

PROCESSING OUR OWN EXPERIENCES

In Class

- Pay attention to your own reactions, emotions.
- Notice where you feel “stuck.”
- What are your triggers?

After Class

- Be curious
- Journal
- Ask a friend to listen
- Talk therapy

Resources: *Birthing from Within*
When Survivors Give Birth



Birth Doula Scope of Practice

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graph TD; A[Birth Doula Scope of Practice] --- B[Standards of Practice]; A --- C[Code of Conduct];
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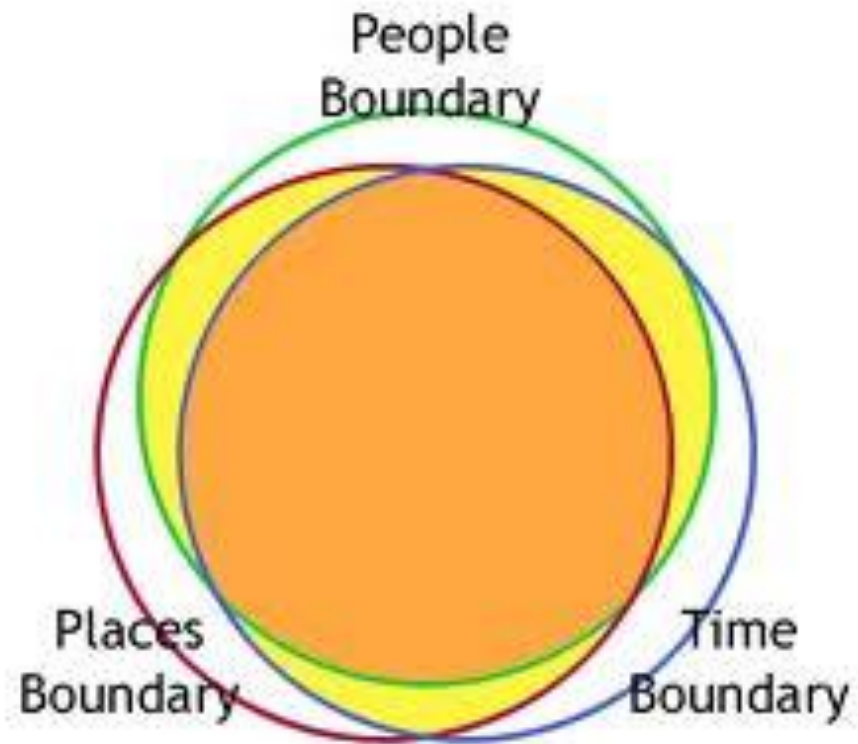
Standards of
Practice

Code of
Conduct



SCOPE OF PRACTICE BENEFITS BOTH DOULA AND CLIENT

- ❖ Enhances communication
- ❖ Helps you deliver respectful care
- ❖ Establishes professional boundaries
- ❖ Limits liability





My postpartum client has a five-day-old baby and a really sore bottom after her third-degree tear. What are your favorite suggestions for perineal comfort for healing from a vaginal birth?





What are your favorite suggestions for perineal comfort after a tear during birth?





My client has gestational diabetes but all her sugars have been in the normal range when testing every day, even though she failed the glucose tolerance test at 28 weeks. Her midwife is worried about a big baby! HELP!





What are your favorite resources for more information on gestational diabetes?



YOUR CLIENT CONTRACT ...

- Services provided
- Limitations
- Policies regarding backup
- Timeframe for services
- Fees and terms of payment
- Refund policy
- Responsibilities of each party
- Signatures (include partner!)

TRANSPARENCY

Good communication of mutual expectations is key!



TRAUMA-INFORMED CARE

- Acknowledge prevalence of trauma
- Signs of traumatic impact (flight, fight, freeze)



Brainstorm common re-traumatizing triggers during labor and birth



3 Principles of Trauma-Informed Care

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graph TD; A[3 Principles of Trauma-Informed Care] --- B[Safety/Trust]; A --- C[Choice/Collaboration]; A --- D[Empowerment];
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Safety/Trust

Choice/
Collaboration

Empowerment



STRATEGIES TO MOVE FROM VICTIM TO EMPOWERMENT

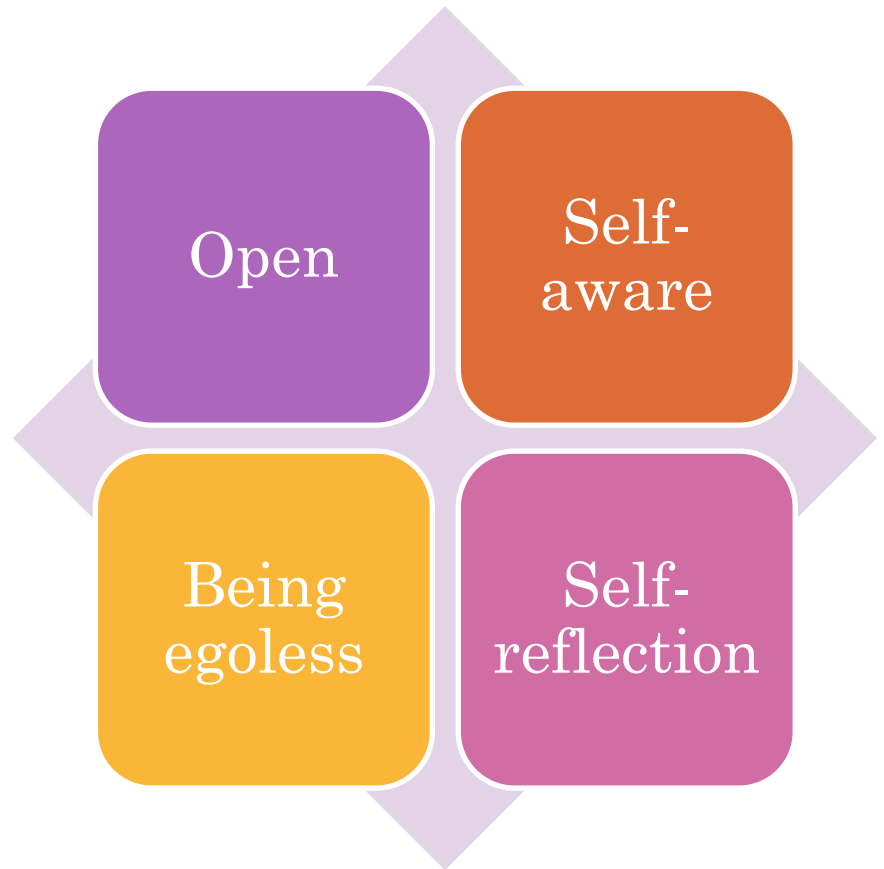
- Choices (value of agency)
- Caregivers ask permission before touching or doing things to her
- Freedom of movement
- Wear her own clothes in labor
- Permission to put herself first
- Ask “What will it take for you to feel safe?”



CULTURAL HUMILITY

Definition

- Ongoing process of self-exploration and self-critique combined with a willingness to learn
- Involves an intention to honor the beliefs, customs, and values of others
- Genuine curiosity rather than assumptions



**The biggest
communication problem
is we do not listen to
understand.**

We listen to reply.



COMMUNICATION SKILLS FOR DOULAS

When a person has a problem that needs to be solved

When a person is experiencing strong feelings or concerns

When two or more people are in conflict



OPEN-ENDED QUESTIONS



Require more than “yes” or “no”

Do not lead conversation

Do not make presumptions


Do not set priorities

Encourage spontaneous sharing





OPEN ENDED QUESTIONS

- How do you feel about ...?
 - What do you need right now?
 - How are you coping?
 - What things are concerning you?
 - Can you describe what's going on?
 - Can you share with me the story of your first birth?
 - How is your partner feeling about what is happening?
- 

USING OPEN-ENDED QUESTIONS

Closed Questions

- Are you planning a natural birth?
- Is your boyfriend going to be at the birth?
- Are you working with the nurse midwives?

Open Questions

- What do you envision for your birth?
- Have you thought about who you want to be present for your birth?
- Who is your health care provider?



TURN THE FOLLOWING INTO OPEN-ENDED (VALUE NEUTRAL) QUESTIONS.

- Are you planning on having an epidural in labor?
- Do you intend to breastfeed?
- Does your doctor respect your birth plan?



REFLECTIVE STATEMENTS



Not a question, but a statement



Your tone does not rise at the end like a question; it stays flat



Results in direct feedback about accuracy from the person



REFLECTIONS = SEEKING CLARITY

Content

“I can’t believe how tired I am!”

- You’ve never felt this tired.
- You didn’t expect to be so exhausted.

Meaning

“I am worried about Tom going back to work.”

