

Doulas as Part of the Care Team

Overview of the role of doulas, how they can be engaged as part of the care team of a pregnant patient, and the doula landscape in Louisiana.



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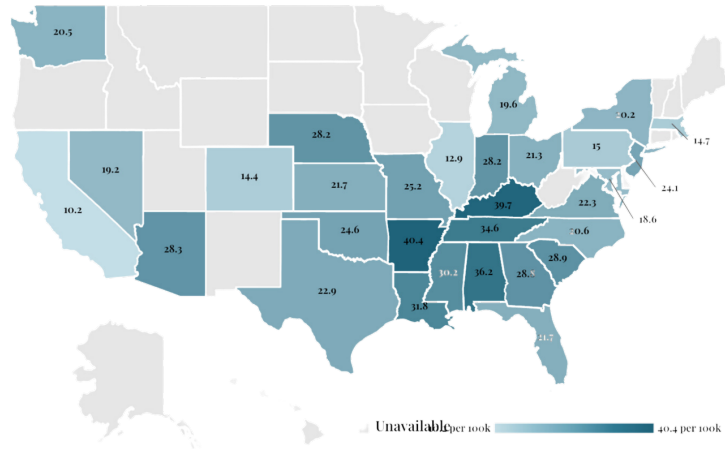
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Objectives

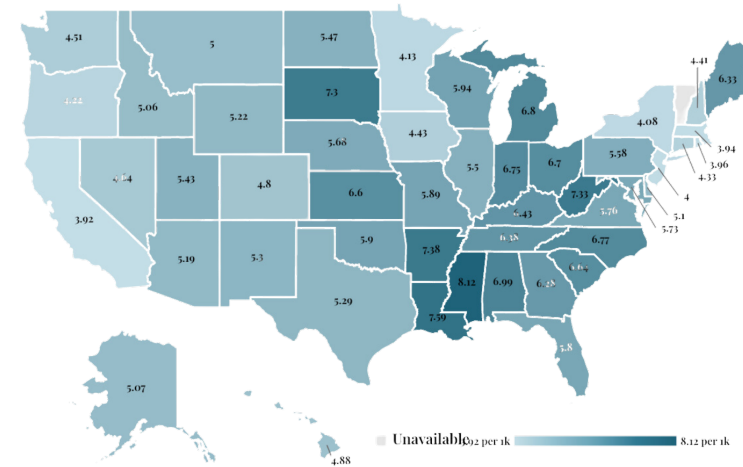
1. Understand the scope and impact of doula care.
2. Identify ways to integrate doulas into the clinical team.
3. Explore evidence linking doula care to improved maternal outcomes.
4. Recognize barriers and pathways to implementation.

The Maternal Health Crisis

Louisiana Ranks 5th
31.8 Maternal Deaths / 100,000



Louisiana Ranks 2nd
7.59 Infant Deaths / 1,000



What Is a Doula?

A trained professional who provides continuous physical, emotional, and informational support before, during, and shortly after childbirth (ICEA, 2023)



Four Domains of Doula Support

1. **Emotional:** Presence, validation, confidence-building
2. **Physical:** Comfort measures, positioning, massage
3. **Informational:** Evidence, explanations, resources
4. **Advocacy:** Supporting self-advocacy, not speaking for client



Doula Limitation of Practice

1. Doulas do not perform clinical tasks like exams, monitoring, or giving meds.
2. Doulas do not provide medical advice or contradict providers.
3. Doulas do not replace nurses or physicians.



Instead: They complement the medical team by focusing on non-clinical, patient-centered support.

Evidence-Based Benefits of Doula Care

- Cesarean delivery rates drop by up to 40% with doula care.
- Preterm births are reduced by 22%, especially among Medicaid populations.
- Risk of postpartum depression decreases by 57% when doulas are involved.
- Breastfeeding initiation rates increase by 20%.
- Spontaneous vaginal births increase by 15%, lowering the need for interventions.

