

Pre-requisites for a successful Doula intervention/facilitation

First the Wife MUST be able to:

1. Be pregnant and she must know that and be looking after herself, assist in the development of the baby with exercise, diet, meditation etc. know conception dates, trimester times and expected birthdate.
2. Have arranged the home for the child and the hospital to attend and made requisite payments etc.
3. Want and request the assistance of the Doula and realise that within a month after the baby is born the Doula will leave and be out of the picture and it's up to her to carry on
4. Do the ground and leg work required for ensuring the efficacy of the Doula's services
5. The Midwife has a direct technical role for say 3-4hours whereas the Doula has an indirect support role for as many weeks and the Wife has an all-encompassing role of mother for her life while the baby has the responsibility to become eventually independent and self-supporting.

Second the Doula MUST be able to:

6. Not do micro managing or prototype development and testing – that is for the wife and midwife
7. Supervise rather than actually do, yet doing where critical e.g. cooking
8. Be able to ask difficult or overlooked questions based on her experience about the compartment of the household and its readiness for baby and to be able to run with baby
9. Be able to suggest and even design (though not implement) system changes for when the baby comes home
10. Along with the wife accept that her role comes WELL after conception and is targeted at facilitating/incubating for a short time (month at most) a host positive context/environment for the wife for the birth itself (that's all)
11. Recognise she is more an EO and not a PA.

Third the Husband MUST be able to:

12. Know of, endorse and facilitate the Doula.

Fourth the Family MUST be able to:

13. Know of, endorse and facilitate the Doula.

Source: as referenced, compiled and written by Paul Wildman paul@kalgrove.com V4 07-03-2016