- You don’t feel ready to be on your own.
- You’re feeling overwhelmed at the thought of being on your own with the baby.



PRACTICE REFLECTIVE STATEMENTS WITH A PARTNER

My mother-in-law
assumes she will be at
the birth and my
husband refuses to tell
her “no.”

“I am having
nightmares about
another cesarean.”



THE VALUE OF SILENCE



- Allow for silence
- Can punctuate an intense feeling or revelation
- Don't feel you have to jump in and fill up the space



VALIDATION

- Validation is not stamping a smiley face on the person's feelings.
- It's not "fixing" or "rescuing."

HOW to AVOID TOXIC POSITIVITY

INSTEAD OF: JUST STAY POSITIVE

SAY: THAT MUST BE REALLY HARD

INSTEAD OF: EVERYTHING HAPPENS FOR A REASON

SAY: I'M SORRY YOU'RE GOING THROUGH THIS

INSTEAD OF: THINGS WILL WORK OUT/ LOOK ON THE BRIGHT SIDE

SAY: THIS JUST REALLY SUCKS RIGHT NOW. IS THERE ANYTHING I CAN DO TO SUPPORT YOU?



USING VALIDATION

“I never thought I would have a cesarean.”

“Everything I didn’t want to happen at my birth, happened.”

Surgery was far from your hopes and expectations for the birth.

I know, you had every reason to expect a natural vaginal birth.

That must be such a disappointment for you.

I can only imagine your disappointment.





Lifespan

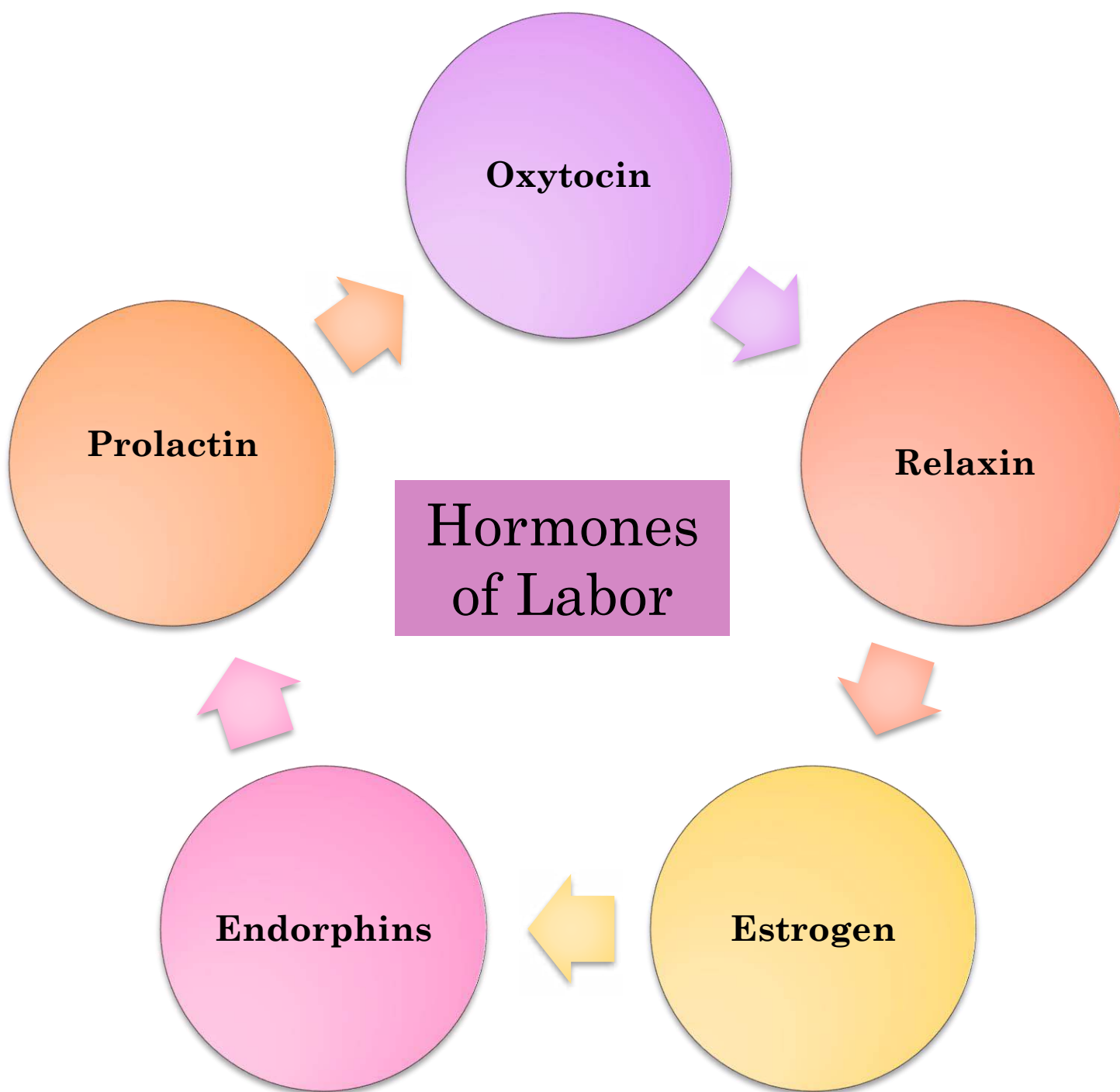
Doulas

DAY 2

MDHHS Doula Initiative

Birth Doula Workshop

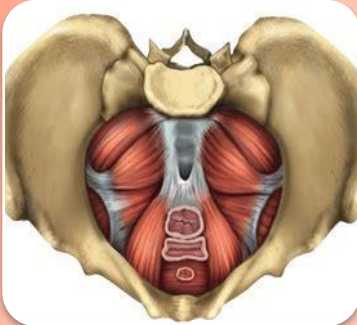
With Patty Brennan





OXYTOCIN

- Creates strong, productive contractions
- Letdown of breastmilk
- Enables experience of pleasure
- Maternal behaviors and feelings



RELAXIN

- Relaxes soft tissues, muscles, ligaments and tendons



ESTROGEN

- Decreases pain sensitivity
- Increases intuition

ENDORPHINS

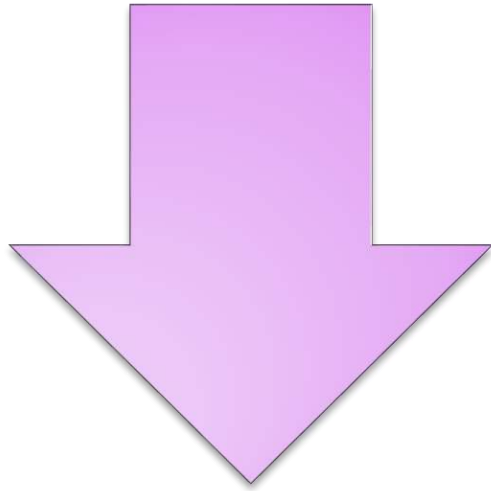


- Morphine-like hormones; reduce pain sensitivity, relax, energize
- Increase with pain and exertion (active labor)
- Help create trance state (withdrawing and instinctual behavior)
- Contribute to euphoric feelings after birth

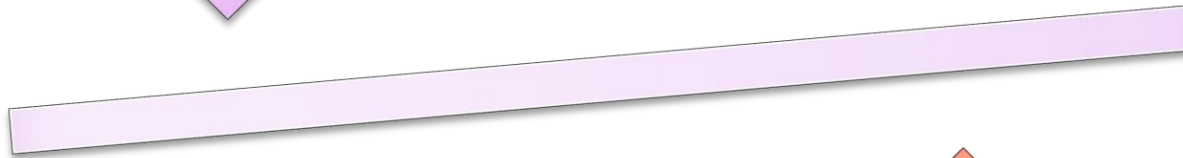
PROLACTIN



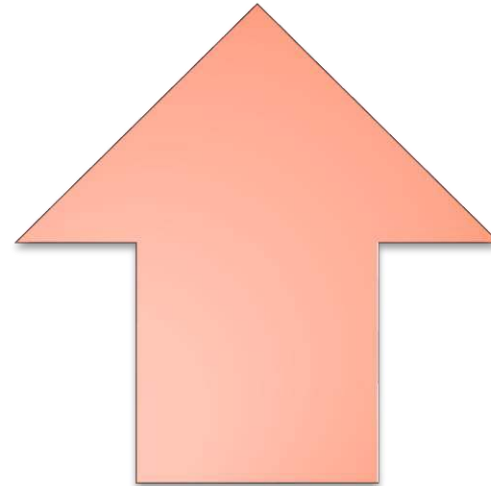
- “Nesting hormone”
- Promotes milk production
- Increases relaxation, ability to bond with baby