Bottom Line: Doula care is one of the most effective, evidence-based strategies for safer, more equitable births.

Landmark Studies on Doula Care

- Hodnett Cochrane Review (2013): Continuous support → fewer cesareans, less medication, more positive experiences.
- Gruber et al. (2013): Doulas improve birth outcomes and reduce complications.
- King et al. (2017): Doulas lower risk of postpartum depression and anxiety.
- Falconi et al. (2022): Medicaid evaluation across 3 states confirms reduced C-sections and improved maternal mental health.

Doula Care and Health Outcomes

- Cesarean deliveries: 52.9% lower odds among Medicaid recipients.
- Preterm births: 22% reduction, saving mothers and infants from costly complications.
- VBAC success: 15–34 more successful vaginal births after cesarean per 100 patients.
- Breastfeeding: Near-universal initiation (97.9%) among Medicaid-supported families.

Nurses + Doulas: A Collaborative Model

When doulas and nurses collaborate, everyone wins

- Shared care plans ensure consistency.
- Clear roles avoid duplication or conflict.
- Open communication keeps the patient at the center.
- Mutual respect fosters teamwork and better patient satisfaction.

Together, nurses and doulas create calmer, safer, and more empowering birth environments.

The Doula Landscape in Louisiana

- Ongoing efforts to train more Doulas in Louisiana
- Medicaid pilot programs beginning to reimburse doula care.
- Collaborations with major hospitals

Bottom Line: With community and hospital partnerships, Louisiana is transforming maternal health through doulas.

Hospital Integration Models

- Volunteer programs
- Staff doulas – hired as part of the L&D team or apart of a collective.
- Community partnerships – hospitals partner with doula networks.



Success Factors: clear role definitions, hospital badges, SOPs, and staff-doula orientation.

Strategies for Successful Integration

Clear Policies & ID Badges

- Doulas identified by lavender jackets & hospital-issued badges.
- Volunteer services: background checks, TB tests, vaccine updates.

Cross-Training & Orientation

- Doulas attend staff orientations; staff learn doula roles.
- Policies and quick-reference guides available for review.

Regular Communication:

- Doulas included in staff meetings, charge nurse check-ins.
- Feedback loops between nurses, doulas, and admin.

Community Partnership:

- Materials from local doulas available for patients.
- Data on outcomes shared with staff and leadership.
- Collaboration with hospital administration to address barriers.

Case Study

How to strengthen collaboration by:

