



Black Women Birthing Justice Newsletter

Issue #5
www.bwbj.org

In this Issue

Postpartum Doulas Understood

Kimberly Durdin

•

Doula Work Is Tradition

Nilijah Brown

•

Doula's Corner

Yhanni James

•

A Birth Story

Aniesha Sapp

•

Birth Justice in Action

•

BWBJ offers Free Doula Training



Celebrate! May is DOULA MONTH!

Read how a personal
journey in Ghana led
Nilijah Brown to
Doula work, pg 3.

*Nilijah and daughter, Anu
(left)*

Spring 2014

Postpartum Doulas Understood

By Kimberly Durdin, IBCLC, Doula

Although the role and meaning of a “doula” is becoming more recognized by the general public, most people assume that a doula is used primarily for labor and birth support.

A **Postpartum Doula** is support for the family *after* the baby is born, not just mom. (*Continued on page 2*)

Message from the Editors

In May, doulas around the world are celebrated for the amazing work they do supporting mothers and their families through the birth and postpartum process—at home and in hospital settings. While doula services are reemerging in communities of color, they are still largely underutilized in our birth experiences. The Spring issue of the BWBJ newsletter is dedicated to the influence and power of doulas. We launch our doula training program and encourage you to find a local doula training to expand your own knowledge and help women in your community. This issue will also help to inspire you to Take Action Now in upcoming legislation on important issues that could affect you or someone you love.
~Aminah Barber & Jillian Faulks-Majuta **BWBJ Editors**

(Continued from Cover Page: Kimberly Durdin)

In many traditional cultural beliefs about the postpartum period, women were given a period of rest after childbirth to heal, regain their strength, nurture and care for their baby. In order for this to happen, other members of the community would do their part to care for the new mother, many times, for up to 40 days, so that she could care for her baby and recover from the birth experience. Modalities such as postpartum massage, belly-binding, herbal baths, special foods, and placentophagy accompanied with rest and relinquishment of any other responsibilities the mother may typically have (such as working, care for household and older children, cooking, etc.) were a part of this healing scenario.

One trend in American culture has been the use of “baby nurses” or “night nurses” to support a family postpartum. Baby nurses and the like are trained to care for the baby, postpartum doulas care for the mother. Although there are situations where a baby nurse may be more appropriate for a family to employ after birth, many families are not aware of the unique role of the postpartum doula and could benefit. The postpartum doula’s role is to educate, empower and support the health and healing of a new mother, so that she can truly step into her role as a new mother whole and complete.

Today’s postpartum doulas employ many of the same healing modalities that have been used over the ages. Each doula is as individual as the families that they serve, bringing their special abilities to their work. Doulas are often women who hold other degrees and certifications in a variety in areas such as massage therapy, family counseling, cooking, acupuncture, placenta preparation, breastfeeding education, yoga, breath work, herbalism, Reiki and more. When searching for a postpartum doula ask about any special talents she incorporates into her practice.



Kimberly Durdin, (center) Doula, IBCLC, Student Midwife & mom to the Durdin Clan.

Kimberly is a Student Midwife and Director of Lactation Services and Parent Education at The Sanctuary Birth and Family Wellness Center in Los Angeles, CA. She is the mother of six ranging in ages from 22 to 2 years old. Her birth experiences range from having a Cesarean birth, followed by home births of her subsequent children. She credits her children for guiding her into service of helping parents-to-be during the childbearing years. Kimberly prepares couples for their journey to birth and parenting in her unique childbirth class series she created for the home birthing and birth center mother and partner. Kimberly also trains birth and postpartum doulas with an extensive curriculum she developed through the wisdom she has gained from her many years of supporting families.

Doula Work is Tradition

By Nilijah Brown

My awakening to birth injustice began thousands of miles away from my hood of Baltimore city where we see some of the poorest birth outcomes in America. It happened in Ghana, West Africa.