Fear &
stress



Labor
hormones



PHYSIOLOGIC EFFECTS OF FEAR

Fight or Flight



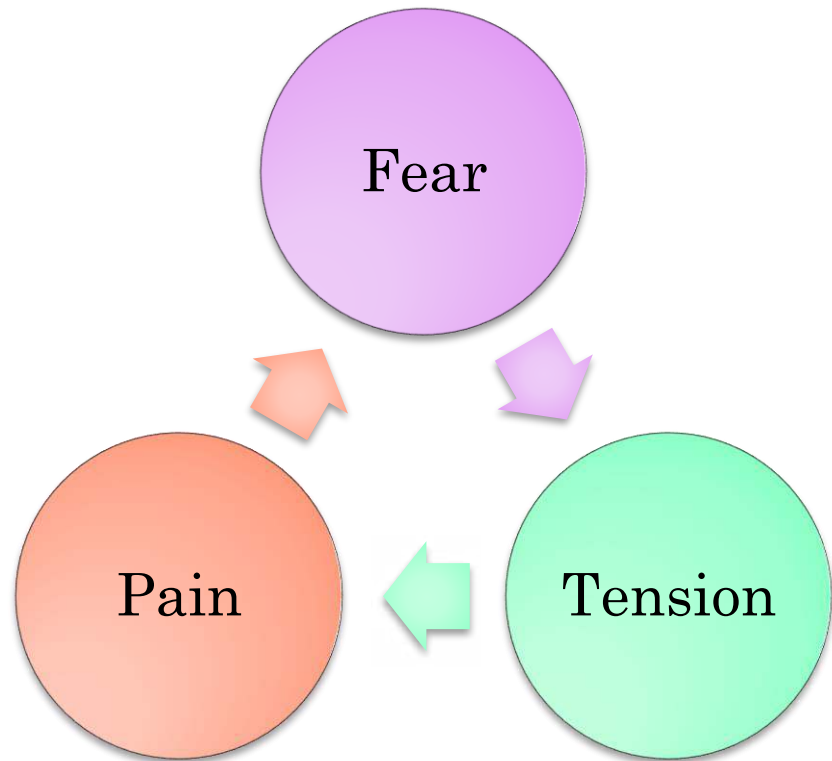
- Activates autonomic nervous system
- Releases stress hormones
- Increases respiration and heart rate, need for O₂
- Blood shunted to the extremities



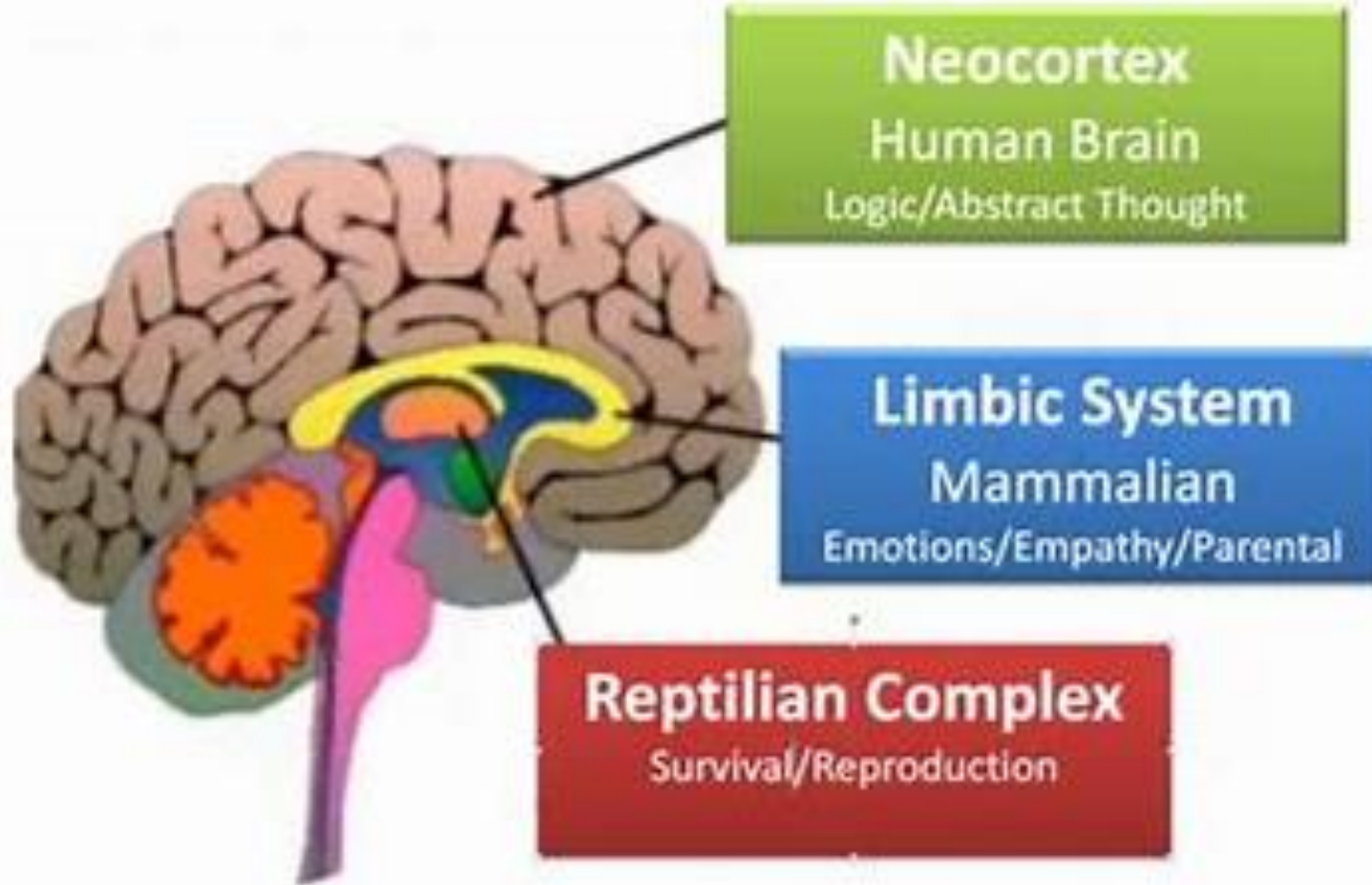
NEGATIVE EFFECTS

Hormonal Blocking

- Increased sensation of pain
- Slows contractions
- Results in prolonged labor
- More fetal distress
- Increased use of medical interventions



CONSCIOUS BRAIN VS. PRIMAL BRAIN



ANTAGONISTS TO RELEASE OF OXYTOCIN

- Stress hormones
- Stimulation of the neocortex



BRAINSTORM FACTORS IN THE LABOR ROOM THAT MIGHT ...

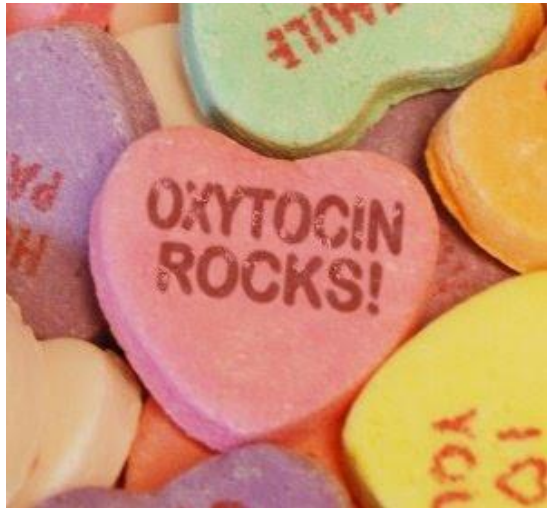
increase stress
hormones or stimulate
the conscious brain in
the birthing mother

Environment
Behavior
Words
People
Events



BRAINSTORM FACTORS IN THE LABOR ROOM THAT MIGHT ...

increase the release of oxytocin



Environment

Behavior

Words

People

Events



THERE IS A DIFFERENCE BETWEEN PAIN AND SUFFERING



“GATE CONTROL THEORY OF PAIN” OR “NEUROMATRIX PAIN THEORY”

- Synapses between pain impulses coming from the cervix and the brain
- Spinal cord acts as a “gate”—allows or blocks
- Can be interrupted by sending a different message
- Comfort Measures Checklist, p. XX
- See what works
- May change over course of labor



SUPPORT THE RITUAL

Doulas

- Blend with her
- Match her rhythm
- Model for partners
- Mom who can't be happy in any position for more than 3 cxs?
Her ritual is
CHANGE.

Partners

- Might be amazing!
- May not know how to help
- Often have a different rhythm than mom's

If it's not broke, don't fix it!



