Labor Support Doula Certification Manual
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Doula Trainings International wants to welcome you to our Labor Support Doula Training and Certification Program.

This packet contains all of the necessary information you will need to apply for certification at the end of our 9-month program.

Once you complete all of the requirements you will receive a certificate from our office. This will give you the qualifications to provide support to families as a certified professional labor doula. You may then provide the letters (CD) after your name.

Please feel free to contact us with any questions during your journey to becoming a certified doula. We wish you the best.

Warmly,

Tara Brooke
tara@doulatrainingsinternational.com
917-282-1699

Gina Giordano
gina@doulatrainingsinternational.com
347-432-7905

Aimee Brill
aimee@doulatrainingsinternational.com
(347) 423-9507
Doula Trainings International define the role of the labor doula as a professional person who:

- Provides care and mentors the mother and family during, before and after her baby is born
- Is non-medical and provides no clinical tasks
- Provides non judgmental support
- Is a companion to the family during the birth process
- Helps gently guide the family to best achieve the birth they desire
- Listens to and supports the needs and wishes of the family for the birth of their choice
- Provides a series of comfort measures during the birth process
- Assists with immediate postpartum care
- Promotes the education of evidence based information and makes this information available to the families the doula works with
- Is a positive resource for new parents in the community in which she works
- Makes referrals to other trusted professionals in the community who may be able to help the family during the birth process
**Labor Support Doula Certification Requirements**

1. Attend a 3-day training with a DTI Trainer. The date of this training starts your 9-month program to become certified. All students MUST complete this training by the end of the 9 months.

2. Provide documentation of attendance at 3 births. Documentation may be done through your mentor and/or with paperwork submitted from the families that you work with. Working with your mentor as a guide from the prenatal period to the last postpartum visit is strongly encouraged. We will count this as documentation if worked out with mentor ahead of time.
   - You must be the doula at each of these births.
   - Only one of these births may be a cesarean birth.
   - All births used towards certification must be after you participate in one of our trainings.
   - You must submit a 600 – 1,000 word birth story from the doulas perspective on each birth that you attend for certification.

3. Participate in our mentorship program that provides students with ongoing support throughout the certification process. This includes mandatory attendance on all monthly calls for continued education.

4. Read and demonstrate a working knowledge with your mentor of all required reading materials. Mentor must initial your required reading list for certification.

5. Observe a Breastfeeding Class.

6. Business Strategy Outline OR attend a business workshop (must be approved by your mentor)

7. Audit a childbirth education series that is pre-approved by your mentor.

8. Construct a resource referral list from the community you plan to work in.

9. Write a 600-1,000-word essay on the role of a labor support doula.

10. Write a 250-750-word essay on your journey and desire to become a doula.
Labor Support Doula Required Reading List

The following are the titles that participants in the labor support doula training must read to complete certification.

The Birth Partner: Penny Simkin

Birthing from Within: Pam England

Pushed: Jennifer Block

Ina May’s Guide to Childbirth: Ina May Gaskin

VBAC Companion: Diana Korte

The Baby Book: Dr Sears and Sears

Dr. Jack Newman’s Guide to Breastfeeding: Dr Jack Newman

Suggested:

The Big Book of Birth: Erica Lyon
The Thinking Woman’s Guide to a Better Birth: Hency Goer
Evaluation of Labor Support

Doulas Information:

Name ______________________________________________________________
Date(s) attended birth ________________________________________________

Thank you for taking the time to fill out this evaluation for your labor support doula. This will assist her in becoming certified.

Please circle:

Did the doula provided overall support for you and your family? Y N
Did the doula answer all of your questions to the best of her knowledge? Y N
Was the doula helpful and supportive of the birth you wanted? Y N
Was the doula able to provide helpful resources (if necessary)? Y N
Was the doula able to be reached when you needed her assistance (phone or email)? Y N

Please answer:

Overall what did the doula do that was most helpful to you and your family?

____________________________________________________________________
____________________________________________________________________

What do you think she could have done better?

____________________________________________________________________
____________________________________________________________________

Name(s) ______________________________________________________________
Phone number(s) ______________________________________________________
Evaluation of Labor Support

Doulas Information:

Name ______________________________________________________________
Date(s) attended birth __________________________________________________

________________________________________________________________________

This document is stating that the doula and her mentor have discussed and evaluated her working relationship with the families listed below.

Mentor name _________________________________________________________
Mentor Signature____________________________________________________
Date _______________________________

Please provide the following information for the families you have worked for. You must get their permission to give out their information as we will be contacting them to discuss your working time with them.

Name(s) ______________________________________________________________
Phone number(s) ______________________________________________________

Name(s) ______________________________________________________________
Phone number(s) ______________________________________________________

Name(s) ______________________________________________________________
Phone number(s) ______________________________________________________

Name(s) ______________________________________________________________
Phone number(s) ______________________________________________________

Name(s) ______________________________________________________________
Phone number(s) ______________________________________________________
Verification of Mentor Program and Monthly Calls

This document is stating that the mentee has maintained a relationship with her mentor throughout the certification process. Please fill out the information and send this to your mentor for her to sign.

Doula’s name ________________________ date: ________________________

Mentor’s name ________________________ date: ________________________
Mentor’s signature ________________________ date: ________________________

Monthly Calls:

Date_________________ Facilitated by:_____________________________
    Subject:_____________________________________________________
Date_________________ Facilitated by:_____________________________
    Subject:_____________________________________________________
Date_________________ Facilitated by:_____________________________
    Subject:_____________________________________________________
Date_________________ Facilitated by:_____________________________
    Subject:_____________________________________________________
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Date_________________ Facilitated by:_____________________________
    Subject:_____________________________________________________
Date_________________ Facilitated by:_____________________________
    Subject:_____________________________________________________

Observation of Breastfeeding Class

Date Attended: ____________________________

Signature of leader: ____________________________________________

Briefly describe your experience:
Attendance of Childbirth Preparation Class

Date Attended: ____________________________

Signature of leader: ________________________________________________

Briefly describe your experience:
Checklist

Forms that need to be submitted for certification

☐ Photocopy of certificate from a Doula Trainings International training

☐ Completed form(s) documenting attendance of 3 births from the families you assisted
  - OR -
  Completed form(s) documenting attendance of 3 births from your mentor

☐ Completed and signed document from your mentor stating that you have developed and maintained a relationship through the process of becoming certified and you have attended all mandatory calls.

☐ Completed form documenting that you have observed a Breastfeeding Class

☐ Outline of business strategies
  - OR -
  Photocopy of certificate from an approved business workshop

☐ Completed form documenting that you have observed a Childbirth Preparation Class

☐ Resource Referral list from your community

☐ Essay about the role of a labor support doula

☐ Essay about your journey and desire to become a doula

* This checklist is for you; it does not need to be submitted with your packet for certification.