



## Black Women Birthing Justice Newsletter

Issue 6  
[www.bwbj.org](http://www.bwbj.org)

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### Special Edition on Ageism and Birth Justice with

#### **Aminah Barber**

Founder, African  
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Alliance, author, *The  
Black Woman's Guide to  
Breastfeeding*.

#### **Julia Chinyere Oparah**

Professor of Ethnic  
Studies, Mills College co-  
editor, *Birthing Justice:  
Black Women, Pregnancy  
and Childbirth*.

Left: Aminah Barber

## Spring 2015

### Young Moms & Birth Injustice!

By Aminah Barber

Did you know that...

- Young women, ages 12-19 are 2 times as likely to die during childbirth than women over age 20?
- Black adolescents are 2-3 times more likely to become pregnant than other races? *Cont. on p2*

### Message from the Editors

Welcome to our first newsletter of 2015! In the coming year, we will be changing our newsletter format to be more compatible with social media. This means that we are publishing our longer stories as blogs on our website and facebook page, and then sending our subscribers a shorter e-newsletter with links to these stories and more. Please check out our blogs on [bwbj.org](http://bwbj.org), and share widely!

The current issue is dedicated to young and “older” moms and encourages us to challenge ageism in our maternal health-care system and our communities.

*(Continued from Cover Page: Aminah Barber)*

Young mothers of color, especially those under 18, are undoubtedly the most oppressed and disparaged in the U.S. There is a marked stigma and pervading prejudice when one says, “I’m a 16-year old mother,” or, “I’m 14 and pregnant.” It is assumed that these young women have been irresponsible, promiscuous, and are likely uneducated. These beliefs lead to poor prenatal self-care, and low-self esteem, and substandard healthcare offered by the medical profession. Young mothers of color are:

- Most often treated poorly in doctor’s offices.
- Not given all their options when it comes birth choices.
- Rarely educated about using doulas and midwives.
- Least likely to access prenatal care.
- More likely to deliver by C-section.
- More likely to suffer untreated postpartum depression.
- Not given important information to make informed choices about adoption, circumcision, immunization and other issues.

The important daily work done by doulas, midwives, lactation professionals, childbirth educators, birth assistants, women’s health advocates and birth justice workers is vital to improving the birth experiences and outcomes of young pregnant women and mothers!

Get involved. These organizations for and by young women are doing amazing reproductive justice advocacy and support work.

Check them out online:

[Young Women United](#)  
[SPARK](#)

[Fresno Barrios Unidos Teen Success](#)

[ACT for Women and Girls Teen Success](#)

[California Latinas for Reproductive Justice, Justice for Young Families](#)



## **Join BWBJ at the BirthKeeper Summit**

Come to our workshop: **Black Lives Matter: Centering Black Perspectives in the Alternative Birth Movement** and see BWBJ member Ndeya Walker on one of the plenaries.

In our workshop, BWBJ members will highlight priorities for birth activism from black women’s perspectives, share the strategies we have developed, and explore opportunities for multiracial alliances that honor and foreground black women’s leadership.

**BirthKeeper Summit**  
**April 30–May 3**  
**Berkeley City College**  
 Berkeley, CA

**'Healing Birth is  
Healing our Earth'**

**facebook.com/Birthkeeper**  
**birthkeepersummit.com**



## *Black and AMA: Bringing “Older” Moms into the Birth Justice Conversation*

*By Julia Chinyere Oparah*

### **What is Birth Justice?**

**Birth Justice exists when women and transfolks are empowered during pregnancy, labor, childbirth and postpartum to make healthy decisions for themselves and their babies. Birth Justice is part of a wider movement against reproductive oppression. It aims to dismantle inequalities of race, class, gender and sexuality that lead to negative birth experiences, especially for women of color, low-income women, survivors of violence, immigrant women, queer and trans-folks, and women in the Global South.**

**To learn more visit [bwbj.org](http://bwbj.org)**

I’m an AMA mom. You know; an Advanced Maternal Age mom. I didn’t think that I was advanced in age when I got pregnant and I didn’t expect to be treated like a high-risk case. In fact, I felt quite youthful, healthy and well prepared for pregnancy. That changed days after the unforgettable call from my infertility doctor when I heard those yearned for words: You’re pregnant! From my first prenatal visit, my confidence in my ability to carry and birth my baby, and my judgment in becoming pregnant as a forty-one year old woman, were questioned. Rather than a natural experience to be enjoyed and savored, my pregnancy was stressful, exhausting and at times terrifying as a result of medical interventions that I now know to have been unnecessary. I became just another high-risk statistic: a double jeopardy pregnancy—“black and AMA.”

