12. Rachel Is Weeping for Her Children: Theological Reflections on Intersectional Reproductive Justice and Maternal Health

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This chapter moves through the methodological steps of Catholic social teaching: seeing, judging, and acting. Beginning with "the signs of the times" and the experiences of Black women, I will lay out the stark realities of maternal and infant mortality and morbidity in the United States and extend this to the many threats to young Black lives. Social analysis of the statistics on maternal mortality and morbidity points, unsurprisingly, to the economy of slavery and enduring white male supremacy as root causes of death and near-death for pregnant Black women and their children. Theological reflection that employs themes including the dignity of the person, solidarity with the vulnerable, participation in the common good, and the principle of subsidiarity, all through an antiracist and anti-misogynist lens, yields a framework for reproductive justice that better captures lived experiences of reproductive oppression and points toward the kinds of practices and policies that actually support women and children. The 2022 U.S. Supreme Court Decision in *Dobbs v. Jackson Women's Health Organization* has not only eroded reproductive rights regarding safe abortion access but also compromised women's access to quality obstetrical care.[1] Resistance to this reproductive injustice is gaining strength at the grassroots level in ways that include but are not limited to

[1] Supreme Court of the United States, Dobbs, State Health Officer of the Mississippi Department of Public Health, et al. v. Jackson Women's Health Organization, et al, www.supremecourt.gov/opinions/21pdf/19-1392_6j37.pdf. The Guttmacher Institute conducts research and policy analysis on the impact of abortion bans on women of color, www.guttmacher.org/2023/01/inequity-us-abortion-rights-and-access-end-roe-deepening-existing-divides.

securing access to safe abortions and contraception. Here, I raise up women-led initiatives aimed at enhancing women's reproductive health, ensuring safe pregnancy, labor, and delivery, and promoting infant and child flourishing.

Maternal and Infant Mortality and Morbidity in the United States

In 2017, the staff of *ProPublica* published a series of articles on maternal mortality and morbidity in the United States, which has one of the highest rates of maternal death among wealthier countries. "Lost Mothers" tells the stories of women who died tragically of pregnancy and childbirth related causes.[2] Women of many racial, ethnic, religious, educational, geographical, and economic backgrounds die each year in the United States during pregnancy, childbirth, and the postpartum period. While strides have been made globally to improve maternal mortality, the trend in the US is moving in the other direction.[3] The challenges are particularly acute in rural communities with little or no access to obstetrical care, a situation made worse by the closure of maternity wards in already underserved areas.[4] Many healthcare practitioners and ethicists have

[2] Nina Martins, Emma Cillekens, and Alessandra Freitas, "Lost Mothers" *ProPublica*, July 17, 2017, www.propublica.org/article/lost-mothers-maternal-health-died-childbirth-pregnancy. The World Health Organization defines these mortality rates as "the annual number of female deaths from any cause related to or aggravated by pregnancy or its management (excluding accidental or incidental causes) during pregnancy and childbirth or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy." www.who.int/data/gho/indicator-metadata-registry/imr-details/4622.

[3] Jovanni R. Spinner, Sheila Carrette, and Joylene John-Sowah, "The Maternal Mortality Crisis in the Black Community," in *Black Women and Public Health: Strategies to Name, Locate, and Change Systems of Power,* ed. Stephanie Y. Evans, Sarita K. Davis, Leslie R. Hinkson, and Deanna J. Wathington (Albany, NY: SUNY Press, 2022), 67.

[4] Spinner, Carrette, and John-Sowah, "The Maternal Mortality Crisis in the Black Community," 71; Alisa Valentin and Christy M. Gamble, "Rural Black Maternal Health in

highlighted women's increased vulnerability after the 2022 U.S. Supreme Court decision in *Dobbs v. Jackson Women's Health Organization*, as state legislators enact laws that can have chilling effects on the care of women in crisis.[5] Though all pregnant, birthing, and postpartum persons are affected because childbearing itself comes with risks that are often unacknowledged, disparities, particularly along lines of race and ethnicity, are glaring.

One piece in the *ProPublica* series, "Nothing Protects Black Women from Dying in Pregnancy and Childbirth," explores the impact of race on health outcomes for women of color and accounts for differences in income and educational level.[6] Highly educated and affluent women of color, even those who are physicians themselves, continue to be disproportionately represented in mortality and morbidity statistics.[7] The devastating numbers are attributed in part to unconscious bias (and perhaps some conscious bias) on the part of healthcare professionals who then dismiss the experiences and early warning signs reported by Black patients generally and Black women in particular. According to the Centers for Disease Control and Prevention (CDC), "Black women are three times more likely to die of a pregnancy-related cause than white women," noting that bias, underlying medical conditions, structural racism, and other social determinants of health play roles in the phenomenon.[8]

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the Age of Digital Deserts," in Evans, Davis, Hinkson, and Wathington, *Black Women and Public Health*, 143–144.

