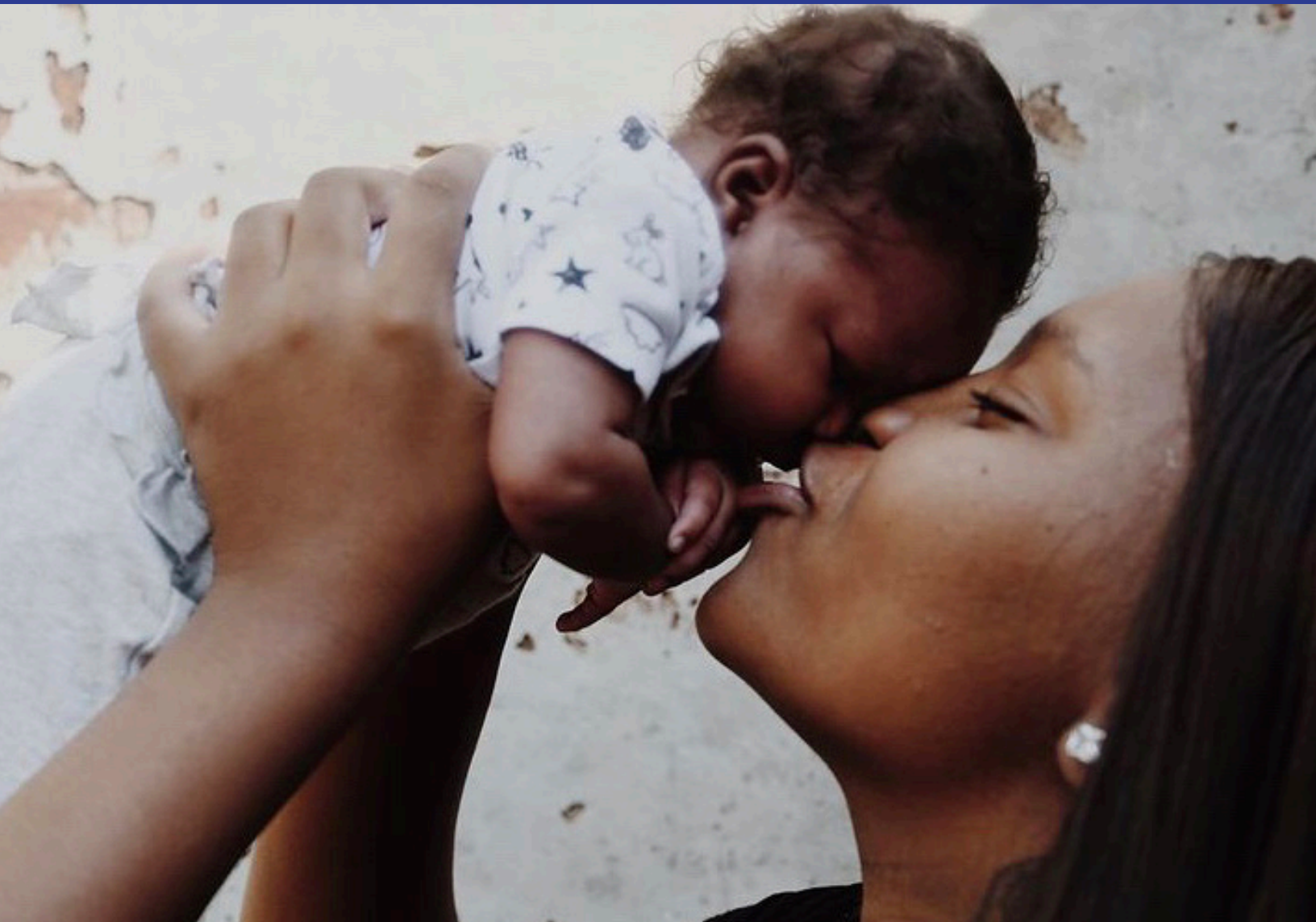




GROUNDSWELL
FUND

2020

Birth Justice Fund Docket





GROUNDSWELL
FUND

2020 Birth Justice Fund Docket

Birth justice is at the heart of reproductive justice. As a leading funder of the U.S. reproductive justice movement, Groundswell Fund created the Birth Justice Fund (BJF) to support organizations and projects that challenge the huge disparities in pregnancy and birth outcomes experienced by women of color, low-income women, young women, queer, and transgender people.

The Birth Justice Fund increases access to empowering and culturally relevant birthing options; uplifts the leadership of midwives, doulas, and other birth workers of color; and supports real changes in policy and practices.

Through the Birth Justice Fund, Groundswell supports community-based efforts that promote dignity for parents, families, and communities by reclaiming the sacredness of the birth process and the power of choice around how, when, and where birth will happen.

Birthing During a Pandemic

The events of 2020 dramatically transformed life in the United States. And while all Americans faced unexpected challenges, hardship, and loss, communities of color, bore the brunt of Coronavirus infections, exposure and death, as well as unemployment, police violence, climate disasters, voter suppression, and risks to housing stability, food security, and healthcare, including perinatal care.

The COVID-19 global pandemic in particular exacerbated and exposed what was already been true for pregnant, birthing, and postpartum families of color in the U.S. for whom systemic injustice and racism shape every experience, every moment of life. In 2020, these families continued the struggle to navigate a racist, classist, transphobic, and homophobic U.S. healthcare system that creates persistently inequitable, poor outcomes for Black, Brown and Indigenous communities, while at the same time bearing a disproportionate share of pandemic-related illness and economic devastation as they faced job loss or risked infection working in essential, frontline jobs, often without adequate protection and support.

Communities of color are experiencing widening perinatal health disparities in the COVID-19 pandemic: A nationwide Centers for Disease Control and Prevention (CDC) study¹ found that Latina mothers made up nearly half of Coronavirus cases reported among pregnant women between January and October 2020. The United States spends more than any other nation in the Global North on childbirth, yet consistently has the worst outcomes—higher rates of injury and death for birthing parents and babies and higher likelihood of

health disparities, such as low birth weight. In addition, while maternal mortality rates are dropping globally, they are climbing in the United States.² Women of color in the United States, especially Black women, are far more likely than white women to die in childbirth or experience childbirth-related complications. Black and Indigenous women are two to three times more likely to die from pregnancy-related causes than white women, even though most pregnancy-related deaths in the U.S. are preventable.³ There is virtually no research on the birthing outcomes of transgender and queer parents and their babies.

Babies of color are more likely to be born preterm or with low birth weight than are white babies because of a lack of access to adequate prenatal care and systemic racism and poverty. CDC data show that Black babies are twice as likely to die as the national average, followed closely by Indigenous babies who are 1.8 times more likely to die.⁴ Though Latinx babies experience a similar Infant Mortality Rate (IMR) to the national average, they are still more likely to die than are white babies.⁵ A 2016 study published in the *Journal of Midwifery and Women's Health* found that women of color in the United States experience far higher levels of exposure to “chronic stressors” than do white women. This means that the cumulative effects of racism directly affect the health of mothers and birthing parents, babies, families, and communities.

The Birth Justice Fund

The Birth Justice Fund supports work aimed at eliminating disparities in pregnancy and birth outcomes experienced by people of color, low-income

[1] Centers for Disease Control, Pregnant women with COVID-19, United States [January 22-September 1, 2020] <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/special-populations/pregnancy-data-on-COVID-19.html>

[2] <https://www.thelancet.com/action/showFullTableHTML?isHtml=true&tableId=tbl1&pii=S0140-6736%2816%2931470-2>

[3] Centers for Disease Control. “Racial and Ethnic Disparities Continue in Pregnancy-Related Deaths “ <https://www.cdc.gov/media/releases/2019/p0905-racial-ethnic-disparities-pregnancy-deaths.html>

[4] Source: CDC NCHS Period Linked Birth-Infant Death Data Files [Get the data](#) PNG

[5] <https://www.healthsystemtracker.org/chart-collection/infant-mortality-u-s-compare-countries/#item-mortality-rates-are-higher-than-average-among-infants-born-to-mothers-who-are-black-american-indian-and-alaska-natives-and-pacific-islanders>



CHOICES: Memphis Center for Reproductive Health

communities, young parents, and queer and transgender families. Groundswell accomplishes this by supporting organizations that increase access to empowering and culturally-humble birthing options, led by midwives, doulas, and other birth workers of color, and that advance changes in policy and practice aimed at improving birth outcomes.

Birth justice is a critical component of reproductive justice. Groundswell's Birth Justice Fund grantees advance a comprehensive, full-spectrum reproductive justice agenda. They fight for access to quality, affordable, community-centered care during pregnancy,

labor, postpartum, and miscarriage. They also advocate for access to abortion care, to contraception, to fertility and family-building care, to other reproductive healthcare, and to comprehensive sex education. They work to end all forms of oppression. Birth justice leaders are shifting the narrative and conversation about equity, bodily-autonomy, and self-determination. They are reclaiming traditions and knowledge that colonization, genocide, enslavement, patriarchy, and capitalism have tried to destroy. The wisdom of these traditions and knowledge remains strong and vibrant, and, in this moment of pandemic, is more important than ever. In the words of the **Southern Birth Justice Network**:

“If we bring our babies into the world, with justice, in the natural way, without anyone telling us how to do it, then it nurtures our innate power as mothers and parents to create a free world for our children to play and learn and grow.”

The Birth Justice Fund pursues three primary strategies:



Resourcing Transformative Models of Care

The manifestations of racism in the U.S. healthcare system are systemic and widespread, but midwifery and doula care can change outcomes for Black, Indigenous, and other people of color, especially when caregivers are people of color. Midwifery and doula care support birthing people and their families physically, as well as emotionally, and provide low-cost, high-quality care where it might not otherwise exist. Such care reduces the rate of medical interventions, Cesarean births for example, and lowers infant

and maternal mortality and morbidity rates. In fact, a 2014 World Health Organization report found that around the world, 82 percent of maternal deaths, newborn deaths, and stillbirths could be averted with full-spectrum midwifery care. In addition, the report found that midwives could deliver 87 percent of all essential sexual, reproductive, maternal, and newborn health services. The report also noted that midwifery care should be considered a “core part” of universal care, and that there are no adverse effects, only significant positive ones, of patient-centered midwifery care. The Birth Justice Fund supports innovative models advanced by birth workers of color who are developing high quality, low-cost solutions to the U.S. perinatal health crisis.