I moved to Ghana in 1999 after working for years as a midwifery apprentice. I felt a strong desire to learn traditional childbirth rituals and customs from African midwives. After a year in the bush, I suddenly became severely ill. My friends took me into town to the military hospital, considered Ghana's finest medical facility.

I had to pay the equivalent to \$5 US to enter the hospital. As I waited to be seen, I witnessed a woman in labor being turned away because she didn't have the entrance fee. She begged and begged but the soldier would not receive her. I wanted to help desperately but I barely had the energy to breathe.

There were other women around but they supported her in the only way they felt they could...begging the soldiers to let her in. Meanwhile, the woman continued to labor alone. We could hear her screaming in agony. Hours later I saw 3 soldiers carry her body away. We heard the other women crying.

In that moment my soul declared that if I lived to be strong again, I would make sure I educated as many women as possible on how to support a birthing woman.

We need women to stand against birth injustice from many angles. Birth injustice is not only a political issue it is a cultural and spiritual issue. Yes we need voices to vote, right letters and speak out against health disparities so that all women have access to care when needed, but we also need to return to the ways of women.

It is not our nature to look outside of our circle of sisters for support in bringing our babies into the world. There was a time when all the village women knew about birth—she might not be a midwife but she knew what to do until the midwife arrived. We have lost that tradition.

Even in indigenous communities women have become disconnected from our innate knowing. We have surrendered our births over to modern medicine. Collectively, we no longer view birth as a natural, normal process, a rite of passage, but a medical emergency.

I encourage all women to take a doula training course; even if you have no intention to work as a doula professionally. You never know when someone in your community will need your support. Here is a list of a few really great culturally conscious doula trainings.

www.ictcmidwives.org

www.thebirthwell.com

www.mamatotovillage.org

Nilijah Brown is a mom, Doula Trainer, Certified Pregnancy Yoga Instructor, and owner of the MD Birth Network.

For information on doula training in Alameda County, CA, see page 7.



Doing Our Part to Make a Difference in the DC Metro area

By: Aza Nedhari

In low-income environments, motherhood often arrives too soon, limiting choices and perpetuating cycles of poverty. The DC Metro area has a cesarean birth rate of 34% and perinatal statistics show in an average week in Washington, D.C.: 176 babies are born, 18 babies are born to teen mothers (ages 15-19), 24 babies are preterm, 18 babies are low birth-weight, 2 babies die before their first birthday. In an average week in Prince Georges 234 babies are born, 34 babies are born preterm, 24 babies are born low birth-weight, and 3 babies die before reaching their first birthday. In an average week in Baltimore County 190 babies are born, 23 babies are born preterm, 16 babies are born low birth-weight, and 1 baby dies before their first birthday.

Research indicates that children of teen and lower income mothers are at greater risk for low-birth weight, preterm birth, infant mortality, and childhood illness due to racial disparities in socioeconomic status, poor nutrition, stress, and infection. The healthcare crisis for these women and their infants persists in the face of technological advances; therefore, we believe the disparities that exist within maternal and child health in the Capital Region's urban core can be mediated through the promotion a Doula and Midwifery Model of Care, which offers a holistic, cultural framework for understanding pregnancy and birth.

By fostering community supported parenting, Mamatoto Village is working to improve these health disparities, and seeks to improve the perinatal health outcomes for underserved and high-risk women and babies in the National Capital Region through professional training for birth workers of color. This is an educational and outreach initiative, designed to create highly skilled and culturally competent Community Birthworkers who will aid in preparing expectant teens and lower socioeconomic women to experience pregnancy, birth and motherhood in an empowering, healthy and self-determining way.



Doula's Corner

*Yhanni James
Mother | Doula*

*by Kimberly Durdin
(Yhanni's mom)*

This is Yhanni, my first-born. At 22 two years old, she's an amazing mom to Judah, and partner to Bobby.

Here, Yhanni is preparing a placenta for encapsulation. I am proud to say I recently trained her to be a postpartum doula.

A local midwife, Allegra Hill, taught Yhanni.

