other mothers reminisced how they too were very scared before, during, and even after the birth of their first child. All agreed that having a child can be frightening, unless one has the experience of a doula to reassure them. A doula’s calm demeanor may be all a mother needs to push through a long and difficult labor such as the one described by this mother. She said she would look around the room at everyone’s faces staring at her – those of the doctor, nurses, her husband, and her mother. They all looked **“mad or worried”** until she came to rest upon her doula’s peaceful face, which gave her reassurance that she could make it through delivery successfully.

A mother can research, prepare, and plan. Then, something unforeseen is discovered or happens that can change your whole plan. This was the case for one mother in the group who wanted to have a vaginal birth. When her healthcare team discovered the baby was breached, she needed to adjust her expectations for following through with a vaginal birth plan. Because she felt so strongly against having a C-section, her doula helped her process those objections by addressing her concerns, and ultimately, she accepted the new plan. She was relieved to have the doula’s support through those changes. In this way,

<sup>8</sup> (Julie D. Flom, 2018)

<sup>9</sup> (International Childbirth Education Association, 2015)





the birth plan was a living document, evolving with many nuances. *“At end of day, as long as my baby is fine. This is what I need to focus on.”*

The doula’s hard work to prepare their client during pregnancy pays off during labor. The birth doula’s role is to keep the women comforted, informed, and empowered during labor and facilitate communication with both hospital staff and personal support people so that the mothers feel in control of their medical decisions and birth experience. Immediately after birth, the doulas help with newborn care and breastfeeding. It is at this stage that once again, the doula’s practical experience makes a lasting difference in both the mother’s and child’s health since numerous studies prove the importance of breastfeeding.

### Breastfeeding

SBCC is right in supporting breastfeeding initiation soon after birth, because it is a particularly important aspect of care since low-income and Black women typically have lower breastfeeding rates than the general population.<sup>10</sup> This population of women does not have the social support within their culture that encourages breastfeeding. However, a study shows that given “culturally-appropriate doula care, breastfeeding initiation rates were very high (97.9%)” among this group.<sup>11</sup> In addition to the medical benefits that breastfeeding offers, it psychologically assists the mother to transition to motherhood. The skin-to-skin contact necessary for successful breastfeeding technique establishes the parent-child bond, while lowering the stress-producing hormone, cortisol, in both mother and baby. Finally, from a practical standpoint, breastfeeding is cost-effective for families since formula and supplies can cost upwards of \$1,500 per year.<sup>12</sup>

Table 3 – Doula Success Rate

Focus Group Participant	Attempted breastfeeding after birth	Would have tried breastfeeding <u>without</u> encouragement from doula	Continued breastfeeding for at least 2 weeks to 2 months after birth
#1	Yes	No	Yes
#2	Yes	No	Yes
#3	Yes	No	Yes
#4	Yes	Yes	Yes
#5	Yes	No	No
<b>Doula Success Rate:</b>	<b>100%</b>	<b>80%</b>	<b>80%</b>

SBCC’s doulas are effectively coaching their clients to initiate and continue breastfeeding as evidenced by the data presented in Table 3, at right. This data was collected during the focus group. It is important to note that while SBCC’s doulas counsel their clients to breastfeed for at least 6 months after birth, 40% of this focus group population intends to breastfeed one year or more. This is impressive considering 80% of these same women would not have breastfed at all were it not for their doula’s encouragement. One mother directly contributes her breastfeeding to her doula’s work: *“I don’t think I would have tried it – not without my doula – especially with my mom and grandma whom I’m close to. They would’ve said ‘No, just give him formula!’”* Another mother admitted that she had not planned on breastfeeding at all until her doula explained the importance of the mother’s colostrum to the baby. Ultimately, 100% of the women in the focus group attempted breastfeeding after birth, and only 20% stopped breastfeeding after two weeks.

<sup>10</sup> (Katy B. Kozhimannil, 2013)

<sup>11</sup> Ibid

<sup>12</sup> (U.S. Department of Health & Human Services, 2019)



Those who objected to breastfeeding shared their reasons why. At least two of the mothers reported *“feeling like an animal”* while breastfeeding. This feeling was compounded for one mother who is breastfeeding two of her children at once. At least two of the women hinted that their family did not support the idea of breastfeeding. *“It is a commitment. I cried the first two weeks. I was like, ‘I don’t know if I can do this.’ And I had my doula which obviously was a great help....But my mom was not a good support to me because she kept saying, ‘Just stop, you shouldn’t torture yourself.’ And I would say, ‘No, this is what I want.’”* The one woman in the group who did not join the doula program until after she gave birth explained that she had problems with her baby latching, and consequently, her milk production fell. This is when she transferred to bottle feedings. The final reason for not fully breastfeeding was uncovered as several mothers admitted to supplementing feedings with the bottle out of convenience so they could attend to multiple competing priorities. Every woman in the group expressed the frustration and anxiety they felt as they breastfed for the first time – not knowing if the baby was getting what they needed or enough milk, not confident they were doing it correctly, not trusting their bodies to make enough milk.

