

Timecodes	Subjects/ Title	On-Screen Text
(00:00:00)	Opening women	[inaudible] Not necessarily, I've read horrifying articles-
(00:00:40)	Alexandra Lenihan	The pain obviously, and that's like my fear about giving birth, that it's going to hurt really bad.
(00:00:46)	Shanté Jackson	The idea of giving birth, I mean, when people see documentary about giving birth, they see the screaming and the crying and the sweating. Yeah, I personally am scared of giving birth.
(00:00:55)	Davida Koren	I think Americans and women have really internalized that birth needs to be medicalized and you have to have an epidural and you're not supposed to experience pain.
(00:01:05)	Gia Rigoli	Nine months, I hate throwing up, the morning sickness, carrying something in your body is terrifying to me.
(00:01:11)	Alexandra Lenihan	The idea of giving birth, it just seems like all the images I have in my head of women giving birth are of them screaming and their faces were really red and the sweating, and then the husband faints and then they're like, "Oh, first time dad," all those movie things that happen.
(00:01:28)	Davida Koren	At this point, we've internalized that ideology over and over again. It's now embedded in so many women to think that birth is something that needs to be treated rather than is an experience or is a natural thing.
(00:01:47)	Woman in Labor	[inaudible] hurts, pain, pain. Sorry, I can't, I can't.
(00:01:58)	Woman in Labor 2	I just [inaudible] please.
(00:02:00)	Offscreen Character	Don't hurt the baby right [inaudible]
(00:02:01)	Woman in labor 2	Oh, I hurt. I hurt.
(00:02:09)	Woman in labor 3	Goddamn.
(00:02:12)	Woman in labor 4	No, I can't, I can't do it. I just-
(00:02:13)	Offscreen Character 2	I need you to do it. [inaudible]
(00:02:15)	Woman in labor 4	It hurts.
(00:02:34)	Paula James Martinez	My name is Paula James Martinez. I'd recently moved to New York City because a giant dotcom had asked me to be in charge of all things fashionable. So like every career-minded woman, I fell in love and moved to California. And I can remember thinking, it had never been a better time to be a woman in America. Companies were taking real action on equal pay. Sexual harassment was finally being taken seriously. Beyonce had Lemonade. And we were about to get our first female president. When I had a really bad feeling, oh, shit, I was pregnant. So I googled like my life depended on it, and apparently it did. Mothers in this country are routinely dying.
(00:03:43)	News Anchor	Can it possibly be true that women giving birth in our country are more at risk than women in dozens of other nations around the world? Afraid so.
(00:03:54)	News Anchor 2	A new investigation claims United States is the most dangerous place to give birth in the developed world. Every year in the US, more than 50,000 mothers are severely injured during or after childbirth.
(00:04:06)	Paula James Martinez	Yet in the wake of so many tragic stories, I had a great birth. That's me in labor, and that's about as dramatic as it got. But I couldn't help thinking, why was I such a unicorn? What had gone right for me, I wondered. Was it because I'd had a midwife, which is unusual, but it seemed very normal to me. In case you hadn't noticed yet, although my daughter was born here in the US, I was born in the UK and delivered by National Health Service Midwives. I know you guys are thinking this.
(00:04:46)	Sister	Camilla Fortescue-Cholmeley-Browne?
(00:04:48)	Midwife	Yes.
(00:04:49)	Paula James Martinez	But a modern British midwife does much more of this. In fact, in Great Britain, France, Germany, Netherlands, Belgium, Denmark, Sweden, Norway, and Finland, over 75% of all babies are delivered by midwives. And unlike the United States, none of these countries have a rising maternal mortality rate. Birth in the UK is actually so safe that the baby's father is statistically more likely to die during his partner's pregnancy and birth, and British babies are 70% more likely to survive the experience than in the US. So why was it when I told many of my American friends that I was having a midwife birth, did they look at me like I'd suggested some sort of witchcraft?
(00:05:51)	Christy Turlington	Our history with midwives is complicated. In the 1930s, as hospitals were sort of becoming more popularized and springing up all across the country, and obstetrics as a specialty in medicine was starting to grow, and hospitals became teaching hospitals and suddenly, there was a shift away from home births and midwives. And it was almost like, let's create a new territory and in order to do that, we have to get rid of the old, and that is probably a very simplistic way of doing it, but that's essentially what happened. It's not in our popular culture anymore.
(00:06:33)	Barbara Verneus	You don't even know that it exists. When I talk to people, they say like, "Oh, people still do that?" And I'm like, "Yes, you don't have to have your birth in a hospital. You can actually have it in your home or in a birthing center, however you want. And it's your choice." Knowing that it's a choice, people don't know that they have choice in how they birth, right?
(00:06:57)	Christy Turlington	I knew always that I wanted to at least try for a natural birth. It just made sense to me, why would I not try? And I also knew enough that when you go into a hospital, that it's not going to necessarily... it's going to be harder to go that way if you're in that setting, that just like, that's what hospitals are created for, that's what doctors are trained to do, is to intervene and to operate. To me, it always felt like if I don't want that, then I should stay away, and I think there are more and more women that feel that way.
(00:07:46)	Paula James Martinez	Kimberly Turbin lives just 30 miles away from me in Reseda, yet her birth story is a million miles away from mine. It was one of the most disturbing stories I heard when I was researching this project. But not just that, it was also one of the bravest.
(00:08:18)	Kimberly Turbin	Rape and having sex when you don't want to, all that doesn't compare to I think what he did. He basically changed my decision making for me, my body, and my vagina for the rest of my life. Now I have muscle spasms issues, I have vulvodynia, which is just vulva pain. I was fine until I let them know that I had PTSD and that I had been raped in the past. And I think that the feeling was starting to creep up on me, so if they could give me something to calm down. Doctor came in and it's not going fast enough. He said, "We're going to have to do an episiotomy." And I'm like, "No. Why? We haven't even tried." It was only 5:00 PM and right now it's only maybe 11 or 12. And I'm like, "I haven't even started pushing yet. This can't be right." Basically he said, how dare I question him? He's the expert here in the room and this is what I need. And the nurse is like, "It's just going to be a little cut." And I was like, "No, I don't want you to cut me. No."
(00:09:37)	Nurse	Keep going, keep going, go, go, go, go, go.
(00:09:37)	Kimberly Turbin	No, don't cut me. Why? No.
(00:09:43)	Doctor	[inaudible] What do you mean, why? That's my reason-
(00:09:45)	Kimberly Turbin	But why can't we try?
(00:09:46)	Doctor	I am-
(00:09:46)	Kimberly Turbin	I get one contraction and I'm not saying anything and I breathe out and he just starts cutting.
(00:09:53)	Nurse	Push, push, push, keep pushing, keep pushing, keep pushing. Go, go, go, go, go.
(00:09:56)	Kimberly's mom in Spanish	[foreign language]
(00:09:56)	Nurse	Good job, good job. Keep pushing. Go, go, go, go, go, go, go, go.
(00:10:00)	Kimberly's mom in Spanish	[foreign language]
(00:10:00)	Nurse	Okay. And relax.
(00:10:03)	Kimberly Turbin	I couldn't even really cry or get happy over my baby being here, and he basically snatched that whole moment away from me. I don't think they believe our pain. After I gave birth, I asked Dr. [inaudible 00:10:18] for pain medication and he told me no. And this is that I couldn't sit. It was like someone ripped me open and then they sewed it back up, but you can't even go to the bathroom after that comfortably. I was able to catch full blown on video how these doctors sometimes are acting towards us and what they do to our bodies, while we're sitting there saying, "No, don't do it."
(00:10:46)	Kimberly Turbin	What made me take it further was after I had Rio, everybody was like, "Well, it's normal, sometimes they cut. That's what they decided to do and get over it." But I was like, "But how? I can't even sit down without being in pain." Six months, I was like walking slow, I had to change my whole diet, all fiber, I had to retrain my vagina how to work just to have a functioning vagina at 31. That's a huge part of my body that I have, that somebody took my control over. If I ever find somebody I love or want to marry or make a life with, I have to explain that I have these fucking issues with my vagina and I may not ever want to have a baby again.