She's an amazing asset to the birthing community in Los Angeles. Even my clients at the Sanctuary have come to love her spirit, and wisdom.

Never too Late: A Birth Story

By Aniesha Sapp



I have had three pregnancies and I now have three children. I hadn't heard of a doula before my third pregnancy and most people would have assumed that by the third child it would be old hat for me. Not so much! With my second child I ended up with a C-section, which was not what I wanted. My daughter is now seven years old and I was still emotionally angry about what had happened to me.

I was determined with my most recent pregnancy not to let that happen again. I began asking questions to friends who had babies about pregnancy and delivery. One friend told me that she had a doula, and I inquired what that was and why would you opt for that versus a doctor. She told me that the doula was simply a labor coach and helped the mom get through the various stages of labor. I was intrigued but not convinced if I wanted someone other than a doctor.

I attended a Birthways meeting where I heard more about doulas and what makes them different from doctors and midwives. I met three doulas at the meeting and was able to share my story about my last labor and delivery experience.

The doulas at the meeting confirmed or understood my anger and reassured me of several things: most likely the C-section that I had was not medically necessary; there was nothing wrong with me as a woman or with my body; that if I wanted a natural birth that I would be well within my rights to insist on it with my medical care person. They also told me about a documentary, "The Business of Being Born".

I decided to hire a doula, Linda Jones, after I got a recommendation from a friend, who had used the same doula for most of her labors and deliveries. I felt understood and supported when I met with Linda and believed that she would have my back. For me I was looking for a sista-friend-auntie to be there when I was in labor. She could call whatever shots were necessary and make suggestions and recommendations to me and the medical "professionals" while I was not in the state of mind to do so for myself.

During labor, the doula could see that the position that I was sitting in was making the labor pain more intense/uncomfortable, so she told me that the baby didn't like it and that I should kneel or stand which helped decrease the sharpness of the pain that I was feeling. Also she informed me that I should not be in a rush to meet the expectation of the medical staff "doctors" and that they can wait. Since I had called my doctor to inform her I was in labor I felt that I needed to get there ASAP so that they wouldn't be just waiting. She informed the nursing staff of my stages of labor and asked for remote monitoring equipment that would allow me to move around.

A Birth Story *continued* by Aniesha Sapp

She also voiced my desires to not have multiple vaginal checks while I was in labor. I felt reassured that the labor and delivery of this baby would be more in line with what I had wanted but didn't realize with my last two pregnancies. No invasive vaginal checks, no use of labor inducing drugs, no pressure from the medical professionals. I was able to get through labor and deliver and Linda came and assisted with the breastfeeding as well. My husband said that having our doula, Linda, there was like having a personal guide while you are in a foreign land. She knew the language, knew the locals, knew the terrain, and maneuvered us through.

East Bay Community Birth Support Project: Free Doula Training in the East Bay!

Are you interested in supporting women of color and low-income women to have an empowered birth experience?

Do you live in Alameda County?

Are you a woman of color, living on a low income?

Have you been incarcerated and are you looking for a new direction in your life?

Do you want to explore a career as a doula?

BWBJ is excited to offer FREE DOULA TRAINING through its new partnership with the [Birth Justice Project](#) and UCSF. The program aims to empower women, to build new skills, create new job opportunities and build a cohort of women of color and low-income doulas. All trainees will be assigned a senior doula mentor and must complete volunteer hours at a local hospital or birth center. Childcare, travel money and training materials will be provided. Formerly incarcerated women willing to participate in research on the impact of the training will also receive financial compensation.

We need your help! Please spread the word and help us recruit trainees and doula mentors. Training will take place July 11-12 and 18-19, 2014 with a total commitment of 7 months. If you would like to participate in the training, help with recruitment or participate as a paid doula mentor, please contact Sarah McCoy-Harms at sarah.mccoyharms@birthjusticeproject.org or [415-562-4784](tel:415-562-4784). For more information on this project, please email bwbj.info@gmail.com.

