

THE POSTPARTUM PERIOD

SEASON 2

SHIFT

WITH P. S. BLOSSOM



Narrative Change SHIFT with P.S. Blossom

The US has a complex history with race, reproduction, and class, which leads to negative health outcomes for women and other birthing people of color. Dominant public narratives surrounding these health outcomes do not always reflect the perspectives, voices, or lived experiences of women and other birthing people of color. The P.S. Blossom podcast explores issues at the intersections of reproductive justice and capital with a specific focus on the autonomy of women and other birthing people of color.

SHIFT with P.S. Blossom is a guide that accompanies each topic covered in the P.S. Blossom podcast. It provides a reproductive justice approach to controversial conversations. We encourage readers to actively participate in SHIFTing the Narrative by sharing personal stories and lived experiences in their communities.

Postpartum Period

The postpartum period, also known as the puerperium and the "fourth trimester," refers to the period immediately after birth up to one year after birth. More than half of all pregnancy related deaths occur during the postpartum time period, and therefore require attention to the needs of the birthing parent. It's important to be sensitive to different cultural practices and medical needs related to childbirth, which may involve eating particular foods, limiting strenuous activities, and ensuring the birthing parent has the support they need to care for their new infant is key. Postpartum Justice as defined by [MPJ](#) "is free from sexism, racism and a health care system that is based on profit. Postpartum Justice recognizes society's collective responsibility for all birthing people and parents. It distills the postpartum wisdom of the past and transforms it to serve the future."

“**Health equity is everywhere. It's not confined to a clinical space, it's not confined to the hospital or the office, or to healthcare, big healthcare agencies. Everything that we do can affect our health.**”

—Dr. Mary E. Fleming

NARRATIVES AROUND THE POSTPARTUM PERIOD

Sometimes it is difficult to identify harmful dominant narratives, since they are deeply rooted in our culture. By identifying harmful dominant narratives, we can positively SHIFT social structures and behaviors.

Here are some examples of **harmful dominant narratives** around the postpartum period:

- “You should be able to return to work pretty quickly. You have already had the baby, right?”
- “Enjoy your vacation! It must be nice to get vacation time after having a child!”
- “Why do you need time off? You didn’t have the baby.”
- “Why are you sad? You had your baby, and they’re healthy. It’s weird that you feel sad. Don’t you feel guilty? Some people can’t even have children. Be more grateful.”

Here are examples of healthier **intersectional counter narratives** that can help SHIFT harmful dominant narratives:

- “It takes a village to care for the mother and the baby - they both are the priority.”
- “It’s okay to feel both grateful and tired, loved and angry, distant and happy, messy and beautiful simultaneously after giving birth. All of it’s allowed.”
- “The 4th trimester is just as crucial as pregnancy and childbirth.”



Raven Dorsey (she/her)

S2 EPISODE 18+19

Raven Dorsey (she/her) is a Full Spectrum Doula and the Former Deputy Director of Engagement of [Paid Leave for All](#). Prior to joining the team, she was a Community Organizer for the Warren for President campaign, in Greensboro, North Carolina and a Development Associate at the Women's Law Project where she coordinated events and fundraising efforts in the Philadelphia area. Raven completed her master's of social work at the University of Pennsylvania in May 2018 and her bachelor's degree in women and gender studies with a concentration in gender, sexuality and public health from SUNY Stony Brook. Raven also loves to serve her community as a certified labor and postpartum care doula.

“ **Obstetricians and midwives are the folks that take care of the medical health of mom and baby. They tend to the physical health of mom and baby. Doulas tend to the psycho-social and emotional health of mom and baby. They can help navigate the process.** ”

“ **I think that conversation around, ‘It's just you. Just focus on baby,’ is a very narrow interpretation of what postpartum looks like. It becomes much healthier, much more digestible, [and] much more doable when we zoom out and look at the whole person.** ”

ON THE EPISODE

In Exploring the Role of a Full-Spectrum Doula Parts 1 and 2, Raven explains what a Full-Spectrum Doula is, what postpartum care entails, and how she supports mothers in overcoming the challenging moments in this period to regain a sense of self. In Part 1, Raven sheds light on the value of creating a pregnancy and postpartum plan, establishing your resources and the members of your village, and how a doula can empower you in your birth and postpartum period. In Part 2, we discuss intuition and how we can shift the dominant narrative around women dismissing their own expertise and intuition when it comes to having a baby. Raven speaks on the importance of maternity and paternity leave. She also provides a wealth of information, insight, and valuable resources where we can learn more.

“ **Trust yourself. Trust your intuition. If you don't feel your intuition, take time to connect with it to find it.** ”



“ We're working within the confines of a system that is not always the most friendly to the most vulnerable population. ”

“ We can't fix racism in a day, right? We can't do that. It took us a long time to get here and it'll take us a long time to get out of it. But we can try to equip each individual with as much as we can. ”

Dr. Mary E. Fleming (she/her)

