Characteristics and Birth Outcomes of PDX Doulas in the Context of All Oregon Birthing Persons

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What is a doula?

- A birth professional that provides physical, emotional, and informational support to birthing persons and their families during pregnancy, intrapartum and postpartum
- In Oregon – can be a Traditional Health Worker (THW)
Public Health Significance

COMMITTEE OPINION SUMMARY

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Approaches to Limit Intervention During Labor and Birth

ABSTRACT: Obstetrician–gynecologists, in collaboration with midwives, nurses, patients, and those who support them in labor, can help women meet their goals for labor and birth by using techniques that are associated with minimal interventions and high rates of patient satisfaction. Many common obstetric practices are of limited or uncertain benefit for low-risk women in spontaneous labor. For women who are in latent labor and are not admitted, a process of shared decision making is recommended. Admission during the latent phase of labor may be necessary for a variety of reasons. A pregnant woman with term premature rupture of membranes (also known as prelabor rupture of membranes) should be assessed, and the woman and her obstetrician–gynecologist or other obstetric care provider should make a plan for expectant management versus admission and induction. Data suggest that in women with normally progressing labor and no evidence of fetal compromise, routine amni-
Public Health Significance

- Doula support widespread
  - Small research base
  - Potential to meet the Triple Aim and reduce disparities
  - Slow integration into MCS
The gold standard of doula professionalism in a spirit of collaboration with health care providers.
- Collaborative Practice Training
- Volunteer **intrapartum only support**
  - Shifts
  - Weekends
  - Free to patients who may not normally access a doula
- Referrals for community-based support
Questions

▪ How do characteristics and outcomes from volunteer PDX Doulas births compare to Oregon Vital Statistics (VS), 2012 to 2016?
▪ Are our doulas helpful in providing physical and emotional support to **birthing persons**?
▪ Are our doulas helpful in providing support to **birthing partners**?
▪ Overall, are our doulas helpful to families and OHSU professionals?
Analytic Approach

- **Two-part** descriptive analysis of the PDX Doulas volunteer program
  1. Maternal, labor, and delivery characteristics
  2. Summary of evaluations by pertinent stakeholders
- Excluded observations where doulas were not present at delivery (n=208 → n=157)
Descriptive Results

Maternal Age

- 24 or less
- 25 to 34
- 35 or more

Maternal Race/Ethnicity

- White
- African American
- American Indian
- Asian/Hawaiian/Pacific Islander
- Other/Multiple Races
- Hispanic

Proportion

PDX Doulas vs Oregon VS
Descriptive Results

Characteristics of Labor, Delivery & Maternal Conditions

- Gestational Diabetes
- Gestational Hypertension/Eclampsia
- Induction/Augmentation
- Epidural/Spinal Anesthesia
- Cesarean
- VBAC

Prevalence Ratios (95% Confidence Interval)
PDX Doulas vs Oregon VS (reference)
Evaluations

- Were the techniques suggested by the doula helpful
  - to the *birthing person* in handling the *physical aspects of labor*?
  - to the *birthing person* in handling the *emotional aspects of labor*?
  - for the *partner* and/or other family members and friends present for the labor?

- Overall, how would you evaluate the *usefulness* of having a doula present?

- Scale
  - 5 – Was a big help
  - 3 – Neither helped nor hurt
  - 1 – More harm than good
### All Evaluations Combined (n=302)

Score of 5 - was a big help

<table>
<thead>
<tr>
<th></th>
<th>% (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>88.9 (268)</td>
</tr>
<tr>
<td>Emotional</td>
<td>86.6 (261)</td>
</tr>
<tr>
<td>Partner</td>
<td>86.8 (255)</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td><strong>93.1 (281)</strong></td>
</tr>
</tbody>
</table>
## Evaluation Results