THE LABOR WHISPERER



HYPNOTIC SUGGESTION

- You're doing so well.
- That's it ... that's the way
- You're doing it!
- You are so strong.
- You're working with the contractions so well.
- You are relaxing beautifully.
- That was a good one!
- I'm right here.
- I will help you.
- You can do it.

- Say with me, "I can do it."
- You're doing exactly what you need to be doing.
- Each cx is bringing our baby closer.
- I'm proud of you.
- Perfect, just perfect.
- Just rest now.
- Good, beautiful
- Just breathe.

See p. 83 in Manual



PAIN COPING ~ WATER!

- *Best non-drug pain relief available*
- Full immersion is best
- Support for physical positioning
- Showers work too







VISUALIZATION

- Ride the waves.
- You are a surfer ...
- trying not to crash and burn.
- If you wipe out, get back on your board and go again.
- Hypnobirthing classes



MANTRA

- Repeating one word or a specific string of words; e.g., “I can do it.”
- May overlap with a visualization (e.g., “baby, baby, baby” or “open, open, open”)



PRESENT MOMENT AWARENESS

- Numbers game
- Anchor her in the present moment
- “Just get through this one.”
- “Just rest now.”

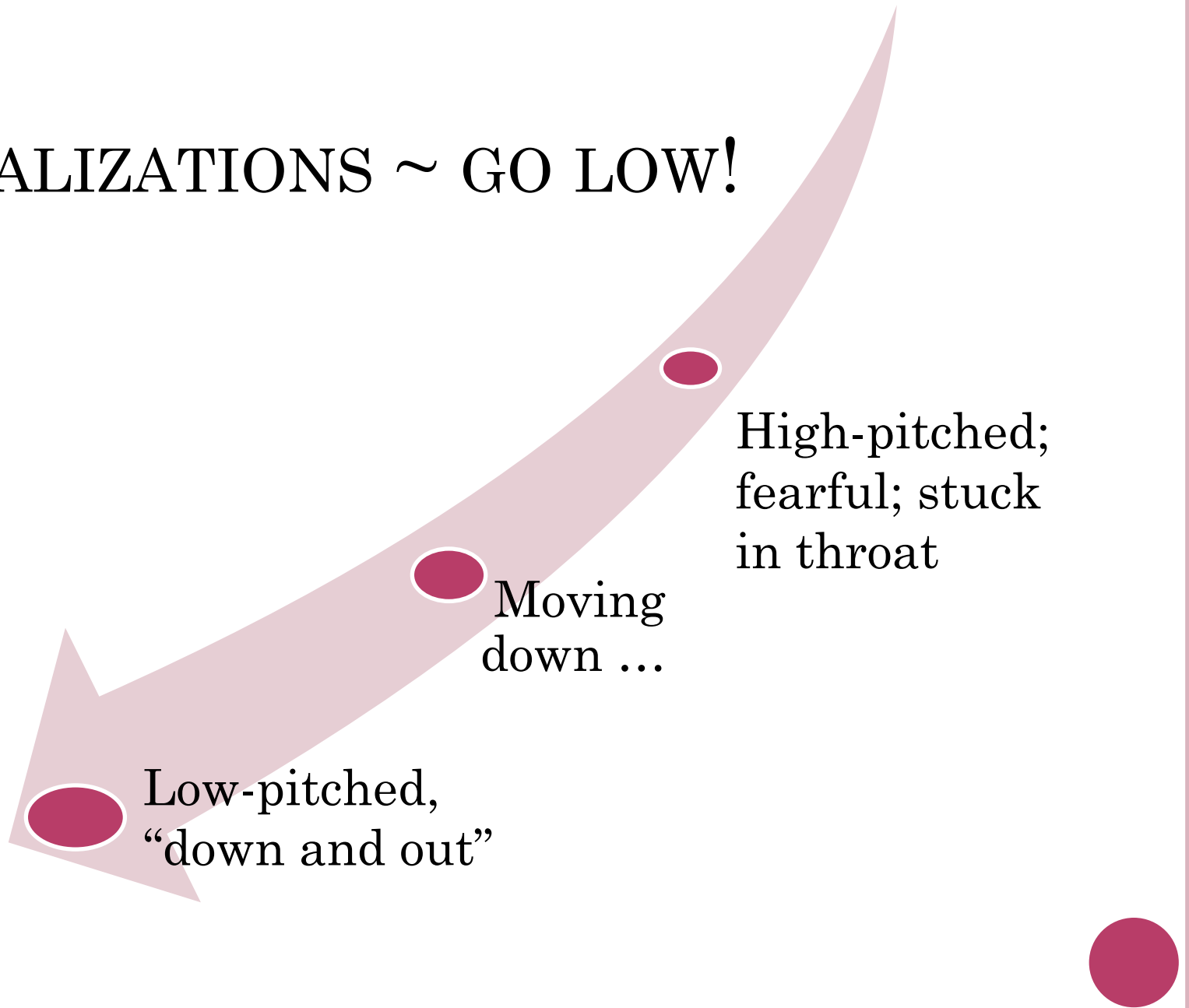


VOCALIZATIONS

- Release the intensity
- Helps to make noise
- Moaning
- Intone a vibration
- “Roar like a mama lion.”



VOCALIZATIONS ~ GO LOW!



SIGNS OF TRANSITION?



BENEFITS OF BIRTH BALLS

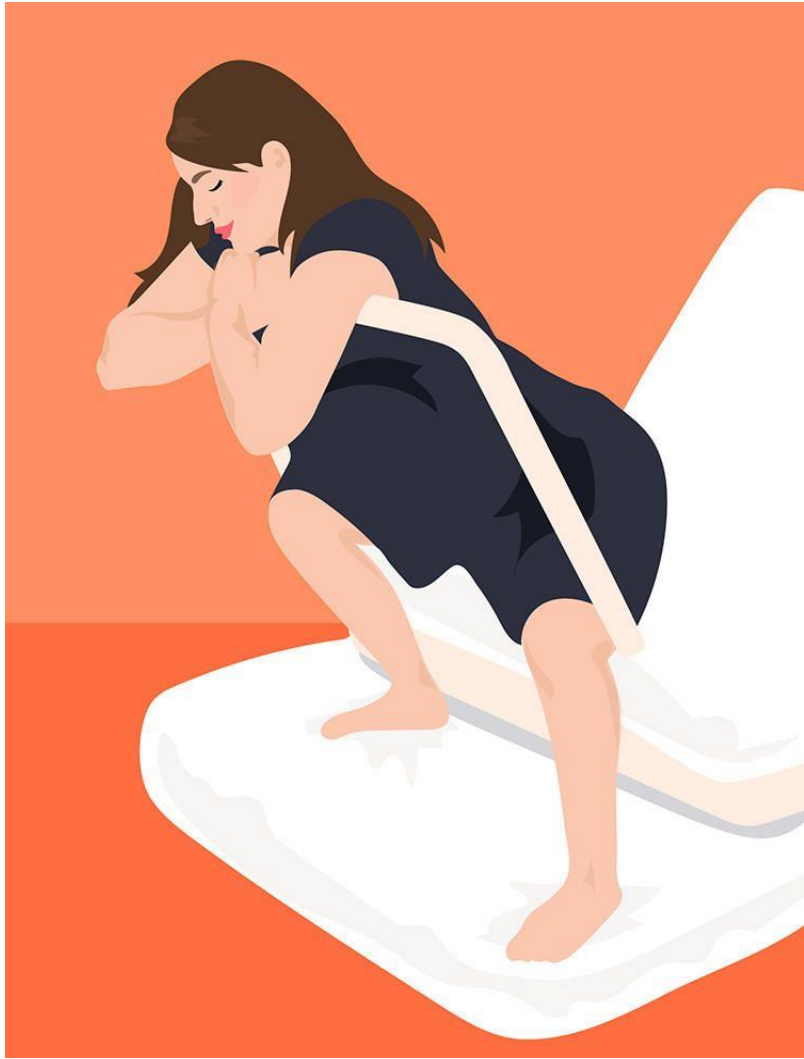
- Works in many different positions
- Encourages rhythmic movement, gentle swaying
- Promotes relaxation
- Conserves energy

















