Experiences in women's care: doulas'...



ORIGINAL ARTICLE

EXPERIENCES IN WOMEN'S CARE: DOULAS' PERCEPTION VIVÊNCIAS NA ASSISTÊNCIA À MULHER: PERCEPÇÃO DAS DOULAS VIVENCIAS EN LA ASISTENCIA A LA MUJER: PERCEPCIÓN DE LAS DOULAS

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ABSTRACT

Objective: to know the perception of the doulas regarding their experiences in assisting women in prepartum, delivery and postpartum. Method: it is a qualitative research, of the descriptive type, with seven doulas of a house to support the pregnant woman. The data were collected through semi-structured interviews, being submitted to the Content Analysis technique in the category Analysis category. Results: four categories emerged: "A work that is service"; "Doula work in the prepartum: moment for the information and the preparation of the woman"; "Doula labor at childbirth: continuous support and pain relief"; "Doula's postpartum work: looking at breastfeeding and fetal losses". *Conclusion*: it is concluded that the reports show the recognition of the importance of the care provided by these women during the gestational, puerperal and puerperal periods and indicate the need for deepening and recognition of some formative axes for the doulas training courses. Descriptors: Doulas; Qualitative Research; Humanized Birth; Professional Training; Women's Health; Normal Birth.

RESUMO

Objetivo: conhecer a percepção das doulas quanto às suas vivências na assistência à mulher no pré-parto, parto e pós-parto. Método: trata-se de pesquisa qualitativa, do tipo descritiva, com sete doulas de uma casa de apoio à gestante. Coletaram-se os dados por meio de entrevistas semiestruturadas, sendo submetidos à técnica de Análise de Conteúdo na modalidade Análise categorial. Resultados: emergiram-se quatro categorias: "Um trabalho que é serviço"; "Trabalho da doula no pré-parto: momento para a informação e o preparo da mulher"; "Trabalho da doula no parto: apoio contínuo e alívio da dor"; "Trabalho da doula no pósparto: olhar voltado para a amamentação e perdas fetais". Conclusão: conclui-se que os relatos demonstram o reconhecimento da importância da assistência por estas mulheres no período gestacional, parto e puerpério e sinalizam a necessidade de aprofundamento e reconhecimento de alguns eixos formativos para os cursos de formação das doulas. Descritores: Doulas; Pesquisa Qualitativa; Parto Humanizado; Capacitação Profissional; Saúde da Mulher; Parto Normal.

RESUMEN

Objetivo: conocer la percepción de las doulas en cuanto a sus vivencias en la asistencia a la mujer en el preparto, parto y postparto. Método: se trata de una investigación cualitativa, del tipo descriptivo, con siete doulas de una casa de apoyo a la gestante. Se recolectaron los datos por medio de entrevistas semiestructuradas, siendo sometidos a la técnica de Análisis de Contenido en la modalidad Análisis categorial. Resultados: surgieron cuatro categorías: "Un trabajo que es servicio": "Trabajo de la doula en el preparto: momento para la información y la preparación de la mujer"; "Trabajo de la doula en el parto: apoyo continuado y alivio del dolor"; "Trabajo de la doula en el postparto: mirar hacia la lactancia y pérdidas fetales". Conclusión: se concluye que los relatos demuestran el reconocimiento de la importancia de la asistencia por estas mujeres en el período gestacional, parto y puerperio y señalan la necesidad de profundización y reconocimiento de algunos ejes formativos para los cursos de formación de las doulas Descritores: Doulas; Investigación Cualitativa; Parto Humanizado; Capacitación Profesional; Salud de la Mujer; Parto Normal.

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INTRODUCTION

The history of childbirth is undergoing extensive modifications, which began in the postwar period, more specifically in the twentieth century. The childbirth was left to be performed by midwives and / or someone trusted by the expectant mother to be executed in the hospital setting. In this way, the woman was separated from her relatives, without physical and emotional support.¹

In the last years, there has been a resurgence of the presence of women supporting the parturient at delivery, where they are characterized as doulas. It is explained that the word doula is of Greek origin and means "woman who serves", and is currently used to name women who help the parturient throughout the gestational period, throughout the delivery and in the postpartum period. It is noted that this task is not mandatory and does not replace other health professionals, however, there is scientific evidence that doula presence decreases the index of perinatal problems and anxiety of the woman in childbirth, promoting the bond mother and child.2-3

It was identified in a study on the opinion of the doulas regarding the emotional support offered to the parturients in the city of São Paulo, Brazil, whose function is to offer emotional support, physical and psychological comfort, culminating in a good delivery.⁴

is considered as favorable significant, by parturients, members of multiprofessional team and the doulas themselves, their role in support childbirth.⁵ It is noticed, by the parturients, that doula work is a benefit for women, when collaborating with the strengthening of the potential of each one and with the faster postpartum recovery.6

Therefore, it is important to know the experiences of these women in relation to their work, based on the reports of the doulas themselves. It seeks, therefore, the insertion and strengthening of this occupation in the care.