<table>
<thead>
<tr>
<th>Birthing Person Evaluations (n=65)</th>
<th>Partner Evaluations (n=75)</th>
<th>Family/Friend Evaluations (n=10)</th>
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<tbody>
<tr>
<td><img src="90.8" alt="Physical" title="59" /></td>
<td><img src="97.3" alt="Physical" title="73" /></td>
<td><img src="100.0" alt="Physical" title="10" /></td>
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<tr>
<td><img src="90.8" alt="Emotional" title="59" /></td>
<td><img src="86.7" alt="Emotional" title="65" /></td>
<td><img src="100.0" alt="Emotional" title="10" /></td>
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<tr>
<td><img src="83.9" alt="Partner" title="52" /></td>
<td><img src="94.7" alt="Partner" title="71" /></td>
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</tr>
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<td><strong>Overall</strong> <img src="92.2" alt="Overall" title="59" /></td>
<td><strong>Overall</strong> <img src="100.0" alt="Overall" title="75" /></td>
<td><strong>Overall</strong> <img src="90.0" alt="Overall" title="9" /></td>
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</tbody>
</table>

Score of 5 - was a big help
### Evaluation Results

<table>
<thead>
<tr>
<th>Nurse Evaluations (n=125)</th>
<th>Score of 5 - was a big help</th>
<th>% (n)</th>
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</thead>
<tbody>
<tr>
<td>Physical</td>
<td>82.3 (102)</td>
<td></td>
</tr>
<tr>
<td>Emotional</td>
<td>82.3 (102)</td>
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<tr>
<td>Partner</td>
<td>82.6 (100)</td>
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<tr>
<td>Overall</td>
<td>89.6 (112)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Midwife Evaluations (n=13)</th>
<th>Score of 5 - was a big help</th>
<th>% (n)</th>
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</thead>
<tbody>
<tr>
<td>Physical</td>
<td>92.3 (12)</td>
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</tr>
<tr>
<td>Emotional</td>
<td>84.6 (11)</td>
<td></td>
</tr>
<tr>
<td>Partner</td>
<td>84.6 (11)</td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td>92.3 (12)</td>
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</tbody>
</table>

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<thead>
<tr>
<th>Doctor Evaluations (n=15)</th>
<th>Score of 5 - was a big help</th>
<th>% (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>80.0 (12)</td>
<td></td>
</tr>
<tr>
<td>Emotional</td>
<td>93.3 (14)</td>
<td></td>
</tr>
<tr>
<td>Partner</td>
<td>85.7 (12)</td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td>93.3 (14)</td>
<td></td>
</tr>
</tbody>
</table>
Overall, PDX Doulas were helpful to families and OHSU professionals.

PDX Doulas were useful in providing support to birthing individuals who were undergoing an induction or augmentation of labor and who were interested in preserving physiologic birth and reducing interventions.
Approaches to Limit Intervention During Labor and Birth

**ABSTRACT:** Obstetrician–gynecologists, in collaboration with midwives, nurses, patients, and those who support them in labor, can help women meet their goals for labor and birth by using techniques that are associated with minimal interventions and high rates of patient satisfaction. Many common obstetric practices are of limited or uncertain benefit for low-risk women in spontaneous labor. For women who are in latent labor and are not admitted, a process of shared decision making is recommended. Admission during the latent phase of labor may be necessary for a variety of reasons. A pregnant woman with term premature rupture of membranes (also known as prelabor rupture of membranes) should be assessed, and the woman and her obstetrician–gynecologist or other obstetric care provider should make a plan for expectant management versus admission and induction. Data suggest that in women with normally progressing labor and no evidence of fetal compromise, routine amni-
PDX Doulas collaborate with birth professionals, patients and their families.

PDX Doulas are associated with minimal interventions and higher patient satisfaction.
Discussion

- **Strengths**
  - Overall positive feedback from 5 years of intrapartum only support
  - Addresses gaps in the literature - provides perspective of pertinent stakeholders

- **Limitations**
  - Comparison not to OHSU or weekend specific
  - Selection bias - birthing persons opt in
Future Directions at PDX Doulas

- Medicaid Billing Provider aka “doula hub”
  - Promote THW Doulas
  - Community-Based Support
  - Recruit and train new doulas that reflect the populations served
  - Cost to families – reduced or free

- Build more research infrastructure to ask more advanced questions
Acknowledgements

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▪ Volunteer Services, OHSU
▪ Volunteer Doulas, PDX Doulas
THANKS!

Any questions?

You can reach me at: snow@ohsu.edu
You can find PDX Doulas at: pdxdoulas.org