

# DOULA CARE: NURSING STUDENTS GAIN ADDITIONAL SKILLS TO DEFINE THEIR PROFESSIONAL PRACTICE

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Students enter professional nursing with a desire to acquire knowledge, develop skills, and provide nurturing support during life-changing experiences such as childbirth. "Community Perspectives on the Childbearing Process," an elective course at Johns Hopkins University School of Nursing, provides an opportunity to learn and use the skills of physical, emotional, and informational labor support as a "doula." As the first of its kind offered in a school of nursing, this service-learning opportunity offers students the unique opportunity to learn the skills of labor support through an in-depth, hands-on experience. The experience helps students develop a proactive perspective on childbirth and to advocate and support women's choices in labor. Since its inception, more than 379 students have attended 405 births. Students, who become doulas while being educated as nurses, gain new skills, real practice experience, and strong professional standards and identity. (Index words: Doula care; Continuous labor support; Service-learning for nursing students; Community-based doula program) *J Prof Nurs* 24:118–21, 2008. © 2008 Elsevier Inc. All rights reserved.

**N**URSING STUDENTS HAVE high expectations for gaining skills and knowledge to prepare them to enter professional practice. Service-learning experiences have been shown to augment traditional educational methods. Birth companions, or nursing students who become doulas while being educated as nurses, gain new skills, real practice experience, and strong professional standards and identity. Through the experiences of learning and applying doula skills to their professional nursing practice, new graduates will be better prepared to enter the real world of nursing practice.

Johns Hopkins University School of Nursing started a doula training program for baccalaureate students in 1998. Students register for this as an elective two-credit academic course. The elective course provides the baccalaureate student nurse with doula training, which focuses on the emotional needs of women in labor and their families and on nonmedical physical and emotional

comfort measures (Jordan, Van Zandt, & Oseroff, 2001). A certified doula trainer from the organization Doulas of North America (DONA), a professional organization of doulas, teaches nursing students hands-on skills to use with laboring women, including relaxation, breathing, positioning, massage, and movements to reduce pain and enhance labor progress. Student nurses are able to work as doulas for assigned clients and their families after successful completion of the training.

## The Role of the Doula and Benefits of Labor Support

Doulas are women trained to support other women before birth, through labor, and after the birth of the baby with their continuous presence and labor-enhancing complementary interventions (Van Zandt, Edwards, & Jordan, 2003). They provide nonmedical emotional, informational, and physical support to women during the entire childbirth experience. Fourteen randomized trials have demonstrated that continuous support provided by a doula during childbirth can lead to shorter labors and decrease the need for intervention (Lantz, Low, Varkey, & Watson, 2005). The use of doulas as paraprofessionals (someone with a lower level of training and/or credentials who works in tandem with another professional) has gained popularity and represents a needed addition to today's maternity team (Lantz et al.,

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2005). According to DONA's web site (<http://www.DONA.org>), in 2005, 2,303 birth doulas and 102 postpartum doulas are certified. DONA's membership has grown from 750 members in 1994 to more than 5,500 members around the world today (<http://www.DONA.org>). In hospital birth settings characterized by high rates of routine intrapartum interventions, continuous labor support by nurses is unrealistic. Today's perinatal (labor and delivery) nurse must monitor the status of the mother and fetus; implement clinical care protocols and pharmacologic interventions; document assessment, actions, and patient response; and care for other patients as assigned. The benefit of the doula as a complementary team member is to provide support that results in a reduction in the length of labor, the need for pain medication, and the rate of cesarean births and other types of invasive interventions (Hodnett, Gates, Hofmeyer, & Sakala, 2003; Scott, Klaus, & Klaus, 1999; Zhang, Bernasko, Leybovich, Fahs, & Hatch, 1996).

The Cochrane Library published an updated systematic review on continuous intrapartum support in 2003, concluding, "women who had continuous intrapartum support were less likely to have intrapartum analgesia, operative birth or to report dissatisfaction with their birth experiences. Continuous support during labor should be the norm, rather than the exception" (Hodnett et al., 2003).

The goal of doula care is to ensure that the woman and her family feel safe and confident during the birth experience. The goal of nursing care during the intrapartum period is to ensure a safe delivery for the mother and baby without any medical complications. Aware of the connection between the birth experience, a woman's self-esteem, and her medical outcomes, the doula works in collaboration with the health care team to support a woman in having a safe and satisfying childbirth experience (Hodnett et al., 2003).

The nursing student who receives training as a doula has the opportunity to learn and use doula skills as a service-learning educational experience during his or her nursing education. These additional skills and opportunities, different from clinical nursing skills, give student nurses the opportunity to stay with one client, to use complementary interventions, and to advocate and serve in a supportive role with no clinical functions, tasks, and documentation responsibilities. The student nurse as a doula follows a code of ethics set forth by DONA and develops the skill of practicing according to standards set by a professional organization.

