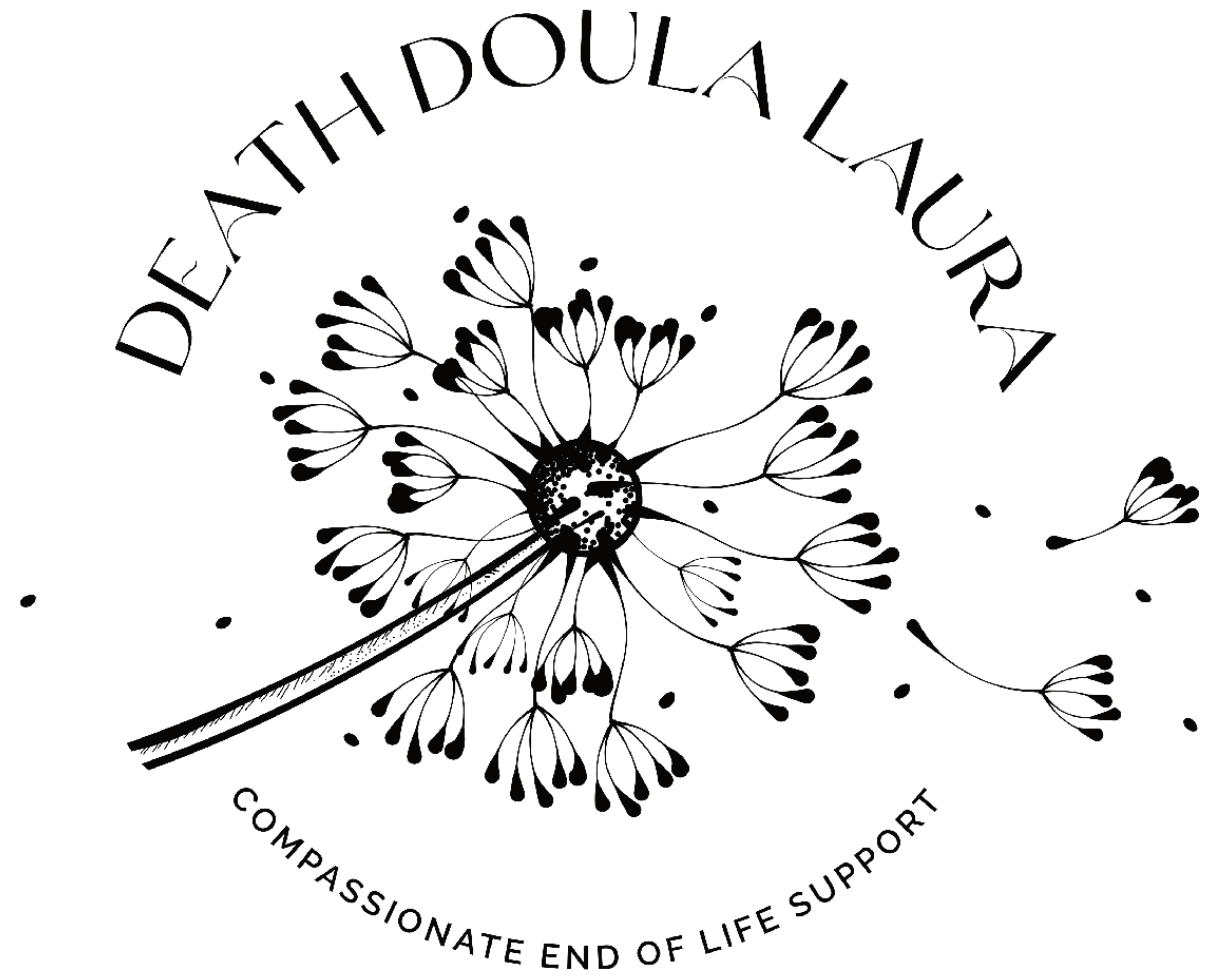
