

The European Doula Network: Connecting, Supporting, Informing

Debbie Mitchell, European Doula Network, Core Organiser

The European Doula Network (EDN) has grown significantly since its humble beginnings around kitchen tables some twenty years ago and now represents approximately 5,000 doulas who provide non-medical support during childbirth and other life transitions. Doulas play a crucial role in offering emotional and informational support to the Mother-Baby dyad and to people in minority groups and marginalised communities who may encounter difficulties receiving much needed holistic care. The Network is dedicated to raising awareness about the positive impact of doula care, promoting the inclusion of doulas in healthcare settings and advocating for doulas facing professional challenges. The EDN regularly conducts research to better understand the evolving needs of doulas and their clients, ensuring continuous improvement in doula practices. The Network's annual meetings and many initiatives provide opportunities for doulas to connect, share experiences, and support each other, enhancing the community spirit that is central to our work.

Note: As the majority of individuals giving birth are women, this word will be used in the article, but this is not to exclude any other people receiving doula support.

KEY WORDS: *doulas, continuous support, birth, pregnancy, postpartum*

The role of the doula as a helper and carer at the gateways of life has been around since the beginning of time. However, the term, 'doula', taken from Greek and meaning a 'woman who serves', was coined in the 1970s to mean a non-medical attendant who assists women during the peri-partum period (Raphael, 1973).

Doulas have typically supported all those who need them. However, a growing number of doulas are now providing care specifically addressing the needs of people of colour, LGBTQIA2S+ individuals, the disabled or those in vulnerable circumstances, such as teenagers, migrants, refugees and people in prison. Most doulas offer support during the perinatal period, but increasingly there are doulas who support during other life transitions, including a growing number of End of Life, Thana or Death Doulas, who provide emotional and informational support to bring comfort to those who are dying and their families (see Figure 1).

Whilst the origins of childbirth education in the West can be found in the post-war baby boom of the 1950s, the doula movement began taking shape in the USA in the 1990s. By the turn of the century, doulas in Europe were also beginning to establish themselves. The idea of creating a network to help connect doulas, as well as develop a standardised scope of practice and quality training programmes across Europe, emerged simultaneously in

several countries around 2005. The idea was discussed at birth-related conferences over the following years and the European Doula Network was officially formed in Paris, France, in 2011, uniting members around a common Code of Ethics with the mission of 'Connecting, Supporting and Informing'.

In 2024, the EDN is a circular, sociocratic organisation encompassing 64 doula associations and training programmes, with 20 'Friend' memberships – individual doulas who wish to participate in and support EDN - across 27 countries in the extended European region. Geographically, we include doulas from Iceland to Kazakhstan, and from Finland to Portugal. The EDN does not accredit members, but requires that they honour and act according to the EDN values, mission and Code of Ethics. Our shared Code of Ethics, translated into 22 languages, helps to establish and clarify the role of a doula for clients, health professionals and trainee doulas as well as the general public.

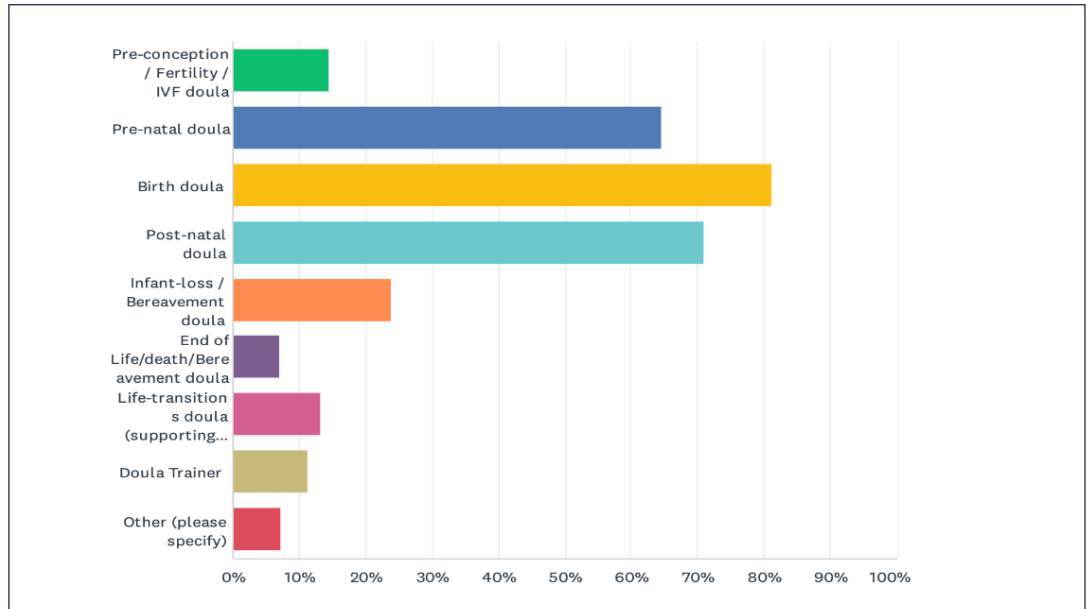
The EDN represents approximately 5,000 doulas in member associations. Half of the members provide doula training programmes which have collectively trained around 8,000 doulas over the past 24 years. This year, we released a documentary mini-series called 'United for Birth' (www.youtube.com/@EuropeanDoulaNetwork), interviewing our founders and doulas from across the Network, as well as families they have supported.