(00:11:37)	Offscreen voice	She starts crying, [inaudible] said the baby [inaudible] and she runs away.
(00:11:42)	Dawn Thompson	I don't know how anyone could watch that video and not be moved and appalled by this woman laying there in the most submissive position possible, with a doctor wielding scissors at her genitals and her begging not to be cut and him berating her and demoralizing her and insulting her, and then proceeding to cut her punitively 12 times. And it's all caught on tape, and it took us 80 lawyers to find one that thought they could win.
(00:12:29)	Kimberly Turbin	It's like a whole machine that works together. They decide your fate before you even wake up that day. And a lot of these cases is, "But is the baby okay?" There's no like, "Is the mom okay?"
(00:12:50)	Dawn Thompson	What stands out a lot for me is, and it's happened a few times, is the doctor not making eye contact with the mom, entering the room, not going up to the mother's side, not asking her how she's doing, not asking her what she needs, what she wants, getting straight down to business without any interaction at all, having women being told to be quiet when asking for what they want.
(00:13:37)	Chanel Porchia	This one particular person, who we are now really close friends, I was there for both of her children and one started out as a home birth and we had to end up transferring. The doctor introduces herself and the first thing she says is, "Oh, you're so lucky because I'm the only one on the floor who uses forceps." And I was like, "What kind of introduction is that?" That's how you introduce yourself? Not, "Hi, my name is so and so, this is my name." It's, "No, hey, you're so privileged because I'm the only one who use forceps." And I was like, "Are you insane?"
(00:14:16)	Paula James Martinez	Why don't we know about our choices? And where did all the American midwives go? We have to go back to the early 1970s. It had never been a better time to be a woman in America. Companies were taking real action on equal pay. Sexual harassment was finally being taken seriously. Joni had Blue, and...
(00:14:47)	Pamela Hunt	At the time, the Vietnam War was happening.
(00:14:54)	Reporter	Anti-war demonstrators protest US involvement in the Vietnam War, in mass marches, rallies and demonstrations.
(00:15:01)	Pamela Hunt	Racism was happening.

(00:15:12)	Pro-Segregation Protester	You're not effective if you're not for segregation, so I don't see a lot of you people going in my [inaudible]
(00:15:13)	Pamela Hunt	We were pacifists, we believed that people could work out their differences by talking with each other and being compassionate with each other.
(00:15:22)	Paula James Martinez	That's Pamela. She'd never admit it, but she's a true American hero. As a college student moved by the message of peaceful resolution, she set off across the country in a caravan of pastoral buses with her husband to spread the word of peace and love when the country was facing a lot of hate.
(00:15:41)	Pamela Hunt	What you put your energy into, you get more of. So if we put our energy into peaceful resolutions, then we get more of that.
(00:15:50)	Paula James Martinez	Eventually, the caravan of buses settled in rural Tennessee to found what would become one of America's largest communes, The Farm, where Pamela would become one of the world's most famous midwives. So I set off to Tennessee to find out why midwives are a counterculture movement in the US.
(00:16:26)	Pamela Hunt	We didn't call ourselves midwives. We weren't midwives. I had a major in art, but we had a belief that birth would work.
(00:16:39)	Joanne Santana	Mind and body are one. How the woman's mental attitude is during the birth is going to make a huge difference on how it goes physically. And that's part of spiritual midwifery, you want to nurture these women, these babies, these families. You got to kind of give your heart and soul to them really.
(00:16:58)	Paula James Martinez	Joanne is also one of the early members of The Farm, and an OG spiritual midwife who, after seeing not just how the system had treated her, but other women, knew it was time to fight for a better way. Spiritual midwifery in essence is the practice of caring and listening to women during birth, and also the title of one of a series of books written by founding midwife, Ina May Gaskin. These books have introduced an entire generation to the possibility of peaceful unmedicated birth. Having sold over a million copies worldwide, the book from a commune has something of a cult status. But why now, do generation after generation of mothers continue to press their dog-eared copies into each other's hands?
(00:17:50)	Doctor	All right. [inaudible]
(00:17:55)	Carol Nelson	In 1965, pretty much the standard of care, when you first hit the hospital, you got a shot of Demerol, Demerol is a pain reliever, you got a shot of scopolamine, dries up your secretions
(00:18:12)	Doctor	All right, let's-
(00:18:13)	Carol Nelson	You had your enema and your prep, which included shaving your vaginal area.
(00:18:19)	Joanne Santana	The nurses would call it pit, stick, suck and split, Pitocin, an epidural stick, suck the baby out with a vacuum extractor, and bye, as quick as possible.
(00:18:32)	Paula James Martinez	Carol's story is really disturbing, but unfortunately, not unusual for the time.
(00:18:38)	Carol Nelson	I ended up having an allergic reaction to the Demerol. not only throwing up, but instead of it making me relax, it made me tense. At that time, when you got fully dilated, they would bring you back to the delivery room and they would give you more drugs, more anesthesia, and put you to sleep.
(00:19:09)	Paula James Martinez	And it wasn't just bad for mothers. Studies also found behavioral and motor issues in babies whose mothers had received anesthesia, including Demerol.
(00:19:19)	Carol Nelson	And then, the doctor did a huge episiotomy and took the baby with forceps.
(00:19:26)	Paula James Martinez	Now, I'm only going to explain episiotomy once because it makes even me feel weird, but it's basically when a doctor cuts you with scissors down there to make the opening larger and get the baby out faster
(00:19:41)	Carol Nelson	After the birth, they put me in recovery and just left me alone, flat on my back, and I ended up throwing up and aspirating. Luckily, one of the nurses came back in as I had stopped breathing. So that was a horrific experience. I really didn't know that that wasn't what everybody went through. I wasn't educated enough to know the difference.
(00:20:08)	Paula James Martinez	The difference was though, these were women looking for solutions, to stick it to the man and take back control. There was a movement among women's groups in the '70s developed to deinstitutionalize the defendant. Feminists argued that childbirth was not a disease and that childbirth did not require hospitalization or the supervision of an OB.
(00:20:30)	Joanne Santana	How did I get into midwifery, really? Self-preservation. I had my first baby in 1967 and the only real childbirth training I'd had as far as seeing a birth was Wagon Train. Once in a while, the Conestoga wagons on the trail would pull over and film from the outside of the canvas, you would hear a woman scream, a baby cry, and the wagons would roll on. So I thought, okay, you scream and the baby comes out. I remembered one of the nurses saying, "Just think about your breathing." I said, "Well, how do you breathe?" And she said, "Just think about your breath going in and out." And I tried it, pain cut in half, and I was like, wow, heavy magic. And then, it was just too strong. I thought, I can't do this anymore. And it stopped, no more contractions. And I'm sitting there going, somehow I'm not understanding how intellectually, how to get this baby out, but my bod has gotten pregnant, grown this baby, well on the way to having this baby, I've just got to trust my body that it's going to get me out of this. And as soon as I thought that, they came back and pretty soon, I had a push.
(00:21:48)	Doctor 1	Hello, now don't you worry.
(00:21:50)	Doctor 2	We'll soon have you cured.
(00:21:52)	Doctor 1	Leave it all to us, you'll never know what hit you.
(00:21:55)	Doctor 2	Goodbye.
(00:21:55)	Doctor 1	Goodbye.
(00:21:58)	Joanne Santana	In those days, they bring you to an OR room, which must have been about 45 degrees, everybody has layers of clothes, and they're all yelling at me, "Don't push because the doctor's not there." Right after I'd made this deal with myself to listen to my body. So I'm going, "Ah, okay, I'll be a good girl." I don't push. He finally shows up about 15 minutes later, cuts a huge mediolateral episiotomy for a 6 pound, 14 ounce little girl I should've had 15 minutes ago with the nurses. I couldn't sit down for a month. I had to take a pillow with me everywhere. I thought there has to be a better way than this.