[5] For example, "Dialogue After *Dobbs*, Toward Reasoned Dialogue and Constructive Conversation on Abortion" *Journal of Moral Theology*, 12, no. 1 (2022): 89–144, jmt.scholasticahq.com/article/66268.

[6] Nina Martin and Renee Montagne, "Nothing Prevents Black Women from Dying in Childbirth" *ProPublica*, December 7, 2017, www.propublica.org/article/nothing-protects-black-women-from-dying-in-pregnancy-and-childbirth.

[7] Stephanie Y. Evans, Sarita K. Davis, Leslie R. Hinkson, and Deanna J. Wathington, "Introduction: Race, Gender, and Public Health: Social Justice and Wellness Work" in Evans, Davis, Hinkson, and Wathington, *Black Women and Public Health*, 11.

[8] Centers for Disease Control and Prevention, "Working Together to Reduce Black Maternal Mortality," www.cdc.gov/healthequity/features/maternal-mortality/index.html.

The peril extends to Black infants. According to a 2018 *New York Times Magazine* article, "Why America's Black Mothers and Babies are in a Life-or-Death Crisis," penned by journalist Linda Villarosa,

> Black infants in America are now more than twice as likely to die as white infants—11.3 per 1,000 black babies, compared with 4.9 per 1,000 white babies, according to the most recent government data—a racial disparity that is actually wider than in 1850, 15 years before the end of slavery, when most black women were considered chattel. In one year, that racial gap adds up to more than 4,000 lost black babies. Education and income offer little protection. In fact, a black woman with an advanced degree is more likely to lose her baby than a white woman with less than an eighth-grade education.[9]

High blood pressure, cardiovascular disease, pre-eclampsia, and eclampsia all play significant roles in maternal mortality. Infant mortality rates are impacted by the number of infants with low birthweight. The statistics are staggering, and they may represent only a fraction of the problem because, as Villarosa notes, it has been more than ten years since official federal data were updated and "Only about half of the states and few cities maintain maternal-mortality review boards."[10]

Social Analysis and a Public Health Lens

Morbidity and mortality for Black mothers and children in the United States is rooted in the history and ongoing impact of white supremacy. Villarosa has further developed her analysis and placed it in the context of racialized healthcare injustice more broadly in *Under the Skin: The Hidden Toll of Racism on American Lives and the Health of Our Nation*.

[9] Linda Villarosa, "Why America's Black Mothers and Babies are in a Life-or-Death Crisis," *New York Times Magazine*, April 11, 2018, www.nytimes.com/2018/04/11/magazine/black-mothers-babies-death-maternal-mortality.html.
[10] Villarosa, "Why America's Black Mothers and Babies are in a Life-or-Death Crisis."

Villarosa's work builds upon the earlier groundbreaking research of Dorothy Roberts in her 1997 *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty*, where Roberts notes, "For slave women, procreation had little to do with liberty. To the contrary, Black women's childbearing in bondage was largely a product of oppression rather than an expression of self-definition and personhood."[11] The practice of slavery, particularly after the trading of enslaved people between nations became illegal (in theory) in 1808, incentivized the control of the reproductive lives of enslaved persons in order to maximize economic gain for owners of enslaved people. Strategies employed by owners of enslaved people included forcing tensions between productivity in work and the needs of young children, "shattering the bonds" of mothers and children at the auction block, and child-stealing. In this context, Roberts frames contraceptive practice, abortion, and infanticide as forms of resistance to enslavement.[12]

Yet Roberts highlights that movements for reproductive liberty have also themselves been racist from the start. White supremacy under slavery sought control over Black women's reproductive capacity to maximize profits. White supremacy under Jim Crow sought control over Black women's bodies as part of a program of eugenics. In both cases, the reproductive lives of Black women were regulated in order to achieve the social and economic goals of white people.[13] So, as Angela Davis claims, controlling pregnancy and childbirth becomes a *right* for those with racial and economic privilege and a *duty* for those without those advantages.[14]

Killing the Black Body presumes the right to abortion guaranteed in the 1973 Supreme Court decision in *Roe v. Wade* (overturned in 2022 in the *Dobbs* decision) but critiques the women's movement for its narrow focus on abortion rights as matters of personal choice. For Roberts, taking

[11] Dorothy Roberts, *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty* (New York: Random House, 1997), 23.
[12] Roberts, *Killing the Black Body*, 33–45.
[13] Roberts, *Killing the Black Body*, 56.
[14] Roberts, *Killing the Black Body*, 58.