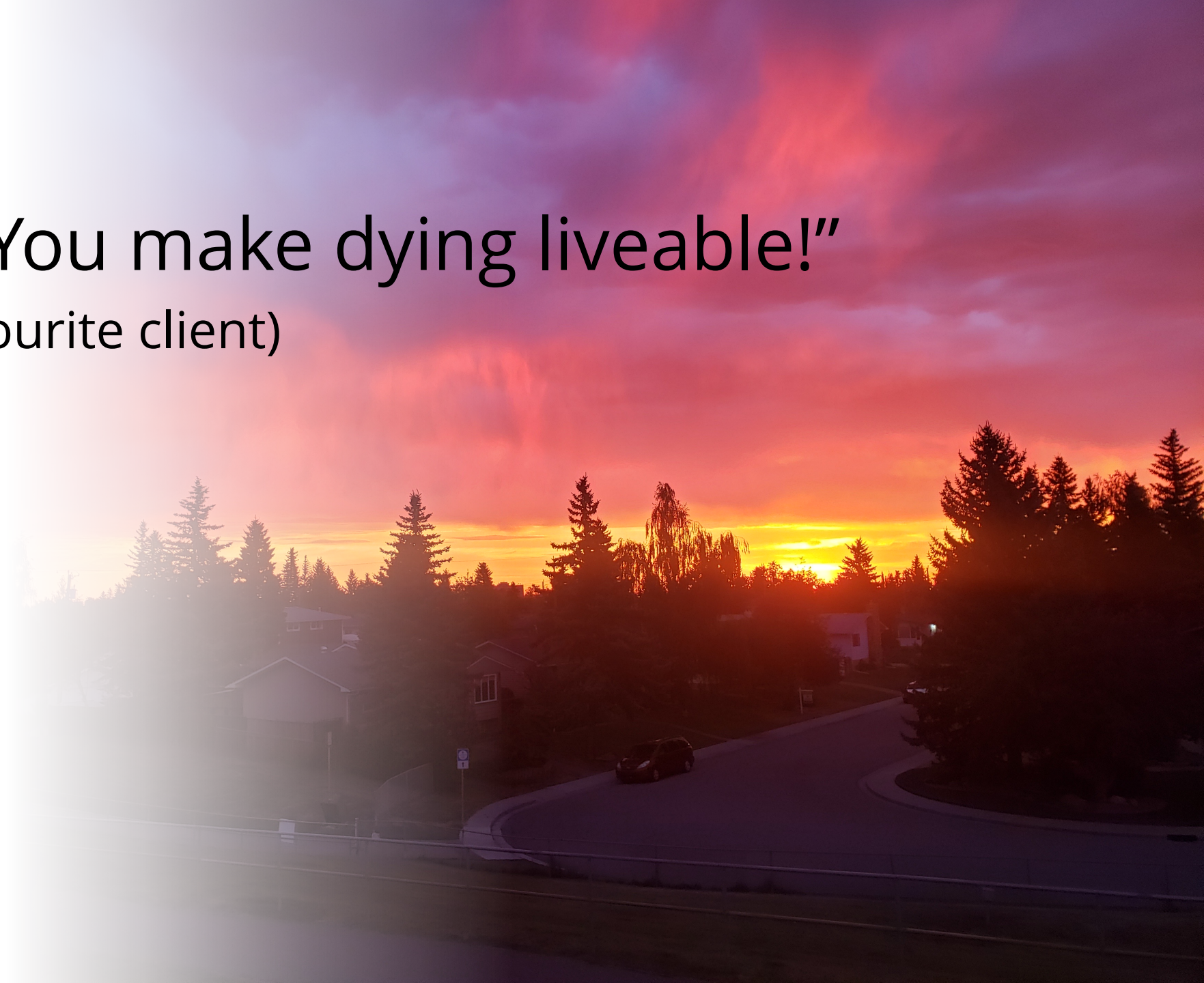


