



Doula-ing from a distance: better than nothing

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Before the Covid-19 pandemic I never thought about 'doula-ing from a distance'. I use phone, email, text messages and sometimes video as ways to communicate with my clients, but for these forms of communication to become the *only* way we can work together is new for me.

I love how the universe gifts me what I need. My last client before the pandemic was initially based abroad, so for the first couple of months we developed our relationship via video calls. Although we then met, and I attended her labour (and beautiful water birth) in hospital, our postnatal contact was conducted entirely 'online'. We reflected by text message afterwards on what was useful about my support. My client identified how maintaining contact with me on the phone and through text messages, during the challenging period two weeks before labour began, was really important for her: 'doula-ing from a distance'. I have had this feedback before from birth clients, and it makes me rethink what I offer as a doula, and how this new 'virtual' way of working impacts that.

I am constantly learning what it means to 'hold space' for someone. This journey is fascinating but challenging. I reflect on the contribution of (my) physical presence in labour (positive and potentially negative), and how I use (my)self in offering birth and postnatal support to clients. I focus on remaining 'embodied' and 'present' with my clients, and I see this as integral to my offering of support. So how does working virtually change this, for me and for them? I started working with a couple who reached out for doula support just before the pandemic changed everything and my offer of support moved from my

usual birth package (with face-to-face meetings in the months preceding the birth, and my continual physical presence throughout labour) to a virtual support package. The first difference for me in the antenatal period is more contact with my client and her partner. I video call them, and we spend more time together than with my face-to-face birth support package. I find preparation for online sessions takes more time, as does follow-up communication. We contact each other via messaging and email exchanges, which is similar to my usual way of working, and our relationship is clearly developing even though we have not met (and are not likely to meet). This is an evolving process; it's interesting.

I am aware of the limitations of what I can offer my clients by way of support. I cannot provide practical support once labour starts, nor can I talk about how I 'hold their birthing space'. It makes me wonder: do I encourage dependency in my clients, a sense they need me to be there in some way for things to go as they hope? I reflect more on my language, on ways to promote their self-belief and self-confidence. They CAN do this! If I can be with them, they imagine being able to 'fall back' on my support. If we all know that I can't be there in person, we are talking more about what *they* can do, what they offer and what they need from each other, and their midwife. This subtle shift in focus is challenging me to re-imagine empowerment and to critically reflect on how I work with birth clients to promote confidence in their birthing wisdom.

One positive thing to come out of these challenging times is that birth workers are sharing more resources with each other. I explore how to offer video calls, or messaging support to my clients once labour starts, if this is possible with rural internet connections and, should they transfer to hospital, whether maternity staff would agree to it. Having recently offered solely virtual postnatal support, this experience highlights the value of being accessible by message and phone in the early days after the birth, responding promptly to messages whatever the time of day or night. Effective virtual postnatal doula support emphasises the importance of the signposting role that doulas have, particularly for breastfeeding support. I recognise the value of encouraging my clients to find their 'village' (albeit a 'virtual village'), the new parents and experienced others who can provide support and a safe place to share anxious thoughts about new parenting. Given the increased pressures of the times, my signposting role includes awareness of online resources to support perinatal mental health, and I actively share these links with my clients and update information on my online platforms. I do this in my face-to-face work, but now I can't rely on this contact as an opportunity to assess well-being, or decide what information I need to share.

The Covid-19 pandemic is with us for the foreseeable future, and birthing couples want support, so I continue to develop the resources in my virtual doula offer. At the start of this journey I asked myself: is 'doula-ing from a distance' better than nothing? Thus far, I would say 'yes'. I am encouraged by my clients' positive feedback on the support they experience from our virtual contact to date; we learn from each other. Virtual doula-ing will never be my preferred way of working, but it offers interesting challenges, and opportunities for personal and professional growth. My practice is positively changing as a result of working differently.