seriously Black's women's experiences of pregnancy, childbirth, and mothering yields a more comprehensive view of reproductive justice than the view that dominates white feminisms, namely liberty as merely immunity from interference and coercion that is protected by a Constitutional right to privacy. Again, Roberts frames the issue quite clearly,

> Black women, on the other hand, especially those who are poor, must deal with a whole range of forces that impair their choices. Their reproductive freedom, for example, is limited not only by the denial of access to safe abortions, but also by the lack of resources necessary for a healthy pregnancy and parenting relationship. Their choices are limited not only by direct government interference in their decisions, but also by the government's failure to facilitate them.[15]

In the 1990s, research teams from Boston University and Georgetown University undertook the Black Women's Health Study in response to the recognition that research up to that point had been conducted primarily with White women patients. Not long into the study, it became clear to the team that what needed to be studied was not so much *race* but the *impact of racism*. They adapted a tool used to measure impacts of "everyday race-related insults" on healthcare disparities and sought to include impacts of institutionalized racism and the toll structural racism takes on women's bodies. They arrived at the conclusion that "for black women in America, an inescapable atmosphere of societal and systemic racism can create a kind of toxic physiological stress, resulting in conditions—including hypertension and pre-eclampsia—that lead directly to higher rates of infant and maternal death. And that societal racism is further expressed in a pervasive, longstanding racial bias in health care—including the dismissal of legitimate concerns and symptoms—that

[15] Roberts, *Killing the Black Body*, 300.

can help explain poor birth outcomes even in the case of black women with the most advantages."[16]

The Black Women's Health Study confirmed and nuanced additional research conducted by Arlene Geronimus of the University of Michigan School of Public Health beginning in the late 1980s. Geronimus had begun developing the theory of *weathering*, in which "high-effort coping from fighting against racism leads to chronic stress that can trigger premature aging and poor health outcomes."[17] As an adjective, *weathered* signifies the effects of harsh conditions over time. As a verb, *weathering* suggests courage and endurance in the face of such conditions. When applied to the context of maternal and child health, Villarosa notes "something about being a Black woman in America is bad for her body and her baby"[18] and, according to Sarah Rubin and Joselyn Hines, the act of mothering itself becomes a radical practice of resistance.[19]

Theological Reflection

A voice was heard in Ramah, sobbing and loud lamentation; Rachel weeping for her children, and she would not be consoled, since they were no more. (Matthew 2:18)

Christian ethicist Kelly Brown Douglas recalls the image of Rachel in her epilogue to *Stand Your Ground: Black Bodies and the Justice of God,* "A

[16] Villarosa, "Why America's Black Mothers and Babies are in Life-or-Death Crisis." See also Linda Villarosa, *Under the Skin: The Hidden Toll of Racism on American Lives and the Health of Nation* (New York: Random House, 2022), 74–80.

[17] Villarosa, *Under the Skin*, 80.

[18] Villarosa, *Under the Skin*, 80.

[19] Sarah Rubin and Joselyn Hines, "As Long as I Got Breath in my Body: Risk and Resistance in Black Maternal Embodiment," *Culture, Medicine, & Psychiatry* 47, no. 12 (2023): 495–518. The authors note (505–506), "For many moms in our study, pregnancy and the postpartum period contained revelatory moments of embodied knowledge where they feel gratified and virtuous centering their children. For others, centering children is a shift in perspective regarding their community and environment" and "everywhere she looks she sees the way her surroundings endanger her children."

Mother's Weeping for Justice."[20] Written in direct response to the murder of Trayvon Martin and the acquittal of his killer, *Stand Your Ground* is a forceful critique of American exceptionalism that costs the lives of a litany of Black people who are subjected to violence from neighbors, strangers, and law enforcement. Douglas unites the biblical image of Rachel with the mothers of Black people who have been murdered. We might do the same for Black mothers and their children harmed by and lost to reproductive injustice.

Rachel is a key figure in the Genesis narrative. Like many female figures in the Bible, her story is closely tied to her reproductive status (Genesis 29; 30:22–24). Barren for many years while her sister delivered sons to Jacob, she eventually gives birth to Joseph, who is later sold into slavery by his brothers, but who would eventually rise to power and influence in Egypt in a time of famine. Rachel leverages the taboo around menstruation to escape detection by Laban, transforming pollution into power (Genesis 31:35). She later dies in childbirth while delivering Benjamin (Genesis 35:16–20).[21]

As a matriarch of the people of Israel, Rachel is later recalled by the prophet Jeremiah during a time of exile and great desolation, "In Ramah is heard the sound of sobbing, bitter weeping! Rachel mourns for her children, she refuses to be consoled for her children—they are no more! Cease your cries of weeping, hold back your tears! There is compensation for your labor—oracle of the LORD— they shall return from the enemy's land. There is hope for your future—oracle of the LORD— your children shall return to their own territory" (Jeremiah 31:15–17) A mother in distress and grief over her children is a powerful metaphor for the wrenching experience of exile and the power of God's love and promises for the people of Israel. Childbirth, a sign of divine favor, is also a "symbol

[20] Kelly Brown Douglas, *Stand Your Ground: Black Bodies and the Justice of God* (New York: Oribis, 2015).

