



Black Women Birthing Justice Newsletter

Issue #4
bwbj.org



Special New Year
Edition! Featuring Birth
Justice Elders:

Shafia Monroe, CNM,
CCE, President and
Founder of the
International Center for
Traditional
Childbearing (ICTC)

And

Nonkululeko Tyehemba,
CNM, President of the
Harlem Birth Action
Committee

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Breastfed is Best Fed!

By Shafia Monroe

Breastfeeding is the number one gift that a mother can give to her infant. It's good for the baby and it improves her own health. Breastfeeding reduces infant mortality, enhances mother-infant bonding, increases newborn health, and lifts the postpartum experience for mothers. The Black community has a legacy of breastfeeding; tracing back to our African ancestry where breastfeeding was the norm with weaning taking two-three years. (*Continued on page 2*)

Message from the Editors

Have you ever nursed your baby in a mall, park or place of worship and received looks of discomfort or judgment? Have well meaning friends or family asked "why don't you just use formula" when you were juggling pumping milk with a full-time job? We all know that "breast is best" for baby and mama— breast-milk builds baby's immunity, protects from allergies, lowers the risk of infant mortality and helps mama lose weight, avoid the baby blues and save money. But that doesn't mean its always easy to nurse for the two years recommended by the World Health Organization, especially for black women who have unique barriers to breastfeeding. In this edition, we invite lactation warriors to share words of inspiration for all nursing mamas and their loved ones.

(Continued from Cover Page: By Shafia Monroe, CNM, CCE)

Black women were the last to abandon breastfeeding in the US, with numbers dropping in the late 1950's. Subtle and overt messages were used to discourage breastfeeding and to encourage formula feeding. Fortunately breastfeeding rates are gaining again in the Black community but the entire community is needed to continue its resurgence. Black women should strive to breastfeed for the minimum of 12 months or more to reduce the risk of breast cancer, ovarian cancer and Type II Diabetes. The mother should continue breastfeeding until the anterior fontanel (soft spot) closes, which is between 12-19 months after birth.

As a mother of 7 breastfeeding babies, who worked and went to school, breastfeeding saved me and my baby's life. It reminded me to sit and relax with my baby, eat good food, drink water, herbal teas and juices, and rest. My partner and children supported my breastfeeding by bringing me water, putting my feet on a stool and doing dishes, so I could do my important job of nursing my baby.

On a spiritual level, we say that God or the Creator doesn't make mistakes, so the fact that women can make milk to feed their baby is by divine design. It is a miracle! And I am proud that women can sustain their baby's life independently. It's a pretty powerful thing. Breastfed is best fed.

The Benefits of Breastfeeding

- * It's convenient and economical
- * It helps mother lose the baby weight
- * It's sexy (there's nothing wrong with that)
- * It can delay the menstrual cycle from 6 months to 1 year, which helps to heal anemia

www.shafiamonroe.com



Steps to successful breastfeeding:

1. Commit to breastfeeding: believe that you can and will breastfeed.
2. Be patient, it takes 3 -6 months to get the hang of it.
3. Join a breastfeeding support group.
4. Drink mother's milk tea.
5. Breastfeed as often as the baby desires.
6. Let your baby guide the breastfeeding pattern.
7. Have as much skin-to-skin contact as possible while breastfeeding.
8. Have the baby sleep in your room or bed if it is safe to do so.
9. Keep a healthy diet and breastfeed frequently.
10. Enjoy the experience.



Breastfeeding and Social Justice

By Kathi “Aminah” Barber



If we dive into breastfeeding in the U.S., social injustice raises its ugly head. Breastfeeding rates in the African American community are the lowest of all races. When you add a \$2 billion a year infant

formula adversary to the mix, the breastfeeding barriers in our communities are compounded. These rates are due to several factors including our history, the mass marketing of infant formula and cultural barriers.

Before slavery, Africans revered breastfeeding and considered breast milk a blessing. Breastfeeding, natural childbirth and midwifery practices were all normal aspects of our lives. During slavery, black mothers were often separated from their infants and were only able to breastfeed for short periods of time. They were also forced to serve as wet nurses for white babies, which has created cultural barriers for many women today. In the 20th century, scientists and physicians began to promote baby formula based on cow's milk, leading to a steady decline in breastfeeding until the 1970s. From the 1970s on, public awareness campaigns were developed to promote the importance of breastfeeding for both the mother and her baby. Today, most breastfeeding support that targets African American women is funded by Women, Infants, & Children (WIC): a government agency which provides programs for breastfeeding support,

marketing, and education. However, these programs fail to meet the needs of middle income African American women who have the same breastfeeding rates and poor health outcomes as the low income women that WIC serves. Despite government support, breastfeeding rates have been extremely slow to change. According to a survey carried out by Centers for Disease Control and Prevention (CDC) in 2008, the rates of Black women breastfeeding their newborns has been steadily increasing: approximately 59% of black women breastfed their child in 2008. Nonetheless, our community still lags behind other races in breastfeeding our infants past the age of six months.