The Compassionate Role of a Death Doula:

The help you
didn't know
you needed



“Oh, I get it! You make dying liveable!”
(quote from a favourite client)






Did you
know?

- Only a very small percentage of Canadians experience sudden death. For most it is a gradual decline
- Death from old age is rarely listed as a cause of death, but this is what is happening as the body wears out
- According to the 2016 Census, 92.3% of seniors live in private households, and nearly nine in 10 surveyed Canadians aged 55 and older (87%) say they want to live at home as long as possible. The reality is that most Canadians die in hospital.



What do We Want?

1. We want to live forever
 2. We want to be fully able and then die suddenly in our sleep
 3. **We want to die at home (NOT in the hospital)**
 4. We want to die pain-free
 5. **We want to die with dignity**
- 

What Challenges Do We Have With Dying at Home?

Isolated living.

Health Care System doesn't cover all costs.

Home not equipped properly.

Not our tradition. Or is it?

Uncertainty about resources.

Our loved ones don't know how to take care of us.

We don't communicate what we want.



The Compassionate Role of the Death Doula (the sand in the jar)

What is a Death Doula?

- A helper (from the Greek root word, meaning female slave)
- A death doula assists a dying person and their loved ones before, during and after death.



Four Realms of Care

- Planning
- Vigil (and respite)
- Legacy
- Grief and Bereavement



What Do We do?

Death Doulas provide non-medical, compassionate support:

- Support for the person experiencing the life-limiting illness or frailty
- Support for family members
- Support for isolated and/or vulnerable populations
- Support during prenatal or infant loss, pet loss, complex grief
- Education - creating awareness of what is likely to come, and how we can best manage it, interpret what might be happening

What Do We Do?

Death Doulas also provide:

- Coordination – assistance in creating a network of support; errands, vigil coordination, etc
- Presence – being present when family members or friends need a break
- Facilitation - Try to help someone have a “good death” – whatever that means to them
- Research – helping to find solutions for enacting final wishes
- Information
- Provide Non-medical care – foot rubs, energy work, a soft place to land

What Do We Do?

Death Doulas also provide:

- Advance Planning – so loved ones have time to grieve, instead of having to make difficult decisions during an emotional time
- Empathy – a realm of love and compassion, without judgement of someone's past or present, without judgement of beliefs, nor desires
- Advocacy
- Ritual - pre/post-mortem rituals that honour loved ones
- Grief and Bereavement Support
- We try to help someone have a good – or even beautiful – death.

Death Doulas Do Not:

- Take on any decision-making
- Provide medical advice
- Work against medical/clinical advice (we support the care team)
- Offer or pass medicine to a client
- Take center stage (we are the “extras” – there when you need us, gone when you don’t!)
- Do physical lifts or transfers or personal care (unless trained formally)



So Why Am I the Sand in the Jar?

Things Your Care Team Doesn't Do:

- Medical practitioners can't do your advance planning with you.
- Social Workers are still limited by a heavy workload and don't have time to help you communicate with your family
- Nurses don't do foot massages or comb your hair
- Pain specialists can't prepare your snack
- Physiotherapists don't want to run errands
- Pharmacists won't help you create a beautiful space
- The medical team doesn't hold space for you – not because they don't want to, but because they don't have time, and they don't have the training.
- Death Doulas are the sand – we work in between all those realms of care and fill in the gaps. We fit in small spaces.

Things You Should Know:

- Death Doulas are fee-for-service private providers
- Death Doulas should NOT work with any other “hat” on, unless there is an agreement, and you are confident that they have the qualifications of the “other hat”
- Certification is not regulated across Canada. Not all training is equal
- Fees and agreements vary widely among Death Doulas
- Ask for a current (within 2 years) Vulnerable Persons Check
- Ask for references



When Should You Contact Me?