(00:22:39)	Joanne Santana	So when I got pregnant with my second, first midwife I ever met was a guy named Bob. And he asked how my other birth had gone, and he said, "Oh, you can do it at home." And I said, "Well, don't you need to cut an episiotomy?" And he said, "No, no, just don't push hard." On 4th of July, we were going over to Sutro Park to sleep for the night, started having contractions, called the Good Earth Commune. One of the ladies came over with her baby and was, what you would call nowadays, my doula. And got me in a tub, talked me through some contractions, and then I pushed him out and she said he popped out. All the fireworks in San Francisco went off. It was the most empowering thing that ever happened in my life. It was so different from my first birth. I just felt like I could do anything.
(00:23:35)	Paula James Martinez	So that was it, women could do anything. We were free, free to choose the birth we wanted to try for, free to push when we wanted to, free to say no to drugs or yes, free to give birth at home or not, free to be heard, free from dangerous procedures we didn't need, free to take back control. Okay, maybe not. I might have got a little-
(00:24:01)	Paula James Martinez	Okay, maybe not. I might have got a little carried away there.
(00:24:07)	Paula James Martinez	The conflict over home birth proved one of the most bitter between the medical establishment and the women's movement. And while no state forbade home birth, ACOG actively discouraged it. Doctors have participated in home births by offering backup in an emergency were threatened with loss of hospital privileges and even losing their medical license.
(00:24:30)	Carol Nelson	Our Tennessee law had been on the books since 1898 and it was one little sentence in the Medical Practice Act that said, "Midwifery is not the practice of medicine," and that let midwives practice openly in Tennessee, not all states were like that.
(00:24:51)	Paula James Martinez	In fact, very few states were like that.
(00:24:57)	Pamela Hunt	The midwives in the South were keeping midwifery alive. They were keeping home birth alive. These home birth midwives knew what they were doing.
(00:25:08)	Monica Simpson	Midwives, especially in the Southern region have been the champions of our community and there was a very intentional break. Midwives were holding a lot of power in our communities, and these were Black women and these granny midwives, as we call them in the South.
(00:25:27)	Paula James Martinez	Grannies were healers and valued by slave owners. As more healthy babies meant well, more people to enslave. But as slavery was abolished ...
(00:25:39)	Joanne Santana	They made it illegal or retired them and then made it illegal in Alabama and Mississippi and Florida.
(00:25:48)	Pamela Hunt	What it looked like to me is Alabama medical system didn't want those babies to be born by midwives. They wrote a law and they put all those midwives out of work. And Alabama still has very backwards in their thought about midwifery.
(00:26:07)	Barbara Verneus	Midwives are being attacked, being told that we're not safe, but yet majority of the unsafe births are happening in hospitals.
(00:26:16)	Paula James Martinez	And even though the work of Black midwives in America has been whitewashed out of most of our cultural understanding of birth, there's a growing number of midwives of color like Barbara who are putting their lives on hold to become qualified often against the odds to provide holistic care within their community and transform our perceptions about what midwife care really is.
(00:26:39)	Barbara Verneus	Culturally, in African culture or Caribbean culture, a midwife wasn't just a person that caught babies, they were the medicine woman, they were the counselor, they were everything centered around the community, they uphold the family.
(00:26:57)	Carol Nelson	Historically if you look back, midwives have been a threat and midwives have been the healers, the people who deliver the babies and the women who empower the women to give birth and there is no reason that there shouldn't be midwives everywhere.
(00:27:14)	Paula James Martinez	And because American tales are often wild and winding, the biggest community these progressive hippies served as midwives were well, the Amish.
(00:27:27)	Pamela Hunt	Now, the Amish are interesting because they don't really educate their women about childbirths, but the girls grow up seeing their mother having baby after baby after baby and so somewhere back there they know that that's normal.
(00:27:41)	Carol Nelson	So, those women are in our statistics, grand multips. We've delivered a lady's 19th baby at 49 years old and that's not low risk.
(00:27:53)	Pamela Hunt	I don't think that the hospitals can brag about that. I think that the hospitals are having a hard time because they're doing so many interventions.
(00:28:04)	Paula James Martinez	But interventions are also lifesaving, which is why it's vital that midwives are able to be supported by doctors if needed, a model known as integrated care in most developed countries.
(00:28:16)	Pamela Hunt	We made those connections in 1971. Lovely doctors who are very willing to work with us and have helped us a lot.
(00:28:30)	Dr. Gae Rodke	For seven years I was a backup for six wonderful dynamic lady midwives. At one point, they even told me I was an honorary midwife, I just happened to be there. I was a midwife who could do a cesarean delivery if I needed to. I was always the last person they wanted to see because if I showed up, it meant that something hadn't gone the way they wanted it to.
(00:28:54)	Barbara Verneus	If there is an emergency, okay yo, let's go to the hospital. If there's a C-section that is necessary and needed as long that keeps baby and mommy safe and whole, let's go do it.
(00:29:09)	Paula James Martinez	Washington has some of the most integrated care in the US and the best survival rates for both mothers and babies.
(00:29:21)	Paula James Martinez	In Jen's case, modern medicine saved three lives.

(00:29:27)	Jen Sinconis	I was 24 weeks pregnant when I thought I was just having Braxton Hicks contractions. Called my doctor, I had mentioned that the contractions hurt and they said, "Oh actually, they shouldn't hurt, you should come in." It got serious really fast, I hardly had time to fully understand what was happening. When I woke up in recovery, I knew I wasn't pregnant, I knew they were born, I knew they were tiny, but I didn't really understand what that meant. It really wasn't until I was allowed to see them the next day that that severity of the situation really hit me. It was three months and we were talking about tracheostomies, it was six months and we were talking about more surgery and lifelong therapy needs. We saw what was coming with the medical repercussions while the boys were literally fighting for their life in the NICUs.
(00:30:49)	Paula James Martinez	Yet even with the incredible care Jen's family received, there was one very stark difference between her story and those of mothers in all other developed nations.
(00:31:01)	Jen Sinconis	The boys went in for heart surgery at six weeks old and I know that bill came in at around \$260,000, which honestly we just laughed, put it in a drawer because we don't have that. There were so much that was really expensive. Being in the NICU, just the room itself is \$10,000 a day plus I had two kids so that was doubled. That didn't include the doctors, the nurses, the therapists, the treatments, the medications. There were a lot of things that weren't covered but we didn't start to realize some of that until several months, even several years down the road.
(00:31:43)	Jen Sinconis	I was very naive at the beginning in that I just assumed that since we had comprehensive medical care and I paid my insurance bills every month and I had an employer that sponsored this plan that it would be okay. My biggest mistake was actually trying to pay everything. We did everything we could to pay our bills and to stay current. So, we liquidated our 401ks, we sold our house, we sold our cars, we sold our furniture. We ended up declaring bankruptcy to write off about \$400,000 worth of personal medical debt. But even after that, their medical bills were still so high that we just couldn't keep up. This is America, I had no idea we could fall into a gap like this.
(00:32:53)	Paula James Martinez	Does the insurance system affect outcomes?
(00:32:57)	Amy Richards	People in the United States no longer even know what the cost of medical care is because it's so hidden in these copays and you're being charged X only because they know they're only going to get Y from the insurance repayment. But if you're paying for it directly, all of a sudden there's a new price of B that was never even part of the conversation. So, I think that we don't live with real numbers and that's all a part of the capitalistic system that supports the medical industry and establishment.
(00:33:26)	Harry	Expensive, 9.25 for a bar soap.
(00:33:29)	Zinnia	Well, I had to take shower, Harry.
(00:33:32)	Harry	\$5,000? I'm not paying it. What are they going to do, repossess the kid?
(00:33:36)	Joanne Santana	Money, it wasn't about safety or what the women wanted or anything, it was all about profit.
(00:33:43)	Chanel Porchia	Here, it's a business. You become a commodity, your child becomes a commodity. How can I thereby make money off of that? I don't have time for you to be in labor for 72 hours, no. The capitalist structure of this nation is based on the industrialization of motherhood.
(00:34:06)	Dr. Gae Rodke	The people in charge now seem to want to make it into shift work. They have employed laborists they call them, who are watching actually more ladies than ACOG says a doctor should be watching in active labor, but they are watching numerous ladies in labor and just intervening whenever somebody crosses whatever arbitrary line has been created.
(00:34:41)	Dr. Emiliano Chavira	Obstetrics is getting better at this in recent years but there was a period of time where inductions were really done for any old, almost no reason at all, a convenience of scheduling and ...