When the topic of breastfeeding and African American women is tweeted and blogged, women ask: “Why is this an issue in 2013?” Progress in the practice of breastfeeding has been incredibly slow, but breastfeeding organizations within the Black community are beginning to create change. A few leading activist organizations include Soul Food For Your Baby (SFFYB) out of Los Angeles, Uzazi Village in Georgia and Reaching Our Sisters Everywhere (ROSE) from Georgia.

African American lesbians, bisexual women and transfolks are particularly marginalized within breastfeeding advocacy. Queer parents are habitually left out of traditional breastfeeding support groups and almost always disregarded in breastfeeding literature and advertising. Same-sex couples rarely appear on brochures or breastfeeding education videos, and when they do, they are rarely women of color. For transgender dads of color, intolerance for gender diversity creates even larger barriers.

How can we bring about change? There is no easy answer. Each of us can do something: reach out to the communities discussed above, Tweet, Facebook and blog about this issue. Make a stand, quietly or loudly, and connect with BWBJ.



MaMa Wit

The BEBOP of BREASTFEEDING

By: Nonkululeko
Tyehemba, CNM

Breastfeeding embodies so many facets of the unique experience that occurs between a mother and her baby. In the beginning it is challenging, yet durable. But it is also beneficial, healthy, nutritious rewarding and empowering. It requires patience, calm, work, ingenuity, consistency and love.

The Bebop of Breastfeeding represents the what, the how, the why, and the where of the emotional and hormonal process that occurs between mother and child. Breastfeeding is so-o-o important in the health, development and well being of this dynamic dyad. The advantages completely outweigh the disadvantages. Like learning anything new, there will be hurdles to jump through. But unless you are one of the new mothers with a really unusual condition or situation, you can breastfeed successfully.

Here are a few tips to either get you started or remind you of the journey you are about to embark on:

1. Try your best to be around mothers who are or have been successful breastfeeders.
2. Believe in yourself and TRUST your body. It will work for you every time.
3. Be Patient, Be Patient, BE PATIENT. This is not a twitter or texting experience and so it takes a little work, like learning a new dance. At first you may think that you can't do it but don't get DISCOURAGED. Hang in there.
4. Come out of your head and don't try to over analyze the experience. Don't ever come to the conclusion that your baby doesn't like it. If you come to that conclusion, you have lost before you've begun. Your baby loves every thing about you; he/she just has to get used to you on the outside.

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Doula's Corner

Creating a Sacred Space for Birth

By: Gina Mariela Rodríguez
Mother | Writer | Doula
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Whatever your religious or spiritual beliefs may be, honoring Ancestors and Divine Presence may be a part of your journey from conception through birth.

Take time to think about your birth space. Are there any special photos, jewelry, mementos, scents, that you feel would help maintain healing energy? Do you prefer candlelight? Do you imagine listening to music, or chanting? Who do you want to share the space with you? How do you feel about medical staff, other than your provider, being present during your labor and birth? Would you like to see or take your placenta home? For many birthing people, these are profoundly spiritual questions.

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My Angel: A Birth Story

By Bethanie Hines



Birthing Mateo was my medicine. Whatever you need to work out will be worked out when you give birth. For me it was: can you just let people love you, and trust that you're good enough and you're worth it? When I could cry and lean into that, then my labor started.

When Mateo came out he weighed 5 lbs 8 oz. They laid him on me for a little while. Michael, my partner, was crying really hard, and I was shaking. And then they took him away and put him under these bright lights. I just didn't want him to be exposed to that energy. So my placenta is on the counter, my honey is crying and I just feel so spread thin. And then we found out that he was born with a cleft lip and palate. Usually you'll find out in an ultrasound if your baby has it. He has a line above his lip, and basically when he was 13 weeks, it didn't fuse. In South America where it's very prevalent, there's a hole and the teeth come out because there's a separation between the top lip and the nose. And there's also a hole in his

palate. So he can't breastfeed and I have to pump milk.

All of a sudden this beautiful experience of opening and vulnerability became this emergency situation. It just felt like I did something wrong. I'm sitting here in shock while the nurse is just talking and speculating about my child. I stayed at Alta Bates Hospital for two days and everyone who came in said: *This is the cleft lip/palate child* and that became his identity. It's a really common birth defect. But it just became that *that* was what he was about. It was so scary and I was so raw. And I was feeling for him because he's little. I tried to breastfeed him and I couldn't feed him, so the first week, he was in survival mode.

You know, you expect to have this perfect baby. It's so confusing, because he is perfect, but I expected him not to have that issue. I feel bad that I had mixed feelings about it initially. He didn't have to go to ICU. He was small but I could take him home.

I can't breastfeed him and so I pump eight times a day. He's going to have to get surgery at nine months. He's just little, and he has to get cut which makes me sad. But after he gets the surgery, he will be able to breastfeed. So the birth went how I wanted it to, but afterward I wondered: *did I do something wrong to make him like that?* I wanted to blame myself, and for my partner and me, it was hard not to take it personally. There were all these mixed feelings and at the same time, he's my baby and I love him. He chose us to be his parents and we obviously have the capacity to love and care for him, it's just not how I expected it to look. That's the metaphor of the birth plan: the birth plan is what you envision but then you have to roll with whatever comes. This is the form he came in and I love him. It's almost as if he's more solid than we are as parents. For him, it's: *this is who I am*. It was our baggage around perfection that was the problem. So I am a milk pumper. I've pumped over 400 times since he's been born.