Reproductive technologies and changing opportunities and pressures in the workforce have changed the makeup of pregnant mamas in the U.S. and other industrialized nations. More and more women are choosing to delay child-bearing while they pursue advanced graduate degrees, build a career, or work through mental wellness or family-of-origin issues. While the average age of first-time mothers in the U.S. is 25 years, the proportion of first births to women aged 35 years and over has multiplied nearly eight times since 1970. Back then, only 1 in 100 first-time pregnant mamas were over 35, today it is closer to 1 in 12.

Women over 35 who try to conceive are more likely to have a medicalized journey to pregnancy. Many of us find it harder to conceive and carry a pregnancy full term, due to endometriosis, fibroids, a decline in egg quality and quantity or other reproductive health conditions. Sexual intimacy with a male partner and at home insemination—the typical routes taken by heterosexual and lesbian women trying to get pregnant respectively—may take much longer or not work at all. As a result, we are more likely to have a closely monitored conception, possibly involving fertility drugs or in-vitro fertilization. For black women, this can be particularly difficult because our fertility is not seen as something to be valued, and because we often lack the funds to pay for expensive treatments. As a result, fertility treatments are seen as by many in our communities as a luxury for elite white women. We may also have internalized the idea that pregnancy is supposed to come easily to us as black women



Regardless of how we got pregnant, we are likely to have fears about our pregnancies. Pregnancy websites and books inform us that we are more likely to experience miscarriage, premature delivery and stillbirth, and that our babies may have chromosomal abnormalities including Down Syndrome. Doctors treat us as at-risk, and send us off for "routine" genetic testing that is not required for younger women, and that proves to be inaccurate in 95 percent of "positive" results. If initial tests results are worrying, we have to choose between amniocentesis—the invasive insertion of a needle into the baby's amniotic fluid—and the terror and uncertainty of the possibility that the baby we are carrying has a fatal birth condition. Our society's disablism encourages us to see the life of a child with a birth "defect/difference" as worthless, and to go to any lengths to avoid giving birth to a child with Down Syndrome. As we carry our pregnancies, and try to nurture our hopes and dreams of bringing new life into the world, we are stalked by fear.

So what can you do?

If you are trying to conceive: connect with women/ black women your age who are trying or have conceived; create or join a support group; educate yourself about the large number of women over 35 (and over 40) who have successful pregnancies; persevere.

If you are pregnant: Consider receiving your prenatal care from a midwife who will help you to have a healthy pregnancy without pushing ultrasounds and genetic testing, and will foster your confidence and emotional readiness; work on being the healthiest you can be, enhance your diet, consider a prenatal yoga or fitness class, build stress-relievers into your day; do your research about genetic testing and make an informed decision, don't let a medical practitioner sign you up without knowing about the emotional and physical impact and risks to you and your baby.

If you are a birth activist or birth worker: educate yourself about ageism in the maternal health system and become an advocate for the right for women to choose to conceive at any age when they feel ready; challenge your own assumptions and judgments; educate yourself about genetic testing, amniocentesis and disablism; defend the right for women to choose whether to carry a baby with birth "defects"/differences full-term without judgment or discouragement.

Useful reading: *Testing Women, Testing the Fetus: The Social Implication of Amniocentesis in America*, Rayna Rapp, Routledge, 2000. Oparah is a professor of Ethnic Studies at Mills College and co-editor of *Birthing Justice: Black Women, Pregnancy and Childbirth*.

**Doula's Corner**  
**By Ife Fatiu**



**By Ife Fatiu, doula, childcare provider and youth organizer, Baltimore, MD.**

Two years ago, when I was pregnant with my son, my husband and I decided that we wanted to deliver naturally at a hospital that we had researched. During my pregnancy, I took childbirth classes and studied as much as I could, so that I could be a well-informed mom. I was supported during labor by a doula and friend, Mayasa Telfair, who provided her services for free.

After pushing out my son, I broadened my knowledge of pregnancy, labor and birth. Not only did I want to become a well-informed mom, but I also wanted to be prepared to help other moms that I knew. I recently continued this journey by training as a doula at the Birth Well. I am required to attend three births within two years. This forced me to ask those outside of my circle for the honor of attending their births. In doing so, I wanted to offer free of very low cost services to teenage mothers, single mothers or anyone in need. I was fortunate enough to have a pro bono doula, why wouldn't I want to give back to those who can't afford to pay for this support?