(00:34:55)	Pamela Hunt	Well, I'm sorry, but our bodies don't work like that as women. We're not on a schedule, we're not on a schedule. Try to put a woman on a schedule.
(00:35:13)	Dr. Emiliano Chavira	As society advances and medical care in general advances, there's probably an underlying belief that every technology that gets developed is going to improve childbirth and the care of pregnant women. I think that's just a value and something that's not necessarily proven scientifically.
(00:35:38)	Doctor 2	And get the machine that goes bing.
(00:35:38)	Doctor 1	And get the most expensive machines in case the administrator comes.
(00:35:49)	Doctor 1	Still something missing, man.
(00:35:49)	Both Doctors	Patient. Yeah.
(00:35:59)	Amber Price	We are a country that likes to sue whenever there's an outcome that is not optimal. And so, we have a reactionary healthcare field where we tend to not push the envelope, allow somebody to do something that's outside the normal standard of care because we're really concerned about a lawsuit. It is absolutely driving decision-making in healthcare right now but it's also helping drive the maternal mortality crisis because we tend to intervene out of concern that we might be heading down a path where we might see an adverse outcome if we're not listening to people, if we're not hearing what they're saying, if we're missing important clues, not just during their pregnancy and birth but in their postpartum period, we see adverse outcomes.
(00:36:49)	Dr. Gae Rodke	If I had a wish it would be that we would have a birthing system that was set up for and by women and that women were in control of the birthing process because I think that there are things that the largely male administration of most hospitals and the boards of directors of insurance companies just don't get about birth. In an ideal world, I would love for all OBs to have midwifery training so they could understand the process of normal birth as opposed to the medicalization of birth.
(00:37:42)	Paula James Martinez	One of the most vulnerable moments of my life was during labor and I can't imagine doing it without support, particularly that of my doula. If I'm honest, I don't really remember anyone else being there but my husband assures me he was. You might be wondering what a doula is. No, a doula is not a handbag, a weird deer or a part of your brain. It's not exactly what Ali Wong suggests either.
(00:38:10)	Ali Wong	I'm very, very scared of childbirth, that's why I'm going to hire a doula. You know what that is? You know what a doula is? That's a white hippie witch that blows quinoa into your pussy to Keyser Soze all the pain away.
(00:38:31)	Dawn Thompson	The doula is for physical and emotional support so it's what we used to do centuries ago back in the day, our sisters, our mothers, our grandmothers, our cousins, our aunts, all the women before us who had babies helped us birth. They were there, they were rubbing our back, they were talking to us, they were singing to us, they were doing all of these things that helped us through childbirth and we just don't do that for women anymore. And so, I think the doula fills that spot now.
(00:39:03)	Monica Simpson	So, I think that doulas are extremely important and I may be a little biased in that because I am a doula but I understand how important it is for women to have support, for us to be able to take care of each other during this journey to motherhood.
(00:39:26)	Paula James Martinez	And as much as you might think doulas are in the same category as kale facials or jade vagina eggs, it's statistically proven they can have huge benefits for mothers. In fact, a large scale study of over 15,000 women from 17 countries found that compared to birthing people with no labor support, those with a labor companion such as a doula were more likely to have a shorter labor, less likely to need drugs to speed up labor, less likely to use any pain medication while giving birth and less likely to have their babies admitted to a special care nursery.
(00:40:01)	Danika Charity	Having come from a long line of teen parents, I had always really been drawn and had a heart for teens, pregnant teens. Thinking of all these girls, well, first thinking of my family, my mom, who with me took a bus to the hospital to get induced and then took a taxi home at 18 years old. All my aunts who gave birth at 15, 16, 17, I thought about them and what that experience must have been like for them and how different it was from my experience. That is what made me go and do my doula training because I wanted to serve them and other underserved women.
(00:40:43)	Danika Charity	There's rarely a girl that says no to a free doula. Do you want someone who's going to be there and help educate you leading up to your birth and then she'll join you during your birth and she'll help massage you and comfort you and give you all the information you need? Do you want this person? Yes, of course. And who wouldn't? And a lot of them don't even know that they have these choices and that they can speak up and that they can walk into a hospital and have a plan. Most of the doctors who they work with and nurses do not expect them to walk in knowing what they know and they would prefer that they didn't ask and that they would prefer that they didn't know these things.
(00:41:22)	Chanel Porchia	Our work becomes more in the realm of advocacy and really trying to advocate for this versus basic human rights. Just the human right to just be who you are and to have bodily autonomy over yourself until you birth your babies in a way that is affirming to you.
(00:41:44)	Dawn Thompson	Doulas have been proven to improve outcomes and the system is starting to recognize that. It's a bandaids on a broken system when what we should be doing is spending all of that money and time fixing that system.
(00:42:02)	Amber Price	What care ideally should look like is that the woman who comes in to have her baby is ask questions around what is important to her and what those things are that she's really looking for along the journey of her birth, where we're respectful if somebody's having a contraction to stop talking and to support her through that rather than being focused in our computer systems, where we are high touch and low tech, where every woman's birth has a goal of being as low intervention as possible and not as managed. And culture change is where hospitals can make the greatest impact. But society has just as greater role in how we portray birth before somebody ever comes into that system.
(00:42:45)	Dr. Gae Rodke	I stopped doing obstetrics last December, which still is sad for me. I came to that decision because I just couldn't any longer practice in a place where women's goals were so dismissed. The chairman of our department actually said that they were going to have protocols and all ladies would get the same care no matter what. And so, the chance to individualize care for a given patient went out the window. And I couldn't in good conscience take patients who over the years had entrusted me to be their advocate and to make medical decisions for them knowing them to have to give up not so much my autonomy, but their autonomy was too heartbreaking. It wasn't what I went to medical school to do.
(00:44:03)	Dr. Emiliano Chavira	When you get a medical education, you are apprenticed in some of the basics and presumably over the course of your career, you're going to keep learning and advancing and as the field changes, you keep along with it. You get trained to practice in a certain way and you get a certain familiarity with clinical scenarios that are common. And you basically learn, "This is how I treat scenario A and this is how I treat scenario B." To practice in a way that is different in the way that you are trained or different in a way that you are familiar with becomes very uncomfortable because you're not necessarily used to or familiar with what's going to happen if I don't do these things. And our position as obstetricians is going to be, "Well, that's too bad you're just going to have to figure out a way to survive it and get through it, this is the only thing that we can offer you." I just came to feel that we had taken a wrong turn somewhere and how did our specialty get to a place where the experts in childbirth cannot deliver a baby?
(00:45:27)	Paula James Martinez	How do the rest of us learn about childbirth?
(00:45:36)	Instructor	[inaudible]
(00:45:43)	Instructor	Well, I'm going to send you through to Sandra and see if you can find out about the baby? It looks like we will be having a happy, healthy baby. First thing I'm going to do is I'm going to give [inaudible 00:45:51] a large dose of [inaudible 00:45:52] aine. Now this does not hurt, now [inaudible 00:45:56] just loosens her at least and helps for an easier delivery. And the next thing I'm going to do is I'm going to check to make sure she's exactly to [inaudible 00:46:06]. She's going to need your help with a quick breathing exercise to help her relax a little so can I get you all out and in and out and in and out. All right, she is ready to push but she's going to need your help with one more time. So, on the count of three can I get you [inaudible 00:46:29] push as loud as you can. One, two, three. Push. All right. One more time, just a little bit louder. One, two, three, push.

(00:46:38)	Instructor	Here's our little boy. Yay.
(00:46:38)	Instructor	So, I'm just going to wrap him up to tell you a couple of things about him.
(00:47:26)	Pamela Hunt	When your body goes into labor, you have a hormone, oxytocin. In labor, it rises and rises and rises. And at the time you have the baby, you have the most amount of oxytocin going through your system at any other time in your life and that oxytocin is a pain killer.
(00:47:51)	Paula James Martinez	It's not just a better understanding of birth for those having babies as needed, partners are also a vital part of the process too.
(00:48:00)	Charles Johnson	Let me see, which one? Which one is it?
(00:48:00)	Charles Johnson	This one.