Supporting the Pipeline of Birth Workers of Color

The Birth Justice Fund supports grassroots organizations that train people of color and other marginalized communities to enter, remain in, and thrive in the perinatal workforce. Historically, when pregnancy and labor were taken over by the medical profession in the United States, midwives were criminalized and the non-medicalized birth options they provide pushed to the margins, leading to dire consequences for pregnant people and their babies. Groundswell’s grantees are reversing this trend by supporting

the communities most impacted by birth disparities to become their own healers and providers. The organizations in this docket lead trainings and mentorship opportunities to support the pipeline of student midwives, doulas, and other birth workers of color. Several provide peer support networks for birth workers and advocate for racial and transgender justice within midwifery and doula institutions. Through these efforts, Birth Justice Fund grantees are diversifying birthwork professions and ensuring that birth

workers of color have a seat at decision-making tables. In addition, several Birth Justice Fund grantees work within the existing medical system to train medical providers, medical students, and policy makers to implement birth justice principles and to address implicit bias.

A NATIONAL CALL FOR BIRTH JUSTICE AND ACCOUNTABILITY

HOW MANY BLACK, BROWN, & INDIGENOUS PEOPLE HAVE TO DIE GIVING BIRTH?

Racism, not race, is killing Black, Brown, and Indigenous people in our maternity care system.

In the United States, women are more likely to die from complications of pregnancy and birth than in 14 other high-resource countries, and most of these deaths are preventable. For the first time, a woman is twice as likely to die from pregnancy-related complications as her mother was a generation ago. This burden is not equally shared. For Black, Brown, and Indigenous people, childbirth in the U.S. is often not the joyous experience that we all deserve. Black and Indigenous women

We need action rooted in Reproductive Justice. Founded by 12 women of color in 1994, Reproductive Justice is a movement-building and organizing framework that identifies how reproductive oppression is a result of the intersection of multiple oppressions and is inherently connected to the struggle for social justice and human rights. The movement addresses the intersectional needs of Black, Brown, and Indigenous communities, as birth injustice is never just about access to equitable health care but the intersecting systems of inequities, such as housing, incarceration, food apartheid, child protective services, unprovoked violence, environmental injustice, and more.

Quality, equitable, and respectful care in childbirth is an essential human right. It's not enough to just talk about health equity. This is not just about implicit bias or the racism of individual providers. We need a complete systemic overhaul of the full spectrum of reproductive health care and maternity care within the U.S. **Our hospitals, health care**

We demand systemic change that is grounded in reproductive justice and promotes an anti-racist model of health care. This begins with:

- **Passing the Black Maternal Health Momnibus Act (H.R. 6142/S. 3424) in Congress** which includes:
 1. Investing in the social determinants of health, like housing, transportation, child care, and nutrition.
 2. Funding community-based and community birth organizations working to improve maternal health outcomes for Black and Indigenous women.
 3. Growing, diversifying, and strengthening the perinatal workforce to ensure that all people can receive maternity care and support from people they trust.
 4. Implementing education on bias, racism, and discrimination for providers in maternity care settings.
 5. Promoting innovative payment models to incentivize high-quality maternity care and continuous insurance coverage for pregnant and

Building Power and Advocating for Systemic Change

As the birth justice movement has grown, so too has its ability to advance systemic change and address the issues that lead to poor birth outcomes for communities of color. As Birth Justice Fund grantee Uzazi Village says, “We can’t just fish people out of the water one by one. We need to go upstream to find out why people are falling into the water or being pushed in.” A growing number of organizations on this docket engage in advocacy and grassroots organizing at the administrative, local, state, or federal levels.

They advance comprehensive agendas to reduce perinatal health disparities by increasing access to birth workers of color and by expanding access to high quality, affordable, patient-centered care for birthing people of color. This includes efforts to make it easier for midwives to practice and to gain equitable Medicaid reimbursement for doulas and midwives; advocacy to address the social determinants of health; and grassroots organizing around the full-spectrum of reproductive justice issues, from ensuring abortion care to ending obstetric violence.

How to Read this Docket

In 2020, the Birth Justice Fund awarded \$1.62 million to 27 grantees, the vanguard of birth justice organizations, working in 16 states, Washington D.C., nationally, and across the U.S.-Canada border. This year, we added two new grantees, Alaska Native Birthworkers Community (Anchorage, AK) and ROOTT: Restoring our own Through Transformation (Columbus, OH). At the height of the first wave of the pandemic, Groundswell Fund made the strategic decision to automatically renew Birth Justice Fund grantees – most of whom are frontline health workers - without a written grant application so that they could focus on providing critical care and transition to new telehealth and safety procedures. Also in response to the pandemic, Groundswell Fund awarded rapid response grants to Birth Justice Fund grantees. In addition, Groundswell provided funding to organizations led by birth workers of color to support the mental health and wellbeing of birthing families and their babies during this difficult time. This docket provides grantee highlights and descriptions and tells the stories of birth workers on the frontlines of bravely serving communities of color during the multiple crises of 2020.



In solidarity,
Naa Hammond
SENIOR PROGRAM OFFICER
GROUNDSWELL FUND

STRATEGIES PHOTOS: Birthmark Doulas (top), Changing Women Initiative (middle), Every Mother Counts (bottom)

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Alaska Native Birthworkers Community

2020 Birth Justice Fund Grantees

ALASKA

Alaska Native Birthworkers Community

TOTAL GRANTS: \$30,000

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Anchorage, AK

GRANT HISTORY: New Birth Justice Fund grantee
www.nativebirthworkers.org

Alaska Native Birthworkers Community (ANBC) is led by Alaska Native midwives, doulas, breastfeeding counselors and healers who organize to reclaim Indigenous birth practices, support families from preconception through postnatal care, and increase community-centered care options for Alaska Native people. Alaska has more than 200 tribes and geographically isolated communities, accessible only by plane or boat, weather permitting. Rural pregnant people are required by Indian Health Service to leave their home community at or before 36-weeks gestation to give birth in a regional hospital or Anchorage. This forces most rural Alaska Native birthing people to be displaced thousands of miles from their village or town, often giving birth alone and separated from family and support systems. ANBC's small volunteer network provides prenatal, labor support, and postnatal visits to Alaska Native parents. In addition, the organization

offers ceremony, such as coming of age ceremonies via traditional tattoo; visits with Indigenous birthing families seeking perinatal, mental health, and emotional support; community dialogues to promote Indigenous birthing practices; and donated items, such as welcome bundles of newborn supplies, food baskets, and pregnancy care packages. During the pandemic, ANBC began hosting virtual weekly talking circles for pregnant and postpartum parents; increased food package distribution to families experiencing food insecurity; and began giving families extra emotional wellbeing supplies, such as coloring books, calming teas, birth affirmations, hand sanitizer, chocolate, aromatherapy soap, and lip balm. The organization also plans to survey Alaska Native families on their birthing experiences and needs during the pandemic. ANBC uplifts the wisdom of Indigenous peoples who have been giving birth on their lands and waters for more than 10,000 years before colonization. By training a new generation of Alaska Native birth workers, ANBC seeks to formalize and grow a network of Indigenous birth workers located around the state who feel confident, competent, and grounded in cultural values to serve Alaska Native birthing people without leaving their ancestral homelands. During the grant period, ANBC will host a full-spectrum Indigenous doula workshop for 30 birth workers from across the state and a certified Indigenous breastfeeding counselor training for 30 people. ANBC is building meaningful partnerships with decision-makers and institutions in order to change the policies that dictate how rural and Alaska Native

people currently give birth in the state. ANBC is also active in shaping national conversations about Indigenous midwifery and is a key leader in Birth Justice Fund grantee National Indigenous Midwifery Alliance.

CALIFORNIA

Healing Clinic Collective

TOTAL GRANTS: \$46,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Oakland, CA

GRANT HISTORY: Birth Justice Fund grantee since 2014
www.healingcliniccollective.net

The Healing Clinic Collective (HCC) provides low-income people and women, with holistic health and healing services through daylong healing and resilience clinics and networks. Structural racism and classism mean that communities of color and low-income communities in the Bay Area lack access to holistic healthcare and providers, including reproductive healthcare and the midwifery model of care. HCC maintains a database of 120 practitioners (mostly of color) offering 20 different traditional and holistic healing modalities, including midwifery and doula care. Over the last year, HCC has engaged in an intensive effort led by transgender people of color to deepen its gender justice political education and build relationships with Two Spirit, trans, and gender non-conforming (TGNC) practitioners and healing justice activists with the hopes of expanding its practitioner network to better serve and reflect transgender communities. This is an especially important focus for HCC's midwifery and doula care. During the grant period, HCC seeks to recruit 10-20 new Two Spirit and TGNC healing practitioners and up to 25 new volunteers who are Two Spirit and TGNC. HCC will also hold an educational workshop on gender justice for its cisgender practitioners on understanding how to respectfully serve the needs of Two Spirit and TGNC community members. In 2021, HCC will host its first healing clinic for trans-feminine and other Two-Spirit and TGNC people where practitioners, including midwives and doulas, will provide both online and outdoor open-air services. HCC leads a midwives council that before COVID-19 offered monthly skill share sessions, peer review, and midwifery services by Licensed Midwives rooted in traditional values of prayer, ceremony, and ancestor-guided midwifery practices. The pandemic

brought a sharp spike in Bay Area pregnant people seeking homebirth, forcing the midwives to focus on their individual practices and client services. This year, the midwives council has met periodically to offer peer support to adapt to pandemic conditions, to reconstruct a traditional Temazcal to support themselves as overburdened birth workers of color, and to create and disseminate care packages to midwives working at Oakland's Highland Hospital and Kaiser Permanente Oakland Medical Center. During the grant period, HCC will hold at least two birth-related online monthly workshops led by HCC doulas. It will also host a gender justice workshop that will include content about language and the queer birthing body and a one-pager on gender and birthing.

COLORADO

Elephant Circle

TOTAL GRANTS: \$66,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Denver, CO

GRANT HISTORY: Birth Justice Fund grantee since 2013
www.elephantcircle.net

Elephant Circle (EC) provides sliding scale legal services to Colorado families fighting for reproductive justice; develops and disseminates accessible reproductive justice educational curricula; and engages with national organizations in the birth justice movement to become more intersectional around issues of race, class, and gender identity. Inspired by elephants, who give birth within a circle of support, Elephant Circle envisions a world where all people have a circle of support for the entire perinatal period. During the pandemic, Elephant Circle and Groundswell grantee COLOR partnered to launch a "warm line" project to connect pregnant people in Colorado with a network of birth doulas, all-options doulas, and midwives while navigating the new and changing landscape of healthcare. I launched a Blueprint for Birth Justice to inform planning and policy conversations at the local, state and national level. Elephant Circle began collaborating with Birth Justice Fund grantee Changing Woman Initiative on a legal and policy project for Restoring Indigenous Birth. As part of its Protecting Pregnant People Project, EC began to inform ambitious new legislation in Colorado that could serve as a national model for a birth justice policy platform. EC

incubates emerging birth justice organizations in Colorado and around the country, including Birth Justice Fund grantee Queer and Transgender Midwives Association, the Birth Rights Bar Association, Project X (a group focused on equity work within birthing care), and Expecting Changes (a two-year postpartum doula program serving pregnant and parenting people who use substances). In partnership with Birth Justice Fund grantees National Black Midwives Alliance and National Association to Advance Black Birth, EC launched a survey for birth workers of color in order to assess the feasibility of leading a national convening for birth workers of color.

