



Daymark  
Foundation



# Expanding Doula Care for Black, Indigenous and 2SLGBTQ+ Communities

*Report-Back from July 21, 2022 Convening*

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*"Doulas need and deserve access to rest – it's not about self-care messaging, it's access to rest and recovery"*

*"What if support work was more like a basic human skill, like CPR or cooking?"*

# Introduction

The Daymark Foundation has a mission to transform mental health in Canada, with perinatal mental health as one of its key priorities.

In our exploration of this area, we have been learning that equity-deserving groups, such as Black, Indigenous and 2SLGBTQ+ people, have unique experiences with mental health related to systemic discrimination and intersectionality.

We have also come to appreciate the important role that community-based/radical doulas can play in promoting mental health and wellbeing of clients and families in these communities.

As such, on July 21st, the Daymark Foundation convened a group of 13 doulas and doula-serving organizations (see 'Participants' section for a full list) to discuss the question:

**How can we increase access to doula care for Black, Indigenous and 2SLGBTQ+ people in a sustainable way?**

## Convening objectives

- Further bring to life the unique role that doulas have in promoting and supporting the perinatal mental health of Black, Indigenous and 2SLGBTQ+ individuals and families
- Understand the challenges that Black, Indigenous and 2SLGBTQ+ people face in accessing doula care, and explore ways to make them more accessible
- Explore the lived experience of doulas themselves, and how support for doulas could help enable enhanced and expanded services
- Unpack any tensions that might exist in the path towards scaling.

## Foundational assumptions (agreed upon at the beginning of the gathering)

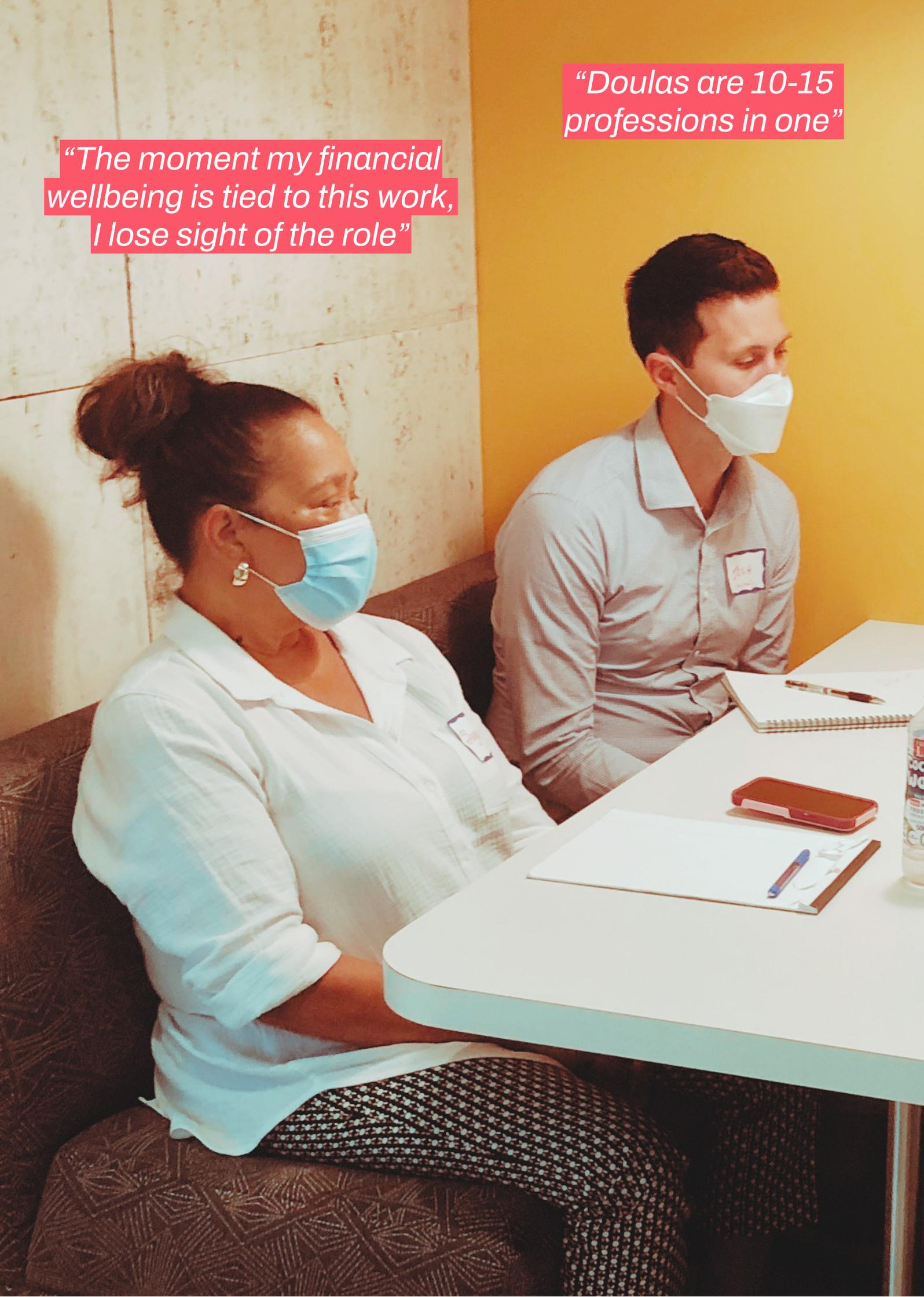
- Black, Indigenous and 2SLGBTQ+ people have unique experiences with perinatal mental health that are highly influenced by identity and systemic discrimination in the healthcare system
- While doulas can provide support to all perinatal people, they have a particular role with equity-deserving clients as advocates, cultural interpreters, and sharers of identity
- Birthwork has been taking place for millennia. There is an inherent desire to preserve the roots and values of the practice.
- When thinking about expanding doula access, we must consider the needs of doulas themselves. Support for carers can unlock potential.
- The leadership for this work needs to come from the communities doulas are trying to support
- A safe(r) (physically, mentally, emotionally and spiritually) birthing experience should be available to all individuals and families, without barriers.

