

April 7th, 2020

For Immediate Release:

No Person Should Birth Alone

A call to Provincial Governments to ensure all hospitals policies include the permittance of one support person to all births, should personal protective equipment be available and support is safely screened upon hospital entry.

Doula Training Canada represents more than 7,200 professional members across Canada who support thousands of families. **Doulas across Canada call upon the Provincial Governments, senior administrators of hospitals and birth centres, and provincial**midwifery communities (when applicable) to support the physical and emotional needs of all birthing people by protecting their right to continuous in-person labour support by a companion of their choice.

We are aware of current institutional policies across provinces put in place to restrict visitors in labour and birthing environments due to COVID-19, the additional precautions being taken to limit exposure, and the strong need for more personal protective equipment.

There is no doubt that protecting birthing persons, infants, their families, and frontline workers from contracting or spreading Covid-19 is of primary importance. However, in strictly controlled environments where everyone agrees to respect the rules of infection control and prevention, the evidence for the presence of ONE chosen support person in the birthing room has such high benefit that it is our duty to find better strategies than having a person birthing alone without a person of familiarity.

Doula Canada firmly supports the World Health Organization's position that "All pregnant women, including those with confirmed or suspected COVID-19 infections, have the right to high quality care before, during and after childbirth. This includes antenatal, newborn, postnatal, intrapartum and mental health care." The WHO further stipulates that "A safe and positive childbirth experience includes... [h]aving a companion of choice present during delivery."

The WHO's stance that birthing people have the right to labour support has been echoed by other well-respected public health organizations, including the Centers for Disease Control and

¹ <u>https://www.who.int/news-room/q-a-detail/q-a-on-covid-19-pregnancy-childbirth-and-breastfeeding</u> (Accessed on April 3, 2020.)

² Ibid.



Prevention, which has explicitly identified spouses/partners as "essential support persons for women in labor" during the COVID-19 crisis.³

Peer reviewed research has demonstrated that continuous labour support leads to a decreased rate of cesarean sections, decreased use of pain medications, an increased likelihood of shorter labours and increased rates of satisfaction with birth experiences. Babies born following continuous labour support are also less likely to have low Apgar scores (an assessment of newborn health at birth and soon after).⁴

Prodigious evidence has also proven that when birth is perceived as a positive experience by the birthing person it can lend itself to a better recovery in the immediate postpartum period. This outcome nourishes optimal infant bonding and attachment, feeding, as well as parental mental health. This means the opposite of a positive birth experience could have detrimental effects. The physical and mental health of parents could become ignored, infant feeding challenges could have a higher chance of ensuing, and most frighteningly, we know that eroded parental mental health can and does impact the brain development of babies. Given how stretched and difficult access to appropriate perinatal mental health resources has become since before the COVID-19, suggestions that these potential impacts can be mitigated with proper psychological intervention does not sound feasible. **Prevention is the better option.**

Vulnerable populations and persons in the margins are at a much higher risk of the real impact of birth trauma. Black, Indigenous, and People of Color experience higher rates of birth complications because of a myriad of the egregious expressions of racism. **Appropriate** support by a chosen individual that a birthing person feels safe with is not simply a privileged ideal; for some it may prevent further trauma, explicit racism, discrimination, or other forms of egregious expressions faced by vulerable and at risk populations.

Doula Training Canada stands with birthing people across Canada and asks that ALL institutions revise their policy to include ONE support person at a birth when personal protective equipment is available. In this time of pandemic, support is vital for the mental and physical health of our birthing people, infants, and growing families.

³ https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html#manage_access and https://www.cdc.gov/coronavirus/2019-ncov/hcp/inpatient-obstetric-healthcare-guidance.html (Accessed on April 3, 2020.)

⁴ <u>https://www.cochrane.org/CD003766/PREG_continuous-support-women-during-childbirth</u> (Accessed on April 3, 2020.)