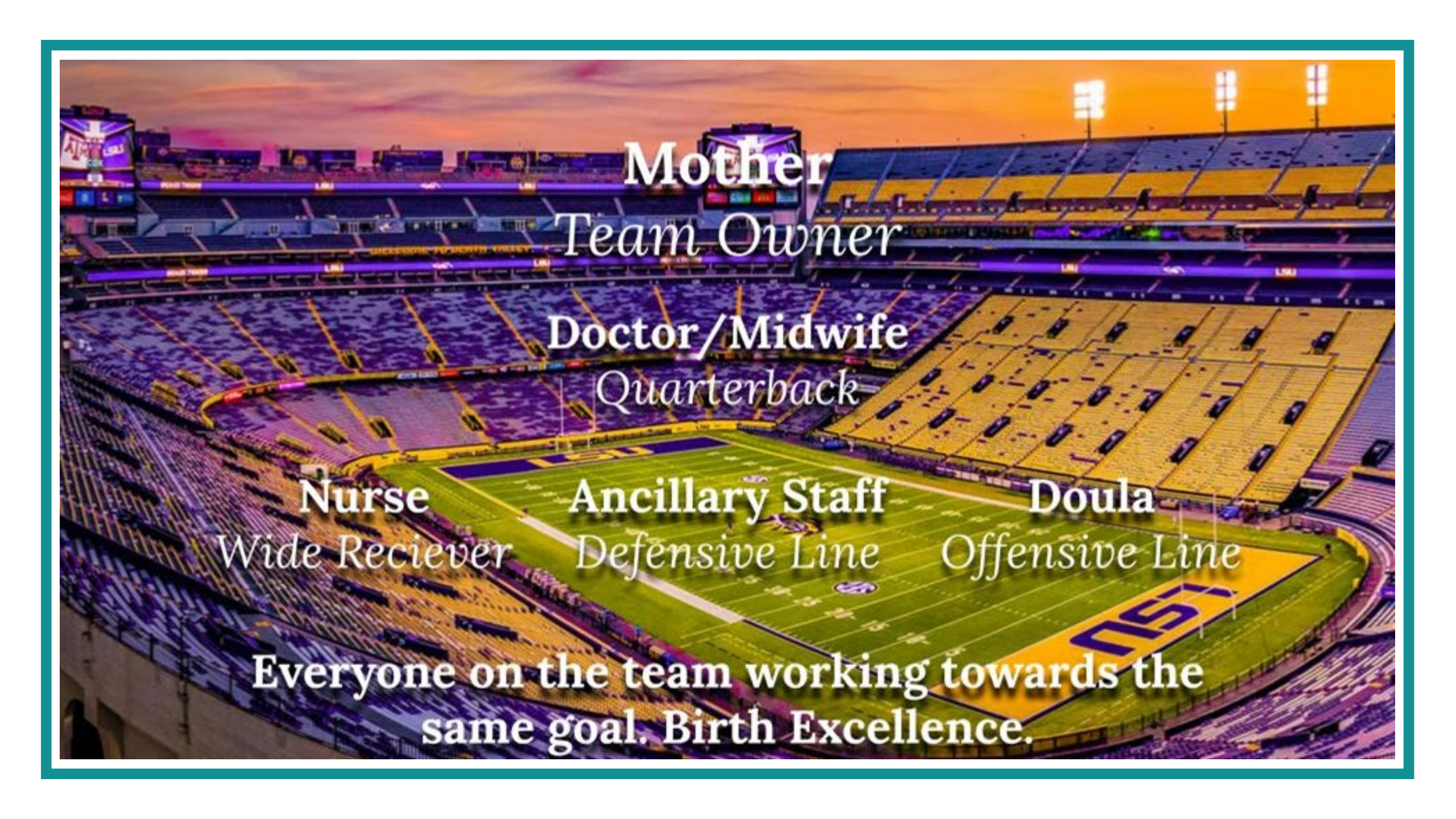
- Creating standard operating procedures and badge access.
- Providing cross-training and orientations for doulas and staff.
- Setting up feedback channels for staff, patients, and doulas.



Barriers to Access and Integration

- Lack of consistent reimbursement.
- Provider skepticism or lack of awareness.
- Systemic racism and bias in maternity care.
- Absence of standard hospital protocols for integration.

Acknowledging these barriers helps us design solutions.

An aerial photograph of a large sports stadium, likely the University of South Florida (USF) Stadium, taken at sunset. The stadium is mostly empty, with the green field and yellow end zones visible. The sky is a mix of orange, pink, and purple. Several text labels are overlaid on the image, mapping different roles in a birth team to positions on a football field. The labels are: 'Mother' and 'Team Owner' at the top center; 'Doctor/Midwife' and 'Quarterback' in the middle; 'Nurse' and 'Wide Receiver' on the left side; 'Ancillary Staff' and 'Defensive Line' in the center; 'Doula' and 'Offensive Line' on the right side; and a large statement at the bottom: 'Everyone on the team working towards the same goal. Birth Excellence.'

Mother
Team Owner

Doctor/Midwife
Quarterback

Nurse
Wide Receiver

Ancillary Staff
Defensive Line

Doula
Offensive Line

Everyone on the team working towards the
same goal. Birth Excellence.

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Questions?