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Women assisted by doulas: exploratory study

ABSTRACT | Objective: To evaluate the perception of women assisted by doulas in relation to their role. Method: Exploratory study with a quantitative approach. The data were collected by the snowball technique, through a digital questionnaire. Descriptive statistical analysis was performed. Results: The sample comprised 322 participants, with an average age of 31.8 SD \pm 5.4 years, mostly white, married, with higher education and only one pregnancy. 95% of the participants recognized the importance of the doula's work and had a positive perception of the follow-up, in addition to claiming (93%) that their work contributed a lot during childbirth, especially in the physical and emotional areas (48%). Regarding the interaction with the nursing team, 51% stated that there was. Conclusion: The doula is a professional who contributes to the humanization of childbirth care, her support was considered positive and beneficial, however, her inclusion in the childbirth care team is a challenge to be faced.

Keywords: Humanizing delivery. Doulas. Labor, Obstetric. Women's Health. Maternal-Child Nursing.

RESUMEN | Objetivo: Evaluar la percepción de las mujeres asistidas por doulas en relación a su rol. Método: Estudio exploratorio con enfoque cuantitativo. Los datos fueron recolectados mediante la técnica de bola de nieve, a través de un cuestionario digital. Se realizó análisis estadístico descriptivo. Resultados: La muestra estuvo conformada por 322 participantes, con una edad promedio de 31,8 DE \pm 5,4 años, en su mayoría blancos, casados, con estudios superiores y un solo embarazo. El 95% de las participantes reconoció la importancia del trabajo de la doula y tuvo una percepción positiva del seguimiento, además de afirmar (93%) que su trabajo aportó mucho durante el parto, especialmente en el área física y emocional (48%). En cuanto a la interacción con el equipo de enfermería, el 51% afirmó que sí. Conclusión: La doula es una profesional que contribuye a la humanización de la atención al parto, su apoyo se consideró positivo y beneficioso, sin embargo, su inclusión en el equipo de atención al parto es un desafío a enfrentar.

Palabras claves: Parto humanizado. Doulas. Trabajo de parto. Salud de la mujer. Enfermería Maternoinfantil.

RESUMO | Objetivo: Avaliar a percepção das mulheres assistidas por doulas em relação ao papel das mesmas. Método: Estudo exploratório com abordagem quantitativa. Os dados foram coletados pela técnica snowball, através de um questionário digital. Realizada análise estatística descritiva. Resultados: Fizeram parte da amostra 322 participantes, com idade média de 31,8 DP \pm 5,4 anos, maioria branca, casada, com nível superior e apenas uma gestação. 95% das participantes reconheceram a importância do trabalho da doula e tiveram uma percepção positiva do acompanhamento, além de alegarem (93%) que o trabalho destas contribuiu muito durante o parto, principalmente nas área física e emocional (48%). Em relação a interação com a equipe de enfermagem, 51% afirmaram que houve. Conclusão: A doula é uma profissional que contribui para a humanização da assistência ao parto, seu apoio foi considerado positivo e benéfico, porém, sua inserção na equipe de assistência ao parto constitui-se um desafio a ser enfrentado.

Palavras-chaves: Parto humanizado; Doulas; Trabalho de parto; Saúde da mulher; Enfermagem materno-infantil.

María Clara de Sales Rondon

Undergraduate in Nursing. Adventist University Center of São Paulo.
ORCID: 0000-0002-7506-7328

Glebia Tenório Sampaio

Undergraduate in Nursing. Adventist University Center of São Paulo.
ORCID: 0000-0003-2490-8809

Elisabete Venturini Talizin

Nurse. Professor of the Nursing Course at Centro Universitário Adventista de São Paulo.
ORCID: 0000-0001-5839-0118

INTRODUCTION

Childbirth care over time has undergone many changes in relation to care/care. These changes resulted especially in the replacement of the birth environment, where this process was previously carried out at home (home), assisted by midwives and people from the woman's own affective relationship, and started to be carried out in the hospital environment, far from her family members.⁽¹⁾

To contribute to a more humanized experience in this unique period in a woman's life, several ordinances and manuals were published in Brazil with guidelines aimed at assisting in labor and delivery.⁽²⁻³⁾

Since then, some measures have been recommended to encourage natural childbirth, such as: the presence of family members during labor and delivery; adaptation of the hospital environment (more similar to the family environment); no immediate separation of the newborn from its mother; opportunity to be accompanied by women who guide them or who are just by their side, in addition to supporting the reduction, when possible, of drug, technical and surgical interventions, including the doula.⁽⁴⁾

Doula is a Greek word defined as "a trained professional who provides ongoing physical, emotional and informational support to a mother before, during, and soon after birth to help her achieve the healthiest and most satisfying experience possible."⁽⁵⁾

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In Brazil, childbirth care is provided by health professionals who have a degree in the area, such as doctors, nurses and midwives, however, over the years, doulas have shown prominence and visibility in the obstetric sphere ⁽⁶⁾ and present themselves as the new member who can make up the health team in delivery and birth care. ⁽³⁾ There are voluntary doulas, especially within the scope of the Unified Health System, and professional doulas, hired by pregnant women.