Student nurses are challenged by the incongruity of ideal practice learned in their maternity course and the realities of the practice setting. The highly technical roles that graduate nurses face in practice today may hinder their ability to give the type of continuous social support that can impact the client's birth outcome and experience. Many graduating nurses choose a labor and delivery setting for their first job because of a desire to care for laboring women, yet the clinical and administrative duties may preclude their ability to provide such

supportive care (Zhang et al., 1996). Therefore, it is the goal of this service-learning experience to empower graduating student nurses to use these additional doula skills to enhance their practice in whatever setting they work. Graduate nurses who have participated in this service-learning experience may select work environments that may provide opportunity to use these additional skills, which may improve their satisfaction with their work (Wright, 2006).

### Course Description

Students who choose to take the elective course "Community Perspectives on the Childbearing Process" must first complete the required theory and clinical course "Nursing the Childbearing Family." The elective course focuses on developing the nursing student's knowledge of the doula role. Students are encouraged to consider how the skills they learn as doulas—providing emotional reassurance, physical massage techniques, and helping the woman in labor find an ideal position—can augment their roles as future nurses in all settings.

The course stresses the doula's role in collaboration with the rest of the maternity team. In the didactic portion of the course, the student learns that the roles of the nurse and the doula are complementary (Ballen & Fulcher, 2006). The student nurse learns the importance of working together as a team and identifies that although he or she is being educated to the professional nursing role, the role of the doula is different. Education and role-playing during the workshop help the student practice clinical scenarios where potential role conflict may occur. Throughout the didactic portion of the course, there is an emphasis on the doula role as a provider of supportive nonmedical care measures. Theories and practices from maternal-child health nursing, community health nursing, and the DONA doula model are integrated into the curriculum. DONA's mission is to provide training and certification opportunities for doulas of varied cultures, educational backgrounds, ethnic backgrounds, and socioeconomic levels and to educate health care providers, the public, and third-party payers of the benefits of a doula's presence during childbirth. Their vision is "a doula for every woman who wants one" (<http://www.DONA.org>).

The didactic portion of the course consists of 20 hours of lecture and discussion, of which 16 hours are taught by the DONA-certified trainer. The other 4 hours focus on community-based care and case management of clients. The two faculty members responsible for the course and the coordination of the community program teach these topics. To complete the course, the student must provide service as a doula to one client, including one prenatal and one postpartum visit, and must be present during labor and birth. The student nurse doula is required to document his or her care, including demographic information, a birth record, and a narrative birth story. The client, others attending the birth (father, client's mother, and friend),

and the student nurse doula complete evaluations about the birth and the doula's role.

### **The Community Program**

Once students have completed the didactic portion of the course and provided doula care to one client, for academic credit, they have the opportunity to participate in the community service portion of the program. The community service program funded by the School of Nursing offers students the opportunity to provide care to clients in the community and receive a stipend, at an hourly rate, for their efforts.

Student leaders run the doula service, also known as the Birth Companions Program. The course faculties are advisors for the program, providing 24-hour on-call supervision and consultation to the students. At biweekly Brown Bag lunches, the students are assigned new clients and discuss referral sites. They also participate in presentations on topics of interest such as DONA requirements for certification, kangaroo care, nurse-midwifery as a career, doula care of women undergoing induction or cesarean section, and experiences with childbirth in other countries.

Students contact community agencies to offer the program's services and maintain regular contact. Referral relationships have been established with approximately 30 agencies, including hospital-based obstetric clinics, freestanding community-based prenatal programs, health departments, and a high school for pregnant teens.

Pregnant women are required to refer themselves for this free service. The brochures available at referral sites are easy to read and targeted to vulnerable women. However, any woman who requests the service is eligible. The student leaders accept referrals through a dedicated 24-hour telephone line. They maintain a log of all referrals and assign clients to the student nurse doulas. They provide information to inquiring mothers about the program and provide mentoring and problem-solving assistance to classmates about reaching clients, maintaining client relationships until labor begins, and follow-up care. If a delivery is imminent when a mother refers herself, the student leaders expedite assignment to a student nurse doula.

Each mother is assigned two student doulas so that at least one is available to attend the birth if the other has educational obligations. The students make every effort to attend the prenatal and postpartum visits and the labor and birth together as a team. Working in pairs has been shown to increase student learning and problem solving. As students' first obligation is to their academic work, including clinical assignments and examinations, the on-call faculty member often provides decision-making assistance when students are faced with a mother in labor and other conflicting demands.

Many of the student doulas are bilingual or multilingual. These students are assigned to clients with special language needs and, at times, are the only interpreters physically present and available to the client. This provides an exceptional service to the community

agency and an excellent educational opportunity for the student to work with clients of diverse backgrounds.

Students establish a relationship with the client through one or more prenatal visits at the prenatal provider's office or another mutually agreed upon location. Together, the student and the mother make a birth plan and discuss the student's role during the intrapartum period. Students are encouraged to do a broad assessment to identify any problems that need to be addressed. The importance of maintaining regular prenatal care is reinforced with the mother. Referral to and utilization of other community services are encouraged. The two faculty members are available to offer consultation and assist with community resource identification and the referral process.