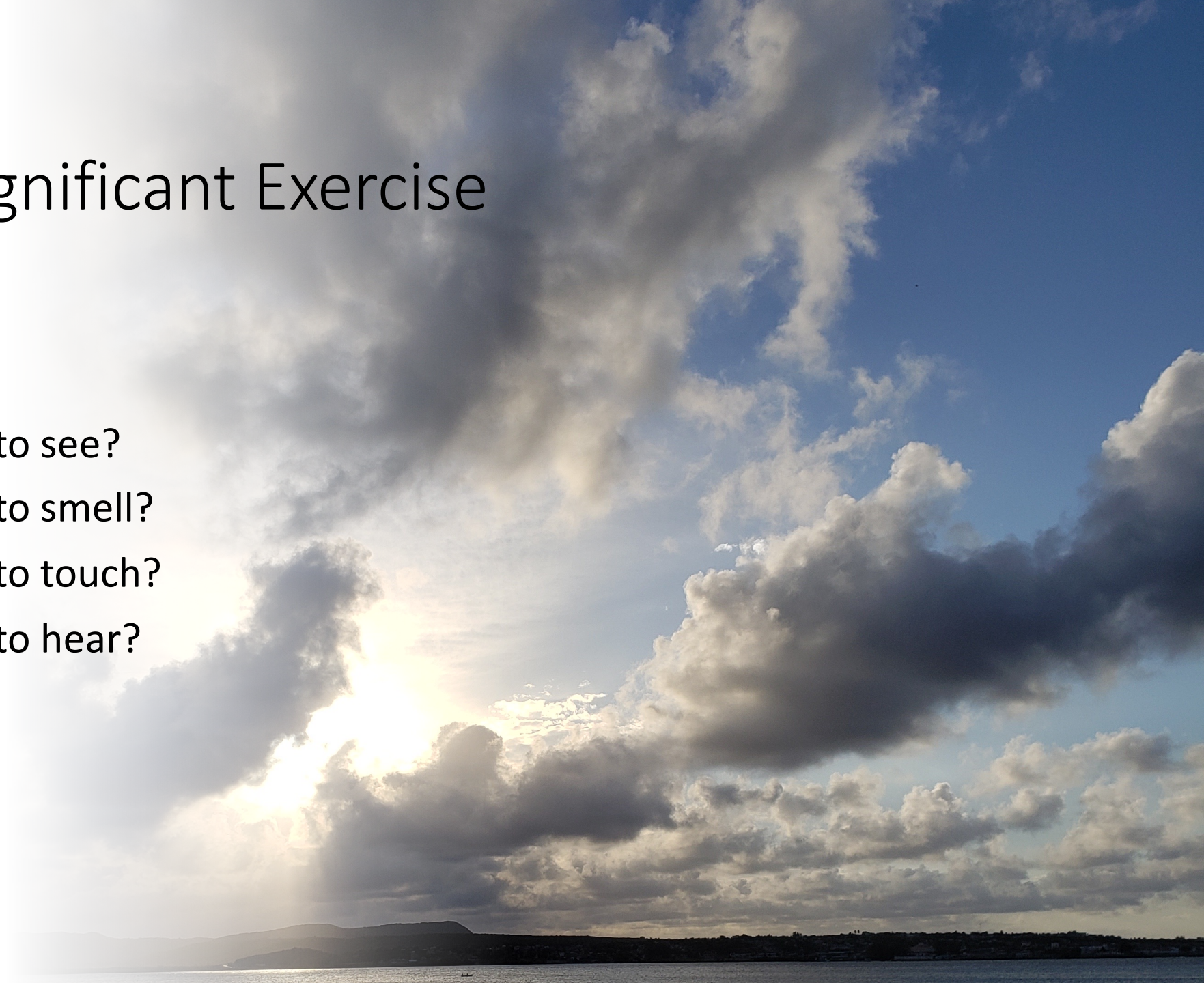
Now!

- I want to know your wishes while you are able to think about them and express your ideas!
- Having plans in place will bring you peace of mind.
- It doesn't matter if you are young or old, healthy or infirm, anxious or not!

A Small but Significant Exercise

At end of life....

- What would you like to see?
- What would you like to smell?
- What would you like to touch?
- What would you like to hear?



Questions



Resources

Short, 11 minute film, “Holding Space”

<https://www.youtube.com/watch?v=l7nvTzDEwDQ&list=WL&index=80>

Home Hospice Association

<https://www.homehospiceassociation.com/>

Interview with a Death Doula (she’s a real character!):

https://www.youtube.com/watch?v=PeM-LPUEL_0