The role of the doula revealed positive results, mainly related to the improvement in the perception of childbirth as a natural event and providing greater security to the mother and her family in relation to the pregnancy process. ⁽⁷⁾

The "Doulagem" (support offered by the doula) throughout the pregnancy and puerperal cycle has also appeared as an ally in the reduction of obstetric violence and in the reduction of fears and gestational stress, which contributes to the good evolution of pregnancy and labor, positively impacting the lives of pregnant and parturient women. ⁽⁸⁾

Given the peculiarity of this theme, the aim of this study was to evaluate women assisted by doulas, seeking to know their perception regarding their performance and interaction with nursing professionals.

METHOD

This is an exploratory study with a quantitative approach, carried out with women living in Brazil who were monitored by a doula during labor and delivery. This monitoring could have been contractual or voluntary, taking place from 2015 to 2019, with no restrictions on age, type of delivery and number of pregnancies.

For data collection, the "Snowball" technique was used, where the initial participants indicated new participants who, in turn, indicated others, and so on.

The collection took place from November 2019 to February 2020, after approval by the Ethics and Research Com-

mittee of the Adventist University Center of São Paulo, as per opinion 3.683.939.

The research was conducted through a digital questionnaire developed by the researchers that contained closed questions. Participants had access to the questionnaire and the Informed Consent Form through a link sent via email or WhatsApp.

Regarding the capture of the first participant, the questionnaire link was sent via whatsapp to a professional doula, known to one of the researchers, who attends to a large demand of parturients in São Paulo, who was responsible for sending the link to her clients and so began the collection process.

The information obtained in this study was stored in the Microsoft Excel program. A descriptive analysis of the results was performed and the quantitative variables were expressed in numbers and percentages.

RESULTS

The sample consisted of 322 women, most aged between 24 and 38 years, representing 81%, mean of 31,8 SD ± 5,4 years.

As for color/race, the majority (71%) considered themselves white, 19% brown, 7% black and 3% yellow. Regarding marital status, most were married (65%), followed by those with a stable relationship (26%), single (7%) and divorced (2%). As for education, 90% reported having incomplete or complete higher education, 9% high school and only 1% elementary school.

Regarding the number of pregnancies, 57% of the participants had one, 27% two and 16% three or more. The majority (83%) had only one pregnancy

assisted by a doula. Regarding the birth environment, 88% of the participants mentioned the hospital environment and for 83% the birth occurred in a normal or natural way. The professionals who conducted the birth were mostly (52%) doctors and nurses, 29% only doctors, 16% only nurses and 3% others.

The birth companion was present for the majority (97%), with 79% being the husband, partner, ex-husband or boyfriend, 15% in addition to the husband, there were other family members and 6% family members and friends.

When asked about their knowledge about the role of the doula, the majority (96%) said they had knowledge about their work and 95% said they believed in the importance of this work.

As for the perception of the interaction between the doula's work and the nursing team, 51% of the participants said there was interaction.

For 93% of the participants, the doula's work contributed a lot during their labor and delivery, being perceived mainly in the physical and emotional area (48%).

Regarding the perception of being assisted by the doula, 95% reported a positive perception. The other results are shown in Table 1.

DISCUSSION

Regarding the participants' sociodemographic data, white race, marital status, high education level and only one pregnancy stand out. Data that corroborate the last Brazilian Census (2010): people of the white race chose to unite through civil or religious marriage more than other races; the greatest concentration of

Table 1 – Perception of women assisted by doulas. São Paulo/SP, Brazil, 2020.