(00:48:06)	Charles Johnson	Which one is it, this one?
(00:48:10)	Child	Yes.
(00:48:10)	Charles Johnson	You need a new finger?
(00:48:11)	Child	Yes.
(00:48:12)	Charles Johnson	All right, let me check my pocket. What's tonight, guys?
(00:48:14)	Children	Tacos.
(00:48:15)	Charles Johnson	Taco what?
(00:48:17)	Children	[inaudible 00:48:21].
(00:48:18)	Charles Johnson	Taco Tuesday.
(00:48:20)	Woman	You want some tomatoes?
(00:48:22)	Child	We had [inaudible 00:48:21].
(00:48:26)	Woman	You did. Do you want some tomatoes?
(00:48:28)	Charles Johnson	This is a table I had. This is actually, before [inaudible 00:48:31], this is a table that Kira and I had in the place here. So for weeks we moved in, and so she walked in, and I'd be sitting at this table [inaudible 00:48:40] like a grown man just all the time.
(00:48:43)	Paula James Martinez	That's amazing.
(00:48:47)	Charles Johnson	Langston is in what I call the toaster or the little incubator, just taking a nap. Kira is resting in here bed. As I looked down, I began to see the catheter at Kira's bedside begin to fill with blood. And I was alarmed, frankly, and I brought it to the attention of the staff and the nurses. And they came in. They assessed Kira. They ordered a series of tests including blood work and an ultrasound and also, very importantly, a CT scan that was supposed to be performed stat. I'm concerned, but I'm thinking, you know what? My wife is healthy. My baby is healthy, and we're at Cedars-Sinai. Her blood work comes back. It's abnormal. It's showing that all of her blood levels are dropping. When they did the ultrasound, they can see that her abdomen is beginning to fill with fluid. So keep in mind, this is shortly after 4 o'clock. The doctor comes in. He looks at her, feels around in her stomach. She's in intense pain, and he says, "We'll just see what happens," and walks back out of the room.
(00:49:53)	Charles Johnson	And I'm asking, "Well where's the CT scan?"
(00:49:55)	Charles Johnson	They're telling me, "It's coming. It's coming. It's coming." 7 o'clock comes. By this time, Kira is shivering uncontrollably. She's beginning to become very pale. And they do another ultrasound. They see that there's even more blood in her abdomen.
(00:50:09)	Charles Johnson	And I'm asking still, "Where is the CT scan?"
(00:50:13)	Charles Johnson	And at which point a staff member tells me, "Sir, your wife just isn't a priority right now. Your wife just isn't a priority right now." 9 o'clock comes, 10 o'clock comes, no CT scan. Kira's condition is continuing to deteriorate.
(00:50:29)	Charles Johnson	And they said, "Sir, we need to give her a blood transfusion so that we can keep her stable."
(00:50:34)	Charles Johnson	And I'm saying, "Keep her stable, just a couple of minutes ago somebody told me that she wasn't a priority. What are you talking about, keep her stable?" Hours continue to go by. 10 o'clock comes, 11 o'clock comes. It wasn't until after midnight that they finally took Kira back to surgery. I'm angry. I'm frustrated, but I'm thinking finally they're going to do something. They're going to do something. They're going to fix it. On the way to the operating room, I'm holding her hand, and she's saying, "Baby, I'm scared." And if you know Kira, there was not a lot that scared Kira. We're talking about a woman that raced cars, who ran marathons, who was a avid skydiver. But she's holding my hand, she's saying, "Baby I'm scared."
(00:51:21)	Charles Johnson	And the doctor says, "It's no big deal." He says, "I'm going to go back in through the same incision I made earlier when I did the cesarean. I'm going to find out what's going on, and I'm going to fix it." He told me that she would be back in 15 minutes. After they took Kira back to the operating room, they took me out to a waiting room and the same waiting room we had entered that hospital in at 1:30 that afternoon. And at 1:30 in the afternoon, that room was full of life. It was fully of mothers and balloons and families that were excited to welcome these precious gifts and these new babies. And they put me in that waiting room, and it was empty. All I could hear was the janitor's vacuum. My eyes are fixed on this set of double doors, because I know when somebody comes to give me some news, they're going to come through that set of double doors.
(00:52:27)	Charles Johnson	Finally those doors open. A set of residents walk towards me, and they say, "Mr. Johnson, we need you to have a seat." So I sit down, and they tell me, "Mr. Johnson, we couldn't be back there any longer without letting you know what's going on. When he made the incision to open her up, there was a lot of blood, and Kira coded."
(00:52:50)	Charles Johnson	And I'm saying, "What?"
(00:52:52)	Charles Johnson	"She coded, but her situation is critical, they're continuing to work on her." There was hope. They were working on her. And in my mind, honestly at that point I thought that she was going to be okay. Because you're working on her, and this is Kira. She's amazing. That set of doors opened again, and those same two residents, along with a doctor that I'd never seen before, came. They told us that Kira had died, and there was nothing that they could do to save her.
(00:53:30)	KIRAS LULLABY Performed by Johanna Cranitch	[singing]
(00:54:05)	Charles Johnson	When they took Kira back into surgery, and the doctor opened her up, there were three and a half liters of blood in her abdomen, and her heart stopped immediately.
(00:54:14)	Kira Johnson	Yay, give me hugs. I love you, snookers. You're my precious. I love you.
(00:54:44)	Charles Johnson	A woman like Kira, a woman that's perfectly healthy, having access to care, who has a healthy child, who didn't have a high-risk pregnancy walking into a hospital like Cedars-Sinai Medical Center and not walking out to raise her precious sons, I thought that she was an anomaly.
(00:55:10)	Paula James Martinez	I wondered if those in power were starting to hear the voices of those who felt so powerless.
(00:55:22)	Panel Speaker	I'm here first and foremost as not just a man and a husband but a dad to a beautiful, healthy, little five-and-a-half-year-old girl that is missing the most important thing in the world for every little girl. And that's a mom. My wife took her life 41 days after my daughter was born. Nowhere on the death certificate was a box checked that she had given birth to a baby. There's two words, hanged and hanged herself. My daughter has to look at that death certificate. I'm running out of stories to tell her about what happened. The reality of the matter is, I'm scared to death she's going to blame herself. But it's not her fault, and it wasn't her mother's fault. It is the system's fault. It's healthcare's fault. My wife did not suffer in silence. She was extremely vocal about what was going to happen. We went to seven different hospitals in different facilities in the last 13 days of her life, each one turning her away for one reason or another.
(00:56:20)	Panel Speaker	All the doctors she talked to, the answer every time was the same. It never changed. "You're fine. You're not crazy. You don't belong with them. Just go home and be with your friends and family. This will pass." Postpartum depression is twice as common as breast cancer. Now imagine that. Imagine you just get diagnosed with breast cancer, you walk into a hospital, and they say, "I'm sorry, we don't offer services for that. Just go home. You'll be fine." It's too late for my wife, but it's not too late for my daughter. We have an opportunity to make sure that my daughter's generation, that women after my wife get the care they need, the care they deserve.
(00:57:03)	Panel Speaker	And I always emphasize all the time, it is not a women's health issue. It is a family health issue. If mom is not okay, everybody suffers.
(00:57:42)	Paula James Martinez	Postpartum depression is not a small problem, yet far too many suffer in silence. Not only are mothers not being heard, but also there's this guilt, if you say you're struggling, that you're a bad mom.
(00:57:58)	Rep. Joe Kennedy III	I think you're starting to see men step up and talk about it, and we have to. I cannot imagine going through that period with a new addition to our family without my wife there. I can't imagine it for me. Obviously your entire life would be upended. I can't imagine it for our three-year-old little daughter or our one-year-old little boy. I can't imagine the stories that I have heard from husbands and dads that have told their own stories. What compels me to try to speak up about this is to know that we can do something about it.
(00:58:27)	Paula James Martinez	But is anyone in congress doing anything?
(00:58:34)	Rep. Jaime Herrera Beutler	We're 47th in the developed world for maternal mortality, and it's getting worse. So then the next question is, why? Why are we the 47th? And why is it getting worse? And why are some states even worse than others? If you're an African American woman in New Jersey, I am almost to the point where it's like, should we try and let them have birth elsewhere? It's mind blowing in 21st century America that that's happening. So these groups started saying, "Well we can't answer the question fully. We need maternal mortality review committees in every state. We have to investigate every death."