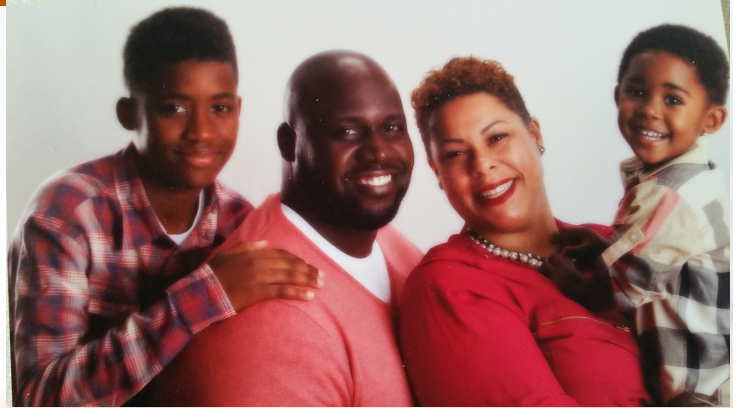
## Not a "Fast Girl": A Teen Birth Story

By Tammy Cloud

I had my first baby at 16. My mom definitely did not want her 16 year-old daughter to become a young mom. My dad let me know that if I was going to have the baby, he wasn't going to have anything to do with me. So I didn't have a lot of support and felt really alone. This was my first year of high school and for the first time, I wasn't in parochial school. A lot of my friends had parents who were very protective of their daughters and didn't want them to be around so called fast girls. I was considered a fast girl because I was pregnant, so it was hard for me even to receive support from my friends. Eventually, my mom came to accept that she was going to be a grandmother. Once I went home with my first daughter, my mom took more of a parental role than a grandparent. She was very supportive but she also took a lot of control and power away from me and wanted to make all the decisions.

At 19 I found myself pregnant again and this time, my partner and I stayed together. We were pretty settled and stable for teenagers. At the clinic where I received prenatal care, I never saw a doctor, only midwives. I was two weeks overdue, and I was supposed to be induced on a Monday. That Sunday night, I went into labor. I went to the hospital but I was only 2 cm dilated, and they said I could stay or go home. We decided to go home and at 4.30 in the morning, I woke my partner and called the midwife because the contractions were coming fast. My midwife was awesome. She was there the whole time. I just remember that woman being there, holding our hand, walking us through step by step.

I really wanted an epidural, because I didn't want to feel the pain I felt with my first. I didn't know I was 8 cm dilated, so I



told the nurse, "I want an epidural." They checked my cervix and said, "No you're 8 cm. No epidural for you." Shortly after that I pushed my daughter out. It was a great experience.

When I had my third child, I was married, but not with my children's father from the first two births. This was my husband's first child, so he was really excited and came to all the prenatal appointments. It was a really great experience to have someone by my side step by step of the pregnancy. I knew coming into this birth that I wanted an epidural. I pushed out my first two completely naturally and I didn't have anything to prove to anybody. So I just wanted this to be painless. So I came in, had the epidural, and had a pain free delivery. But afterward the recovery was awful. It took a long time to get the feeling back into my legs. They put me on a bedpan and I couldn't get up to go to the bathroom. In retrospect, it wasn't what I really imagined it be.

I took time out to go back to school and get my BA. So by my fourth pregnancy, I was considered older in age, and I had to go through a lot of tests. It was really stressful when they kept reminding me of my age, and all the birth defects that my baby could have. I was also overweight coming into the pregnancy, so I had a lot of fear. I needn't have been afraid, because in the end I gave birth to a healthy 8 pound 11 ounce baby boy.

I hope that my story helps people to understand and support teen moms. Young or old, we need emotional support, not judgment, isolation and fear during our pregnancies.

## BWBJ Trains Doulas of Color! By Helen Arega

Last year, BWBJ joined forces with Birth Justice Project (BJP) to birth the East Bay Community Birth Support Project. The trailblazing project provided 16 women of color and formerly incarcerated women a chance to become certified doulas and to learn ancient birth practices in order to heal not only their communities and themselves. Our goal is to educate more families of color about doulas and bring these ancient practices back into our communities.

The training was a safe space for the participants to celebrate their heritages, their ancestors, and their healing. The training took part over three weekends, with the first two focused on becoming birth doulas, and the last focused on postpartum work. Each newly trained doula was



assigned a veteran doula mentor and will attend five births under their guidance as part of the training. They can also participate in an ongoing peer doula support group. The training gives the participants the knowledge, skills, confidence and support to start their own businesses and become self-sustaining.

The trainers: Monnie Efross Reba, a recently retired labor and delivery nurse with years of experience training doulas, Linda Jones, a veteran birth and postpartum doula with decades of experience, BWBJ member and doula Talita Oseguera, and I worked diligently to preserve ancient traditions, maintain integrity and remain true to the purpose of this training. Inviting guest speakers who could inspire and educate these women was a crucial piece in bringing this training full circle. We were honored to welcome former Black Panther Ericka Huggins, educator, midwife and dancer Arisika Razak, lactation consultant and doula TaNefer Lumukanda and midwife, traditional healer and educator Laura Perez.

The East Bay Community Birth Support Project was one of the most powerful and healing projects that I have ever been a part of and I am honored to have shared this experience with an amazing group of women.