Upcoming EVENTS

Sharing Circles
East Oakland

May 24
June 28

Childcare and refreshments
provided.

To reserve a space:

(510) 430 3163 or

bwbj.info@gmail.com



Want to submit
artwork, photos,
stories or articles?

Email us:

bwbj.info@gmail.com

Call: (510) 430-3163

Like us on Facebook and
follow us on twitter

[@birthingjustice](https://twitter.com/birthingjustice)

Doulas & Social Justice in the News

Birth Justice Workers in the Community by Crystal Azul

I grew up hearing stories about births and deaths from my mom, who was raised in a poor, evangelical home in Mexico. My mom would tell me the story of her nephew Esteban's birth. It happened during the middle of a hurricane, the water had risen a foot into the tiny house, and my mom's cousin was in active labor. Baby Esteban, nearly having a water birth, came out of his squatting mother like a slippery fish, caught by my mom's capable hands. When my friends started having babies, I became actively interested in birth justice work, especially after hearing their stories of unnecessary interventions... **Read more...**[*\(qt\)POC Birth Justice Workers and Community*](#)

Ebony Magazine Features Doulas

While using a Doula, Midwife or other birthworker during pregnancy and delivery may be the norm for some, for many African American women, doulas are a relatively new addition to the birthing scene. Check Ebony Magazine's feature on Black Doulas, Eryka Badu's experience using doulas, and how the author reflects on her own non-use of a Doula. **Read more...**[*Doulas and Black Motherhood*](#)

ICTC Full Circle Doula Training

The ICTC Full Circle Doula Training Intensive is a 29 hour birth companion training program that includes cultural awareness and sensitivity, infant mortality prevention, high risk pregnancies, medical terminology, prenatal support, labor and birth management, professional business development, and traditional/spiritual birthing practices. Graduates receive: provisional certificate & ongoing support. Email doulas@ictcmidwives.org to register.

Birth Justice in Action!

BWBJ is committed to advocating for the rights of low-income women and women on welfare to make healthy, non-coerced, self-empowered life decisions. That said, please read the following California legislation BWBJ supports. These Bills may impact you, family members or friends. Take Action Now—call your local council(wo)man, write a letter, lobby, or contact BWBJ to join us as we continue our work to support birth justice, which continues well beyond delivery.

Invest in California Families, repeal the maximum family grant (SB 899) will repeal California's policy of denying financial support to babies born while their families are receiving CalWORKs basic needs grants. The only exceptions to this policy, known as the Maximum Family Grant (MFG) rule, are for rape and the failure of certain long-acting contraceptives specified in the law.

BWBJ knows that every family, no matter their income, deserves a fair chance to thrive and despite how a child came into this world, they have a right to resources to live a healthy life. We support SB 899, repealing the maximum family grant because the state should not mandate that one child in a CalWorks home should receive less than another.

The Diaper bill (AB 1516) would provide an \$80 per month supplement to eligible children receiving public assistance and would create a public-private partnership fund to help facilitate the distribution of financial donations and diaper contributions to the neediest of families.

Every parent or guardian who has cared for an infant knows how vital diapers are. BWBJ supports AB 1516, The Diaper Bill because every person, no matter their income, should have the dignity of being able to diaper their child. We also hope, that in the near future, every person will be granted the opportunity to use the diapering method of their choice including cloth and chemical free diapers.

SB 1135 will clarify the prohibition of sterilizations for the purpose of birth control on individuals involuntarily confined or detained under civil or criminal statute while creating and enhancing safeguards, transparency, and accountability for sterilization procedures deemed medically emergent or medically necessary.

The environment in prison is coercive and incarcerated people have few choices. California has a long history of eugenics and has sterilized over 20,000 women since the early 1900s. BWBJ supports SB 1135 to ensure sterilization is not conducted in the coercive prison environment for the purpose of permanently ending an individual's chances of having a future pregnancy.

Visit

<http://www.blackwomenbirthingjustice.org/#!/about3/cjh0>

for more information!