(00:59:17)	Paula James Martinez	In a moment when it feels like we're unable to agree on anything as a country, two mothers from either side of the aisle said, "Enough."
(00:59:25)	Rep. Jaime Herrera Beutler	We pushed and pushed and pushed many different angles, the coalition. Charles was willing to tell his story.
(00:59:33)	Charles Johnson	I just started lobbying for it. I started writing letters. I started making phone calls. I started making visits to Washington DC, taking meetings with anybody that would meet with me, trying to tell Kira's story, trying to get people's attention. I'm not asking at this point. I stopped asking a long time ago. When I go into these offices, I'm respectfully demanding their support. I'm respectfully demanding that this bill go to the floor for a vote, because there's two types of people in our country. Either you are a mamma or you have one. Pour my heart out to congress, people on both sides of the aisle are in tears.
(01:00:07)	Charles Johnson	For those that choose to stand in opposition to this bill, you don't owe me an explanation. You owe an explanation to my boys. You owe Tara Hanson's son an explanation. It passed with flying colors, unanimous support in the house. It passed in the Senate. And so HR1318 is a law.
(01:00:41)	Rep. Jaime Herrera Beutler	Because I've been at the table, doing policy while I've gone through challenging pregnancies or typical pregnancies, or now we're doing this with a midwife so get a little bit of everything. I think it adds to my perspective when I'm making policy. So I bring that to the table, and we need it. I guess part of the problem is maybe there haven't been as many people giving birth while in congress.

(01:01:06)	Paula James Martinez	Well it's certainly an issue that some of our law makers are less shy about discussing. Law makers like Tammy Duckworth, a senator, a veteran who lost both her legs while deployed in Iraq and a working mom of two.
(01:01:24)	Rep. Tammy Duckworth	And exerting even more control over women's bodies, it's sexist, regressive and flat-out dangerous. But even while this administration's agenda is a travesty, it's not an anomaly. Rather it's just the latest step in the far-right's long march to strip away women's rights, and I'm tired of it, sick of them trying to shame women, when they are the ones who should be ashamed. So enough with the hypocrisy, with the misogyny, with some men in hallowed halls in DC arguing that they know better than moms in Illinois or Arizona or Missouri, we can and we must do better. That means fighting for everything from equal pay to better parental leave. It means proving that we care about women every day of the year, not just on one Sunday in May. That's the least that our mothers and daughters and sisters deserve. Thank you.
(01:02:18)	Rep. Tammy Duckworth	The rising maternal mortality rate in the United States is really an issue of disparity. And it becomes an issue of disparity of resources, and I think that the push to go after organizations like Planned Parenthood, the abortion debate, the choice debate has really allowed those folks who are very extreme on the far right to stop the funding stream that goes to a lot of these healthcare practices that really serve underprivileged and lower income women. And that's really causing the rates to spike.
(01:02:54)	Paula James Martinez	It's reported that nearly a quarter of rural hospitals are on the brink of closure. Being 90 miles from your nearest ER can't be good for anyone's health.
(01:03:04)	News Anchor 1	Data used by the Leapfrog Group ranked Lehigh Regional Medical Center at the bottom, an F for patient safety.
(01:03:11)	News Anchor 2	Georgia mothers are dying. Our state ranks last when it comes to maternal mortality.
(01:03:15)	Paula James Martinez	And even if your hospital stays open, unfortunately the lower your neighborhood income, the less likely your hospital is to have a good safety grade, as resources are strained, and staff are over worked and under supported.
(01:03:30)	Rep. Tammy Duckworth	I've had a long journey to motherhood. It took me 10 years of infertility to try to have my children. I know how precious they are to me, and so it really is something that I can't imagine a child growing up without her mother, because her mom died in childbirth. I can't imagine that we, as the richest, most powerful nation on the earth can't solve this problem.
(01:03:55)	Paula James Martinez	So how do we continue to take back control? The more I connected to grassroots workers in maternal health, the more I saw how hard it was for them to be heard beyond those who already knew we have a problem. An answer to this is Mom Congress, a group of mothers, fathers and birth workers who came from every state in the nation to collectively take a series of bills to their representatives.
(01:04:22)	Mom Congress Member 1	I think that's really all of our goals. And if we want to highlight specific disparities and things like that, we can absolutely do that.
(01:04:29)	Mom Congress Member 2	I think we have to, because the majority of ... When we have 78 point-
(01:04:34)	Mom Congress Member 3	There's 78%.
(01:04:34)	Mom Congress Member 4	Of people of color, then that's the issue.
(01:04:37)	Paula James Martinez	Well it's all a symptom of the same thing. They aren't listening to women, and they're deaf to Black women.
(01:04:42)	Chanel Porchia	When it comes to women in general, we're just not being listened to. We're not being heard. Our children are not being heard. They're not being taught about themselves, about their bodies. And we're not being educated. So then you grow up to be an adult who then becomes pregnant. And we don't think about pregnancy until then.
(01:04:57)	Mom Congress Member	[inaudible 01:04:57].
(01:04:56)	Mom Congress Member 1	All right, so let's go. Let's get through security, and let's get this going. This is my group.
(01:05:08)	Mom Congress Members	Some of us, some of the moms are not here. Too many moms, right?
(01:05:12)	Mom Congress Members	Too many moms are not here.
(01:05:14)	Mom Congress Members	And that's why we're here today.
(01:05:15)	Mom Congress Members	I got chills [inaudible 01:05:17].
(01:05:31)	Paula James Martinez	Imagine if, and just hear me out here, two men died every day in America as a result of reproduction. If their contributions to the birthing process were a game of Russian roulette, would we stop having sex without medical help? Would we tell them, "Well you know it's a risk, if you choose to become a daddy." Would we brush these stories under the rug and chalk them up to the original sin? Well if the industry that created Viagra was anything to go by, I'd say that's a probable no.
(01:06:04)	I AM WOMAN Performed by Johanna Cranitch	(singing)
(01:06:11)	Paula James Martinez	And what about feminism? Why is that a complicated word?
(01:06:16)	Panel speaker	How do you make sure that younger people feel like they can embrace the word, feminist?
(01:06:20)	Gloria Steinem	Send them to the dictionary, because no seriously, because it has been demonized by Rush Limbaugh and company into feminazi and man hating. There are synonyms. We don't have to all use the same word. There's mujerista, womanism, women's liberation, girls with two or three Rs, which I love. I think that's pretty cool.
(01:06:46)	Paula James Martinez	Mother, I wonder why I'm not seeing my feminist allies show up for the maternal health crisis.
(01:06:52)	Amy Richards	I think that motherhood is the most extreme expression of femininity, and so it is challenged. When we talk about motherhood, we're talking about both, I think, a relationship that a parent has with a child and the act of birthing children. But really we're talking about how women are symbolized in society or rather that women have value when it's based upon the life of someone else.
(01:07:17)	Gloria Steinem	Sex and race, because they are easy, visible differences, have been the primary ways of organizing human beings into superior and inferior groups and into the cheap labor on which the system still depends. We are talking about a society in which there will be no role other than those chosen or those earned. We are really talking about humanism.
(01:07:39)	Paula James Martinez	And if you're shocked to discover that women don't have equal rights under the constitution, you're not alone.
(01:07:45)	John Oliver	It's one of those things that's so obvious, you assume we already have it. It's like when you see baking soda at the store. You think, I don't need to buy baking soda. I definitely already have baking soda. It's a staple. And then you get home, and you're baking a cake, and you reach in the cupboard for baking soda, and you realize fuck, women still aren't guaranteed equal rights under the constitution.
(01:08:11)	Paula James Martinez	When I first heard about the work of National Advocates for Pregnant Women, I was like, "How are these cases even real?" But on talking to their founder, Lynn Paltrow, I discovered the need for legal support for pregnant women was terrifyingly important.