DISTRICT OF COLUMBIA

Mamatoto Village

TOTAL GRANTS: \$101,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Washington, DC

GRANT HISTORY: Birth Justice Fund grantee since 2016
www.mamatotovillage.org

Mamatoto Village is devoted to training the next generation of Perinatal Community Health Workers and empowering women with the tools necessary for making informed decisions about their maternity care, parenting, and lives. Launched in 2012, Mamatoto Village has two intertwined goals: providing free and low-cost maternity services to

women of color and their families in Washington, DC, through the first year of their child's life and increasing the number of women of color in the maternal health field. Mamatoto Village leads a Perinatal Health Workers Training Program that will train 20-40 women of color. During the pandemic, Mamatoto Village made its Mothers Rising Home Visitation Program virtual to ensure continuity of care and plans to serve 400 birthing people and families over the next year. Mamatoto Village launched a popular online Black Mama's Resource Guide to Living and Thriving for pregnant and postpartum Black women seeking information, wellness guidance, and trusted referrals during the pandemic. Mamatoto Village's Executive Director, Aza Nedhari was elected to serve and co-chair the Washington, DC Maternal Mortality Review Committee (MMRC) – making it the first MMRC in the nation to be chaired by two midwives. In a city where 8,000 of the 10,000 people experiencing homelessness are families, Mamatoto Village advocates against gentrification and homelessness as root causes of the negative maternal health outcomes facing low-income Black women in D.C. Mamatoto Village used its role on the federal Black Maternal Health Advisory Council to ensure that housing insecurity, homelessness, and environmental degradation were key issues addressed in the recently-introduced federal Black Maternal Momnibus Act. Through its photographic Porch Series, Mamatoto Village brings visibility to Black birthing and postpartum families holding onto their neighborhoods with dignity and joy in the face of rapid gentrification that is causing poor maternal health outcomes.

“We serve as a community hub — a safe space for our clients outside of home to freely express themselves, convene, and find one another. We keep our roots in our community, and in turn, we keep the community rooted by having an organization that reflects the people we serve. This is central to birth justice and the holistic model of care.”

– AZA NEDHARI, EXECUTIVE DIRECTOR, MAMATOTO VILLAGE

FLORIDA

Commonsense Childbirth

TOTAL GRANTS: \$146,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Winter Garden, FL

GRANT HISTORY: Birth Justice Fund grantee since 2011

www.commonsensechildbirth.org

Commonsense Childbirth (CSCB) ensures access to timely maternal healthcare, particularly for women of color; low-income women; and uninsured, underinsured, and undocumented women in Central Florida, by providing low-cost and free prenatal care and birth services. Using a nationally recognized midwifery care model, the JJ Way, developed by midwife and executive director Jennie Joseph, CSCB improves birth outcomes for its clients and significantly reduces rates of infant mortality. CSCB has reduced its preterm birth rate for Black women to 0%, compared to an overall premature birth rate of 10.3% in Florida.⁶ Using an empowering model, Commonsense Childbirth's Easy Access Clinics serve one of Orlando's highest-need zip codes by providing outreach, prenatal care, and postpartum support services with a focus on early and

consistent midwifery care to more than 1,000 pregnant and postpartum women annually. In addition, CSCB supports dozens of out-of-hospital births through its freestanding birth center. Its birth center and clinics are Perinatal Safe Spots serving Central Florida's Black and immigrant communities through prenatal care, gynecological and family planning visits, postpartum support, lactation support, and Spanish and Portuguese language clinics. In 2020, Commonsense Childbirth's School of Midwifery became the first-ever Black-led midwifery school to gain MEAC (Midwifery Education Accreditation Council) accreditation. Its midwifery and peer doula training programs are focused on women of color and offer free doula support for hospital-delivery patients from the Easy Access Clinic. Despite the trauma of the pandemic, CSCB transitioned 90% of its services to telehealth to continue service provision. Early on in the pandemic, CSCB began leading virtual clinical appointments focused on patient empowerment: the organization sent clients packages with Fetal Doppler's, blood pressure cuffs, measure tapes, and urine sticks and it used each appointment as a learning space to teach pregnant women of color how to understand, track, and advocate for their health needs. During the grant period, CSCB will share its empowering, affordable, accessible model with other birth workers of color-led organizations in the National Perinatal Task Force.

“Now that telehealth is here, it must stay after COVID-19. We can never go back to the usual. Telehealth is a dream to open up scale to advance birth justice. Before the pandemic, scaling a clinical model like mine wasn't possible because we were going up against the Medical Industrial Complex and capitalism. Telehealth creates an opportunity to fill every maternal care desert in the nation and develop Perinatal Safe Spots in every county without an OB. The medical system focuses too much on delivery and birth, but we know that safety and good outcomes come from prenatal care – so much of which can happen through Telehealth.”

– JENNIE JOSEPH, EXECUTIVE DIRECTOR, COMMONSENSE CHILDBIRTH

[6] March of Dimes Florida Report Card <https://www.marchofdimes.org/peristats/tools/reportcard.aspx?fmodrc=1®=12>



Southern Birth Justice Network

Southern Birth Justice Network

TOTAL GRANTS: \$121,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Miami, FL

GRANT HISTORY: Birth Justice Fund grantee since 2017
www.southernbirthjustice.org

Southern Birth Justice Network (SBJN) based in Miami-Dade, FL, expands birth justice by providing doula and midwifery support to pregnant people, educating the community about doula and midwifery care, maternal health, and birthing and family rights, advocating at the local, state and national levels to advance the needs and rights of Black midwives and the communities they serve, organizing its community to win reproductive justice, and providing doula training. SBJN's goal is to

improve health outcomes and bring the art of midwifery back into communities of color by increasing pregnant and parenting peoples' knowledge of their rights and their access to midwives and doulas. Over the past year, SBJN continued its community and school-based education programs, and successfully advocated to increase the doula reimbursement provided by Florida's Medicaid program and to change certification requirements so that community-based programs, the ones that serve people of color and low-income people, will qualify. The pandemic forced SBJN to transition all of its education, training and outreach programs to virtual, but 2020 has seen an increase in the demand for doula and midwife services, since women, especially women of color, fear the risks of COVID-19 and separation from their newborns in the hospital setting. Over the past year, SBJN's has grown from one half time staff person to two full-time, and is now able to accept interns.

“We are who we serve: Black single trans queer mamas. Our folks are deeply impacted by COVID-19—staff members displaced, interns without childcare. We have folks dealing with a variety of health care issues that cannot be addressed because of COVID. There are deep, personal impacts for our staff, but our community is also affected. Because of COVID restrictions in hospitals, we’ve had an increase in demand for services, training and community organizing. The need for us means there is bad s^*t happening.”

— JAMARAH AMANI, EXECUTIVE DIRECTOR, SOUTHERN BIRTH JUSTICE NETWORK

As the demand for its midwifery and doula services grew, SBJN also continued its Young Mamas Leadership Institute, convening weekly virtual meetings for young mothers 13-22 years old, with ten participating in the spring and seven signed up for the fall, as well as its Doula Training Program and its Community Medic Training. The Birth Assistant Training Program is on hold until 2021. The organization also supported the community during the Black liberation uprisings.

In April 2019, Tammy Jackson, a young Black woman with a history of mental illness, was forced to birth alone in a Broward County jail, enduring seven hours of labor and delivering her baby herself. SBJN was part of a coalition of organizations that organized and advocated for a new state law, which went into effect on July 1, 2020, requiring all jails and prisons to provide medical care to birthing people and get them safely to hospitals. Despite this, in mid-October 2020, Stephanie Bretas went into labor in a Broward County jail, and, and despite her screams for help, was left alone to give birth on the floor.

“We are always connected to police brutality activism. It’s a hallmark of what we do. Standing up against state violence. We have tried to give jail and prison staff doula training, so they know the signs. But we are a small organization and can never meet the need that exists. This is the work the state should be doing. Birth Justice should be the standard. It should be the basic standard of care.”

— JAMARAH AMANI, EXECUTIVE DIRECTOR, SOUTHERN BIRTH JUSTICE NETWORK



Birthmark Doula Collective

LOUISIANA

Birthmark Doula Collective

TOTAL GRANTS: \$96,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: New Orleans, LA

GRANT HISTORY: Birth Justice Fund grantee since 2016

www.birthmarkdoulas.com

Birthmark Doula Collective is a worker cooperative of community-based doulas who support low-income families, families of color, and LGBTQ families in New Orleans as they transition into parenthood. *The Louisiana Maternal Mortality Review Report, 2011-2016* by the Louisiana Department of Health found that Black women are four times more likely to experience a maternal death compared to white women in the state. Astoundingly, 62.5% of maternal deaths in Louisiana were found to be preventable. Birthmark provides in person and virtual doula support to birthing people of color and LGBTQ families – a more critical role during the pandemic. In response to an influx of clients in the first wave, Birthmark began distributing essential supplies, such as formula and diapers, and launched a “warm line” for new parents

and pregnant people seeking support and referrals to care, a particularly important resource in the wake of Hurricane Laura bringing over 6,000 climate refugees to New Orleans. In partnership with the New Orleans Breastfeeding Center, Birthmark runs online Café au Lait meetings to offer lactation support to people of color and an Infant Ready Kit program to prepare families affected by natural disasters with safe infant feeding supplies and information. Birthmark is a leading voice in birth justice movement building in Louisiana, including supporting Black Lives Matter uprisings, immigrant justice campaigns, and supporting Groundswell grantee Women With A Vision's work to oppose the 2020 ballot initiative that enshrined anti-abortion language in the state Constitution. During the grant period, Birthmark will advocate for the New Orleans City Council to dedicate funding for racial equity training for all perinatal and obstetric care providers in the city – a decision that could have lasting impact in improving people of color's birthing experiences. Finally, in a state with one of the highest incarceration rates in the nation, Birthmark began doula support for formerly-incarcerated pregnant people who were suddenly released without resources during the pandemic. The organization plans to launch a Prison Doula Project to serve pregnant and recently-postpartum people who wish to have a doula in the Louisiana Correctional Institute for Women.

“In the pandemic, we lost some ground around birth justice: some hospitals and healthcare providers are using the urgency of the COVID-19 moment to say it’s not safe to have doulas. We’re trying to cover ground around losses in equity.”