S2 EPISODE 20+21

A Louisville, KY native, [Dr. Mary E. Fleming](#) (she/her), completed her undergraduate degree at Xavier University of Louisiana, medical degree at Vanderbilt University School of Medicine and her residency in Obstetrics and Gynecology at Meharry Medical College. Due to her interests in eradicating health inequities and improving healthcare for the underserved, she matriculated to Harvard Medical School as a Commonwealth Fellow in Minority Health Policy where she obtained a Master in Public Health from the Harvard TH Chan School of Public Health. She practiced as a generalist in a Norristown, PA community hospital for four years before deciding to transition to be a full-time locum tenens physician. In this capacity, she has worked in several states across the country. This practice model also allowed her to travel to Kenya for six months to volunteer with Our Lady of Lourdes Mission Hospital in Mutomo. Currently, she works clinically in Baltimore, MD, Norway, ME and as the Co-Founder and the Senior Vice President for Health Equity for [Cayaba Care](#), a maternal health start-up a home-based tech-enabled, maternal health solution that is trying to bridge the gap between traditional prenatal care and

postpartum care and the social determinants of health. In addition to her clinical work, she consults as a medical expert reviewer, physician editor and leads a non-profit, Reede Scholars. As President of the [Reede Scholars](#), she develops strategies for collective action among the Scholars to address health equity and social justice. In 2021 she became Director of the Leadership Development to Advance Equity in Health Care Program in the Executive and Continuing Professional Education department at the Harvard T.H. Chan School of Public Health. As an ardent champion of health equity, she continues to explore avenues to grow her skill set in order to serve the vulnerable populations of this country and globally.

ON THE EPISODE

In Using Tech to Overcome Inequity in Maternal Healthcare Part 1, [Dr. Fleming](#), sheds light on why Black and Brown women in this country have higher adverse maternal health outcomes and how Cayaba Care is trying to meet the access and economic challenges faced by their patients to bridge the gap. In Part 2, we talk about the state of postpartum care in our country and the need to prioritize maternal health, not just infant care. We discuss Cayaba Care's efforts to challenge the harmful narratives affecting the care of women of color, and how we too can advocate for equity.



“ When you're a parent, you can try and plan and set rules for yourself. But that really just goes all out the window until you're in the thick of it, trying to figure it out. ”

“ I want to make sure everybody decides to have kids or not have kids has access to the care and support they need to feel whole during their pregnancy, birthing, and postpartum period, including those who have had abortions or miscarriages. ”

Lizamarie Mohammed *(she/her)*

S2 EPISODE 22

Lizamarie Mohammed (she/her) is the Senior Program Associate for Rhia Ventures supporting the Corporate Engagement program which influences the business community to support sexual and reproductive health, rights, and justice. She brings over a decade of policy and advocacy experience in sexual and reproductive health, rights, and justice. Prior to Rhia Ventures, Lizamarie was the State Issues Manager at the Guttmacher Institute where she analyzed sexual and reproductive health-related legislative, regulatory and judicial actions, tracked state policy developments, and monitored state trends across the US. Her work there led her to develop the maternal health portfolio which included issues related to maternal mortality and access to sexual and reproductive health for those incarcerated. Lizamarie is passionate about social justice issues, is committed to advancing access to quality, comprehensive care for those historically marginalized and underserved, and brings a racial equity lens to her work. She holds a Bachelor of Arts from Skidmore College in Gender Studies and Government

and a Juris Doctor from Seattle University School of Law. Lizamarie is a mom of two toddlers, an abortion doula, a knitter, and a policy wonk in DC. For self-care, especially as a forever-postpartum person, she takes pottery classes as dedicated kid-free time!

ON THE EPISODE

In The Journey through Pregnancy, Childbirth, and the Maternal Healthcare System, [Lizamarie](#), shares her postpartum and birth experiences. After giving birth three times, she highlights the differences and growths between each, how the maternal health care system changed along the way, and where it still needs to meet the needs of women and other birth people.

“ Since I wasn't the intended parent, I realized the maternal health policies that exist by employers, whether it's nonprofits or corporations, didn't meet the needs of people giving birth. ”

Reflection Questions

What was your first experience with the postpartum period?

How can a non-birthing parent/ support person help during the postpartum period?

What can you say/do to properly support the birthing parent and baby?

What are things people experience during the postpartum period?

How does paid leave for all assist families during the postpartum, period?

How can you stand against the harmful dominant narratives around the care needed during the postpartum period?

Who has the narrative of postpartum historically been centered around?

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Raven Dorsey’s [LinkedIn](#)
IG: [@ravenmdorsey](#)

Dr. Mary E. Fleming
[LinkedIn](#)

Lizamarie Mohammed
X: [@LizMohammed](#)

Guest Recommendations Topic

Listen to [Exploring the Role of a Full-Spectrum Doula with Raven Dorsey](#)

Listen to [Using Tech to Overcome Inequity in Maternal Healthcare with Mary Fleming, MD, MPH, FACOG](#)

Listen to [Lizamarie Mohammed's Journey through Pregnancy, Childbirth, and the Maternal Healthcare System](#)

[Evidence Based Birth Podcast](#)

[New York Times article on Black Doulas in New York](#)

[Mama Glow](#)

[The Educated Birth](#)

[Paid Leave for All: Take Action](#)

[Cayaba Care](#)

[Reede Scholars Incorporated](#)

[The Commonwealth Fund](#)

[SisterSong](#)

[Student National Medical Association](#)

Doula Dina Daines on [LinkedIn](#)

Relevant Social and Platform Links

Rhia Ventures is a social impact organization with a mission to advance reproductive and maternal health equity by intentionally leveraging capital to center the needs, experiences, and perspectives of historically marginalized people in decision-making.

BLOSSOM

IG: [@ps_blossom](#)
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<https://rhiaventures.org/narrative-change/>

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Doula Midwife Birth Center Community Birth
Maternal Health Equity Network Motherhood
Birthing People Postpartum Narrative Advocates
Policies Paid Family Leave Investing Doula
Midwife Birth Motherhood Advocates Doula
Birth Center Community Birth Maternal Health
Equity Birthing People Postpartum Narrative
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