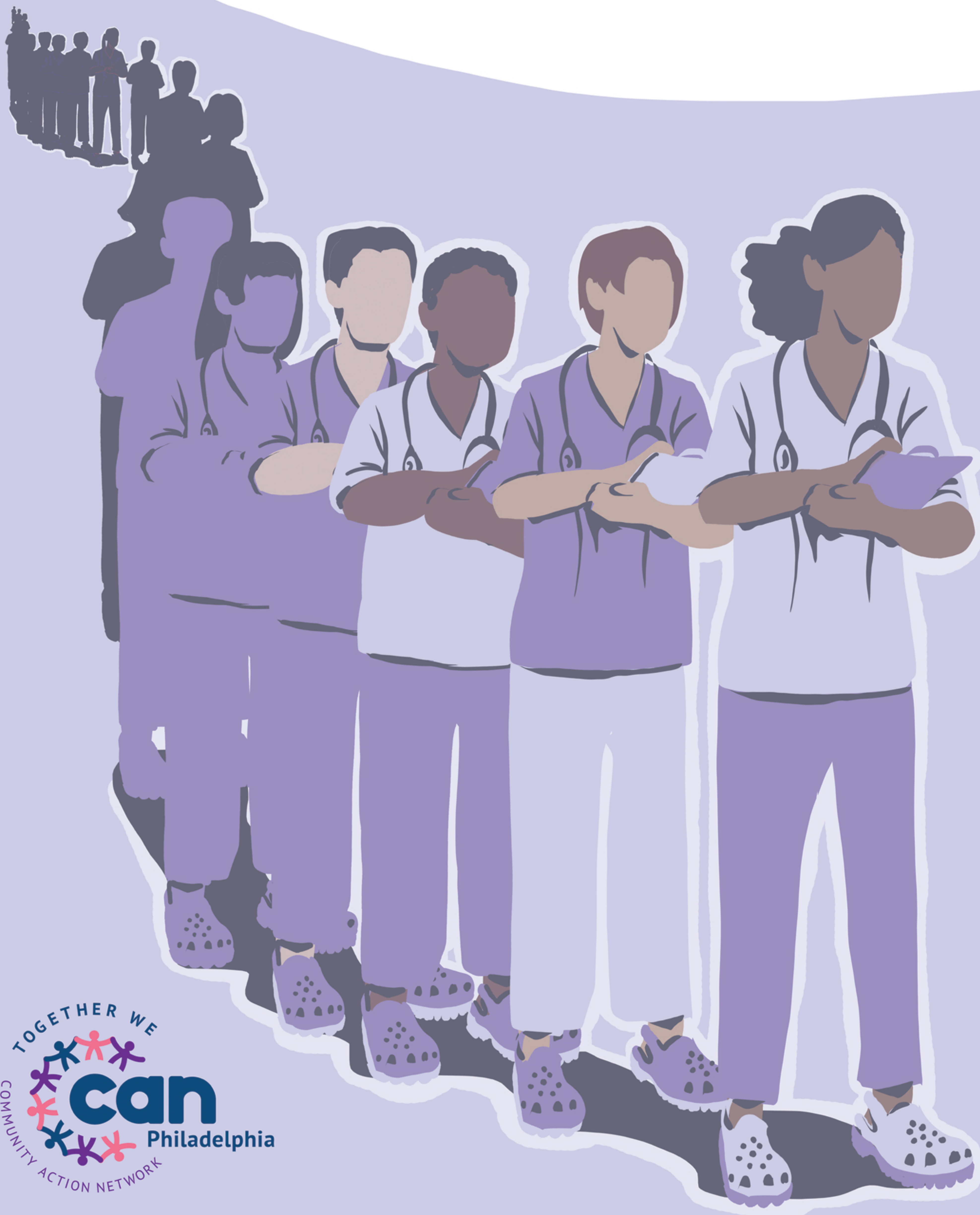


# DO NO HARM: STORIES TO IMPROVE THE BIRTH EXPERIENCE



PHILADELPHIA MATERNAL & INFANT HEALTH  
COMMUNITY ACTION NETWORK (CAN)

This comic/zine was created by the Philadelphia Community Action Network (CAN), a broad coalition of Community partners focused on reducing infant mortality in Philadelphia and increasing their health and the health of their families.