– AUDREY STEWART, DEVELOPMENT MANAGER, BIRTHMARK DOULA COLLECTIVE

Sista Midwife Productions

TOTAL GRANTS: \$26,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee

LOCATION: New Orleans, LA

GRANT HISTORY: Birth Justice Fund grantee since 2017
www.sistamidwife.com

Founded in 2011, Sista Midwife Productions (SMP) provides education, holistic training, and consultations for birth workers and institutions that serve childbearing families of color in Louisiana. Led by Certified Nurse Midwife Nicole Deggins, SMP provides doula training to increase

the numbers of Black birth workers serving vulnerable women. Louisiana ranks 47th in the nation for maternal mortality, 49th for infant mortality,⁷ and 49th for preterm birth and low birth weight. Louisianans face a maternal mortality rate that is growing faster than the national rate, with Black women being four times more likely to die from childbirth complications than white women. SMP provides doula training, community education, and consultations to various organizations and perinatal committees at the local, state, and national level. To date, SMP has trained over 230 doulas, 70% of them in Louisiana and 83% of them identifying as Black. In 2019, SMP launched The Birth Story Project an initiative that hosts monthly sharing circles and an online survey to document the lived experiences of mothers in Louisiana. The organization plans to use the



Sista Midwife Productions

[7] Centers for Disease Control and Prevention https://www.cdc.gov/nchs/pressroom/sosmap/infant_mortality_rates/infant_mortality.htm



Uzazi Village

data to highlight areas of maltreatment for Black women. During the grant period, SMP will launch a pilot program to train 15 Healthy Birth Ambassadors across the state to become community-based doulas, certified breastfeeding specialists, childbirth educators, and advocates. In partnership with faith-based institutions, SMP will recruit and train 30 women as Healthy Birth Champions that can use their roles as trusted community members in the church to help connect pregnant women to services.

MISSOURI

Uzazi Village

TOTAL GRANTS: \$96,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Kansas City, MO

GRANT HISTORY: Birth Justice Fund grantee since 2017
www.uzazivillage.org

Uzazi Village is dedicated to reducing maternal health disparities and Black infant mortality in Kansas City, MO, where Black infants die at over twice the rate of white infants. Uzazi Village's Sister Doula certification program is increasing the pipeline of birth workers in high impacted zip codes. Led by Black women, Uzazi Village seeks to increase the number of Perinatal Community Health Workers (PCHWs) of color from Kansas City neighborhoods most impacted by perinatal health disparities. During

the pandemic, Uzazi Village began offering virtual doula support and lactation counseling online. Demand for its online and mutual aid services skyrocketed during the pandemic, increasing from 1,000 families in 2019 to almost 2,000 in 2020. In addition to doula support, Uzazi Village increased food distribution through its food sovereignty and community garden project; lactation support through its online Chocolate Milk Cafés; online childbirth education courses; and weekly diaper give away curbside pickup events. In order to support the holistic wellbeing of its clients, Uzazi Village offers meeting space to Black community groups and providers in exchange for free wraparound programming for new parents, including massage therapists, mental health therapists, and monthly Black social groups. During the pandemic, Uzazi Village received municipal funding to transform its new clinic space into a designated Coronavirus testing site, conveniently located to reach Black communities at high-risk of Coronavirus exposure. In 2020, Uzazi Village's Executive Director, Hakima Payne, was appointed to the Kansas City Health Commission where she helps to inform critical public health policies. In response to the Black liberation uprisings, Uzazi Village plans to expand its virtual doula trainings nationwide to train and empower Black women. During the grant period, Uzazi Village will complete a pilot program with the state of New Jersey, training 80 Black doulas to address the Black maternal health crisis across the state. Leadership development is a growing priority for Uzazi Village: it recently recruited and trained Black women from the community to serve on Kansas City's first Community Expert Review Board

(CERB) to ensure that research on Black maternal and infant health is by and for those most impacted. The CERB is leading advocacy to shape equitable hospital responses to maternity care. In partnership with renowned Black midwife Shafia Monroe, Uzazi Village recently launched

a National Black Doula Trainer Certification Program, a project that aims to train Black doulas across the country to serve Black communities and advocate for policies that create access and better outcomes, such as doula Medicaid reimbursement.

“The U.S. maternal healthcare system is based on a white patriarchal model. That’s just not how Black folks do things! We want to move away from how we’ve been indoctrinated. We often ask ourselves, “How would Black folks do this differently?” “What does a village model to support birth look like instead of the rugged individualism encouraged by capitalism?” We want to move away from the isolation and loneliness that too many pregnant and postpartum people face. Human beings were not meant to birth this way. We need to reclaim our own ancestry as Black people and get back to what we know.”

– HAKIMA PAYNE, EXECUTIVE DIRECTOR, UZAZI VILLAGE

NEW MEXICO

Bold Futures

TOTAL GRANTS: \$91,250

OTHER GROUNDSWELL SUPPORT: Catalyst Fund grantee, Rapid Response Fund grantee, and Project support for infant mental health

LOCATION: Albuquerque and Las Cruces, NM

GRANT HISTORY: Birth Justice Fund grantee since 2012
www.boldfuturesnm.org

Bold Futures (formerly Young Women United) supports young women of color and youth of color in New Mexico to take action to reduce violence, improve health, and build power in their communities. Bold Futures is a leading advocate for reproductive and birth justice in New Mexico. In 2020, Bold Futures facilitated the first-ever meeting between young mothers with a history of substance use and NM’s Children, Youth, and Families Department to encourage the department to develop cultural competence and assessment parameters that take lived experience into account when assessing families affected by substance

use, instead of defaulting to child separation. During the pandemic, Lovelace Health System in New Mexico began a secret COVID-19 policy of automatically separating Indigenous newborns from their parents if they lived in Pueblos or reservations. Bold Futures and Birth Justice Fund grantees Breath of My Heart Birthplace, Changing Woman Initiative and Tewa Women United immediately began organizing to hold Lovelace accountable for its racist profiling practice that has opened up generational trauma for Indigenous communities that were subject to child separation in the Indian boarding school era. Bold Futures and its partners are developing a first-of-its-kind Emergency Care for Maternal and Child Health plan to ensure that despite the pandemic, human rights are respected by one of NM’s largest hospital systems. Bold Futures aims for the plan to inform equitable care provision for birthing families during other emergencies e.g. wildfires. In the midst of a devastating COVID-19 outbreak in Navajo Nation, Bold Futures began partnering with the Navajo Nation Breastfeeding Council to support isolated Diné families. During the grant period, Bold Futures will continue to advocate for policies to increase community access to birth workers in New Mexico and El Paso, TX.

Breath of My Heart Birthplace

TOTAL GRANTS: \$121,250

OTHER GROUNDSWELL SUPPORT: **Rapid Response Fund grantee and Project support for infant mental health**

LOCATION: Española, NM

GRANT HISTORY: **Birth Justice Fund grantee since 2011**
www.breathofmyheart.org

Since 2010, Breath of My Heart Birthplace (BOMH) has provided low-cost, high-quality midwifery care to low-income women and families of color in New Mexico's Española Valley. It supports the reclamation of culturally-relevant birthing practices for Tewa-speaking Pueblo Indigenous women and Hispanic and Latinx families as part of its mission to reduce perinatal and postnatal disparities and to support community wellness. Working in a rural community, BOMH provides birth center services, pregnancy testing and counseling, prenatal and postpartum exams, integrated childbirth education, well-person services and STI screening, breastfeeding counseling and support,

education on birth options and parental bonding, consultation on nontraditional forms of conception focused on single parents by choice and LGBTQ families, and service referral to other agencies through its walk-in clinic.

In rural northern NM, Birth of My Heart Birthplace sees a 4% cesarean section rate compared to the statewide rate of 18% and a national rate of 32%. It has a 1% preterm birth rate. Thanks to its dedicated community-led and young parent-focused programming, it sees a breastfeeding initiation rate of 99% and continuation rate of 97% for six to eight weeks postpartum.

Over the past year, BOMH celebrated a major success with the opening of its licensed birth center in northern New Mexico. It also added two midwives to its staff, bringing the total to three full-time and one part-time, all before COVID-19 struck. In the face of the pandemic, BOMH has been busier than ever, even as it pivoted many programs and services to virtual, as more women chose to have out-of-hospital births out of fear of infection and, in some cases, fear of being separated from their newborn child.

“...there was violent racial profiling at Lovelace Hospital, the largest nearby hospital, targeting Indigenous women. ...in early times of COVID, when we did not understand the infection patterns between mom and babies, and because tribes were disproportionately affected and the largest outbreak was on Navajo reservation, the response of Lovelace birth center was: if you had a reservation zip code, they separated mothers and babies till they were tested. This policy targeted mainly native and immigrant women. They weren't separating anyone else. We saw a lot of fear from our community. People did not want to go to the hospital because they will take my baby away. They knew they would experience greater levels of violence and mistreatment. This is the reality of our system, and has been, but this was highly-publicized and now we are trying to make changes, to create models for how to protect people in this vulnerable time.”

– JESSICA FRECHETTE-GUTFREUND, EXECUTIVE DIRECTOR, BREATH OF MY HEART BIRTHPLACE



Breath of My Heart Birthplace

Breath of My Heart Birthplace, alongside Birth Justice Fund grantees Bold Futures, Changing Woman Initiative and Tewa Women United have been organizing to hold Lovelace Health System accountable for a secret COVID-19 policy of automatically separating Indigenous newborns from their parents if they lived in Pueblos or reservations. BOMH and its partners are developing a first-of-its-kind Emergency Care for Maternal and Child Health plan to ensure that despite the pandemic, human rights are respected by one of NM's largest hospital systems.

BOMH expects to deliver at least 40 babies this year, and serve over 200 people via its walk-in clinic; next year, with the addition of another midwife of color, those numbers will rise. It will also continue its advocacy at the state and federal levels to ensure that midwives and doulas are reimbursed through Medicaid.

To respond to the impact of COVID-19 on its community, BOMH expanded its food distribution program to support young families and families of color, dipping into its emergency reserves to provide community members with mutual aid and cash. It also began working with a network of local farmers to provide fresh, locally grown produce to the community. BOMH also changed its employee policies to enable staff to handle increased caregiving demands at home, and smoothly pivot some programs to virtual and reorganize clinic space to meet rigorous health and safety standards. The pandemic has raised many issues for BOMH. How do they meet the psychosocial needs of clients in a community grappling with high rates of poverty, substance use, and trauma? What does it mean to provide COVID trauma-informed care?

“The pandemic has increased all of our pressures. Before, our open community spaces helped address isolation, but now with COVID, it’s not safe to gather. We need to figure out how to move forward because this pandemic isn’t going away anytime soon. We are Indigenous, we are people of color, we are queer, we are trans, we are straight. We don’t fit into a mold. External forces want to put you into a mold. This is not an accident.”