### Hospital Advocacy

Even if a doula cannot attend every doctor’s visit, they do not seem to miss their client in the hospital. Three women in the group had already used SBCC’s doula services through birth and they all confirmed their doula’s presence during birth for each one of their pregnancies – a 100% birth attendance rate! Whether it is advocating for a natural birth over a C-section or reinforcing a mother’s birth plan directives, the doula is invaluable to a smooth labor and birth. One mother’s birth plan called for natural labor without intervention. When she was experiencing a lot of discomfort, her healthcare team pushed for an epidural. However, her doula was instrumental in helping her keep to the plan by getting her client placed in a room with a labor tub.

Sometimes advocacy involves informing the client of their rights to goods and services. The healthcare system does not always freely offer them unless the patient asks for it. Such is the case with breastfeeding pumps. Pumps help busy mothers continue breastfeeding their children when they cannot physically be present to do so themselves. Were it not for their doula’s counseling, many focus group participants would not have known to request a breast pump at the hospital. The doula continues this kind of advocacy postpartum as well, such as informing their clients about the WIC program, formula to be paid for by the insurance company, or referrals to other programs to deal with postpartum mood issues.



### Postpartum

Having a child can be frightening because of everything that can go wrong during pregnancy and labor. Then, once those hurdles are passed, the worries about being a good parent begins. This is especially true for first-time mothers. However, bringing home a new baby is challenging for experienced mothers as well. They now need to learn how to further divide their time, and manage multiple priorities and changing routines. Those who have post-birth complications, such as C-section recovery or mastitis, will have personal medical issues to address additionally. These are all things the postpartum doula can help a mother navigate. Postpartum care of SBCC’s doulas includes: coaching parents to form healthy bonds with their babies to create a secure attachment, making valuable resource connections for additional support services as needed, and extensive in-home support.



### Roles the doula plays postpartum:

- |   |  |
|---|--|
| ▪ Breastfeeding support   | ▪ Baby soothing techniques                                 |
| ▪ Emotional and physical recovery after birth   | ▪ Facilitation of attachment & bonding with baby           |
| ▪ Errands, sibling care, light housekeeping and meal preparation to alleviate mother's burden                 | ▪ Newborn care: diapering, bathing, feeding and comforting |
| ▪ Referrals to local resources such as parenting classes, pediatricians, lactation support and support groups |  |

### Parental Coaching

Of these roles, that of facilitating attachment and bonding is very important. Research shows brain development begins in the womb, continuing until the brain reaches approximately 90% of its adult size by age three. During this time, neural pathways are created as the baby has experiences with caregivers. Repeated interactions and communication are crucial to early wiring, creating pathways that help memories and relationships form, and learning and logic to develop.<sup>13</sup>

In this area of measure, SBCC succeeds here too as all five focus group participants shared the many ways their doulas facilitated parent-child bonding to develop secure attachments with their children:

- |                                |   |
|--------------------------------|---|
| • Breastfeeding                | • Eye contact   |
| • Skin-to-skin contact         | • Holding the baby  |
| • Using a sling or 'Moby wrap' | • Learning to address baby's development needs at each step |
| • Co-sleeping                  | • Doing activities together                                 |
| • Talking to the baby          |   |

*"I feel like the co-sleeping and the breastfeeding really helped to build confidence. They're really confident kids. They'll go around saying, 'I'm smart!'"*. The mother described how her children trust her when she instructs them, making it easier to guide them. She says she never would have tried breastfeeding or co-sleeping were it not for her doula's recommendations.



### Resource Connections

The doula's emotional support does not end at birth. The mothers they support face a variety of challenges, including financial ones that make their lives more stressful. In talking to her clients, the doula helps connect their children's needs to community resources – whether it's a free program or a scholarship for it. For instance, one woman's son needed to learn swimming and her doula suggested appropriate camps and programs. They are resourceful in many ways, and it's appreciated as these clients praised their doulas:

<sup>13</sup> (Chicot, 2016)



*"She encouraged me with my three kids, and empowered me, and told me that I could do it. I really appreciate it....She gives me support. She is very caring. She's like a homegirl – someone you can have some tea with at Starbucks, and be like, 'Hey girl, how you doin'?' It doesn't feel obligated. It feels comfortable."*

*"I feel like I could talk to [my doula] about many things – not only just the doula services. She is very knowledgeable and resourceful in all matters. I can even ask her, 'Hey, do you know where I can get these glasses for cheap?'...She has ways of connecting you with the resources you need."*

While there are many resources within the community, SBCC itself offers a variety of services beneficial for families. The respondents listed many SBCC programs of which their doula made them aware: the Big Bear father-son bonding event, counseling for baby's death, Christmas gift giveaways, turkey giveaways, assistance with taxes, massage events, art classes, pancake breakfast with Santa and the I Heart Wilmington festival.