(01:08:28)	Lynn M. Paltrow	We really want to ensure that pregnant people are recognized as having their own personhood and are fully included in the US Constitution. We live in a country that has a constitution, and it's been interpreted to protect the right to bodily integrity and medical decision making. And these are decisions that appear to be and apply to all people. But the more cases we deal with, the more apparent it becomes that people think of pregnant women as a separate and unequal class of persons who really have no rights at all.
(01:09:06)	Anne Bynum	I never thought I could be arrested for experiencing a tragedy. I lost my daughter, and then I was prosecuted for it.
(01:09:14)	News Anchor	A pregnant woman shot in the stomach now facing possible manslaughter charges for the death of her fetus. The shooter not charged in this case, critics calling it a cruel and dangerous new step by the state to criminalize pregnancy.
(01:09:27)	News Anchor 2	Marche Jones' arrest came some six months after the 28-year-old, who was five months pregnant at the time, was shot in the stomach. According to the grand jury indictment, Jones intentionally caused the death of her unborn baby by initiating a fight, knowing she was five months pregnant, concluding it was caused in a sudden heat of passion.
(01:09:47)	Paula James Martinez	Yes, this is real life, not a made-for-TV horror movie. And even if a criminal complaint could be complex, what about a medical one?
(01:09:57)	News Anchor 3	A young mother of three is suing a New York hospital. She claims she was given a cesarean section against her will.
(01:10:03)	News person	35-year-old Rinat Dray is the mother of three boys. Her first two were delivered by cesarean section, which involved difficult recoveries.
(01:10:13)	Rinat Dray	And he said, "It doesn't matter that there's good progress. I don't think it's going to be natural. I don't have all day for you."
(01:10:20)	Rinat Dray	I was begging all the way. "Don't do it. I feel my baby. Everything is fine. Don't do it. Don't do it."
(01:10:27)	Rinat Dray	His answer was just, " Don't speak."
(01:10:32)	Lynn M. Paltrow	She didn't say, "I refuse to have one." If you give me any information that my baby is really in jeopardy, I'd agree to it. But I'm not seeing anything from anything you're telling me. The doula isn't seeing anything that says I need to have it right now. Unbeknownst to Renot, the hospital had a written policy, not just the practice, that authorized doctors to perform surgery without a woman's consent, in fact over her explicit, clear refusal, if they believe that the fetus's life was in jeopardy. And the next thing she knew, Renot Dre was wheeled in, forced to undergo cesarean surgery. And in the process, they damaged her bladder. The defense of what they did, cutting this woman open over explicit refusal, and I should add that they were so confident in their right to deny an adult woman of her medical decision making that they wrote in her records ...
(01:11:32)	News Anchor	"I have decided to override her refusal to have a C section."
(01:11:37)	Lynn M. Paltrow	And the hospital's claims, their absolutely vigorous defense of what they did to her over and over says, "Well yes, there is a Patient Bill of Rights in New York that requires us to inform patients of all of our policies, including the maternal refusal, we get to cut you open without your consent policy. But it doesn't specifically include pregnant women." Their position was pregnant women aren't protected by the New York State Bill of Rights. Their position is women aren't protected by the ...
(01:12:00)	Lynn M. Paltrow	... By the New York State Bill of Rights, their position is women aren't protected by the Constitution. They're not protected by common law rights. That by becoming pregnant, a woman takes on the obligation to do whatever is in the best interests of the fetus, as determined by doctors, judges, anybody but her. There are definitely many powerful people who believe that undergoing major surgery that is a risk to your health is just the burden women bear because they are pregnant. We really have not accepted the idea that healthcare is a human right for everyone, including the people who can get pregnant and that maternal and reproductive rights aren't separate special rights, but they are what half of all the human beings need in order for their survival and what all human beings need for the survival of the species.
(01:13:07)	Amy Richards	Most of our laws around abortion are kind of understood through the lens of Roe v. Wade. When you read the Supreme Court decision, it actually is less naming women's ability to have access to abortion and more saying that a woman has the right to determine when and whether to continue a pregnancy. So, it's as much giving women autonomy over choosing motherhood as it is choosing when not to be mothers.

(01:13:40)	Lynn M. Paltrow	There are many people who are fundamentally, genuinely opposed to abortion for religious, moral, ethical reasons, who have not thought through what the consequences of their position is if it becomes law. Because if it is illegal to have an abortion, then the woman who wants a home birth but somebody thinks it endangers the life of the fetus is committing a crime. The woman who refuses cesarean surgery is no better than the murdering woman choosing to end her pregnancy early through an abortion. The woman who chooses to continue working, so she can have healthcare to support the children she have and her prenatal care, could be endangering the life of her unborn child. It is about taking away every right we associate with personhood from the people who can get pregnant.
(01:14:32) (01:15:32)	Amy Richards Protester	In the United States, the only coverage you get for pregnancy in a workplace situation is a disability. You become a little bit of a second class citizen. You're not fully capable of executing things. That's an example of a lot of the language used around birth and parenting and pregnancy. It's a little manipulative, and I think it's meant to sort of keep people in a not so much fearful state, but in a dependent state, a dependent state upon a medical institution that knows what's right for women. You also become free public domain. Any pregnant woman talks about how all of a sudden everybody can come up and touch your belly. People can have comments about what you're eating and can comment on what you're drinking and what you're doing. And, "You shouldn't be lifting that." All of a sudden, your personhood is up to public scrutiny. You think that mothers have full choice over their lives, and they don't.
(01:15:37)	Amy Richards	Equal rights. Equal rights to have a job, to have respect, not be viewed as a piece of meat.
(01:16:02)	THE SYSTEM Recited by Celia Rowson Hall	We get distracted by abortion because we think of it as needing our support more than mothers need our support. But if you look at a slew of laws that have come out in the last several decades, they've been very subtle, but they've essentially taken the rights of mothers out of mothers' control.
(01:17:04) (01:17:33)	Amy Richards Paula James Martinez	Take away her power. She's easily manipulated. Treat her as if something foreign is happening to her body like she isn't a part of it, just an incubator, a spectator, waiting for the timer to ding. Baby is on their clock and it's almost dinner time. Legs up. Snip. Pull it out. Happy days. Healthy baby. That's all that matters. She feels low. Something's not right, like something was taken from her. Don't worry. Numb it. Medicate it. And while you're at it, how about we take all her feelings away? We will refuse to recognize our mistakes or be responsible for our poor education. We will even change the records as a team to ensure she doesn't have any power. One against all, because it's just one day in her life. Nothing to dwell on. It won't kill her. Either way, it doesn't matter. She's just a mother. A story written by the system.
(01:17:39) (01:17:58) (01:17:59)	Mom Congress Member Mom Congress Member Mom Congress Member	There are many women who are just ignored every day in society, and they tend to be Black women and poor women and we just sort of don't see their experience. And so, I think when we talk about the treatment of pregnant women, we're often talking about the treatment of white, privileged people. And what's different is that that community of people is used to not being scrutinized as much as other populations.
(01:18:10)	Paula James Martinez	Remember those closed door conversations in DC? Well, one thing came up again and again.
(01:18:21)	Monica Simpson	I think it's important to understand where these numbers are coming from are really a part of systemic racism. And if you don't admit that, then we're never going to be able to change any of these numbers. We can talk about them. We can be aghast about them. But-
(01:18:54) (01:19:06)	Paula James Martinez Monica Simpson	You have to acknowledge [inaudible 01:18:00]. We have to acknowledge the source of the problem.
(01:19:15) (01:19:30)	Martin Luther King Jr. Chanting Protesters	Although many communities are marginalized in many different ways, there's something disproportionately going wrong for Black and Native women when it comes to childbirth. African American women are facing maternal mortality in such a desperate way because racism is real. The system of white supremacy is real, and it permeates every sector of our lives. And so, we can't think that the medical industrial complex, it doesn't affect that as well. And so, we have to know that when folks are walking into their doctor's offices, when folks are going in for care, going in to ask questions, going in to get what they need for themselves, their families, that racism unfortunately meets a lot of folks at the door.
(01:19:55)	Monica Simpson	Monica came to her place in reproductive justice through civil rights work. She's also a doula and uniquely placed to talk about the intersecting needs of Black mothers in the South.