– JESSICA FRECHETTE-GUTFREUND, EXECUTIVE DIRECTOR, BREATH OF MY HEART BIRTHPLACE



Changing Woman Initiative

Changing Woman Initiative

TOTAL GRANTS: \$96,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Santa Fe, NM

GRANT HISTORY: Birth Justice Fund grantee since 2016
www.changingwomaninitiative.com

Founded in 2016, Changing Woman Initiative (CWI) gives Indigenous women access to culturally-affirming prenatal, delivery, and postpartum birth services provided by Indigenous midwives. CWI provides free services in its Corn Mother Easy Access Women's Health Clinic to Indigenous women in Santa Fe, NM, and within the pueblos of northern New Mexico. CWI also offers homebirth; lactation support; nutrition consultations; perinatal plant making bundles; traditional medicine referrals; and postpartum care for up to 6 weeks. In the U.S., Indigenous women are two to three times more likely to die from pregnancy-related causes than white women and Indigenous women. Yet, Indigenous midwives make up only 1% of Nurse-Midwifery and 0.5% of Certified Professional Midwives practicing in the United States. Changing Woman Initiative is a vocal advocate for more Indigenous student midwives and birth

workers to enter the field. CWI leads Indigenous doula and lactation consultant trainings with Birth Justice Fund grantee Tewa Women United and is one of the anchors of the National Indigenous Midwifery Alliance, another Birth Justice Fund grantee. In 2019, CWI participated in the first congressional briefing on Native American Maternal Health held by the Center for Reproductive Rights, the U.S. Human Rights Network, and Representative Deb Haaland. The briefing focused on missing and murdered Indigenous women, reproductive rights, and barriers to accessing healthcare. CWI spoke about the importance of informed consent, barriers to care for Indigenous families, the complexities of Indian Health Services, and health policy recommendations for Indian country. The COVID-19 pandemic has disproportionately impacted Indigenous communities, including the Navajo Nation. In partnership with Birth Justice Fund grantees Bold Futures, Breath of My Heart Birthplace, and Tewa Women United, Changing Woman Initiative publicly spoke out against Lovelace Health Systems' secret racist Coronavirus infant separation policies that only targeted Indigenous women from Pueblos and reservation ZIP codes. Former Executive Director, Nicolle Gonzales, who previously worked at Lovelace as a Certified Nurse Midwife, gave an [interview to ProPublica](#).

“Over the past 100 years, state and government legislative bills like Hawai’i’s 2019 SB 1033 Midwifery Licensure Bill have forced Indigenous midwives to assimilate into the western medical system. This has created barriers, not only for Indigenous midwives who have been practicing for years, but also for the communities they serve. When laws are put in place by those who do not understand the territories we live in, it strips away our rights to provide midwifery care in our own territories and it decreases access to healthcare for Indigenous communities. We seek a different path: to renew cultural birth knowledge to empower and reclaim Indigenous sovereignty of women’s medicine and life way teachings.”

– NICOLLE GONZALES, FOUNDER AND MIDWIFERY DIRECTOR, CHANGING WOMAN INITIATIVE



Tewa Women United

Tewa Women United

TOTAL GRANTS: \$96,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Española, NM

GRANT HISTORY: Birth Justice Fund grantee since 2012

www.tewawomenunited.org

Tewa Women United (TWU) is a collective, intertribal voice in the Tewa homelands of northern New Mexico

that supports Indigenous women to become forces for transformation within their families and communities. Reproductive justice and birth justice are central to TWU’s mission, and the organization provides resources for support, choice, and connection, as well as access to information and resources about childbearing, breastfeeding, and parenting for women facing cultural and socioeconomic barriers to reproductive health and wellbeing. Through its Yiya Vi Kagingdi (YVK) Community Doula Program and training programs, TWU trains Indigenous doulas and lactation consultants to serve around the state. TWU began offering online Circle

of Security and Care support meetings for families struggling with mental health and family dynamic issues that are exacerbated by the stay-at-home order. In partnership with Bold Futures, Breath of My Heart Birthplace, and Changing Woman Initiative, TWU began organizing against Lovelace Health System's secret racist Coronavirus infant separation policies that only targeted Indigenous women from Pueblos and reservation ZIP codes. TWU is helping to advise an Emergency Care for

Maternal and Child Health for Lovelace. In 2021, TWU will prioritize advocacy for Medicaid reimbursement for doula care in NM and work with a state-level taskforce to create care plans for families with infants exposed to substances prenatally. During the grant period, TWU will deepen its healing justice work, including offering mind-body-spirit mental health supports for the postpartum period and launching a nine-week herbal school for doulas to learn traditional Tewa medicine-making.

“In the pandemic, we know that rates of sexual assault and domestic violence are skyrocketing but the government’s only response is to separate families and take the kids away. We need alternative solutions that center Indigenous sovereignty. We are trying to reclaim our power through midwifery and doula care. Our vision is that one day, there will be a birth worker in every family and there will be intergenerational healing.”

– CORRINE SANCHEZ, EXECUTIVE DIRECTOR, TEWA WOMEN UNITED

NEW YORK

Ancient Song Doula Services

TOTAL GRANTS: \$100,000

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Brooklyn, NY

GRANT HISTORY: Birth Justice Fund grantee since 2015
www.ancientsongdoulaservices.com

Ancient Song Doula Services focuses on communities in New York City and northern New Jersey with the highest levels of infant and maternal mortality, serving primarily low-income women of color, immigrants, parenting teens, and currently and formerly incarcerated people. According to a 2015 New York City Department of Health

report,⁸ Black women are 12 times more likely to die from complications of childbirth than white women in New York City. Ancient Song trains full-spectrum doulas to provide free or low-cost perinatal care, including support for abortion, miscarriage, and adoption. Its doulas advocate for clients in hospitals and other healthcare settings where racism and classism impact the quality of care. During the devastating first wave of the COVID-19 pandemic in New York City, Ancient Song Doula Services rapidly organized to ensure that hospitals would not block doulas or support persons, helping to urge the New York State governor to issue an executive action designating doulas as essential workers. Nationally, Ancient Song was one of the first doula organizations to pivot to offering online doula training, training hundreds of doulas in New York and across the country, and offering virtual doula support.

[8] Lorraine Boyd, Tamisha Johnson, Aileen Langston, Candace Mulready-Ward, Juan Peña, and Wendy Wilcox, *Pregnancy-Associated Mortality, New York City, 2006- 2010* (New York: New York City Department of Health and Mental Hygiene, Bureau of Maternal, Infant and Reproductive Health, 2015).



ROOTT

In addition, as New York City became the first national hotspot, Ancient Song created a first-of-its-kind emergency reproductive justice-focused doula training for Labor and Delivery nurses of NYU Langone, one of New York City's premier hospital systems. Ancient Song continued to provide sliding scale online community programs to low-income birthing families of color, such as childbirth education classes, lactation support, postpartum support, and mental health wellness check ins for post-partum clients. In recent years, Ancient Song has spearheaded state-level advocacy efforts to ensure equitable doula Medicaid reimbursement and to combat a licensure bill that would have created barriers to entry for community-based doulas. At the federal level, Ancient Song serves on the Black Maternal Health Advisory Council that helped to shape the recently introduced 2020 Black Maternal Health Omnibus Act.

OHIO

ROOTT: Restoring Our Own Through Transformation

TOTAL GRANTS: \$30,000

OTHER GROUNDSWELL SUPPORT: Project support for infant mental health

LOCATION: Columbus, OH

GRANT HISTORY: New Birth Justice Fund grantee
www.roottrj.org

Restoring Our Own Through Transformation (ROOTT) is a Black-led collective of families, birth workers, community members, advocates and interdisciplinary professionals dedicated to decreasing maternal and infant mortality in Ohio. Grounded in a reproductive justice framework, ROOTT uses a holistic, empowering model that provides affordable doula services, full spectrum doula trainings, workshops, research, healthcare provider trainings, and community conversations to unapologetically support Black women in healing from the stress created by racism, traumatic birth, and negative experiences inside the reproductive healthcare system. ROOTT's full-spectrum doulas assist 400 clients a year at all stages of pregnancy, from preconception to postpartum, including offering support for breastfeeding, abortion, and adoption. Impressively,

ROOTT has a 0% maternal mortality and infant mortality rate, compared to the rest of the state where Black women are two and a half times more likely to die than white women.⁹ During the pandemic, ROOTT shifted quickly to telehealth; provided PPE to birth workers; mailed clients perinatal packs with Dopplers, blood pressure monitors, and measure tapes; and worked to maintain continuity of care by connecting families with technology. ROOTT educates healthcare providers to change the focus from so-called “social determinants of health” that blame Black communities for health outcomes towards addressing

the “structural determinants of health” and root causes of negative perinatal outcomes for Ohio’s Black families, namely poverty, housing instability, education injustice, police brutality, mass incarceration, and racism. During the grant period, ROOTT will continue to advocate for state recognition of the essential role of doulas, doula Medicaid reimbursement, and other birth justice priorities in partnership with Groundswell grantees New Voices for Reproductive Justice, National Perinatal Task Force, and Black Mamas Matter Alliance.

“At some point, we have to acknowledge and address how the foundation of Obstetrics and Gynecology as we know it in the U.S., was built from stolen knowledge and traditions of Black and Indigenous women, then used against us through means of sexual assault, eugenics, and genocide. Reproductive justice is the definition under which we say, we are taking this back.”

– JESSICA ROACH, CEO AND PARTNER, ROOTT

OKLAHOMA

InTune Mothers Society

TOTAL GRANTS: \$30,000

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Oklahoma City, OK

GRANT HISTORY: Birth Justice Fund grantee since 2017

www.timcenter.org

Based in Oklahoma City, The InTune Mother Society (TIM) provides perinatal support to low-income Black communities with a focus on healing justice and human development. The InTune Mother Society provides intensive case management and referrals to midwifery care, doula services, and breastfeeding support. Black women in Oklahoma are three to four times more likely than other communities to face perinatal disparities, regardless of socioeconomic status. The InTune Mother Society uses a holistic approach to provide pregnant women with preconception, pregnancy, and

postpartum support, including wellness education on nutrition, relaxation, and exercise. Due to the pandemic, The InTune Mother Society began holding its Perinatal Health Worker trainings online and focused on the skills needed to be a doula safely or virtually in the age of COVID-19. In partnership with a workforce development program, The InTune Mother Society will also create an apprenticeship for low-income women to support its community-based birth justice programs. As a member of Birth Justice Fund grantee National Perinatal Task Force, The InTune Mother Society celebrated a milestone by launching Beehive Birth Consulting, the first Perinatal Safe Spot in Oklahoma. Beehive is a group of Perinatal Health Consultants who provide online holistic childbirth education, focused on the sacredness of the 40-day postpartum period and on family planning, to help mothers and families manage and improve their own perinatal outcomes. In the future, the Beehive’s perinatal wellness center will host workshops, educational programs, Perinatal Health Worker trainings, and provide community support services.