It includes input provided during story sessions conducted during the Advancing the Village Conference hosted at Drexel University in early March 2020.

The goal of the sessions was to collect stories that can convey how patients are treated in the maternal and infant health fields.

During the conference, there were three story sessions, with a total of ten individual participants.

Participants were asked the following questions:

- **Who were the people (healthcare providers) who took care of you during your pregnancy, and how did they make you feel?**
- **During your pregnancy, do you have an example of a healthcare provider that made you feel heard, supported, and cared for?**
- **What stands out about this interaction from other encounters with healthcare providers?**
- **What would you want healthcare providers to know about how you were treated/ cared for during pregnancy?**

The themes were synthesized by Strategy Arts and input from the CAN's Access to Care Workgroup.

**Older black moms feel especially judged and dismissed during pregnancy.**

**As an older patient,  
I was treated terribly.**

**I felt like I was forced  
[to have my tubes tied].**

**It was the recommendation  
of my doctor, and I didn't  
have time to consider [my  
options]. I didn't think of  
the long-term effects.**



**[As an older woman]  
I was given no pain  
medication because it  
felt like they didn't  
need to bother since  
I'm a minority.**



Black moms feel they urgently need to be their own advocate and feel they are responsible to take steps to prove their understanding of their own bodies.



I document every single thing that happens. I have to look out for myself. I have to advocate for myself.

[Doctors] say, “That’s that Philly in you.” [They] just disregarded everything I said because I’m from the hood.



Sometimes they just need to hear from us.



Relationships that include community health workers and other moms provided needed compassion and support for black moms.

[I] felt taken care of and supported...

...particularly by my doula.

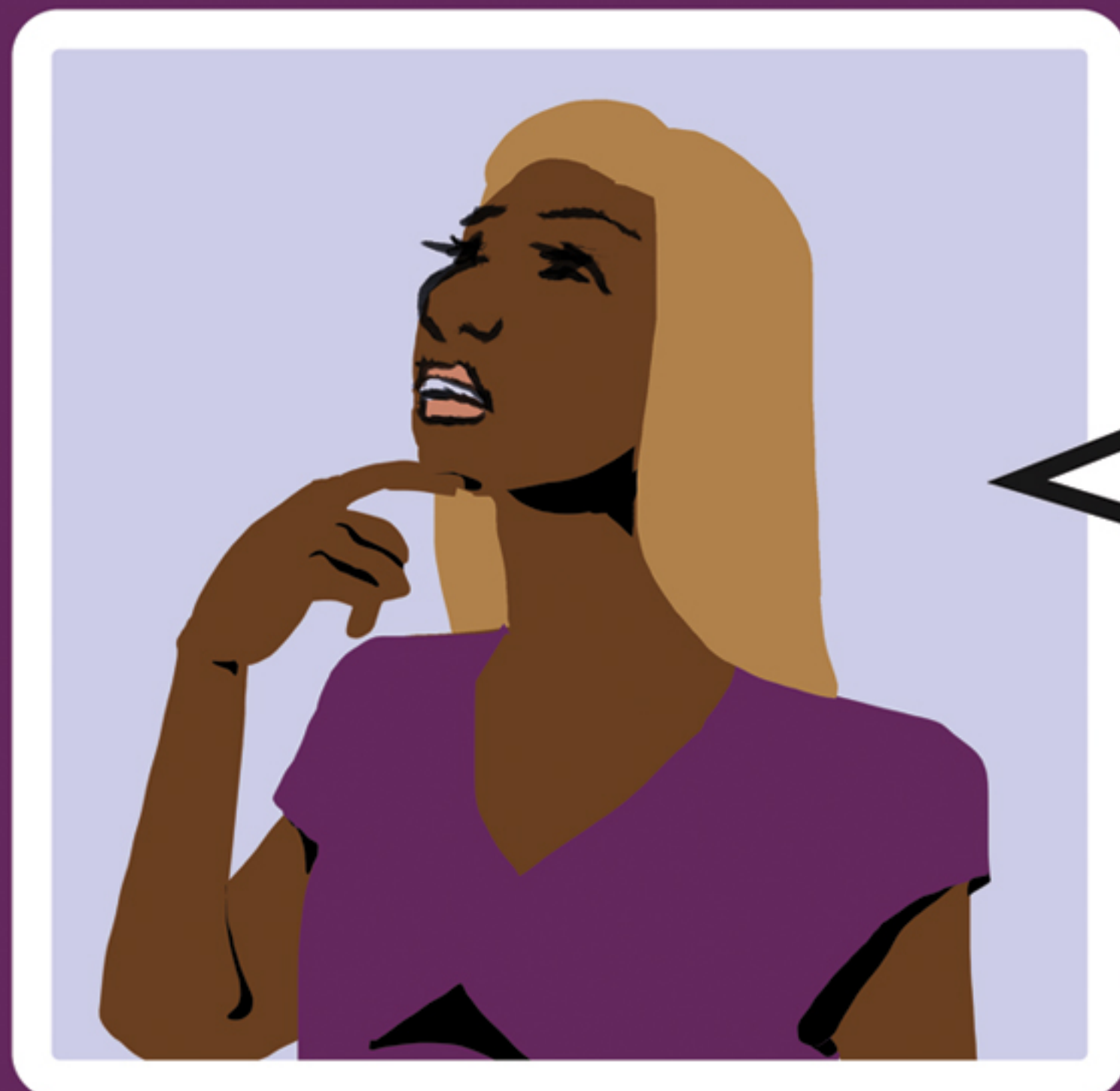
I feel it's just me, but now I know it is others.