Of note, the facilitator uncovered the need for SBCC to better educate mothers about its Preschool Without Walls (PWW) program. The group held misconceptions about PWW's availability and the program's purpose. Most of the women did not realize their children could enter because they weren't yet of age. They think PWW is a type of daycare or preschool. The facilitator described PWW's audience and explained how it would fit their children's age group, while further building the parent-child bond. For that reason, PWW is a natural continuation of services as mothers transition out of SBCC's Community-Based Doula program.

### In-Home Support

Until the new baby arrives home, doulas spend the majority of their time next to their client at the doctor's office and the hospital. They begin visiting their clients' homes in pregnancy as they help assess what things a family is missing and needs upon arrival of the baby such as clothing, playpen, and diapering supplies. The doulas help them obtain these supplies, often bringing them on their next visit. During the first week the baby is home, doulas may spend time with mothers organizing the home, assisting to secure safety hazards, and overall, making sure the home is comfortable. As one of the mothers welcomed her doula in her home, she apologized for the temperature, explaining how chilly her home becomes during the winter months. Her doula immediately helped her obtain a heater so they could be more comfortable. She was grateful that her doula offered the assistance without her even having to ask, because *"it's embarrassing to be asking [for help]"*. It was empathetic of the doula to recognize their need which helped her client maintain her pride. It also proves SBCC's doulas are attentive to each family's individual needs.

In-home support is especially helpful to women who are first-time mothers. Doulas give them more attention the first few weeks at home since there is so much to learn in caring for an infant – feeding, soothing, bathing, diapering, and swaddling. Learning so much at one time can easily overwhelm a new mother. Having the doulas meet the parents in their homes postpartum provides the opportunity for one-on-one training in those skill areas where they feel least confident. One mother's doula brought her the Moby wrap, and showed her how to use it. She said it would further promote bonding and peace for the baby. She gave her a swaddling lesson with blankets for those times she could not use the wrap. *"I don't think I would have taken the time to learn these things if [my doula] hadn't come over to teach them to me."* In-home coaching for breastfeeding keeps mother and baby in the most relaxed environment for



learning this sometimes stress-inducing skill. This first-time mother called her doula in the middle of the night crying that she could not get her baby to latch. *“It was nice to hear positive words when I’m thinking the worst.”* Her continuous positive encouragement to persevere paid off since she is still breastfeeding one year later.

Every one of the mothers expressed feeling like their doulas went *“above and beyond their position”*. One doula literally did just that as she requested permission from her supervisor to help this mother beyond her normal scope of service: to help her clean and organize her home to prepare for the new baby’s arrival. As a single parent to three children in a three-bedroom home, she was grateful for the practical assistance. All the mothers wished SBCC’s doula program could offer that kind of postpartum support, but they realize the limitations an office of two people can reasonably provide. They wished their doulas *“could be cloned”*. They appreciate them for taking their jobs seriously.

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*“What they say, they do. Most people would simply wish their client well and [dismissively say] ‘I hope that everything works out’. Not these women. They truly care. I’m very grateful.”*

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## PROGRAM VALUE

The focus group participants were asked to describe the most beneficial aspects of the doula program for them. The top response was emotional support/encouragement, followed closely by support during childbirth/labor. One mother’s labor was long and hard; yet her face glowed as she spoke about how her doula’s kindness and gentle encouragement helped her get through it. *“She not only had the right words to say, but knew how to say them.”*

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*“Support in the childbirth experience was more important than diapers – the diapers are just extra. Having someone there with me who is professional, gentle, caring, and really cares for her job was the most beneficial for me. She [doula] is a very good person to have during your childbirth.”*

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Two women were grateful to have access to SBCC’s counseling resources since their experiences with stillbirth and marriage problems after having children necessitated the need for counseling. Their doulas easily connected them to therapists since they are available under the same umbrella of services through SBCC. The respondents also appreciate the supplies (diapers, wipes, baby wrap/sling, play pen, heater, etc.), which provides vital financial support in this low-income area. Care and assistance in the home postpartum rounded out the focus group’s list of the most beneficial aspects of the doula program. Table 4, below, summarizes the responses.