[9] Ohio Department of Health, A Report on Pregnancy-Associated Deaths in Ohio 2008-2016, <https://odh.ohio.gov/>



CHOICES: Memphis Center for Reproductive Health

TENNESSEE

CHOICES: Memphis Center for Reproductive Health

TOTAL GRANTS: \$56,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Memphis, TN

GRANT HISTORY: Birth Justice Fund grantee since 2018
www.memphischoices.org

Founded in 1974 as a women's health clinic that provides abortions, CHOICES underwent a radical transformation

in 2020, with the opening of a new facility to become the first licensed birth center in Tennessee and the first non-profit healthcare provider in the country to offer both birth services and abortion care, along with a full behavioral health program, all under one roof. CHOICES serves 6000+ people every year, and is one of the only facilities in the United States offering full-spectrum holistic reproductive healthcare regardless of family choice, economic status, gender identity, or sexual orientation. CHOICES' midwifery practice is rooted in a Southern granny midwifery tradition that reconnects abortion care with birth and maternity care, a tradition anti-abortion political forces have long sought to separate. It centers Black midwives and serves pregnant people from Tennessee, Mississippi, and

“We had to reimagine how to provide care. But it showed us that we can do it differently. We are always looking at ways to be adaptive, but it was difficult in the beginning. We did a lot for community, patients and for our staff. We moved to tele-care for pregnant people. We started making home visits, and we taught people how to do basic assessments, to take their healthcare into their own hands so they could report to us. We also connected patients with resources—housing, food, whatever they needed.”

— NIKIA GRAYSON, DIRECTOR OF PERINATAL CARE, CHOICES



CHOICES

Arkansas on their own terms, and seeks to improve the lifetime reproductive health outcomes of its clients. Even in the face of the pandemic, CHOICES delivered more than 50 babies in 2020, and expects that number to rise to 180 or more. It was on the verge of opening its new birth center and healthcare facility when the virus hit.

During the Black liberation uprisings, CHOICES supported its staff and community, who are majority Black, by donating to the local bail fund to support people putting their lives on the line, and also reviewed its own internal policies and programs to better support Black staff and community members.

In addition, CHOICES, with the Center for Reproductive Rights, Planned Parenthood, and the ACLU, successfully challenged a ban on abortions during the pandemic, put in place in March 2020 by Governor Bill Lee who claimed abortions were “nonessential” medical services that would unnecessarily deplete PPE supplies. A federal judge ruled against the state in late April, enabling CHOICES to continue to provide a full range of services to its community.

“I am proud that we have manifest this vision of a really pro-choice midwifery practice. Stay pregnant, don’t stay pregnant, we will support you. If you want to talk this through, we will support you. Whichever way that takes you, whatever way you decide to go.”

— REBECCA TERRELL, EXECUTIVE DIRECTOR, CHOICES



TEXAS

Mama Sana Vibrant Woman

TOTAL GRANTS: \$30,000

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Austin, TX

GRANT HISTORY: Birth Justice Fund grantee since 2015
www.msvwatx.org

Based in Austin, TX, Mama Sana Vibrant Woman (MSVW) is a collaboration between Mamas of Color Rising (a collective of working-class and poor mothers of color based in Austin), local midwives, and volunteer physicians that supports the individual and collective empowerment of low-income mothers of color, while improving pregnancy and birth outcomes for communities of color. Launched in 2012, MSVW provides birth support services based on its Maternal Justice Care Model to low-income Black and Latinx families. In 2020, MSVW adopted a horizontal leadership structure of collective circles of volunteers, birth workers, and staff. As the U.S. pandemic began, MSVW began food distribution and mutual aid to support Black and Brown communities already facing gentrification, housing insecurity, immigration enforcement, and criminalization in Austin. As part of Mamas of Color Rising and

Communities of Color United, MSVW has been organizing for COVID-19 rental assistance, cash assistance, eviction moratoriums extensions, and reallocation of funds from the police budget towards community needs. In a grassroots effort by several organizations to pressure the municipal government to provide direct cash assistance to low-income communities hardest hit by the COVID-19 economic recession, MSVW awarded \$100,000 to 50 families in 48 hours and offered additional resources, such as food assistance and ride share transportation codes. The action successfully pressured the Austin City Council to unanimously vote in favor of replenishing a COVID-19 relief fund with an additional \$12 million for direct financial assistance to disproportionately impacted Austin residents. Since then, MSVW's Emergency Circle has focused on mutual aid for families of color and birth workers facing economic uncertainty. At the start of the shut down, MSVW began providing online prenatal programs through its Pregnancy and Birth Circles, which typically support 150 low-income Black and Latina women in a year. These holistic circles include free exercise classes, nutrition guidance, access to birth companions and midwives, wellness clinics, and culturally-specific monthly support groups. MSVW began mailing care kits with Dopplers to participants, allowing MSVW midwives to coach people during telehealth visits to understand their bodies, reduce their stress, and eliminate the need to go outside for prenatal care. Clients report feeling more capable, empowered and less



Mama Sana Vibrant Woman

stressed out. Instead of training new birth companions, MSVW decided to deepen engagement with 13 trainees from previous years. Birth companions continue to provide both in person and virtual doula support when needed. Before 2020, it was a challenge to get new mothers to come to MSVW postpartum groups with their newborns because of Austin's unreliable public transportation, but since making its programming digital, MSVW's English and Spanish postpartum groups have flourished with new parents of color isolated at home seeking community and support. In 2020, MSVW launched a small pilot program with Black and bilingual therapists to provide three individual therapy sessions to participants feeling anxiety and depression during the pandemic. In the next year, it hopes to scale its mental health offerings. Facing an increasing anti-abortion

attacks, MSVW will partner with Jane's Due Process and hopes to train abortion doulas in the next year. MSVW serves Casa Marianella, one of the main shelters for pregnant recent immigrants and refugees in the United States. In an anti-immigrant climate, MSVW continues to prioritize trauma-informed full spectrum services in Spanish, English, and French for pregnant asylum seekers and migrants from Central and South America and Africa who face the additional trauma of family separation at the U.S.– Mexico border.

“COVID-19 made a vulnerable community that much more vulnerable. People are isolated and feeling alone on an island with their babies and kids. We focus on community care for pregnant and birthing people of color, for birth workers, for ourselves. There are multiple hands holding each other.”

– TIEK JOHNSON, DIRECTOR OF OPERATIONS, MAMA SANA VIBRANT WOMAN



Surge

WASHINGTON

Surge

TOTAL GRANTS: \$36,250

OTHER GROUNDSWELL SUPPORT: **Rapid Response Fund grantee**

LOCATION: **Seattle, WA**

GRANT HISTORY: **Birth Justice Fund grantee since 2017**
www.surgereprojustice.org

Seattle-based Surge fights to end reproductive oppression for all people, centering Black women, women of color, and queer and trans people of color in a movement that rises from the bottom up. Through community engagement, education, and policy advocacy, Surge stands with Northwest communities who have been subject to state control. Run primarily by women of color and queer and trans people, Surge's Doulas for All coalition advocates for Medicaid reimbursement for doulas at the state-level, and to make doula care accessible to incarcerated people and provide free training opportunities for doulas interested in working in prisons.

In 2018, Surge helped lead the successful campaign to win a law that makes midwifery and doula care more accessible to incarcerated people in Washington. Once the law was passed, Surge began to lay the groundwork for its implementation, even as state officials threw roadblocks in the way: developing relationships with the hospital where people from the state Corrections

Center for Women give birth, securing an agreement to contract doulas, and building a relationship with the Black Prisoners' Caucus in the women's prison, including regular visits by Surge Executive Director Jackie Vaughn. The goal was to get the program up and running in 2020. However, in response to the pandemic, the state shut down all prisons in March, ending all volunteer programs and prohibiting all volunteers from visiting or even communicating with people on the inside. Recognizing the COVID-risks faced by pregnant prisoners and other vulnerable people on the inside, Surge, in partnership with other organizations, filed a lawsuit and launched an advocacy campaign, including demonstrations at the women's prison, demanding that Governor Jay Inslee commute the sentences of the most vulnerable people and release them immediately. Surge also demanded that prisoner health be protected by limiting each cell to just one person. While the Governor did commute the sentences of 950 people (out of an incarcerated population of 17,000), including all pregnant prisoners, not all of those people were released because they did not have homes to go to. In addition, the state refused to address cell overcrowding.

Surge and its partners are now developing legislative strategies for the 2021 session, including implementation of doula reimbursement and expanding the definition of doula care, actions that will benefit doulas and pregnant people of color who are harmed by the current status quo. In 2020, Seattle was the scene of the nation's largest and longest Black

liberation uprisings against police violence. Jackie Vaughn is a co-founder of Decriminalize Seattle, the alliance which spearheaded most of the protests and to which many of Surge's partner organizations belong. The ongoing action in the streets of Seattle

and organizing for police defunding slowed down reproductive justice advocacy, but is part of a longer-term and larger powerbuilding strategy. Surge's participation ensures that long-term visions center reproductive justice.

“The protests and direct actions have given people a language and framework to talk about abolition. We highlighted the need to disinvest in police and invest in what communities really need. We said, “If we are truly trying to move to an abolitionist stance, we need to invest in community-led care, including doula care. Invest in us. Let us create and dictate the way we do our work, even when it comes to government contracts. A lot of community-led nonprofits that get contracts from the city find that those contracts come with strings and barriers. We are now pushing for the removal of those barriers, to let organizations do the work in the way they know it should be done. We want \$2 million for youth violence prevention; \$10 million for community organizing; and \$3 million for community-led research about what community safety and security means. We are now trying to force the city to understand that these contracts cannot have high barriers. That’s what we are working for.”

– JACKIE VAUGHN, EXECUTIVE DIRECTOR, SURGE



Black Mamas Matter Alliance

NATIONAL

Black Mamas Matter Alliance

TOTAL GRANTS: \$71,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

LOCATION: Atlanta, GA and National

GRANT HISTORY: Birth Justice Fund grantee since 2018
www.blackmamasmatter.org

The Black Mamas Matter Alliance (BMMA) is a national, Black women-led, cross-sectoral alliance that builds power, influences policy, and shifts culture to advance Black maternal health, rights, and justice. BMMA encompasses some 30 “kindred partner” organizations, many of them Groundswell grantees, from across the nation, plus nearly three dozen individual collaborators, most of them health professionals, including doctors and nurses. Black women in the U.S. are four to five times more likely to die from pregnancy-related causes than white women, making BMMA’s mission to improve Black maternal health outcomes critical to advancing reproductive and racial justice.