OBJECTIVE

• To know the perception of the doulas regarding their experiences in the care of women in the prepartum, delivery and postpartum.

METHOD

It is a qualitative research, of the descriptive type, carried out in the months of September and October of 2017, with doulas

in a House of Support to the Pregnant woman, linked to a public maternity of the municipality of Caruaru, Pernambuco.

As a criterion of inclusion, professionals with more than one year of training and, as exclusion criterion, professionals who do not have certification of the doula training course, totaling seven doulas from the technique of data saturation were adopted.

A semi-structured interview elaborated by the authors was used to obtain the data, containing the characterization of the participants and the following guiding question: "How do you perceive your work in prepartum, delivery and postpartum?"

After the data collection, we transcribed the interviews in full, when we performed the Content Analysis according to the Bardin technique, in the thematic modality.

The research was submitted to the Research and Ethics Committee of the Centro Universitário Tabosa de Almeida Asces-Unita, obtaining approval under the protocol CAAE: 72075317.3.0000.5203. In this way, the requirements of a research involving human beings were met, according to Resolution 466/12 of the National Health Council and the collection took place from the signing of the Term of Free and Informed Consent (TCLE) by all participants.

RESULTS

It is reported that seven doulas participated in the study, with ages ranging from 35 to 57 years, with duration of the course to acquire certification of this occupation of four months and the time of professional activity between one year and four months to two years.

After analyzing the data, four categories emerged: "A work that is service"; "Pre-birth doula work: moment for information and teamwork"; "Doula work in childbirth: continuous support and preparation of the woman" and "Doula work in the postpartum period: looking at breastfeeding and fetal losses".

A job that is a service

The work of the doula is seen as a donation, a moment to serve, to help, to give physical and emotional support, as reported below.

[...]and you are there, giving a force, helping [...] that doula came to that, to serve, to give physical and emotional support. (E6)

In this context, it is associated, for some doulas, to "serve" gratuitously, noting that

money is not the most important at the moment.

[...]I get paid for this, but I think only money is not important. I do not think so, at least in my opinion, for me [...] it's a donation. It is so much that, for example [...] today I will doular, but I will doular in gratuity. I do not have any shifts today, but I want to offer, for my part, this moment of giving to women, in gratuity. (E1)

The work of the doula in the prepartum: moment for the information and the preparation of the woman

Note this work as host, with the desire to provide security for the woman and the companion. It is believed, by the doula, to collaborate with the humanization of care given to the parturient, to value women's right to choose and to stimulate empowerment.

The importance of this support is reported since the beginning of gestation, but they often know the women at the time of delivery because the women attended are the ones who performed their prenatal care in the Basic Health Care System, making it difficult the previous contact.

[...]and we start talking, start giving support. Sometimes they do not ... know nothing. We begin to explain, this gives them greater security ... I think the importance of the doula is very large because of this. (E3)

[...]because many of them we only know at that moment, not only I as we all would like to know the pregnant woman from the beginning. (E5)

It is observed that the prepartum time is also an opportunity to publicize the work of the doula, since some women still do not know it.

[...]I stayed there a lot, in the pre-delivery, passing information, because there is a lot of patient who does not even know what doula is yet. (E4)

It is understood, through one of the interviewees, the contribution that women can achieve at the onset of childbirth ready for the professional who attends the delivery, and it is necessary to pay attention to the meaning of the woman's role, where preparation for childbirth does not only depends on the professionals and external stimuli, but it also happens from the inside out, that is, the construction of this moment by the woman herself.

[...]is of great importance for the patient, for the companion and for all of the team because I already give the patient ready for the nurse. (E4)

Doula's work at childbirth: ongoing support and pain relief

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It is understood the doula care during childbirth as an offer of psycho-emotional and physical support to the parturient with the use of relaxing methods that have, as one of their objectives, the relief of pain and the reduction of cesarean section.

[...]prepare, as far as possible, emotionally, we try to prepare it during childbirth, support. (E2)

[...]it is a whole process of much love and affection ... we begin by giving the patient, doing the massages ... giving hot water bath [...] also the companion [...] sometimes the companion is stressed [...] I also massage the companion [...] I do a job not only with the patient but also with the companion. (E4)

Doula's postpartum work: looking at breastfeeding and fetal losses

Attention is paid in postpartum care to the care of the newborn, especially in breastfeeding, as can be seen in the following statements.

[...]after delivery, in the guidelines for the baby, the initial guidelines. (E2)

[...]I go there and welcome that mother with the baby, I put in to nurse, I talk about other things, about breastfeeding, about the baby's record, these guidelines. (E7)

It was identified a care directed to those women who suffered gestational loss, reporting the support also offered at this moment.

[...]have women who lose the baby, so you go there to give support. (E1)

DISCUSSION

It should be emphasized, as far as the data on the training of doulas interviewed, that this kind of service was included in the year 2013 in the Brazilian classification of occupations. It is known that the courses in Brazil are recent and the training proposals, including course development time and qualification of the facilitators, are prepared without supervision.