Scan to access the EDN Code of Ethics, with 22 translations

FIGURE 1: DIFFERENT TYPES OF DOULA SUPPORT PROVIDED BY EDN MEMBERS

(Unpublished data from EDN Doula Survey, completed March 2023)



Over the past few years, the EDN has embarked on several research projects. Our first ever doula survey was launched during World Doula Week in March 2020. (For a brief overview, see EDN Summer newsletter, 2020.) Over 600 European doulas responded and told us about their area of doula practice, training, employment and experiences as doulas. However, the pandemic was radically changing the reality of working as a doula as many hospitals and birthing centres restricted or denied access to additional support people and prevented in-person prenatal and postpartum doula care. The data collected reflected a pre-pandemic world. So in 2023, a second doula survey was conducted, helping to ascertain the impact of the pandemic on both doulas’ and their clients’ wellbeing.

Of 369 EDN doulas surveyed (survey completed 2023; as yet unpublished), birth doulas estimated that over their career they had attended 17,358 births (averaging 47 per doula), with an overall estimate of 45,936 clients supported by doulas of all kinds.

Our dreams for the future are that over the next five years, doulas will become more fully integrated in networks of care, collaborating closely with medical teams to provide holistic care. In ten years’ time, we hope to have wider public recognition and that doula services will be covered by standard health insurance in many European countries.

INFORMING

Knowledge about the role of doulas in Europe and appreciation of the value of doula support varies widely from place to place and even from institution to institution. Across the European region, there are diverse legal and culturally

normative landscapes. The options for where to give birth, and expectations of how to give birth, differ depending on where mothers live. Medical interventions and procedures may be routine in one place and yet be exceptional, or illegal in another (e.g. the Kristeller manoeuvre - an intervention involving the application of manual pressure to the fundus in order to expel the baby during the second stage; see Malvasi et al., 2019). Finally, the presence of a doula is currently only accepted and encouraged within maternity units in a few European countries with progressive healthcare systems. At the furthest extreme, in some countries doulas are essentially unknown. This makes the role of the EDN in enhancing the international profile of the doula particularly significant.

To understand better some of the challenges facing doulas, it is worth exploring common misperceptions about doulas and the support they offer. Following a recent pilot study, we noted there is often fear of encroachment and misunderstanding about the doula role within professional healthcare circles. Due to the nature of being a ‘lay profession’, anyone can call themselves a doula. This means some ‘doulas’ may not act according to established doula ethics or within professional boundaries. Unfortunately, poor practice by one ‘doula’ can then cause a generalised backlash against doulas in general, having far reaching consequences for all those adhering to the Code of Ethics and scope of practice.

As for the perception of doulas within networks of care, doulas, in some ways, are in the enviable position of being freed from the responsibility of making medical decisions and from the bureaucratic duties needed to document all actions taken,



Carolina Becerra with her doula, Magdalena Martinez, EDN representative of Asociación Española Red Circular de Doulas (AERCD), Spain

especially in the case of emergencies. In the majority of situations, they are free from the institutional policies, doctrines and mores of the facilities where they support clients, and are also observers of whatever takes place. It is therefore unsurprising that they may be viewed with apprehension or mistrust, especially when staff are overworked, under-resourced and feeling undervalued.

Given the nature of the role, doulas develop extremely close relationships with their clients, and may receive a halo of attention when the client feels their needs have been met. Doulas' caring and compassionate presence means they often bear witness to intense emotions: both the blissful highs, as well as the terrible lows of disappointing or even tragic outcomes. Their independence

gives them the liberty to spend time simply being with their clients, to 'hold space' for them, and not be dictated to by organisational requirements, or the needs of other patients.