BMMA maintains a presence in Washington, D.C., hosting Congressional briefings to spotlight Black maternal health disparities, inspiring the creation of a 100+ member bi-partisan Congressional Black

Maternal Health Caucus that in 2020 introduced a Black Maternal Health Omnibus that includes nine different bills sponsored by Caucus members, and almost all the result of BMMA policy recommendations. BMMA member organizations also advance state-level policies to improve maternal health.

As BMMA Executive Director Angela Doyinsola Aina explains, “First, you have to remember that pregnancy does not need to be pathologized. It is not a sickness.” But, as she reminds us, for Black women in America, nurturing, whole person healthcare throughout pregnancy, birth and post-partum, is almost impossible to access, given the anti-Black racism that pervades the U.S. healthcare system. As a 2019 *Scientific American* article, “To Prevent Women from Dying in Childbirth, First Stop Blaming Them,” explains, two-thirds of U.S. maternal deaths are considered preventable and racism (as opposed to race) is a critical reason why they are not prevented. BMMA is building a base of medical professionals, women’s health organizations, and policymakers determined to push for changes in policy, care, behavior, and attitudes that will save the lives of thousands of Black pregnant people and their babies.

BMMA’s core strategy had been rooted in convenings and in-person events, including its Black Maternal Health Conference and Training Institute; the first,

held in 2018, gave more than 400 Black birthworkers, and birth and reproductive justice organizations the opportunity to connect, gain support, and receive training. A second conference, this one for 600+ people, was planned for mid-2020 in Columbus, OH, as was a specific convening for Black birthworkers aimed at increasing Black women's' access to holistic midwifery care. BMMA also planned three regional summits. In addition, BMMA had planned its third annual Black Maternal Health Week (BMHW) April 11-17 to call attention to the unacceptable disparities in pregnancy outcomes between Black birthing people – the

incidence of severe maternal morbidity, for example, is 166 percent higher for Black women than white women and is a driver in the rising rates of maternal morbidity and mortality nationwide. At the same time, BMMA was in the process of becoming an independent 501(c)(3) organization and creating the infrastructure needed to make that change, including creating a new board and financial and accounting systems.

As the scale of the pandemic became clearer, BMMA, a still new and evolving organization, was faced with a daunting set of decisions and issues about how to go forward.

“By the end of March, it became chaotic. We had three people on the team who are parents, very scared and concerned, and one pregnant. What came up that shook me to my core: We have no infrastructure as an organization from an HR perspective.... What do we do? What are we supposed to do? Do we go fully remote? What happens if we get sick? Do we have the resources to work from home and remotely? How are we gonna do all the stuff we had planned for April, May, and June? And on top of this, we are an alliance of organizations that provide direct services. Our kindred partners were having problems. How could we be responsible to our members? And my own leadership: on a personal level, how to figure out my own health. How to keep my family safe and healthy...We felt our fragility as an entity. All the fragility we had before was exacerbated by the pandemic. It was a bit much trying to move forward and pivot....No in person meetings? We cried real tears.”

– ANGELA AINA, EXECUTIVE DIRECTOR, BLACK MAMAS MATTER ALLIANCE

But faced with these challenges, BMMA proceeded ahead, and prevailed, implementing a successful and “pretty huge,” in Angela Aina’s words, Black Maternal Health Week, all online. The week included four webinars on topics including Black maternal health and

COVID-19, improving Black mamas’ health outcomes through holistic midwifery care, shifting and advancing policy to support Black mamas, and how to center Black mamas in healthcare and in practice. BMMA also did a successful social media campaign, and partners

hosted local events (mainly virtual) in ten states. It also created an online toolkit to provide ongoing support to partners and individuals. Unable to convene its in-person national gathering in 2020, BMMA has already begun to plan an even larger 2021 gathering. In place of the national convening, BMMA sponsored or co-sponsored a wide range of webinars and other virtual events to lift up the needs and challenges facing Black mamas.

It continued its policy advocacy in Washington, speaking at the Congressional Black Maternal Health Caucus Summit; supporting the Pregnancy Workers Fairness Act in the U.S. House; testifying before the U.S. Commission on Civil Rights webinar on racial disparities in maternal health; and, working with partners in GA, helped to win an expansion of Medicaid coverage for postpartum mothers for six months and a restoration of funding for rural perinatal centers, among other victories. BMMA also worked with GA partners to make sure Black women went to the polls, providing them with information about where and how to vote safely.

BMMA and its alliance partners were affected deeply by the Black liberation uprisings in response to the murders of George Floyd and Breonna Taylor. As Executive Director, Angela Aina shared, “BMMA wanted to be responsive as best as we could, and for me, this was a moment when my own leadership came into question. I did not want to jump on the bandwagon as

mainstream organizations issued statements. What did they even mean? What does this mean in terms of operationalizing the statements? Are you going to address the problems, the practices in your company, your healthcare system? It was mind-blowing to see mainstream actors in the maternal health space release statements – I mean last month you were not even saying the words ‘reproductive justice’! So, we eventually issued a statement that was written by BMMA members and every word we said, we meant.” BMMA also co-sponsored a family-friendly Black Mamas March in Washington DC on June 27.

Throughout this difficult year, BMMA continued to focus on its internal capacity, hiring a consultant to guide them through the process, and centering the health and wellbeing of its staff. As part of this process, Angela was officially hired as full-time Executive Director in late September. Thanks to its high profile on social media this year, BMMA was able to bring in new donors and supporters, and hire staff dedicated to operations and grants management and development in the fall. BMMA is now gearing up for a strategic planning process, and the hire of several new staff positions, including a communications director and a federal policy director. The goal is to become an independent organization in 2021, when BMMA will also roll out an online training and technical assistance portfolio for the field, while continuing its existing work.

“To those of us who do social justice and Black feminist liberatory work, the things that sparked the [BLM] protests, we know have been happening for a long time. Suddenly, at end of May and early June, racism reared its ugly head. But it showcased to the world, that the things that Black, Indigenous and other people of color and other marginalized communities have been saying about systemic oppression is real and must be addressed.”

– ANGELA AINA, EXECUTIVE DIRECTOR, BLACK MAMAS MATTER ALLIANCE

Elephant Circle, National Association to Advance Black Birth, and National Black Midwives Alliance

TOTAL GRANTS: \$66,250
(inclusive of 2019– 2021 grant)

OTHER GROUNDSWELL SUPPORT:

Rapid Response Fund grantees

GEOGRAPHIC FOCUS: National

GRANT HISTORY: Birth Justice Fund grantee since 2019

In 2019, Birth Justice Fund grantees Elephant Circle, National Association to Advance Black Birth (NAABB), and the National Black Midwives Alliance (a project of Southern Birth Justice Network) began partnering to assess the feasibility of hosting a national convening to coordinate birth workers of color across the U.S. and explore plans to engage with the larger multi-racial midwifery and birth field. Over the past several years, many mainstream midwifery organizations and conferences have been sites of harm for midwives, doulas, and birth workers of color. Midwives of color have had to intervene, stopping agendas and demanding better representation and more reflective programming. In response to this harm, these three organizations, led by recognized leaders of color within the birth justice movement, are strategizing ways to create a truly equitable convening that centers the needs of communities of color. With this planning grant, the partners developed a survey that asks a wide range of birth workers of color what they need from a professional space. The partners will work with a strategic planning consultant to develop a report based on the survey results that will inform the convening planning process.

National Indigenous Midwives Alliance

TOTAL GRANTS: \$36,250
(inclusive of 2019 - 2021 grant)

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

GEOGRAPHIC FOCUS: National

GRANT HISTORY: Birth Justice Fund grantee since 2019

The National Indigenous Midwives Alliance (NIMA) is a newly launched network of renowned Indigenous midwives working to uplift and nurture the wellbeing of Indigenous childbearing families and safeguard future generations.

NIMA achieves its mission by supporting the leadership development of Indigenous midwives, promoting cultural teachings, and reclaiming birth sovereignty and culturally-matched midwifery care to improve maternal and infant health outcomes in Indian country. Indigenous communities face significant disparities in health outcomes for birthing parents and infants, and Indigenous midwives make up only 1% of all practicing midwives in the U.S. Of the Indigenous midwives that exist, less than 1% can afford to serve communities outside of federally-run health programs, like Indian Health Service. With Birth Justice Fund planning support, NIMA will formally launch as an organization, complete its first two-year strategic plan and budget, develop its internal infrastructure, and attain 501(c)(3) status. NIMA will also create an Indigenous Midwife Elder Advisory Council and host a convening to allow seasoned midwives to share their vision and guidance for supporting Indigenous midwives across the U.S. Building off of the foundation laid by the Indigenous Birth Keepers Gathering hosted in 2015 by Birth Justice Fund grantee Changing Woman Initiative, NIMA will continue to gather Indigenous midwives for working sessions and strategic planning, including hosting a traditional medicine and ceremonial retreat to ground NIMA's core members in Indigenous values. The alliance will lead an Indigenous Midwifery Mapping project to document where Indigenous midwives live and work currently, and the barriers Indigenous people face when seeking to become or practice as a midwife. NIMA will use this mapping to identify specific policy recommendations that midwifery schools can adopt to better support Indigenous student midwives.

National Perinatal Task Force

TOTAL GRANTS: \$116,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

GEOGRAPHIC FOCUS: National

GRANT HISTORY: Birth Justice Fund grantee since 2012
www.perinataltaskforce.com

Founded by Birth Justice Fund grantees Commonsense Childbirth and Mama Sana Vibrant Woman, the National Perinatal Task Force (NPTF) is a network that offers strategic training, tools, and technical assistance to over 36 organizations based in what it calls "Materno-toxic Areas" for maternal health outcomes across the United



National Perinatal Task Force

“We can address the root causes of disparities with a workforce that understands them. We need to grow our own and name our own. Before we can do birthwork, we need to support the wellbeing of birth workers. To do this, we focus on collective care, sustainable leadership models, and building the capacity of our partners to organize locally for systemic change.”