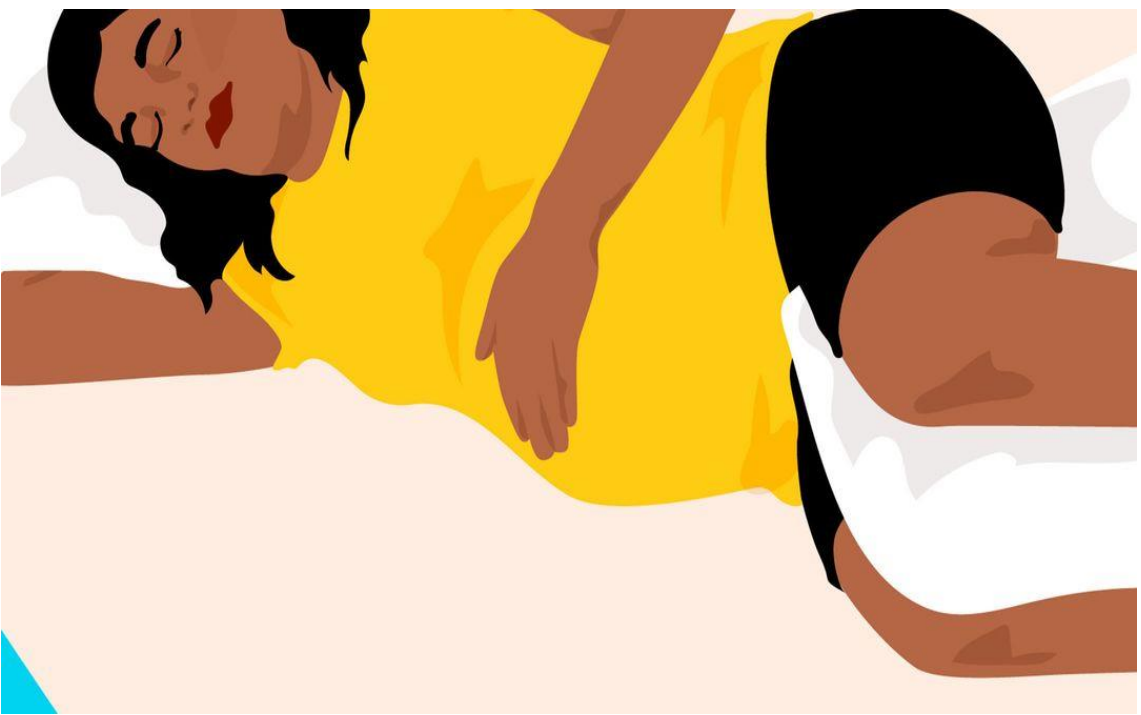


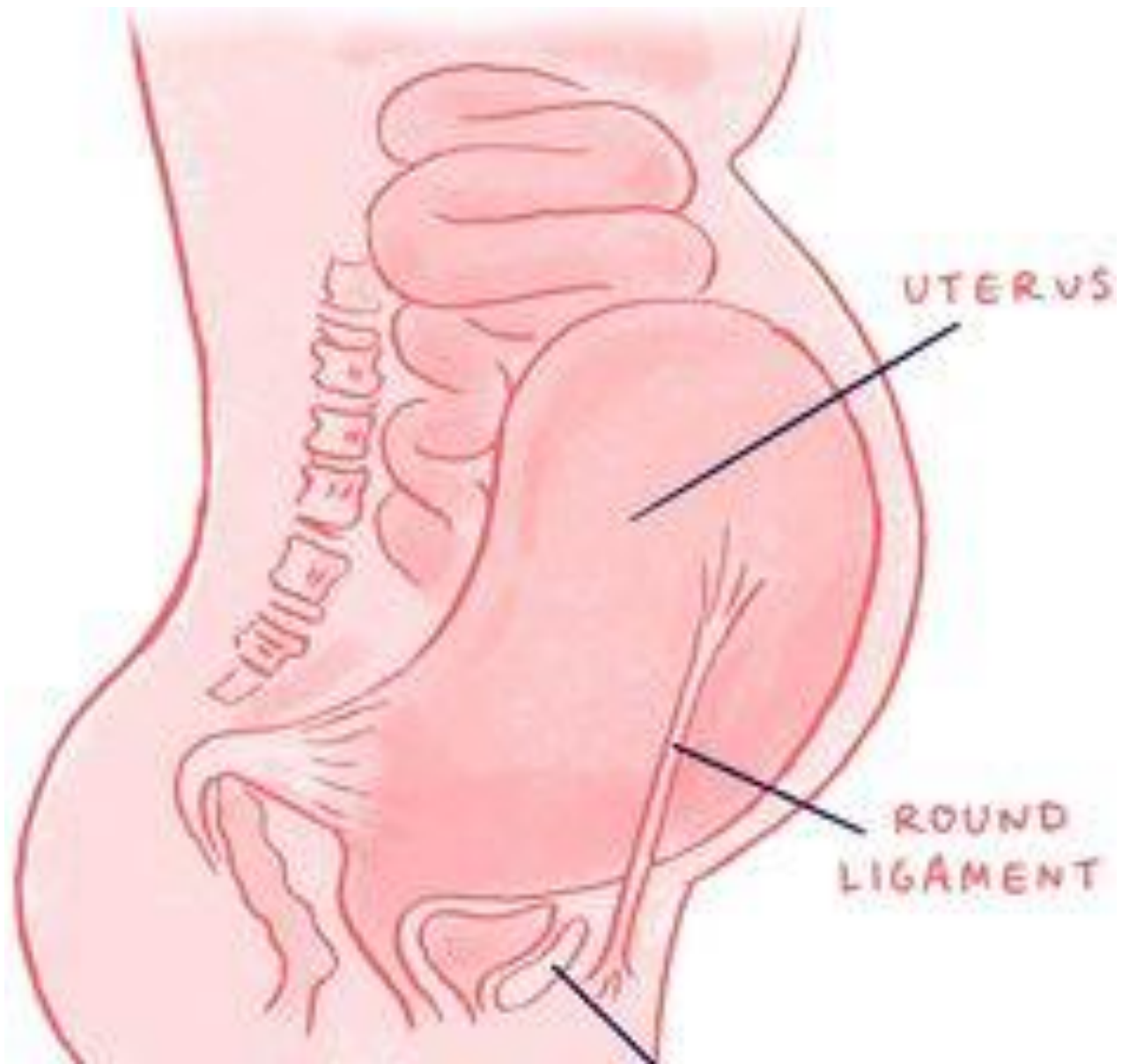












BENEFITS OF THE PEANUT BALL

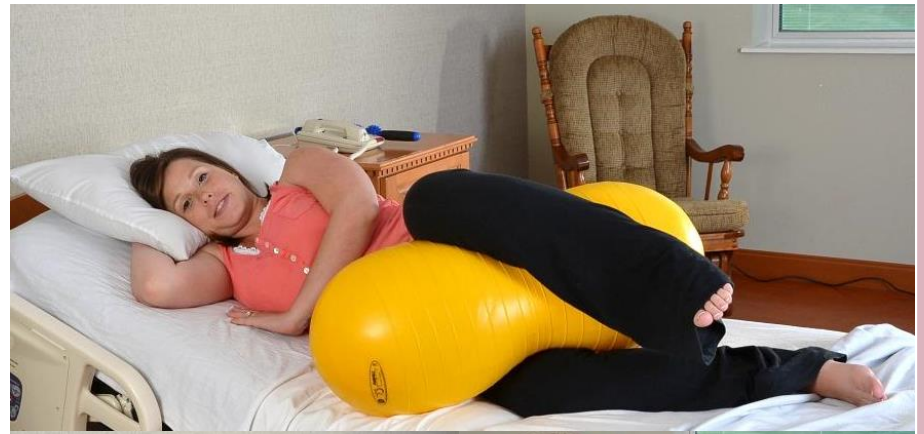
- Widens pelvic outlet
- Encourages rotation and descent of baby
- Assists rotation of posterior baby
- Can be used with an epidural



Too small = not as effective

Too large = places too much torque causing guarding rather than relaxation

Just right!



TUCK POSITION



SUPPORTED SQUAT



FORWARD LEANING



COVERING THE PEANUT BALL



PEANUT BALL STATISTICS

- Decreases 1st stage by 102–108 mins
- Decreases 2nd stage by 27–29 mins
- Decreases cesarean rates by 12% !!!