Just as the doula role is often misunderstood, the working reality for doulas is also frequently overlooked. Doulas are mostly self-employed and do not enjoy the benefits of having paid sick leave, holiday pay or a pension plan. They also need to constantly attract new clients, as repeat customers inevitably come at intervals of several years. There is therefore a high motivation to give the very best care possible.

In order to achieve this, flexibility is essential, and for birth doulas this usually means being on call 24/7 for a period of up to a month around the estimated due date. This affects how far away they can be from the place of birth, what



Front cover of 'Doula International', volume 31, issue 4 (2023) which includes an article describing the international collaboration between DONA, EDN and ICEA at FIGO in 2023. Published by DONA International.

activities they can participate in (and drop at a moment's notice) and what provisions they need to make for their daily responsibilities and commitments. This has a direct impact on their children, partners, friends and families, as well as having consequences for other working or volunteering commitments. As birth is unpredictable, they may also miss significant life events, such as birthdays and celebrations. Finally, while the shift for other caregivers comes to an end, doulas don't go home. They give continuous support over however many hours it takes for the baby to be born, until the first few hours following birth.

The physical, emotional and mental exertion required of offering on-call and continuous support to clients who are in the midst of challenging life experiences means that symptoms of burnout are common amongst experienced doulas. Vicarious trauma can also be a contributing issue. Over 50% of doulas surveyed in Europe (EDN survey completed 2023; as yet unpublished) said they have witnessed disrespectful maternity care. Doulas who have experienced burnout (feeling emotional, physical and mental exhaustion, being overwhelmed and unable to cope) have on average supported 284 clients. Those who have supported 120 clients also say that they have sometimes experienced burnout. Unfortunately, given the precarious nature of self-employment, the risk of burnout can have a significant impact on the long-term sustainability of doula careers. We found that only 17% of doulas in our survey

make a living wage from being a doula.

However, despite the difficulties doulas face in establishing and sustaining their practice, recognition of their value is growing. Thanks to the requests of clients and doula associations, companies offering health insurance in Belgium, the Netherlands, Switzerland and France are now including some provision for the costs of doula services. Although this benefit is for those who can afford private care, there is now an acknowledgement of the value a doula may bring to a new family's sense of wellbeing.

SUPPORTING

Within our Network, members channel and share information and discuss the issues doulas are experiencing. Over the years, the EDN has provided advocacy when doulas encounter grievous misunderstandings at the hands of journalists, medical professionals or governmental departments. Our overall aim is to encourage and support open dialogue between doulas, healthcare officials, policy makers and the wider public. We aim to provide clarification about the doula role, which is intended to complement the roles of others - including partners, healthcare professionals, family members and friends.

The EDN stands against any form of violence and respects human rights as a core value

We are united in our common humanity and stand against any form of violence, holding respect for human rights as a core value. Over the years, EDN doulas have offered support in various humanitarian and environmental crises. Our surveys show that 42% of doulas regularly offer voluntary support, with a further 37% sometimes volunteering to support those in need. Indeed, EDN doulas have offered support in refugee camps, in the aftermath of natural disasters and when human conflict has arisen.

In situations of armed conflicts, the EDN reaches out and co-operates closely with its concerned members. For example, when Russia invaded Ukraine in 2022, Ukrainian doulas asked if the EDN could help them to support pregnant refugees and mothers fleeing the war. Representatives of the EDN met with Ukrainian doulas, also inviting Debra Pascali Bonaro, an international doula ambassador, to share ideas of how to use the full potential of the Network.

Thus the Doula Solidarity and Support (DSS) Initiative was created. It has issued a position statement, a call to action and created an online hub sharing multilingual resources, connecting



Doulas gathered in a circle during the EDN 2023 Conference in Madrid, Spain. Organised by Asociación Española Red Circular de Doulas (AERCD).

refugees across Europe to local doulas offering support. The DSS hub shares details of NGO first response campaigns whenever there is a crisis, as well as resources for doulas supporting marginalised people across Europe and beyond. Trauma-informed care resources, workshops and training courses are also available to over 200 doulas in the hub, which is open to all doulas signing up to the EDN Code of Ethics.

The EDN gives members an amazing opportunity to develop their awareness of regional issues and cultural differences, and the Network encourages dialogue to further understanding and create learning opportunities. We currently have two members, in Croatia and Iceland, who have developed an Erasmus+ Advanced Doula Training course, which draws strength from the benefits of international collaboration. The long-term goal is to use this initiative as the basis for other members to embark on a similar journey.