(01:20:15)	Chanel Porchia	It is astonishing that we are not understanding the history that is connected to this issue. Sometimes, we see that as a side issue and it's not.
(01:21:00)	ACOG	For several weeks now, we, the Negro citizens of Montgomery have been involved in a non-violent protest against the injustices which we have experienced on the buses for a number of years.
(01:21:11)	Paula James Martinez	Black lives matter. Black lives matter. Don't shoot. Don't shoot. No justice, not peace. No justice, not peace. Not justice, not peace. No justice, not peace.
(01:21:24)	Chanel Porchia	It's all connected. And if we're not understanding that Black women are still at the bottom of the economic scale, if we're not understanding that there is a deep, deep history, especially in the southern region. We can't be surprised that unfortunately rates of maternal mortality are going to continue to increase and that we're going to see disparities continue to rise.
(01:21:42)	ACOG	When we think about the history of the United States and people of color in the United States, the medical model of care was never created to treat people of color. It wasn't. If you think about the enslavement of African people and the emancipation, now you have people who are "free". Now you have Jim Crow laws, so now everything is separate. Sometimes you didn't even have access to get into the hospital. This conversation now around maternal mortality, mortal maternal mortality... Black people been dying. Black women and children have been dying since... I started this work in 2008 and the premise of this work was on the foundation of, "Wow. Black women and children are dying."
(01:22:00)	Paula James Martinez	In America. Black women are three to four times more likely to die due to pregnancy related causes than white women. And in New York City, they're 12 times more likely to die.
(01:22:28)	Elizabeth Warren	Chanel runs ancient song, a community doula service in Brooklyn. She's also an educator leading the charge on how to combat racial biases in the medical system and probably needs her own TV show.
(01:22:50) (01:23:18)	Rep. Joe Kennedy III Barbara Verneus	What we continue to see perpetuated within the medical model of care is this structure that is based on racial ideals or perceptions of racial identity for Black and Brown people that are false concepts.
(01:23:27)	Researcher	The American College of Obstetricians and Gynecologists acknowledge that the racial and ethnic disparities in women's health, including higher rates of pre-term birth and maternal mortality, cannot be reversed without addressing racial bias, both implicit and explicit.
(01:24:02)	Charles Johnson	Bias by nature is complex, but basically, explicit bias is conscious like thinking you're better than someone because of the color of their skin or sex. But implicit bias is mostly subconscious and not as obvious. Like assuming the doc you're about to see will be a man. There are many assumptions both explicit and implicit about why people are more likely to die in childbirth than others.
(01:24:47)	Barbara Verneus	Even after we do the adjustments for income for education, this is true across the board. This is true for well educated African American women, for wealthy African American women. And the best studies that I've seen put it down to just one thing. Prejudice.
(01:25:07)	Chanel Porchia	Today, a wealthy, well educated African American woman, one with a college degree, is still more likely to die during childbirth or to have her baby die than a poor, white woman who does not have a high school diploma. And you can't explain that by location. You can't explain that by education. You can't explain that by income. You can't explain that by wealth. You can't explain that other than by acknowledging the fact that there are still vast and deep racial disparities in our healthcare system and across our country.
(01:25:37)	Chanel Porchia	Doctors or people in general just don't believe that Black people suffer or we're strong enough to take the pain.
(01:26:49) (01:27:16) (01:27:25)	Paula James Martinez Paula James Martinez Karla Mileski	Several studies, including from the University of Pennsylvania and in the New England Journal of Medicine found that Black patients with the same symptoms as white ones receive less pain medication and are referred to specialists less often. In a national survey of over 2000 women, 21% of Black mothers reported poor treatment from hospital staff, which they attributed to race, ethnicity, cultural background or language. Just 8% of white mothers reported similar poor treatment.
(01:27:33)	Danielle Horanieh	My wife was not here to raise her sons because of the color of her skin. One of the things that I struggled with all the time is, what else could I have done? What could I have done differently? What could I have done more of? Maybe if I had grabbed a doctor by his collar, maybe if I had gotten irate, maybe if I had turned over a table, maybe if I had made a scene, maybe they would've taken care of her more seriously. Maybe they would've moved with more urgency. But in the moment I was thinking, "I'm a Black man at this hospital and I have to stand under control because I don't want to be seen as a threat. Because if I'm seen as a threat and I get removed from the hospital, then who's advocating for my wife?"
(01:27:48) (01:28:29)	Paula James Martinez Mother Ad Agency employees	Interesting thing about white supremacy and capitalism. It's not this one answer, right? It's so intricate, it's so deeply thought out in detail. Put the light skin against the dark skin. Put the old against the young, put the men against the women.
		I have two sons, I have four daughters and I have to consistently worry about how the world sees them and their perception of a young Black man or their perception of young Black women. When you become pregnant, you shouldn't have to think about that. Your choice shouldn't have to be based on, "Do I want to have a child and think about, well right now they're cute and you see them as cute because they're a baby. But when they're 10 years old, they're a threat."
		And I'm tired of just living in a mode of survival. We now are at a point of, no, we need to thrive. And that is only going to come with people, with allies, with individuals purposely stepping aside or either stepping up and saying, "We need to open these doors. We need to change these frameworks. We need to deconstruct these ideals in our perceptions of one another based on the socialized ideals to see one person above the other." Because at the end of the day, we all believe the same. At the end of the day, we all live and we all die. And all people ever really want to do is just, you want to know that you can live in a place where you feel free.
		Given that things are continuing to get worse, I felt like we just couldn't sit back and do nothing. So I wondered if we could fight the system of a lack of education and fear by changing the conversation the American way with advertising. So I approached Ad Ages 2019 Agency of the Year, Mother to ask them why they thought birth was so badly branded in a country where it was a commercial enterprise.
		As non-mothers, it's like they know a lot about the world. What do you think about birth?
		When I was pregnant, my mom said, I quote, "They cut me from hole to hole." That made me so excited about giving birth.
		I don't know if I want to have kids or not, but I was like, "There's no way I would survive a birth." And I had didn't have that recently. I had that thought when I was younger. I don't know where that came from, but I was like, "There's just no way that looks crazy."
		How do we change that conversation that every time you speak about it doesn't mean I'm about to become pregnant or something disgusting is going to happen. Or men don't suddenly just shrink. I'm like, "How do we change that? How can we have a normal dialogue about it as mothers, non-mothers, as human beings in society?" It's really hard to advocate for mothers. It's hard to get brands on board for it because it's not exciting. It doesn't feel contemporary. They're like, "Mothers, you guys have been around a while, you're not a new thing."
		[inaudible]

(01:28:29)	Paula James Martinez	So that's also the big challenge. How do we make this feel fresh for people in something that they should be revisiting?
(01:28:35)	Mother Ad Agency employee	[inaudible]
(01:28:36)	Camila Caldes	Women should be entitled to have whatever type of birth they want, but it's harder to know what those resources are from the industry standpoint, but also when the cultural ecosystem and narrative ecosystem is so narrow minded and scary for women. And when you create that cultural fear, you're more likely to just relinquish control. You walk into the hospital and you're like, "Put me under. Give me the epidural. I don't care what you do, I just want this to be over." Which is not how anyone... I don't know, that's not what birth should be. Birth is an amazing thing.
(01:29:08)	Paula James Martinez	Or just put big billboards of, "We have hope." But people are like, "Is this a cult?" No, pregnancy. You have to have hope for your children. You have to have hope for yourself. It's an act of hope in itself to bring another person into the world.
(01:29:25)	Chanel Porchia	And to want to see them... I know for me, doing this work, I want to see my children be able to live in a world where they're seen and they can have hope too. They can have some kind of foundation that sees the humanity where we see the humanity in each other and it just resonates in such a way where... I don't know, maybe I'm being idealistic and utopic, but that just can bring pure joy to someone's life on a consistent basis. Because when you look in children's eyes and you see the level of just purity that comes across, it's like, why wouldn't you treat the vessel that produced that with the same level of sanctity that it deserves? If you can see how joyful children are and it's that sheer like pure, unconditional like love, why wouldn't you want the person that is going to be carrying that to have that same thing?
(01:30:30)	DOULA WOULD BE COOLA Performed by Chirino Sisters	(singing)