There are opportunities for anyone working in a healthcare setting (from the front desk to the doctor's office) to form trusted, positive relationships through listening, showing up consistently and proving a willingness to include black moms in their healthcare.



The nurses are always on point!



The most helpful person was the receptionist. She identified my name and walked me through reminders.



[My OBGYN] answered questions and made my partner feel included by talking to both of us. She [OB] used “we” and was willing to answer his questions.

Barriers of racism and power exist where efforts are not made to bring balance to the respect of medical knowledge and the respect of black mothers as experts on their own bodies.

She gave information out of experience, but she did not have birth experiecene herself. I [believed] she was going with the textbook.

The energy was, “we know it and we know more than you.”

[Because of my daughter’s blackness], she was treated poorly.

The arrogance to be told you don’t know your own body!



A revolving door of providers makes black moms feel interchangeable and unable to form relationships around their health.

I saw different people every time I went.



When it came time to deliver, I didn't know who the doctor was and didn't feel supported.



**Black moms feel disregarded as individuals, especially when compared to their white counterparts, by a system that makes assumptions and generalizations and without the tools necessary to engage across racial lines.**



**Because of racism,  
their blinders are on.**

**But it isn't personal,  
it is systemic.**

**If I were white, he would  
have been more patient  
and got someone else. And I  
didn't have the experience to  
confront him. I thought,  
"You really sent me home  
like that."**



**Stop automatically  
assuming, statistically,  
that everyone suffers from  
the same diseases  
because of our melanin.**

There is significant fear and suspicion of a system that has a history of causing trauma and reinforcing damaging treatment of black moms.

[There was a belief that good treatment is the result of a study.] Studies are always occurring, but it is about money.

I had PTSD just from going to the hospital. I don't want to go to the hospital. I [would] say it and say it, but they don't get it. So, I act up, and I hate to do that.



**Active listening and clear communication, explaining medical jargon, is critical to how black moms feel about their treatment.**



**Please listen to the people.**

**This language they are using, the sensitivity and awareness and presentation are not there.**

**Young people go into this with a whole lot of fear, trauma, and stress. And doctors have power and they use it willy nilly.**

**Try to build a rapport and listen to what your patient has to say. Don't dismiss anything.**