– JENNIE JOSEPH, EXECUTIVE DIRECTOR, NATIONAL PERINATAL TASK FORCE

States, helping each site to become a “Perinatal Safe Spot.” NPTF employs a Maternal Justice Model to deliver political education and build the capacity of Perinatal Safe Spots to take political action and create systemic change. In 2019, NPTF hosted the first national Perinatal Safe Spot convening that grounded participants in the history of racialization and reproductive health in the United States that began with colonization and slavery as root causes of today’s maternal and infant health crises. The convening also focused on the importance of collective care – a prescient need that is serving the network well in 2020. At the height of the pandemic, NPTF began offering Collective Care Calls for its Perinatal Safe Spots, as a safe harbor for birth workers of color leaders of organizations at the forefront of the pandemic to gain peer support, mental health support, and relief to better support communities of color in a time of devastation and grief. In 2020, NPTF began

defining its 10 year goals focused on three core pillars: safety, quality, and workforce development. Over the next decade, NPTF will work to advance a national agenda by birth workers of color committed to transforming maternity care deserts into safe spots for pregnant people of color. Under the leadership of Organizing Director and Midwife Paula X. Rojas, NPTF will develop the political education and organizing skills of Perinatal Safe Spots, with the longterm goal of base-building and launching campaigns to address the root causes that put the health of mothers and babies at risk. In the next year, NPTF will begin an interactive mapping project of the Perinatal Safe Spots to understand their contexts and specific needs and to develop tailored webinars. It will strengthen its existing Perinatal Safe Spots’ internal capacity by helping to fundraise resources collectively to address the major challenge facing birth justice organizations: financial sustainability.

“In this moment, it’s clear that the system of policing is broken and there is an opening to rethink public safety: safety in pregnancy and in our lives. What really makes us safe? Communities are organizing to move large amounts of money from systems that don’t keep us safe towards re-granting public money to care for people. How can we invest in communities so that we don’t need policing or harmful systems, and so that people’s basic needs are met? As midwives, we know that safety in pregnancy and in our communities happens in a larger community sense, when you aren’t worried about the lights getting shut off or facing eviction.”

– PAULA X. ROJAS, ORGANIZING DIRECTOR, NATIONAL PERINATAL TASK FORCE

Queer and Trans Midwives Association

TOTAL GRANTS: \$31,250

(inclusive of 2019 - 2021 grant)

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

GEOGRAPHIC FOCUS: National

GRANT HISTORY: Birth Justice Fund grantee since 2019

www.elephantcircle.net/qtma

Founded in 2018, Queer and Trans Midwives Association (QTMA) is a new network dedicated to supporting and representing lesbian, gay, bisexual, transgender, Two Spirit, queer, and intersex midwives and student midwives as they train and grow as providers and people. To that end, QTMA provides educational opportunities, advocacy, community building, and tools that center an intersectional framework. QTMA is run by a majority people of color volunteer advisory committee who made a Facebook page to create a safe space for queer and trans midwives to discuss their concerns and the unique needs of LGBTQ families and clients. Within a few months, it quickly ballooned to 500 Facebook followers and 170 active private group

participants. With a Birth Justice Fund grant, QTMA will continue to host national bimonthly Midwifery Queer Peer Review calls, each with a different clinical focus, like insemination or shoulder dystocia. The calls offer a vital space for queer and trans midwives and students to build relationships with each other and to learn how to better serve LGBTQ birthing families. QTMA plays a critical role in supporting LGBTQ midwives and students who seek to serve a growing client base of queer and trans pregnant and birthing people. Many LGBTQ midwives and students live in hostile locations, and are pushed into unsafe closeting practices, particularly in religious midwifery education programs. During the grant period, QTMA will build its organizational and fundraising capacity, develop a strategic plan, and beta test program offerings beginning with a focus on Intrauterine Insemination (IUI) workshops. QTMA will also survey members to map their work backgrounds, their needs, and the barriers they face to providing midwifery care or gaining midwifery education due to race, ethnicity, gender identity, sexual orientation, educational access, and other intersecting identities.



Native Youth Sexual Health Network

NORTH AMERICA

Native Youth Sexual Health Network

TOTAL GRANTS: \$41,250

OTHER GROUNDSWELL SUPPORT: Rapid Response Fund grantee and Project support for infant mental health

GEOGRAPHIC FOCUS: National

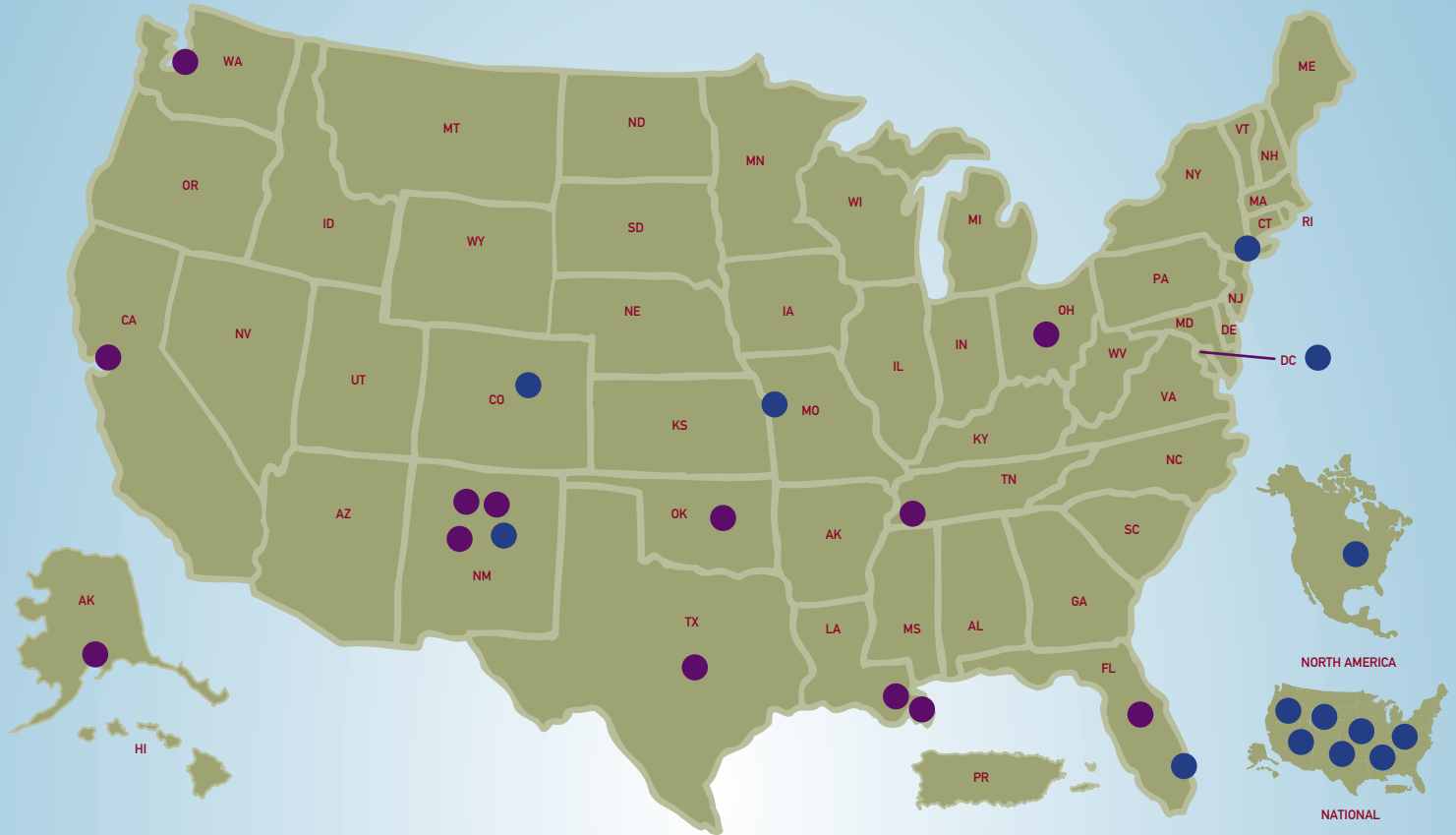
GRANT HISTORY: Birth Justice Fund grantee since 2016
www.nativeyouthsexualhealth.com

The Native Youth Sexual Health Network (NYSHN) addresses issues of sexual and reproductive health, rights, and justice for Indigenous youth throughout Turtle Island. Using a holistic approach to reproductive justice in Indigenous communities, NYSHN's trainings include an environmental justice analysis that addresses violence against Indigenous women and young people. NYSHN plays a leadership role in Indigenous birth worker communities by supporting Indigenous birth workers to reclaim their traditional birth practices and by expanding the definitions of full-spectrum doula care to include menstruation, sexual health, miscarriage, loss, abortion, birth and postpartum

care. In an effort to formalize an intergenerational Indigenous doula network, NYSHN maintains the Indigenous Full Spectrum Doulas Facebook group. The group has become a hub for Indigenous birth workers and full-spectrum doulas across Turtle Island and beyond, and remains a helpful starting place for new and prospective Indigenous birth workers who face many barriers to entry into the midwifery and doula professions. During the pandemic, NYSHN adapted its work to provide doula and auntie care online and via phone. It began leading safe drop-offs of sexual/reproductive health supplies and held physically-distanced outdoor meetings and ceremony for Indigenous birth workers and birthing people. COVID-19 has shifted NYSHN's approach: instead of always offering in person support, it is now focused on empowering families and communities to take charge of their own health. In the next year, NYSHN will build on this learning by providing more intergenerational mentorship and ceremony work to support Indigenous people to reclaim and restore their traditional roles of aunts, birth workers, and midwives.

**To learn more about Groundswell's Birth Justice Fund,
please contact Senior Program Officer Naa Hammond
at nhammond@groundswellfund.org**

2020 BIRTH JUSTICE FUND GRANTEES



- Local or state grantees
- Regional, multi-state or national grantees

ALASKA

Alaska Native Birthworkers
Community

CALIFORNIA

Healing Clinic Collective

COLORADO

Elephant Circle

DISTRICT OF COLUMBIA

Mamatoto Village

FLORIDA

Commonsense Childbirth, Inc.
Southern Birth Justice Network

LOUISIANA

Birthmark Doula Collective
Sista Midwife Productions

MISSOURI

Uzazi Village

NEW MEXICO

Bold Futures
Breath of My Heart Birthplace
Changing Woman Initiative
Tewa Women United

NEW YORK

Ancient Song Doula Services

OHIO

ROOTT: Restoring Our Own
Through Transformation

OKLAHOMA

InTune Mother Society

TENNESSEE

CHOICES: Memphis Center
for Reproductive Health

WASHINGTON

Surge

TEXAS

Mama Sana Vibrant Woman

NATIONAL

Black Mamas Matter Alliance
Elephant Circle, National Association
to Advance Black Birth, and National
Black Midwives Alliance
National Indigenous Midwives Alliance
National Perinatal Task Force
Queer and Trans Midwives Association

NORTH AMERICA

Native Youth Sexual Health Network



GROUNDSWELL FUND

Groundswell Fund strengthens U.S. movements for reproductive and social justice by resourcing intersectional grassroots organizing and centering the leadership of women of color—particularly those who are Black, Indigenous, and Transgender.

www.groundswellfund.org