Variables (n=322)	n	%
Knowledge about the doula's work		
High	310	96,0
Low	12	4,0
Unknown	0	0

Belief in the importance of the doula's work		
Yes, a lot	307	95,0
Yes, casually	15	5,0
Yes, little	0	0
Doesn't believe it's important	0	0
Perception about the interaction of the work of the doula and the nursing team		
A lot	163	51,0
Casually	47	14,0
A little	76	24,0
None	36	11,0
Contributions of the doula's work		
A lot	300	93,0
Casually	5	2,0
Pouco	8	2,0
Doesn't contribute	9	3,0
Areas in which you perceive the role of the doula		
Physical and Emotional Area	154	48,0
Physical, emotional and spiritual area	87	27,0
Emotional Area	58	18,0
Physical Area	17	5,0
Spiritual Area	3	1,0
Other areas	3	1,0
Perception when assisted by a doula		
Positive	306	95,0
Indifferent	8	2,5
Negative	8	2,5
Total	322	100,00

fertility among white women occurs between the ages of 20 and 34, the fertility rate for women with higher education is 1,14 children.⁽⁹⁾

Therefore, it was identified that the participants preferred to give birth in the hospital environment. In recent years, due to the expansion of movements for the humanization of labor and birth, hospital institutions have received legal, financial and technical support aimed at implementing good practices in maternal and child care.⁽¹⁰⁾

Another outstanding result was the type of delivery, with the vast majority of participants reporting vaginal delivery. This result was higher compared to the data from the

Brazilian Census,⁽⁹⁾ 45,3% of women whose last birth took place between 2012 and 2013 had vaginal delivery.⁽¹¹⁾

In a study carried out in the city of João Pessoa/PB, it was evidenced that doula support for women is associated with a decrease in the chances of cesarean, with the absence of doulas being related to almost double the number of cesarean sections.⁽¹⁰⁾

In the present study, most participants reported the presence of a companion (husband, partner or boyfriend) during childbirth, which is associated with several beneficial practices, with the reduction of some interventions,⁽¹²⁾ in addition to offering support to pregnant women, they

are building themselves as parents and breaking stipulated paradigms.⁽¹³⁾

The vast majority of participants knew a lot about the doula's work, possibly this finding is related to their level of education.

Participants had a positive perception of the assistance provided by the doula. A study with postpartum women and doulas, carried out in England, corroborates this finding as it describes the positive impacts arising from the doula on maternal well-being, with reduced anxiety, unhappiness and stress, and increased self-esteem and self-efficacy. Mothers felt more knowledgeable and skilled, received support to make effective use of maternity services, and were empowered to build social bonds in their community.⁽¹⁴⁾

The doulas provided physical and emotional support to the participants in this study. This claim is compatible with the data from the study carried out in a public hospital in João Pessoa/PB, in which it was found that doula was the professional in labor and delivery that best met the needs of women, as her commitment was focused on emotional and physical support, without the direct concern to identify pathologies and/or dystocia.⁽¹⁵⁾

Regarding the perception of the interaction between the doula and the nursing team, half of the participants reported this interaction. According to a study carried out in Campinas/São Paulo, some professionals had difficulty accepting the presence of one more person to accompany, assist and support during the birth process. These difficulties evidenced in the field of action of the doula are related to the lack of knowledge, not only of professionals, but also of parturients and family members, about the doula's work, resulting in the devaluation of the task performed by them.⁽¹⁶⁾

The insertion of doulas in childbirth care in maternity hospitals demands that other professionals are open and receptive to changes in the work processes that result from this. When they are welcoming with the doulas, the chances of developing a positive working relationship

and maintaining the mother's trust are increased.⁽¹⁷⁾

The contribution of this study surrounds the positive perception of the doula's performance, as it is a professional who contributes to the occurrence of a better outcome during labor and delivery by acting in the emotional and physical preparation of the woman and her support network.

Regarding the limitations of this study, it is highlighted the fact that there is no evidence regarding the type of care provided by the doula (voluntary or contractual) and in relation to the city/state where the women attended are located, thus limiting the concrete indication of the financial level that covers the beneficiary population and the region where the monitoring took place. Therefore, fur-

ther studies are needed that address the perception of other populations, such as women with lower educational levels, voluntary and contractual doulas, health professionals.

CONCLUSION

In the present study, it was possible to evaluate 322 women assisted by doulas during childbirth, most of them white, with an average age of 31 years, married, with a high level of education, and only one pregnancy. Most births were normal, in the hospital environment, accompanied by their spouses and assisted by doctors and nurses.

The participants' perception in relation to the doula's care was positive and

beneficial, acting especially in the emotional and physical area. It is considered that the presence of the doula contributed to a humanized care and that it could be more accessible to all women, being part of the care team in the pregnancy-puerperal cycle, since her presence implies the rescue of the woman's protagonism.

The interaction of the doula with the nursing team was perceived by half of the participants. It is believed that such a bond is extremely important, given that both professionals are on the front line when it comes to childbirth care. Working as a team, in which each member knows and respects the role of the others, is an urgent challenge to be achieved, aiming at providing integral assistance to the mother and child binomial. 🐦

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