

Why/why not do we have douglas?

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I heard...

- Prof Clow:...admin... midwifery management - task shifting
- Dr Schoon... good communication (misunderstanding- legal issues)
- Changing environment (social, economic, political)
- Changing midwifery scope (BANK PLUS, progress of labour is not 1-1,5 cm/ hour any more...)
- UPSCALING of midwives...
- Blood management...
- KMC... prevent teenage pregnancies...

We were also challenged...

- “Is a midwife a **midwife** in South Africa?”
- What kind of “animal?”
- “Can all climb the tree?”

Pastor Majola showed the way...

- Human - respectful care

- The eagle....vision



- The ox... strength, keeping on



- The lion... boldness...



I felt kind of overwhelmed...

Does she/he even have a personal life?

BALANCED life ...?

Family?

Place to “re-fill” her/his “cup”



I REALIZED: *a MIDWIFE can do ANYTHING but
not EVERYTHING*

We need to be smarter, work smarter...

THE DOULA as team member...

- Are part of your team...”buying” you time...
- Assist in respectful care...
- Assist in improved communication...
- Making “things” easier - for the childbearing family and the service



THE DOULA

- ‘is a Greek word meaning ‘woman servant or caregiver’. More recently, it refers to someone who offers emotional and physical support to a woman and her partner before, during and after childbirth. A doula (also known as a birth attendant) believes in ‘mothering the mother’.
- ‘A doula is a professional trained in childbirth who provides emotional, physical, and educational support to a mother who is expecting, is experiencing labor, or has recently given birth. The doula's purpose is to help women have a safe, memorable, and empowering birthing experience.’ (online:2016)

Why 'another' one?

From the mothers' side

- Mothers sees midwives as busy, more "important" to be bothered..
- Unfamiliar faces; environment

The doula's contribution

- Alongside, all the time
- The doula can be the "familiar" one in an unfamiliar environment

Why 'another' one? (continued)

From the mothers' side

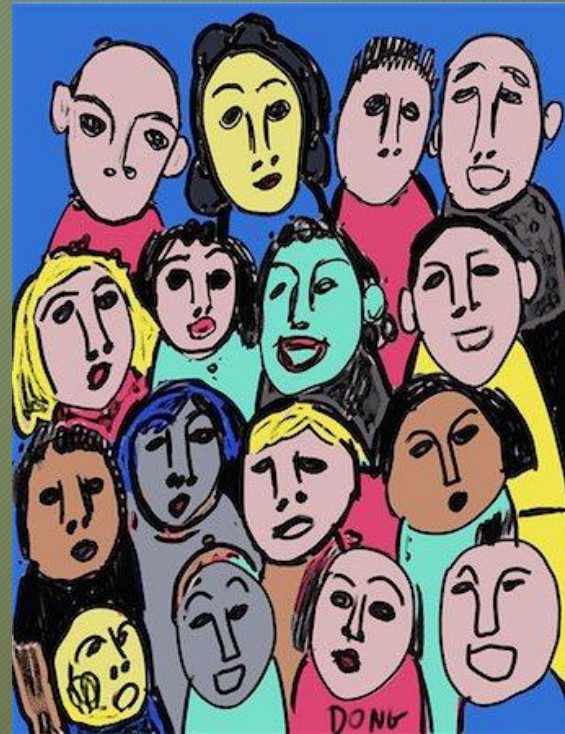
- Why not my partner?

The doula

- The partner is emotionally involved -due to the relationship - the doula is not.
- The partner seldom is knowledgeable on varies ways of supporting - the doula is

“Now where is this one, the doula?”

- “Out there” - in Bloemfontein
- We need to “find” her... identify her



“Why we?”

- The doula is someone of the community
- Preferably a woman who have been through childbirth
- She should be trained - to SUPPORT
- SHE IS NOT a midwife!!! BUT she needs to work in your team
- Therefore:
 - If you identified her; know her; was involved in her becoming a doula she can be work effectively in your team

How can it help?



The doula can

- Provide physical support:
 - Walk/sit with the woman
 - Fetch the glass of water
 - Positioning
- Provide emotional support
 - Talk to her
 - Explain the basics
- Encourage communication

The doula CAN NOT

- Take observations!
- Decide when the woman need to be “nil/mouth”
- Decide on whether progress of labour is good or bad
- Interpret vital’s... “pv” findings..

How can it help? (continued)



The doula

- Applies pain relief methods
 - Touch, massage
 - Aromatherapy
 - Electronic transcutaneous stimulation
 - “Pressure points”

The doula CAN NOT

- Give medicine/injections
- Do vaginal examinations
- Interpret blood loss

FACTS ABOUT A DOULA

- Training: (not done in all provinces)
 - Basic anatomy and physiology
 - Understand the process of birth (**not the mechanism ...!!**)
 - Communication (!)
 - Ways of providing physical support the woman;
 - Ways emotional support to the woman and partner
- Work possibilities: Antenatal, intrapartum, postnatal
 - entrepreneurship... she works for herself
 - She engages in a contract with pregnant couple
 - Full time employment?
- Legal issues:

Conclusion

- The midwifery landscape is changing...
- We need to work smarter...
- Why, or why not do we have doulas in our labour wards?

Thank you!!