In a study about the reasons for the doulas for the actuation and the professional formation, carried out in Rio de Janeiro, Brazil, reports of their concern about the formation, recognizing that there is a discrepancy between courses, with divergent formative proposals. It is concluded that there is a need for standardization of courses offered in Brazil.⁷

The first category occurs when the doula performs a reception and service work, and the care provided by the doulas provides a qualified listening, a differentiated look and a

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careful touch, where the parturient is allowed to expose fears, anguishes and sufferings.⁸

The service must be performed from the beginning of the gestation, but in Brazil, doulas service is understood in two ways: as a voluntary service (community service) and as a private service. The first form is different by the donation of a day of the week available for voluntary services in public maternity, being difficult the monitoring of the women in the moment before the delivery and in the postpartum.⁸

It is observed that some doulas associate "serving" with gratuity, being important to be aware that the idea of charity is distinct from the logic of humanization. Care must be taken in the face of technical and rational knowledge, without losing the capacity of the host and empathy.⁹

In Brazil, there are moments of information in pre-delivery with support groups for women companions, and allowing access information on gestation, delivery, puerperium and, at the same time, strengthening the movement of doulas and humanization of birth in the country. 10

It reinforces the pre-delivery moment as a possibility to present their services to women. The doula's work is acknowledged by the multiprofessional team and, in a positive way, at the same time that their role is known and validated in the different parts of society.⁵

It is understood that his work is important in the sense of preparing the woman for childbirth, to the point of reporting that leaves the woman ready for the process. However, it is noted that this "leave ready" can be characterized as a skewed look at the protagonism of childbirth, where it is built by the woman with the support of all actors. 4,11

Their role is also understood by offering continuous support and relief of pain at childbirth, and actions that favor the reduction of labor time, baby fitting, natural induction of the process and better control of pain help in the decision-making by women, promoting a pleasant environment for birth and contributing to the improvement in the quality of life of parturients.¹²

It is known that the doula helps the parturient to find more comfortable positions for the process of birth and birth, show efficient forms of breathing and proposes natural measures that can relieve pain, such as baths, back massages, relaxation and , by holding the parturient's hand, trust and affection are offered.¹³

The use of complementary and integrative practices is suggested, as long as they have

training to practice. Emotional support is also defined by the ability to listen, encourage, facilitate positive memories of the birth experience, reinforce ideas and advocate for parturient.⁵

The benefits of the participation of the companion in the process of parturition are recognized, being the parturient the protagonist of the childbirth. The participation of the companion in the parturition process should be considered, as it is part of the goals to be reached during the process of humanization of birth and birth.8

A study was carried out in Guatemala to evaluate the effects of doula on the side of the parturient during labor in the 80's. It was observed that the group of parturients who received support had a lower incidence of perinatal problems, use of oxytocin, shorter labor time and greater interaction between mother and baby.¹⁴

It is confirmed that doula-accompanied women have less need for epidural anesthesia for vaginal delivery and have lower rates of preterm birth and cesarean section. ¹⁴⁻⁵ It is pointed out, by the doula's presence, also, for the reduction of the pain of the childbirth and the anxiety during the moment of the birth. ¹⁶

It is known that, in the postpartum period, the perception of parturients is that the doula stimulates the mother and child relationship, successful breastfeeding leads to contributes to prevent postpartum depression. 12 It was revealed that the support to the puerperas by the doulas provided a greater number of women breastfeeding, with more self-esteem, less depression and more interaction with their children.¹⁷

Attention should be paid to other aspects of puerperal life, as the care provided in this period has historically focused on the newborn, but the proposal from the Policy on Integral Care to Women's Health states that assistance at this stage must also permeate the needs of women. 18-9

In postpartum care, the importance of doulas' gaze is focused on women experiencing loss of their children, with the recognition of support and health orientations for women and their families. One should understand the quality of abortion and post abortion care as a set of actions offered to women during and after termination of a pregnancy, whether spontaneous or induced.²⁰

This attention is implied in an integrated effort to offer services that guarantee reception, information, counseling, professional competence and personal

relationship based on respect for sexual and reproductive dignity and rights.²¹

CONCLUSION

It is concluded that doulas recognize the importance of their care when reporting their role as a service that provides a more positive experience of gestation to the puerperium, being important care to promote information ranging from biological aspects to women's rights, and identify its potential for reducing pain, supporting women as companions, and postpartum support.

There should be an attention to the care provided with gratuity, knowing that this service is professional, involves costs and time, being an occupation recognized in Brazil. It should also be emphasized that care in the puerperium should not be restricted to the newborn, in order to avoid the historical rescue of maternal and child care only directed at the child.

Through this study, it is possible to contribute to a reflection in search of the real meanings and meanings of the assistance to the woman, the companion and the newborn developed by these women, favoring the improvement of their formation. It is also suggested that these aspects be deepened by facilitators of the doulas training courses.

It should be noted that the study has limitations for discussing the perception of a specific group of doulas, however, this situation is lessened because they are women who develop a pioneering work in the interior of Pernambuco, enabling a description of the beginning of these works of this new actor in the birthplace of the rural Pernambuco.

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