Tatyana Ali

Personal Testimony for Committee on Oversight and Reform May 6, 2021

“Birthing While Black: America’s Black Maternal Health Crisis”

Thank you for inviting me to share my story. I do so in the hopes that the mothers and babies who have died in hospitals all across this land needlessly because of neglect, abuse and arrogance are given voice. I hope that you hear my story and see them. I hope that you hear with your hearts as if you were listening to those that you love and would do anything to care for and protect.

I’ve always wanted to be a mother. I’ve wanted to pass on the culture of love that I was raised in. My husband, who is African American, had a similar upbringing and wants the same.

When I asked my OBGYN what positions I could be in during labor and delivery, he said that I could hang from the lights if that made me happy. This being my first birth, the dismissal of my very earnest query into birthing techniques hurt. I felt silly. That should have been a warning.

Shortly before my due date we were told that he would be on vacation when I actually gave birth. I briefly met two doctors from the same office who “might” be attending at the hospital.

While dilating at a very normal rate, people in the hospital room kept keeping track of the time. They kept pushing the epidural though it was not in our birth plan. They interrupted me again and again in the midst of my labor pains and made it seem imperative. We finally relented.

When it was time to push, I wanted to get onto my hands and knees. I could still feel my legs. But every time I tried, the 5 people screaming at me would push me back down onto my back. 10 or so people total were in the room. One doctor climbed onto the side of the bed and pushed his forearm into my belly so hard that I could still feel the pain days later. My baby had been crowned for hours. I could feel his hair. We said, “no”, when they offered forceps. They used a suction, a plunger type apparatus, and tried four times, the suction aggressively popped off of his head again and again. I knew instinctively that they would hurt my baby irreparably if this circus continued. They had medicalized my healthy labor to a point of no return. My report says that I was tired. I was not. I told them to give me a C-section, which I knew is their specialty.

Then, without explaining the potential harm, one of the doctors pushed my baby back inside me in an extremely dangerous procedure called the Zavanelli maneuver. I began to convulse and shake. Then, my world went dark. I came to briefly when I heard the faint sound of my baby’s cry. My husband, afraid he was losing me, fixated on me. I whispered to him, “That’s our baby, don’t let them hurt him, go! Go get him.” He went. Then, my world went dark again.

My first baby, Edward is named for his great grandfather, a Los Angeles based swing conductor and composer. We nicknamed him Aszi, because his middle name is my father’s first name,
Aszard. He spent his first days in the NICU because he could not urinate on his own. The head pediatric urologist said it was because of his traumatic birth.

In planning for our second pregnancy we deeply feared for our safety. We decided to work with a black midwife. We had to pay upfront and then had to fight over a year and a half, until my baby, Alejandro was 19 months old to receive partial reimbursement. My emergency c-section cost $140,000.00 and the hospital was paid immediately. My midwife cost $8,000. Of that, the insurance company only reimbursed us $5500.00

What of the families who cannot afford to pay someone 8,000.00 up front?

I was afforded 20 minutes tops with my OBGYN with speculum and vaginal checks at every appt. By contrast, our midwife spent hours getting to know our family. She asked permission to touch my belly at every appointment and never did an intravaginal check. I was given options at every turn in my pregnancy. We chose a homebirth VBAC and every single eventuality was prepared for. Days before I was due, Alejandro repositioned and presented laterally. We would have to go to a hospital after all. But we had planned so carefully that we knew which hospital would be the best fit for us.

My black midwife prepared me. She knew my history and let me know that it was very likely that my prior trauma would be re-ignited. When the anesthesiologist told me that I would feel nothing from the chest down, the fear and pain came flooding through me just as she said it would. My midwife quickly went to my feet and held them and I heard her praying. My mother and my husband joined in. My midwife could lead a prayer for me because she had gotten to know me well enough to know that I believe in prayer and that it would give me strength. She also suggested that I walk into the OR instead of being put in a gurney in order to feel the sense of agency that had been taken from me previously. Post-partum she provided lactation support and visited us regularly checking on my physical wellness and nutrition and my mental and emotional well-being. Both my babies were born via c-section but the experiences could not have been more diametrically opposed. Aszi and I were not safe, Alejandro and I were.

When I began to share my story, others shared with me. I am amazed at the similarities amongst black families and the treatment and similar outcomes for indigenous families and queer and disabled families and incarcerated birthing people. I have heard firsthand stories of people in pain being called drug-seeking. I have heard stories of the Sheriff Departments coming to homes in the middle of the night because families refused to take elective tests. I’ve heard stories of child services being called moments after babies are born because the parents “seem” unfit. We are being ignored, mistreated, sterilized and disrespected.

I am a woman from humble and hard-working people who has come into privilege because of my family’s belief in education and because I reached success through acting at a young age. I went to an Ivy League college. I bring this up because I want you to understand that none of that matters in the hospital, in labor or post-partum care, where we are all stripped down and
dressed in the same blue and green gowns. The God’s truth is that class and education should never matter. The consistent variable here is race. This was my first experience of the kind of institutionalized racism and paternalism that ignores a person’s right to bodily autonomy and neglects the respect and honor that should always be applied when caring for them at these most sensitive and sacred times. This was my first experience of the kind of institutionalized racism and paternalism that can kill.

Many are now scared to start families because they know that we are dying in hospitals. We don’t have to lose anyone else. We need to be heard and we need to be believed. There are groups on the ground providing the support that is needed, but they need the resources to scale their efforts. We need more black midwives, black doulas and culturally competent birth workers and they need to be supported in their work. They need to be covered by all health plans so that adequate care ceases to be a luxury. We need to de-medicalize birth. We need re-dress when hospitals fail us so completely. We need racial bias and trauma training. We need postpartum and lactation support. All pregnant and birthing people need to be treated with loving care.