Lifespan

Doulas

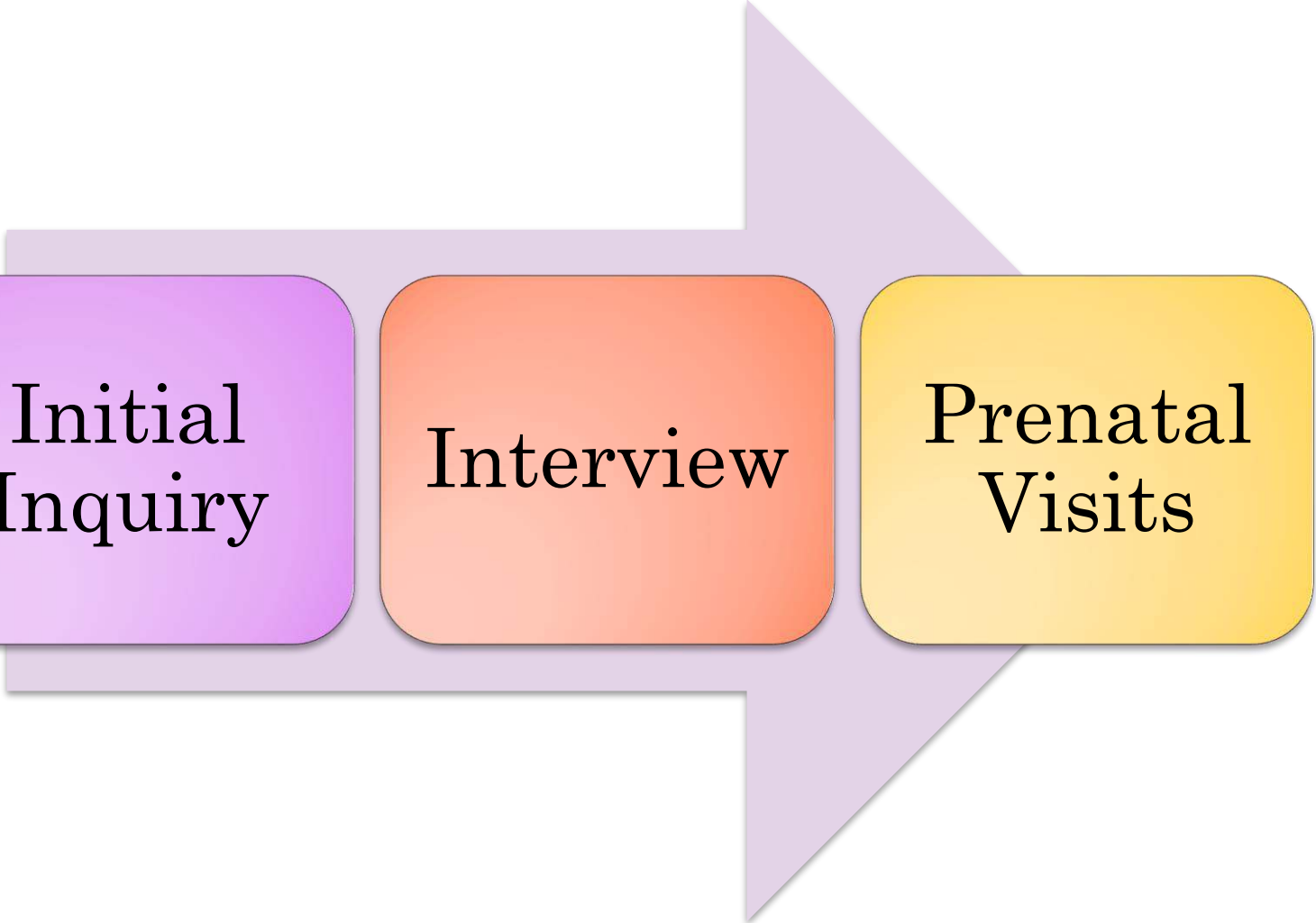
DAY 3

MDHHS Doula Initiative

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With Patty Brennan

THE DOULA'S ROLE PRENATALLY: BUILDING TRUST



Initial
Inquiry

Interview

Prenatal
Visits



INITIAL INQUIRY

The Process

- Call, email, website form?
- Keep it on the short side
- Explore availability (due date, location)
- Determine special needs, concerns
- Lead them to the next step

Tips

- Establish rapport
- Give your full attention
- Take notes
- Follow her lead (What does she need to get out of this call?)



INTERVIEW/CONSULTATION

- Explore whether you are a good fit (mutual)
- Zoom?
- 1 hour should be sufficient
- Include partner
- Contract available to review together
- Special needs or concerns?
- Expectations of the doula?
- Questions?



PRENATAL VISITS

- 1–3 visits lasting ~ 1hour
- Contract signed; deposit collected
- Increase confidence in themselves and in you
- Use a simple intake form or tool
- Develop a birth plan
- Address concerns, questions, educational needs



- Make referrals
- Introduce touch



PREVENTING PERINEAL TEARS

- Slowing down
 - Cease voluntary pushing efforts
 - Let uterus do the work
- Breathing vs. pushing
- Panting (not engaging the diaphragm)



**Breath holding =
Pushing**



HOW DOULAS CAN HELP

Prenatally

- Encourage client to educate herself
- Encourage communication with care provider
- Integrate into birth plan

At the Birth

- Remind her at start of 2nd stage about burning sensation
- Help with panting through the burn
- **“Breathe with me”**
- Eye contact if needed
- Enable hot compresses if desired



