

BiA Doula Training Scope of Practice

A BiA Doula aims to get to know the mother (and partner) and the wishes, values, needs, fears and vision for the birth. The mother is the guiding force in determining the type of care: the doula provides *individualised* support. The doula is available during pregnancy for a mutually set number of visits, and through online/email/phone support. During the birth s/he offers continuous support. In the immediate postpartum period s/he is available for questions, (online) emotional support and referrals. At least 1 post natal visit concludes the doula relationship.

Further more, a BiA Doula:

1. provides *emotional support* by being empathetic, exhibiting a positive attitude, giving guidance through rough moments, and by reassuring and encouraging the partner.
2. provides *physical support* which may include but are not limited to: suggestions for position changes, offering drink and food, comfort touch/massage, movement, visualisation, polarity, encouragement, rebozo use for relaxation, and breathing support. The physical support aims to create comfort, relaxation and balance.
3. provides *informational support* by suggesting the mother (if requested) trusted sources of information (books, articles, research papers), by encouraging communication between client and care providers and by encouraging informed decision making.
4. provides (online) help for writing the *birth preferences*.
5. facilitates *communication* between the mother (and partner) and the medical care team when necessary (i.e. around the birth preferences or informed consent)
6. offers *referrals* when a situation arises that requires additional attention and support that falls outside the doula's scope of practice or that the doula feels s/he cannot provide.
7. recognises the unique role of the partner (when there is one) and is at all times inclusive and respectful.

Outside the scope of practice of a BiA Doula falls:

1. performing or assisting a care provider with medical procedures such as assessing fetal heart tones, taking blood pressure, performing vaginal exams, reading and interpreting medical tests and making a medical diagnosis, temperature taking or postnatal clinical care.
2. giving (medical) advise.
3. Making a diagnosis and based on that using the following to achieve a certain outcome: massage, rebozo, moxa, acupressure. There can be no promise of a certain outcome achieved from using these techniques and the goal can't be to 'heal'. They are purely for relaxing, creating balance and for comfort.
4. using aromatherapy, homeopathy or herbs in a therapeutic way.
5. hands on assistance in establishing breastfeeding.
6. making decisions and/or speak for the birthing person unless the doula is officially appointed as the spokesperson

Further more:

7. If the doula has qualifications in alternative or complementary modalities (such as an aromatherapist, childbirth educator, massage therapist, homeopathist, acupuncturist, breast feeding, consultant, placenta encapsulator etcetera) s/he must make it very clear to her/his clients and others that those modalities are an additional service, outside of the doula's scope of practice.
8. A healthcare provider (such as a nurse, kraamzorg, midwife, chiropractor etc) may incorporate doula skills as a health professional but may not refer to themselves as a doula if they are fulfilling both roles.