30TH ANNUAL .....  
**EMPOWERING WOMEN OF COLOR**  
**CONFERENCE**

Saturday  
**MARCH 7, 2015 ..... WHEELER HALL**  
**UC BERKELEY**

Featured Performers  
**COCO PEILA • SARAH O'NEAL • CHHOTI MAA**

Featured Speakers  
**FAVIANNA RODRIGUEZ • CECE McDONALD • CORRINA GOULD**

..... .....

REGISTER ONLINE AT [EWOCC.WORDPRESS.COM/REGISTRATION](https://ewocc.wordpress.com/registration)

Join BWBJ at the 30<sup>th</sup> annual Empowering Women of Color Conference for our workshop 'Decolonizing Childbirth, Resisting Medical Coercion and Neglect'! To register go to: <https://ewocc.wordpress.com/>



## Coming soon: BWBJ's new book!

BWBJ is proud to announce the Fall 2015 publication of our beautifully crafted anthology *Birth Justice: Black Women, Pregnancy, and Childbirth*, co-edited by Alicia D. Bonaparte and Julia Chinyere Oparah. A powerful book that digs beneath the surface of the statistics in the search for answers and strategies for change, this riveting anthology will transform forever the way you think about childbirth.

Last year, we landed a contract with Paradigm Publisher a social-justice oriented publishing company. We were committed to including the stories of women who have died of pregnancy related causes in the book by reproducing images from Ina May Gaskin's Safe Motherhood Quilt. Unfortunately, our small press could not afford to print color images of the beautiful quilt blocks. So we decided to crowd-fund. We are so grateful to the more than 100 donors who contributed \$5,356, surpassing our original \$3,800 goal!

The funds enabled us to print stylish BWBJ Tshirts, "Ask Me About Birth Justice" stickers and tote bags, which will soon be available on the BWBJ website. In addition, we are planning to take the book on the road, with events in the SF Bay Area, Los Angeles, New Orleans, Atlanta, Miami, Chicago, Toronto, Washington D.C., New York City, Philadelphia, and Portland. Contact us if you would like to help organize or promote an event. In addition, we invite you to host a Kitchen Table Reading Circle. See [bwbj.org](http://bwbj.org) for more info.

**Black Women Birthing Justice NEWSLETTER Issue 6**

**Spring 2015**

## Join BWBJ at the 9<sup>th</sup> International Black Midwives and Healers Conference

To submit a workshop and for registration info, contact:

[ictc@ictcmidwives.org](mailto:ictc@ictcmidwives.org)

or

503 460 9324

Want to submit art, photos, stories or a blog

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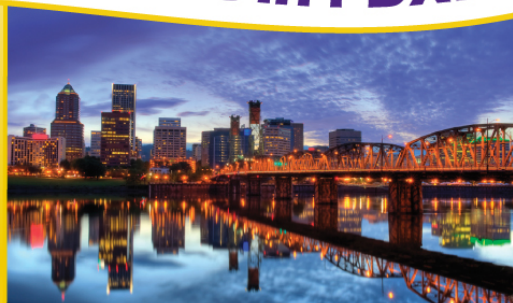
### 9<sup>th</sup> International Black Midwives and Healers Conference "Honoring Our Past, Embracing Our Future"

Join ICTC, Midwives, Doulas, Health Care Providers, IBCLCs, Birth Workers & Communities from across the nation and around the world! Attend amazing and dynamic research-based workshops with distinguished presenters!



October 9-11, 2015

## Join ICTC in PDX!



**Gala Keynote Speaker**  
UmmSalaamah (Sondra) Abdullah  
Zaimah, MN, CNM, CPM

**Special Kenote Speakers**  
Nicole Deggins, CNM, MSN, MPH  
Kimberly M. Heller, DO, FACOG  
Debrah Lewis, CNM, MSc  
JayVon Muhammad, LM  
Maria Valentin-Welch, CNM, MPH, FACNM

For additional details and registration go to [www.ictcmidwives.org](http://www.ictcmidwives.org) or call 503-460-9324  
University Place Hotel and Conference Center • Portland State University • [www.uplacehotel.com](http://www.uplacehotel.com)  
For room rates and reservations • 503-221-0140 or 866-845-4647 • Ask for the "ICTC" Room Block

#### Endorsed By

SisterSong • Midwives Alliance of North America (MANA) • Midwives of Color Committee/ACNM (MOCC/ACNM)  
African Alliance of Midwives • Oregon Midwifery Council (OMC) • International Cesarean Awareness Network (ICAN)  
Doulas of Color • Doula Caribe Internacional • Muslim Midwives, Doulas and Childbirth Educators  
National Association of Professional and Peer Lactation Supporters of Color (NAPPLSC)