TOUCH TECHNIQUES

- Hand-holding partner exercise
- Gaining trust and getting in sync



EARLY LABOR

Grounding and calming techniques

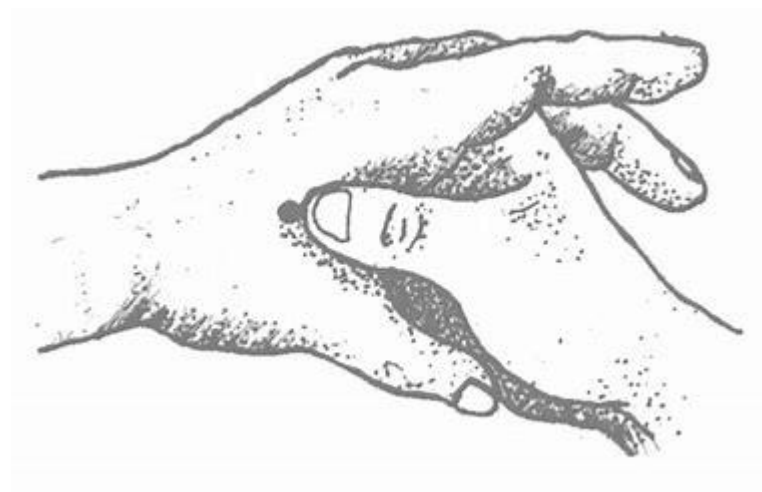




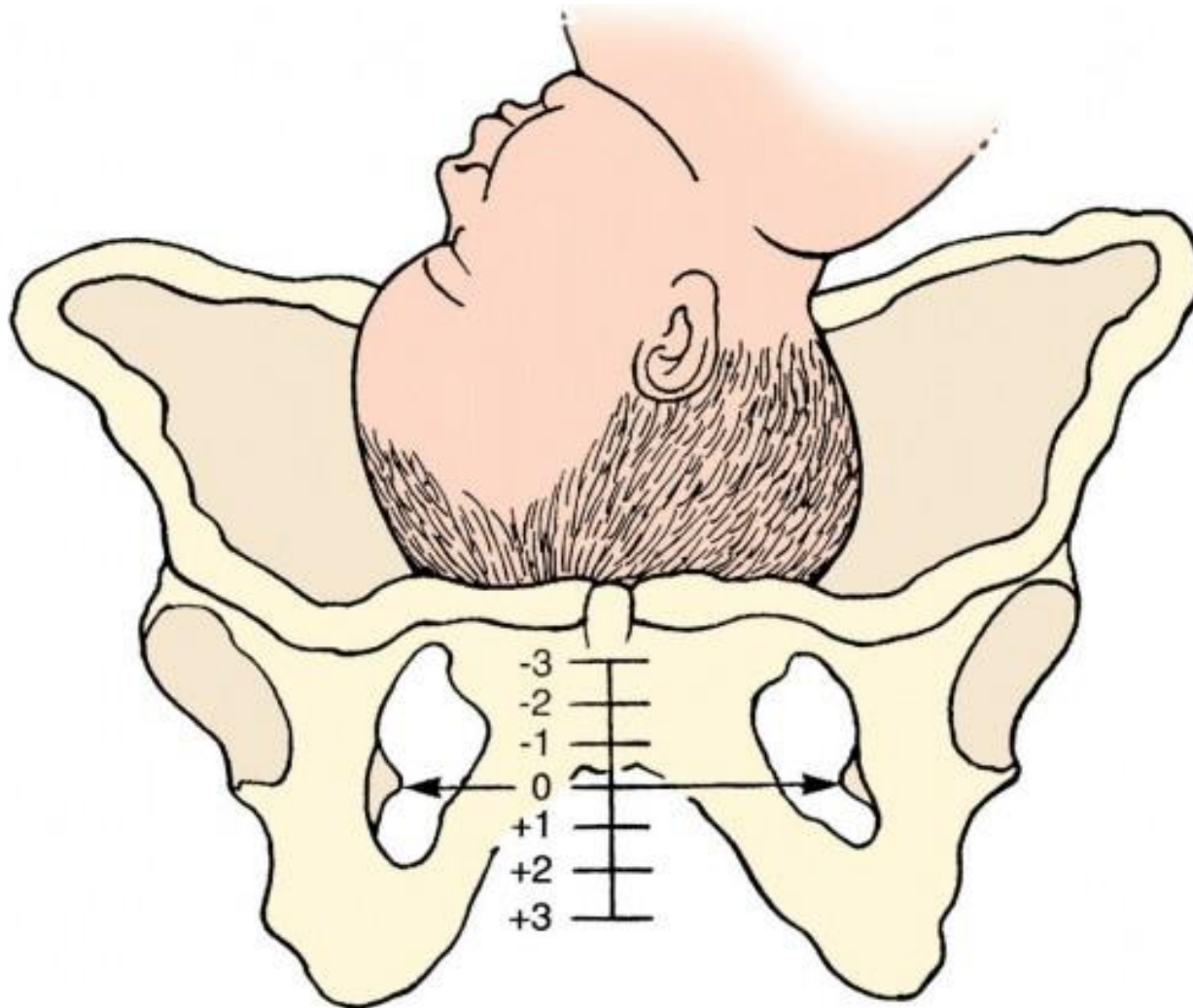




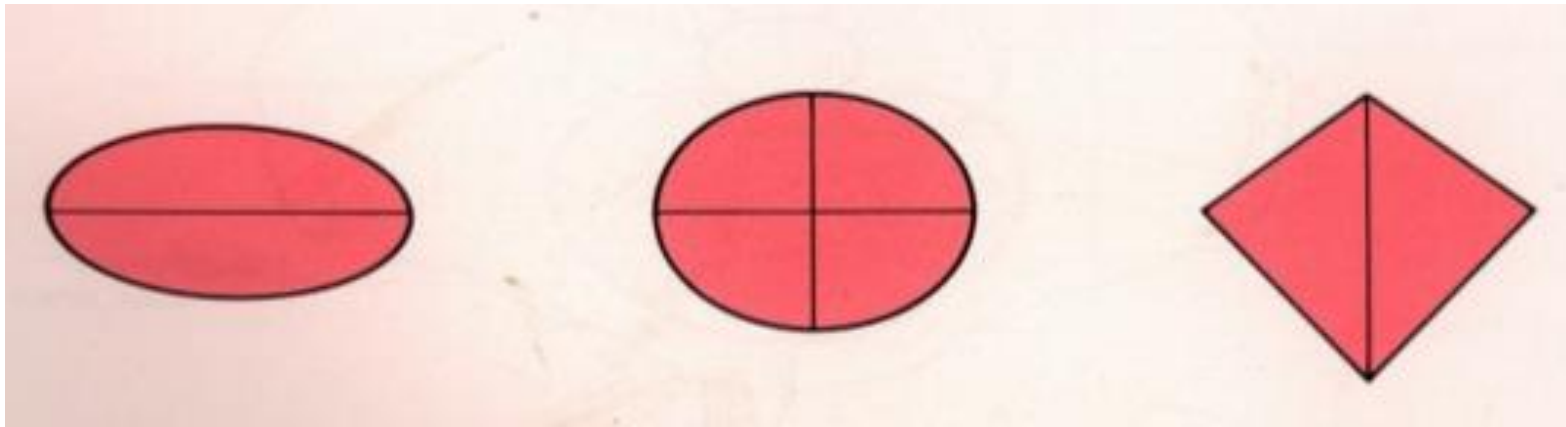
ACUPRESSURE POINTS TO STIMULATE CONTRACTIONS



WHERE IS THE BABY?



THE PELVIS



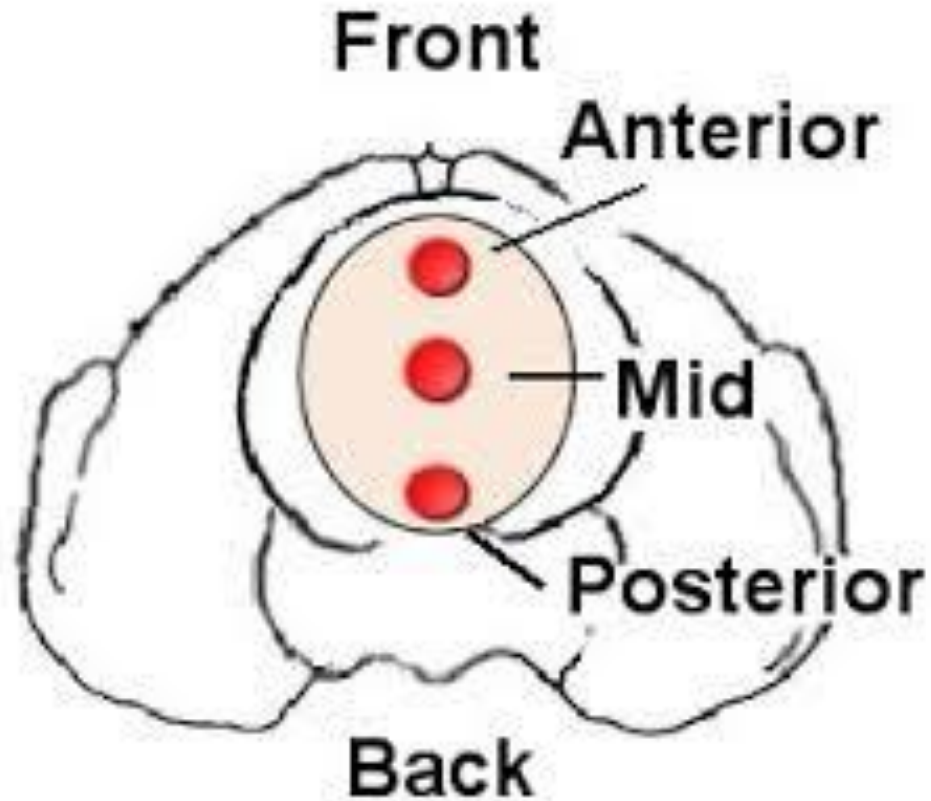
Inlet

Mid-pelvis

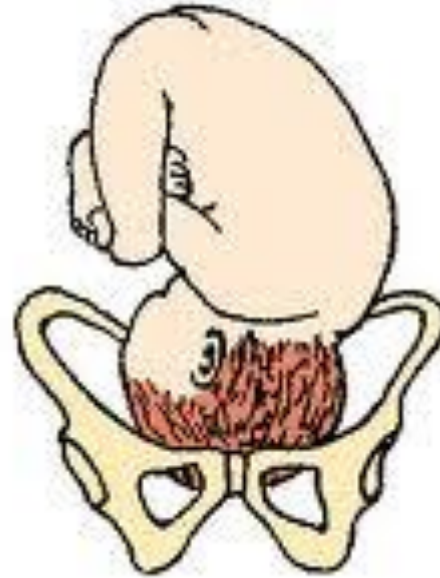
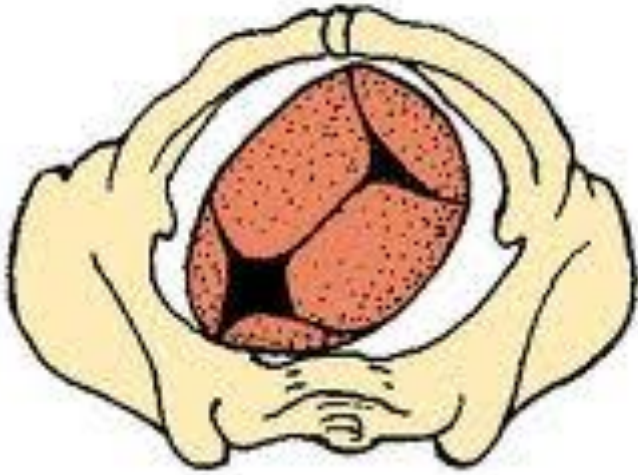
Outlet



