Doulas and Birthing Care Coordination

During the 2021 Regular Session, the Louisiana Legislature enrolled Act No. 182. This legal dictum has as its premise, among other things, “to provide relative to health insurance coverage for maternity services provided by midwifery and doula services; … [and] to create the Louisiana Doula Registry Board…” Following in 2023, legislation requiring health insurance coverage of doula services became law. Act No. 270 goes into effect August 1, 2023, and applies to health insurance plans and policies issued on or after January 1, 2024.

As initial steps, the Louisiana Public Health Institute (LPHI), in collaboration with Healthy Blue, facilitated a Doula Coordination Community of Practice along with a steering committee to assist with the tenets of the legislation. According to the LPHI, the community of practice focused on coordination between doulas and healthcare providers in the parishes of East Baton Rouge, North Iberville, Lafayette, Pointe Coupee, St. Landry, and West Baton Rouge. The aim of this initiative was to address maternal health inequities by optimizing linkages between community and clinical providers and improving care coordination.

Many providers of women and maternity healthcare services do not understand or are unsure of a doula’s role as a member of a healthcare team. Quantitatively, LPHI found that 50% of medical providers moderately understood the role of a doula, with only 25% stating a complete understanding.

According to Act No. 182, “doula” means an individual who has been trained to provide physical, emotional, and educational support, but not medical or midwifery care, to pregnant and birthing women and their families before, during, and after childbirth.

The legislation further explains that “the benefits of doula care have been documented in numerous studies… involving over fifteen thousand women in seventeen different countries… benefits include decreased cesarean sections, increased spontaneous vaginal births, shortened duration of birth, increased maternal satisfaction postpartum, improved breastfeeding rates, and lower rates of preterm labor and low birth weight.” Engagement of doulas has also been identified by maternal and public health organizations as a promising intervention to reduce racial disparities in maternal health outcomes.

As stated, a doula is a trained, non-medical companion who serves as a helpmate. Doulas do not replace a birthing person’s partner or significant other family member who wishes to play a primary role. A doula provides support and advocates for the mother and family’s well-being. At times, a doula may provide guidance and mediation between mother-to-be and the clinical provider. But, for the most part, the doula is there for emotional support, moral support, and guidance. A doula is there to assist in the best birthing experience possible. Doulas most commonly provide support to clients during the prenatal period as well as during labor and delivery. Many also continue to provide support during the postpartum period. Doulas can be an important part of the continuum of maternal care and a connection point between patients and community resources. By the end of 2022, nearly one third of all US States were actively providing or in the process of creating medical insurance coverage for doulas.

Early during prenatal care, clinicians should inquire as to whether a patient plans to use a doula during labor. If possible, have the doula accompany the patient to one or two prenatal
visits to meet you and your staff if you are unfamiliar with this specific doula. Go over any birth plans and preferences of the patient with the patient and the doula together. Active labor is not the best time to define boundaries. The provider should have the patient and doula understand her/his clinical boundaries and what role it is hoped the doula will play.

A mother-to-be and doula should visit the proposed birthing center, hospital, or intended place of delivery. Sharing a birthing plan and understanding the policies and rules pertaining to doulas at the facility is immeasurable. Nurses provide excellent emotional support. But they are also tasked with clinical and administrative duties that may demand more of their time. Nurses may be assigned to one or more patients in labor at any given time. In those instances, doulas are most advantageous. The continued presence of a doula can provide specific labor techniques (positioning, breathing, massage) and strategies that facilitate good outcomes. Studies have shown an increase in APGAR scores above 7, a significant reduction in instrumental vaginal births, and less of a need for oxytocin augmentation when a doula is present.

A skilled doula is also an excellent teacher, communicator, and advocate. The positive effects of doula care can be empowering, especially for women who are psychosocially disadvantaged, of low income, unmarried, primiparous, giving birth in a hospital without a companion, or have a language or culture barrier. Other studies have shown positive effects well into the postpartum period, such as increased breastfeeding rates. The natural emotions of stress and anxiety are often reduced when a doula is involved.

Doulas, as part of a comprehensive support system and coordinated into care during the entire pregnancy, from prenatal care to postpartum care, may support processes and improve outcomes. All providers of the birthing events, physicians, midwives, hospitals, and birthing centers may benefit patients by including doulas in the birthing experience.

ACOG on the benefits of continuous labor support:

Published data indicate that one of the most effective tools to improve labor and delivery outcomes is the continuous presence of support personnel, such as a doula. Given that there are no associated measurable harms, this resource is probably underutilized.

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“Benefits of a Doula”, DONA International, Chicago, IL

“Birth Doula Certification – A Doula’s Guide” DONA International, Chicago, IL, January 2020

Louisiana Act No. 182, 2021

Louisiana Act No. 270, 2023

Louisiana Doula Registry Board – Agenda and Meeting notes

LPHI, Doula Coordination Community of Practice – Steering Committee meetings and Learning Sessions