During the prenatal visit, students establish their role as a doula, not as clinical student nurses. The role of the doulas, the mother's plans for analgesia and anesthesia, breast-feeding, and the overall birth plan are discussed. The mother and student agree on a plan for the delivery day. Approximately 4 weeks before the expected delivery, students are provided with a beeper so that the client can contact them directly when she goes into labor. When labor begins, the student nurse doulas meet the client at the labor and delivery unit and, ideally, remain with the mother throughout the entire labor and birth. The on-call faculty member is available for consultation throughout the intrapartum period. A postpartum visit is scheduled within 2 weeks of the delivery and offers the student nurse doulas and the mother an opportunity to review the birth experience. The identification of problems and working toward closure of the mother-doula relationship are encouraged.

Because the group of nursing students who become doulas is always changing due to students graduating, efforts are made to develop new student leaders. Experienced nursing student doulas partner with those who have just completed the training. The course is offered three times during the academic year, about 4 months apart, to ensure that a steady flow of experienced and newly trained nursing student doulas is available to provide service.

### **Service-Learning Program Outcomes**

Records of student nurse doula experiences are collected in two databases. In the first database, the evaluations of the new mother, others present at the birth, and the student nurse doula with regard to the experience are recorded. This database also stores client demographics and birth record information, including length of labor, medical interventions, and doula interventions. In the second database, information on their experience while in school and on the impact of their experience on their current practice as a nurse is recorded from a survey that is sent to the student nurse doula alumni.

Data collected reveal that 379 students have attended 405 births between 1998 and 2006. The mothers' ages have ranged from 14 to 45 years, with a mean of 28 years. Sixty percent of births attended were those of

primiparous women. Gestational age of the mothers ranged from 34 to 43 weeks, with a mean of 38 weeks. Thirty percent of the women served had household earnings of less than US\$20,000 annually, 41% earned US\$20–50,000 annually, and 29% earned greater than US \$50,000 annually. Forty percent were college educated, 35% were high school graduates, and 25% did not complete high school.

The rates of medical interventions for mothers involved in the program were as follows:

Intervention	Rate (%)
Analgesic	24
Epidural	69.5
Episiotomy	15.5
Cesarian section	21

Mothers found the presence of a student doula to be overwhelmingly positive, with 87% stating that the student doula was a “big help” to her physically, 80% believing that she was a “big help” to her emotionally, and 71% believing that the doula was a “big help” to the mother's other support person (spouse, mother, sister).

Students tended to underestimate the impact of their presence when compared to the mother satisfaction ratings. Thirty-four percent of student nurse doulas believed that they were a “big help” to the mother physically. Sixty-two percent of students felt that they were a “big help” to the mother emotionally. Thirty-two percent of students believed that they were a “big help” to the mother's support person. Sixty-two percent of students also believed that their overall usefulness was of significant benefit.

Student nurse doula alumni received a survey containing 18 open-ended responses. One hundred of these surveys were returned between 1999 and 2003. The surveys showed that 65% had graduated or were enrolled in graduate studies and 80% included their Birth Companions experience on their resume. Fifty percent of students surveyed believed that the Birth Companions experience helped them to obtain employment. Fourteen percent are pursuing DONA certification. These alumni reported that they are working in a variety of specialty areas, including labor and delivery, postpartum and newborn nursery (61%), pediatrics/neonatal intensive care unit (22%), community and public health nursing (7%), and a combination of international and emergency department nursing settings (7%).

Alumni have described their experiences with the program as “breathhtaking, absolutely changed my life as a nurse, future mother, and a woman” and a “wonderful experience—invaluable learning experience. I hope to continue doula work in the future as work and family permit. The addition of this education was one of my favorite parts about Hopkins.” Another alumnus stated: “Although I haven't worked as a doula since graduation, I find the information and practices I learned in the class and from the doula experience is very useful in my practice as a Labor and Delivery nurse.”

## Discussion/Conclusion

Often, graduate nurses find it difficult to provide personalized care in the high-technological environment of health care today. Student nurses who have had this student nurse doula service-learning experience, which complements their learning experiences as student nurses, recognize that these additional skills have positive influence on their nursing practice in the future. A new graduate, Ms. Wright, describes her doula experience as a student to be “the highlight of my nursing education” in a featured article published in the *International Doula* (Wright, 2006). Ms. Wright also describes the “lunch and learn” meetings to be very helpful. It is hoped that this service-learning experience during the baccalaureate education and the experience of supportive family-centered care during childbirth will make a significant difference in the practice and philosophy of nurses as they enter the professional practice world. Additionally, a student nurse who has received doula training should have the ability to both identify and dismiss misconceptions about the role of a doula and promote the complementary role and philosophy of doula care with nurse colleagues.

Participating in this baccalaureate elective course has the potential to impact the way future nursing care is provided. It is the goal of this service-learning program to educate new nurses to have more self-confidence, stronger professional identity, an independent practice experience, and a more varied skill set that highlights communication, comfort, and advocacy.

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