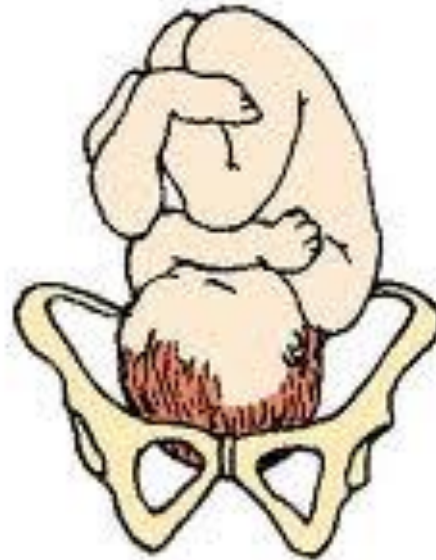
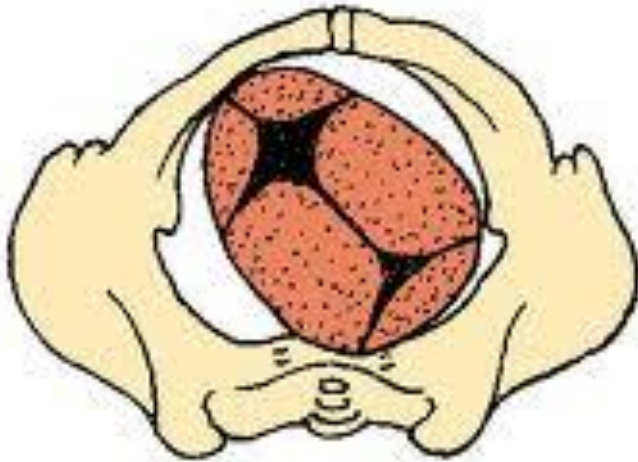
TERMINOLOGY ~ POSITION OF THE BABY



LOA



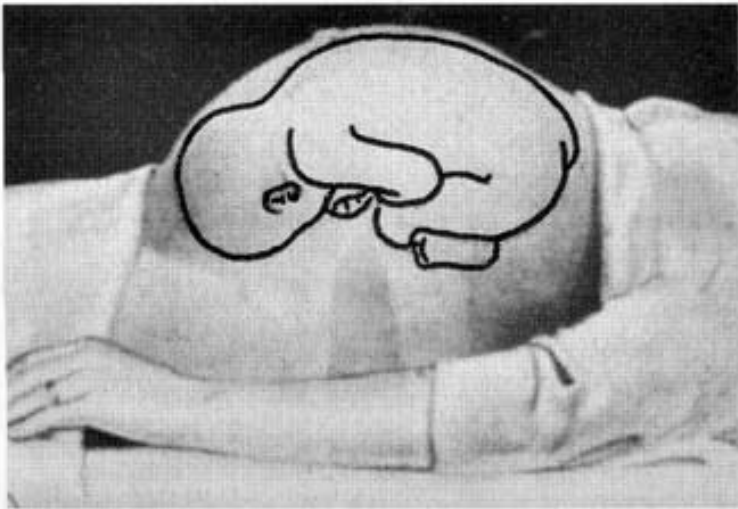
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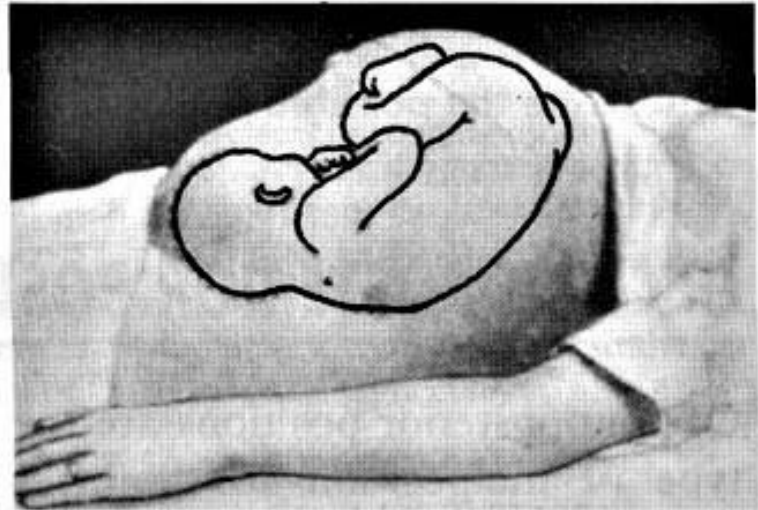


COMPARE ...

Anterior



Posterior



FEATURES OF A POSTERIOR PRESENTATION?

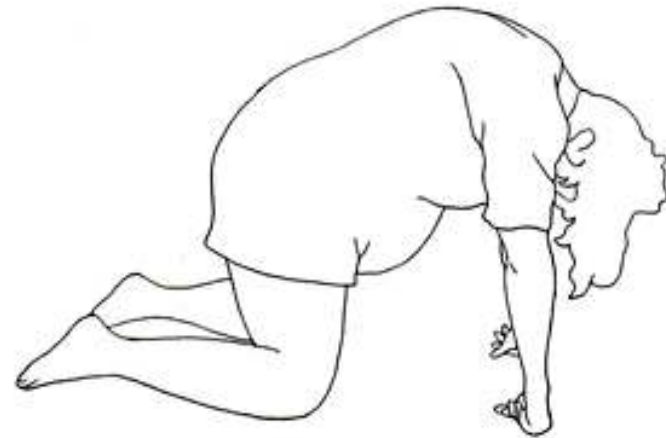
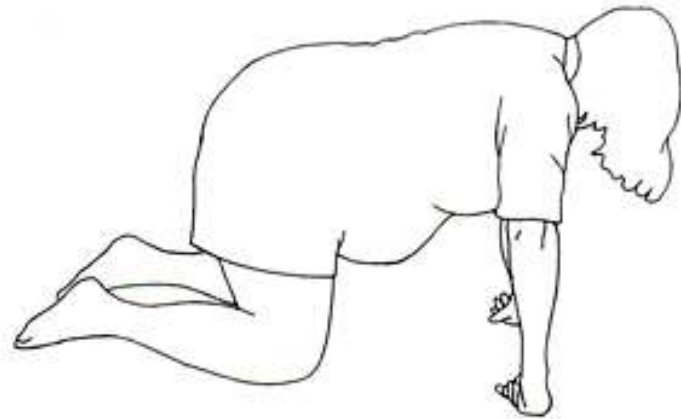
- Back PAIN! (intensity)
- Back pain doesn't go away between cxs
- May be long prodromal phase
- Stalled progress ~ 6cm
- Anterior lip of cervix



HELP A POSTERIOR BABY ROTATE

Before Labor

- Pelvic rocks
- Chiropractic “Webster technique”
- Diaphragmatic release
- Visualization
- Homeopathy
- TCM (moxibustion)



KNEE-CHEST POSITION

- Best results before 4cm dilation
- Long prodromal labor? Assume baby is mal-positioned and try knee-chest



KNEE-CHEST

- Hold till something changes (may take a couple of hours)
 - Cxs may increase
 - Cxs may stop
 - Take a nap
 - Burst of energy/
manic
 - Emotional
catharsis

Bean bag chair
might help her stay
in position



CREATE ASYMMETRY IN PELVIS



- Hands and knees, one-leg down, one up
- Stair climbing
- Lunge position



POSTERIOR WITH EPIDURAL & PEANUT BALL

- OP turn every 30–45 min
- OA can let mom rest for 1–2 hours



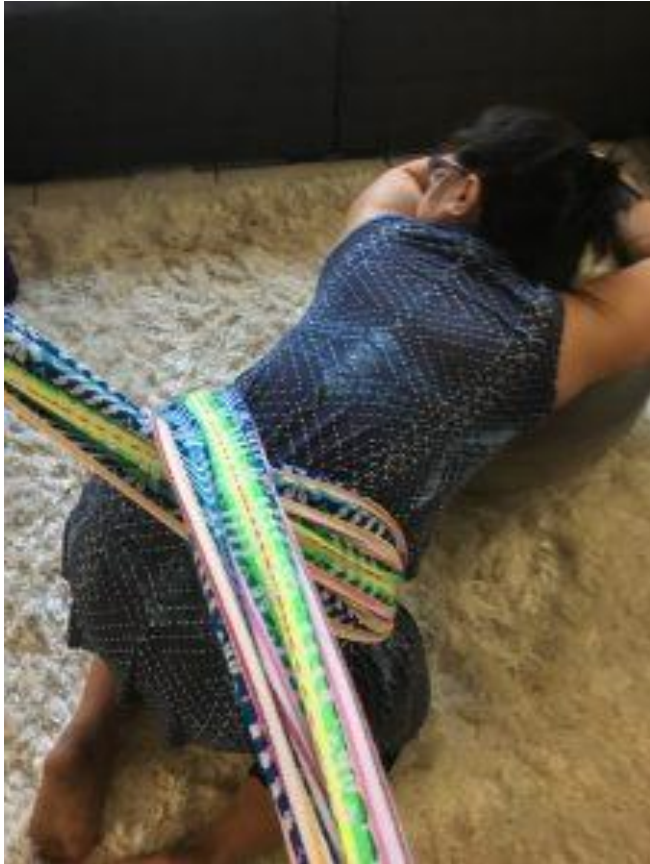
PAIN RELIEF FOR POSTERIOR

Counter-pressure on sacrum

- Hand (use gravity to deliver pressure)
- Tennis balls in tube sock
- Pool noodle



DOUBLE-HIP SQUEEZE



THE DOULA'S TOOLS