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A Birth Story *continued* by Bethanie Hines

I have to pump every three to four hours and my freezer is full of milk. I've spent over 100 hours and I'll have to do that until he's nine months old. That's just what I have to do.

My birth story was amazing, but it's been overshadowed by: *oh my god, is he getting enough food? Is he going to thrive?* One lactation consultant told me that her daughter had a cleft lip and palate and died. And I was so scared, because I had never been so raw. Your baby is like your organ outside of you. And people are coming in, poking and prodding, and telling you this and that. He's doing well now. He's almost 9 lbs, so he's getting fed, and I'm really committed. If I have the milk, I'm going to give it to him.

You just want your kid to be the best and thrive. I'm at Children's Hospital often. The cleft lip affects his hearing so they thought he might be deaf and he had to have all these hearing tests. That was really scary. And he had a lump so they think he might have a hernia, which is another surgery. He's just arrived and he already has to deal with so much.

But this is making my feet touch the ground. I just feel so humbled and fortunate. It's just breaking me open. They should have a before and after about what this does to you. And the love it brings... It's just the most beautiful thing ever.

**Doula's Corner *continued***

by Gina Mariela Rodríguez

Make a list of what you prefer and have a conversation with your (birth) partner, provider, and doula about your choices. This conversation may feel uncomfortable, especially if your provider or doula is not familiar with your spiritual or religious beliefs. Trust your gut. Finding and working with a provider that is respectful of your practice is essential— and remember, you can always, at any point in your pregnancy, change providers. You have the right to making empowering choices so that religious convictions, prayer, meditation, and general spiritual wellness are part of your birth, wherever you bring life into the world. Blessings to you and your sacred journey. Ashé.

Coming Soon! BWBJ is working with **The Birth Justice Project** to provide doula training in Oakland, targeting women of color, low-income women, and previously incarcerated women. For more information, contact info@bwbj.org.



Current Events

AB 1308 Passes! Greater Access to Midwives for California Women

As of January 1st, 2014, midwives can now accept Medi-Cal coverage, offering low-income mothers-to-be the option of having a home birth without the supervision of a doctor. Previously California midwives struggled to find a physician willing to offer oversight for out-of-hospital births. Other newfound freedoms for California midwives include the authority to order ultrasounds, drugs, and lab tests for their clients. To learn more about AB 1308, visit the legislative updates section on the California Association of Midwives website.

Bebop of Breastfeeding *continued*

by Nonkululeko Tyehemba, CNM

5. Put the baby on your titty every chance you get and let the baby explore every part. Make sure that he/she has the whole nipple including the areola [darkened area around the nipple]. You may breastfeed the baby more often in the very beginning, but please offer him the titty at least every 2 hours.

6. Breastfeeding is an emotional and hormonal experience, so be relaxed and in an unhurried mode of operation. Unlike “formula,” it is so easily digested that it doesn’t take long for the baby to want or need more of this precious liquid.

7. For the first 6 months of life, the baby only needs your breast milk. Please do not supplement your breast milk for “formula.” THERE IS NO COMPARISON!

Following these tips will not only let you *know* what’s going on, you’ll *feel* it.



Upcoming EVENTS

Sharing Circles

East Oakland

January 25th 2014

10:00 am- 12:30 pm

San Francisco

February 22nd 2014

10:00 am- 12:30 pm

Childcare and refreshments
provided.

To reserve a space:

(510) 430 3163 or
stories@bwbj.org



Want to submit
artwork, photos,
stories or
articles?

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info@bwbj.org

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An Interview with the Creator of the Underground Hip Hop Hit: *Teach Me How To Breastfeed* **Tanefer Lumukanda** International Board-Certified Lactation Consultant

BWBJ: *How did you get involved in breastfeeding activism?*

Tanefer: It was based on my own experiences with my son and the challenges I faced. Also through my work as a doula, I witnessed lots of women go through similar difficulties. I wanted to provide more support to help women overcome these obstacles.

BWBJ: *Why did you decide to use hip-hop as a way to educate about breastfeeding?*

Tanefer: I didn't initially think of *using* hip-hop, I just did what came naturally to me. I have taught breastfeeding classes and read several books and found that much of the available material about breastfeeding that was geared towards black women in urban communities did *not* speak to the population that they were trying to reach. I have always been involved with music and I thought it would be different for me to produce healthy, educated, celebratory music about women's bodies.

BWBJ: *How can people get involved in breastfeeding activism? What are some of the coolest actions that you've been involved in?*

Tanefer: Check out your local WIC office and see if you can become a peer counselor for breastfeeding women. You can also simply support mothers who are breastfeeding. If you are a breastfeeding mother, don't be afraid; show people that it is natural and normal. Women shouldn't have to hide. If you are a new mom, create a support group among your friends. You could even meet up at the park; you don't have to work under the umbrella of an organization.