## Terminology

While there is no set terminology in Canada for doulas working with equity-deserving communities, the terms “community-based doula” (which is what is used in the US) and “reproductive justice doula” were used interchangeably at this meeting to distinguish this doula work from more commercial doula care targeted at the mainstream population. It was also recognized that the word “doula” has negative connotations (with the root meaning “slave”) - as such, the term “birthworker” may be preferable in some contexts.

*“The moment my financial wellbeing is tied to this work, I lose sight of the role”*

*“Doulas are 10-15 professions in one”*



# Key Insights

There were several insights that the Daymark Foundation took from this session, some of which may exist in tension with others:

## 1. Support people need support

Doulas often feel the need to be “all things” or “ok” for their clients. The fatigue and burnout that can come from being a care provider, lack of rest and insufficient self-care were raised. Doulas need and deserve access to rest. The virtuous cycle of caring for the people who provide care was discussed.

## 2. We must protect what is radical about doula care

There was great pride in the social and reproductive justice underpinnings of this practice, as well as the traditional teachings that form its foundations. There is a strong desire to maintain the grassroots nature of community-based doula work, as well as have access to decolonial, political, trauma-informed trainings from and for equity-deserving groups.

### **3. Legitimization of doula care is important to support access and sustainability**

Several participants made reference to misunderstanding and disrespect of doulas within the formal healthcare system, which can undermine the care doulas provide. Interprofessional learning opportunities, purposeful presence in healthcare institutions, and accountability mechanisms may make the practice more sustainable at a systems level.

### **4. Community, peer support and mentorship are critical to expanding and sustaining doula work**

Too often, doulas work in isolation. Having a community to lean on, people to swap out with, and peers to debrief with and get advice from goes a long way in keeping people well in this practice. Participants shared several ideas on how to support doula collectives and communities of practice.

### **5. Care should be a basic human skill**

There was some resistance to the professionalization and monetization of birthwork and other forms of doula care. Status quo systems and thinking (narrow focus on workforce integration, professionalization, enclosure, platformization) pose existential threats to radical care.

## **6. Being a community-based doula means living in and with instability**

Most doulas working with Black, Indigenous and 2SLGBTQ+ communities are not making a living wage, and are often reliant on 'side hustles' to sustain themselves. Caring for people with income insecurity can mean sacrificing one's own income security. Increased financial compensation for doulas is key to expansion and sustainability of the practice.