This year, there has been close collaboration between the Postnatal Support Network (EDN members offering support for parents and training postnatal doulas) and Geboortnis/Nativity in The Netherlands in preparation for the Postnatal rEvolution Summit in February 2025. To support this project, we have launched a new survey asking mothers about their postnatal experiences over the last five years to see how greater understanding may help improve postnatal experiences across Europe.

CONNECTING

Since the first official meeting in 2011 in Paris, France, EDN members meet in a different country every year, uniting online during the pandemic. Starting in 2022, the EDN also regularly hosts 'Speak! Hear! Doula!', an international online 'doula chat', open to all doulas and trainees. There is often a special theme which is discussed in small breakout rooms and then shared among the whole group. This simple format has been fertile ground for new ideas and networking opportunities, in which a variety of perspectives can lead to inventive solutions.

In 2023, the EDN became partners with the International Childbirth Initiative and the Perinatal Alliance. The International Federation of Gynecology and Obstetrics (FIGO) XXIV World Congress of Gynecology and Obstetrics was held in Paris in 2023 and this proved an ideal opportunity to unite internationally and represent doulas to ObGyns from across the world. The EDN initiated discussions with DONA International (Doulas of North America), the International Childbirth Education Association (ICEA) and Red Mundial de Doulas (RMD) and created a warm and welcoming 'doula corner' at the congress. Together we promoted Step 4, 'Offer Continuous Support', of the International Childbirth Initiative's '12 Steps towards Safe and Respectful Mother-Baby Care' (<https://icichildbirth.org/initiative/>). This unprecedented

alliance also produced a pilot study asking perinatal medical professionals to complete a survey entitled 'Feedback on Doula Support'.

EDN doulas have long been welcome participants at the Midwifery Today conferences in Europe, so the 'Feedback on Doula Support' survey was also shared at their conference in 2023 in Bad Wildbad, Germany. We hope doulas will become a regular sight at regional Midwifery and ObGyn conferences, as well as at locally hosted International Confederation of Midwives (ICM) and FIGO congresses. Next year, we would like to see our members representing doulas at the European Board and College of Obstetrics and Gynaecology (EBCOG) congress in Frankfurt, Germany. The experience of being pioneer doulas in Europe may eventually lead to EDN members helping doulas become established in parts of the global south. The International Childbirth Initiative has been running a series of webinars for partners who are working towards implementing the 12 Steps and EDN doula trainers have been asked to offer information about their programmes.

The highlight of our year, however, is the EDN Doula Meeting, bringing us together and nourishing our strong community spirit. In 2023, ninety doulas met in Madrid to share words and hold emotions, as we reconnected after four years apart. Among the topics covered were doula-midwife teams, doula-ing and disability, LGBTQIA2S+ viewpoints, and doula self-care. In October 2024, our gathering will take place in Lille, France.

FINALLY....

Through Connecting, Supporting and Informing, we aim to raise awareness of what being supported by a doula means, as well as of the long term value doula support offers in enhancing wellbeing and promoting a sense of satisfaction with care. We hope qualities of kindness and caring are shared by all those working in the perinatal field. Indeed, we would like readers to imagine networks of care as an ecosystem, with each member nourishing and strengthening all the others, so young families truly feel part of a fully supportive birthing community. In a society which seems increasingly fractured, doulas can help provide a sense of comfort and belonging to help ease people through some of the most complex transitions of life.

REFERENCES

- EDN Summer Newsletter (2020) The Doula Survey Results. Available at: <https://us12.campaign-archive.com/?u=976c046d32bf4ff27b0e035b4&id=bda4dd399e> <accessed 4 June, 2024>
- International Childbirth Initiative (2020) 12 Steps to Safe and Respectful Mother-Baby-Family Maternity Care. Available at: <https://icichildbirth.org/initiative/> <accessed 2 June, 2024>
- Malvasi, A., Zaami, S., Tinelli, A., Trojano, G., Montanari Vergallo, G. et al. (2019) Kristeller maneuvers or fundal pressure and maternal/neonatal morbidity: Obstetric and judicial literature review. *Journal of Maternal-Fetal & Neonatal Medicine*, 32(15):2598-2607.
- Raphael, D. (1973) *The Tender Gift: Breastfeeding*. Englewood Cliffs, N.J.: Prentice-Hall.
- United for Birth: The story of the European Doula Network (2024) Available at: <https://www.youtube.com/@EuropeanDoulaNetwork> <accessed 1 June, 2024>

POSTNATAL EXPERIENCES SURVEY

To participate in this survey, please go to: <https://www.surveymonkey.com/r/YBG7BD5>