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*“Being a married couple is not easy and with having children...kids and family....many thing got stressful at that time. So we needed that counseling support to reenergize ourselves and keep going.”*

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All five focus group respondents, 100% of the group, would use SBCC's Community-Based Doula program again. They also highly recommend the program for other mothers. The women raved about their doulas during the entire two-hour session. This is all such a testament to the obvious dedication and skill of the doula care team. The thoughtfulness with which SBCC considers the community's needs is also noteworthy. Because of their purposeful program design, SBCC professionals can easily make referrals within the organization since they all fall under the SBCC umbrella. This was cited as a convenient setup for the participants.

### Program Improvements

The facilitator asked what, if anything, the program participants would like to see done differently. There was a resounding call for additional in-home support: specifically, cleaning and overnight care. Two of the women felt SBCC still needed to do more advertising since not many people they speak to seem to know about the services offered here. One person suggested having pamphlets in other clinics. The final and strongest suggestion for improvement was program expansion to bring the program to more people in more locations in the community.

These women are so excited about SBCC's Community-Based Doula program and how it uplifted their lives. They want other women in their community to be able to experience the same thing.

*Table 4 – Most Beneficial Program Aspects*




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*"I think that they need more resources in order to provide more services not only to this area, but for expansion. Because while we benefit, there is more need and more people could benefit from this program. It feels like only 1% of the population who could be using it, do so."*

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*"She needs more doulas to help. They need more funding so they can hire more doulas and be able to help more people, because she can't do it all herself. One doula was with one client overnight...with another one cleaning – I mean she can't do it all. She needs a nap too! [laughs]"*

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## CONCLUSION

This report set out to evaluate the quality of SBCC's Community-Based Doula program based on a focus group with current clients enrolled in the program. It additionally sought to gather qualitative information about whether or not the program aspects were meeting the focus group participants' needs and to



identify any unmet ones. Based on the opinions of these five women, SBCC does a wonderful job of meeting the individual needs of their clients. In the opinion of the program evaluators, who are viewing SBCC from a 10,000-foot view as it sits within the community, they are doing a phenomenal job of meeting the community's needs as well. It is clear that SBCC has been very thoughtful about how they design and grow their programs. Given the success of the doula program, the great need within the community it serves and the overall positive impact that has on society, it would be beneficial to expand access of the program.

SBCC has come to know their clientele well in the process of providing for their care over a period of more than 40 years. This has also allowed them to learn a great deal about the community in which their clientele live. Using this depth of community knowledge and applying solutions with a wide scope of vision is how they accomplish the seemingly impossible task of treating both the individual and the community at the same time. In a community that has suffered from exposure to direct and constant violence over a number of generations, SBCC has an effective model that not only fills a much-needed gap in healthcare, it also has a positive impact on co-morbid conditions affecting the community. They treat the whole person, offering their clientele a multitude of creative and innovative programs.

Evidence of this kind of impact can be heard in the story of the mother who had a stillborn baby. She had been using the doula service from the time of her pregnancy and during labor. When she learned of her baby's death, the quick-acting doula referred her to SBCC's counseling team to find a therapist who specialized in stillborn loss. *"Counseling saved my life after the death of my baby. My husband and I both did it for three months. It helped immensely, and we are so grateful."* Because SBCC has counseling services in-house, this family was able to access the help they needed more efficiently and effectively.

By offering services that target systemic problems suffered by multitudes of people within the same community, such as depression, joblessness, addiction or, lack of education, SBCC creates an effective model to heal a community of people, while filling gaps in critical care. The doulas definitely fill a need for emotional support – cited as the most beneficial aspect of the program – and do so at an especially vulnerable time of a woman's life. So many of the focus group participants shared their difficulties with adversarial healthcare providers, and the success they had in navigating those difficulties because of their doula.

It is unfortunate that such a beneficial program has limited reach. The program is accessible at any time from pregnancy to after birth, providing support, advocacy, and in-home services at all stages. This program treats the whole person as an individual. It fulfills the need for education and advocacy. It fulfills the physical needs of hunger, warmth, clothing, diapers, safety equipment, etc. It fulfills the mental healthcare need to find strength and safety within themselves when they cannot find it in the violent community in which they live. While there is a real need in the community served for tangible items like diapers, it is the doula's emotional support that really makes a difference. The doula shares such a personal, lifechanging experience with the mother. This sentiment was captured by one of the women:

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*"I feel like your doula becomes family....You will never forget them. Maybe they move on because obviously they move on to other clients. But to me, she had a huge impact on an important part of my life...and she's like family."*

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SBCC deserves additional funding to expand this model of doula care. It is the hope of all these focus group participants and of the program evaluators that more women can access the kind of sensitive, supportive care offered by SBCC's Community-Based Doula program.



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