

# 12 Sample Doula Clients

The women who choose to work with doulas for their births are a very diverse crowd, with a range of hopes for their births, and a range of reasons for why they want a doula to attend. The list below is just a sampling; they are based on clients I have had, but I have changed the details for sake of client confidentiality.

- A married woman, in her mid-20's, expecting her first child. She and her husband had attended childbirth classes, and were prepared for the birth. Then, just two weeks before her due date, they chose to hire a doula, just because of a sense that they were going into unknown territory, and thought it would be helpful to have an experienced guide to help them through. (I also attended their second birth five years later.)
- A single woman, in her mid-20's. The pregnancy was unplanned, and although the father was involved and supportive, marriage was "not in the cards." When they contacted me to be their Doula, during her second trimester, the plan was to give the baby up for adoption. They wanted a doula to help with the birth process, and also with the grief process of giving up the baby. However, a week before the due date, the adoptive parents backed out.... The mom ended up choosing to keep the baby, with the dad having partial custody, so my role instead became to help with the birth and to help initiate them into parenthood.
- A married woman, in her early 30's. She and her husband had done a lot of preparation for the birth, including Bradley birth classes. Their goal was a quiet and peaceful labor, with as few medical interventions, and as few interruptions as possible. They wanted a Doula to help "hold the space" for them, and help them have the birth they wanted. The husband was definitely the primary support person and primary advocate, and I was there as a backup and a reassuring presence and to discourage un-needed interruptions and interventions.
- A non-English speaking immigrant, in her mid-30's. She had given birth twice before, in her native country. Her most recent birth was 9 years before, and she was concerned that it had been so long, and perhaps this birth would not go well because of that. Her public health nurse wanted an advocate for her within the American hospital setting, which would be so different from what she had experienced before. During the birth, she was attended by the interpreter and myself; her sister was only able to come after 11:00 pm when her work shift ended.
- A married woman, in her late 30's. She has a 3-year-old child, and her memories of that birth were of being frightened, out of control, and in an overwhelming amount of pain. She wanted a Doula to help her feel more empowered, and help her cope better with this birth experience. The goal was to stay home as long as possible, keeping active and distracted, and go to the hospital only when necessary, and find ways to help the hospital feel like a safer environment, where she felt some sense of control.
- A married woman planning for a home birth with a midwife and a birthing tub. She would be attended by her husband, her housemates (when they weren't tending to their toddler), and two doulas (we were both friends of the family.) Her labor ended up being fairly quick and easy, and the baby was being birthed as I walked in the door. But a few days later, a major health issue arose with the baby, so I offered additional support to the family after the birth.
- A 17 year old, referred by her public health nurse. The dad would be present at the birth, but wasn't sure how supportive he would be able to be. They wanted a Doula to help them understand the birth process, and help them "go with the flow" of labor: she has talked to lots of other women about birth, and understands that every labor is different, and it's hard to predict how hers will go.

- A 16 year old, referred by her friend, who told her repeatedly “I couldn’t have done it without my Doula.” This mom was initially very frightened of the whole idea of vaginal birth, and at one point in her pregnancy was strongly hoping for a cesarean section. She told me “I keep telling myself that I *have* to have a vaginal birth, and there aren’t any other options.” I talked a lot about her fears and how to move past them, and I encouraged her to try to shift her thinking to “I *can* have a vaginal birth, and I *will* choose that, because I know it’s best for me and for my baby.”
- A single woman, in her late 20’s. Her mother will be her support person during labor (dad is out of the picture) but her mother does not believe she is capable of birthing without pain medications. She wants support in attempting a natural birth. Also, she has a history of bipolar disorder, and knows she is at risk for postpartum depression, and wants to make sure she has support during labor to get her parenting off to a good start.
- A married woman, mid-30s. Has a 6 year old – during that labor, first stage was very easy and not painful; however, second stage was 6 hours of pushing! She wants this birth to be different: knows that changing positions throughout labor and birth can help, wants a Doula to remind her to do this. Also, she has insulin-controlled gestational diabetes which puts her in a high-risk category. She has talked with doctors about minimizing interventions, but wants to make sure there is someone there to help her husband advocate for their desires so that she can focus on labor and birth. Their daughter will also be at birth, with an aunt to tend to her needs.
- A married woman, mid-30s. Has had four prior pregnancies: two children, a stillbirth, and a miscarriage. It’s her husband’s first baby. Originally, she wanted a Doula just to provide support during labor and birth. However, her doctor recommends a repeat cesarean section, due to the doctor’s concerns about VBAC birth. So, I meet them at the hospital on the scheduled day, to provide information, advocacy and support during the pre-op time, surgery, and recovery.
- An immigrant, whose husband was still in their native country due to problems with obtaining a visa. Although she had relatives in town who were supportive and helpful, they were all male, and within her culture, it was not appropriate for them to attend her and support her at her birth. Upon arrival at the hospital, a cesarean was recommended because the baby was estimated to be over 10 pounds. The mother wanted to attempt vaginal birth, and my doula apprentice and I worked together with the hospital staff to do all within our power to move her toward a vaginal birth, while still being aware of her safety and the baby’s well-being. (In the end, she did have a vaginal birth of a 10 pound, 6 ounce baby.)

By Janelle Durham