## **7. Money is both a problem and a solution**

While there were some tensions around money as a solution, there was also a recognition that funding was valuable in providing equitable access to clients, paying for debrief and discussion time, enabling wellness practices, and ensuring a liveable wage for doulas. At the same time, there was a critique of doulas who were profit driven, and making money at the expense of others.

## **8. Fundraising is a challenge**

While funding can help sustain doula practices and collectives, there are many access barriers. Professional fundraisers would be ideal as part of a team, but finding and paying them is a challenge. Most doula practices and collectives are not registered charities and therefore cannot issue tax receipts. Applying for funding to foundations and government can be onerous, and relying on a charitable fiduciary can have its own issues.

*"I've been yearning to get in a room and figure out how we can support each other"*



# Moving Forward

Some concepts that we envision would guide the Daymark Foundation's engagement in this area include:

## **Collaborative funding**

Fundraising and philanthropy can unintentionally promote individualism and competition. We seek to create space for doulas and doula groups to work together on projects that benefit the broader doula community.

## **Democratized decision-making**

We are not the experts in doula work, doulas are. We seek to create structures for doulas to help decide where funding goes.

## **Think nationally, act locally**

As a national foundation, we are better poised to support larger projects that can have impact at scale rather than highly localized projects. We are looking for ways for doulas and doula groups to advance a vision for the field at large, without sacrificing relevance and applicability in the local context.

## **More than the money**

In addition to providing funding, the Daymark Foundation is also committed to contributing its time, connecting and convening ability, and project design skills to help bring ideas to life.

## **Transparency and shared abundance**

We do not want to perpetuate any haves/have-nots dynamics. We are looking for ways to distribute our funds for large-scale benefit, in ways that enable participation from any community-based doula or doula group in Canada.

Four project ideas were proposed at the gathering, all of which have merit. In addition to being open to further exploration of any of those specific ideas, we considered a few additional interpretations of those project concepts that would fit with the guiding concepts above.

These are simply examples of how the ideas could take different shapes/forms, which we hope will stimulate further creativity:

### **Doula Fund**

A Doula Fund, whereby a backbone doula organization could serve in a microgranting function. This was represented through a Doula “Alliance” idea, which would provide a network for doulas to come together, self organize, and set shared priorities. The microgranting concept would enable doula organizations and collectives to have access to a pool of funds with minimal paperwork and reporting, within a predetermined scope. The backbone organization would be responsible for overseeing these projects and reporting to the funder on behalf of the Alliance. Funds could be used to support the needs mentioned at the gathering, including wellness, peer connection, debriefing time and more.

### **Free training on community-based doula care**

A free training on community-based doula care that represents the values shared at this session (i.e., radical, political, equity-based, decolonial, trauma-informed). The curriculum would be developed by a group and doulas across the country could be consulted. There could also be a component related to doula sustainability at the personal and practice levels, and perhaps some peer coaching in that regard.

### **Doula Lab or Doula Innovation Fund**

A Doula Lab or Doula Innovation Fund that could be used to surface, design and test out ideas that are meant to advance doula care in Canada. This would be similar to the doula fund mentioned in idea #1, but with a focus on larger projects rather than microgrants.

# Next Steps

The gathering on July 21st was just a start, and the Daymark Foundation hopes to continue collaborating with the reproductive justice doula community as we develop our strategy.

We will be convening a follow-up, virtual discussion on Monday, October 31st and invite other members of the doula community to join the conversation.

Details and registration information can be found here



# Participants

Jessica Johnson	Black Ottawa Connect Ottawa Birth and Wellness Centre
Emma Devin	Brood Care Inc.
Annie Miller	Aunties on the Road
Zainab Sulaiman	HealthConnect One
Anna Balagtas	Pocket Doula Cornerstone Birthwork Trainings
Taylor Kangas	Pocket Doula
Gabrielle Griffith	Ontario Black Doula Society The Seed & Sprout Community (Birth Mark)
Stacia Stewart	Ocama Collective Ontario Black Doula Society Stacia Stewart Doula Services
Cierra Garraway	Ocama Collective
Suzanne Lim	Ontario Black Doula Society
Krysta Williams	Odemin Ghizis Doulas Call Auntie Clinic
Josh Nesbit	Widespread Care
Deniece Bell	Health and physical education professional



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