[21] Susan Niditch, "Genesis," in *The Women's Bible Commentary*, ed. Carol A. Newsom and Sharon H. Ringe (Louisville: KY: Westminster/John Knox, 1992), 15, 21.

of death" and "approaching calamity."[22] In the infancy narrative found in Matthew's gospel, the image of Rachel is employed again during the account of the slaughter of the innocents, the vicious powerplay on the part of Herod, "standing his ground of power," to shore up his control and ego (Matthew 2:18).[23] The abject horror is at once palpable and unimaginable. Each voice raised in the chorus of lamentation is radically unique but together they point to systematic violence and structural sin. Douglas reflects, "Into the midst of a mother's deepest pain and suffering God is present in the world bringing hope."[24] Compensation for the labor of childbearing and childrearing, a hope-filled future for Black mothers and infants, and children returned home from exile offer a powerful vision of reproductive justice.

Dignity, Solidarity, and a Preferential Option for the Vulnerable through the Lens of Black Mamas Matter

Unfortunately, the pro-life movement in many Christian communities, including the Catholic Church, has neglected the richness, complexity, and ambiguity of the biblical imagery of Rachel's lament in favor of an "all lives matter" approach to the ethics of reproduction and as a direct response to the Movement for Black Lives. This approach, while claiming to hold the moral high ground of a commitment to intrinsic human dignity, is, in practice, a stumbling block for intersectional reproductive justice as it undermines the lived dignity of Black bodies. The Black Lives Matter movement, sparked by a creative social media hashtag in response to the murder of Trayvon Martin, was founded by three human rights activists, Alicia Garza, Patrisse Khan-Cullors, and Ayo Tometi. Black Lives Matter also served as an important corrective to the predominantly white

[22] Kathleen M. O'Connor, "Jeremiah," in Newsom and Ringe, *The Women's Bible Commentary*, 173.
[23] Kelly Brown Douglas, *Stand Your Ground*, 228.
[24] Kelly Brown Douglas, *Stand Your Ground*, 228.

and affluent feminist movement embodied in the first Women's March after the 2016 United States presidential election.[25] As I have already noted, movements for reproductive justice have often excluded the experiences of women of color and prioritized the kinds of justice claims made by relatively affluent white women. Scholars including Dorothy Roberts and Brittney Cooper have noted that the history of civil rights for women is marred by the frequent betrayal of Black women as white women accepted compromises that leverage their racial privilege. White racial solidarity has been stronger than gender solidarity; economic solidarity among the affluent and those who aspire to that status has been stronger than gender solidarity.[26]

Black Lives Matter corrects the de facto devaluing of Black persons and communities. The compelling hashtag, the work of experienced and courageous Black women, was then coopted and misused to advocate for "blue" lives, lives of police officers and law enforcement professionals. The cooptation went further as majority culture white Christians hedged their bets by claiming that "all lives matter." Black Lives Matter has never called into question the intrinsic dignity of human persons as persons. Rather it has claimed personhood, echoing proclamations made throughout the history of civil rights in the United States: I am a Man. I am Somebody. Ain't I a Woman?[27] To say that "all lives matter" in a racist context

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[25] Alicia Garza, *The Purpose of Power: How We Come Together When We Fall Apart* (New York: One World, 2020); Patrisse Khan-Cullors and ashsa bandele, *When They Call You a Terrorist: A Black Lives Matter Memoir* (St. Martin's Press, 2018).

[26] Roberts, *Killing the Black Body*; Brittney Cooper, *Eloquent Rage: A Black Woman Discovers Her Super Power* (New York: St. Martin's Press, 2018). For a theological analysis of human solidarity at the intersections of race and gender, see M. Shawn Copeland, *Enfleshing Freedom: Body, Race, and Being* (Minneapolis, MN: Fortress Press, 2023), 36, 67, 93–105.

[27] Claiming personhood for Black Lives has a rich historical tradition. "I am a Man" was a rallying cry used by civil rights activists during the Memphis Sanitation Strike of 1968. The National Museum of Civil Rights at the Lorraine Hotel, www.civilrightsmuseum.org/i-am-a-man. "I am Somebody" was proclaimed by black female hospital workers in Charleston, South Carolina in 1969 and featured in a documentary of the same name by Madeline Anderson, www.civilrightsmuseum.org/washing-society-i-am-somebody. Activist for racial and gender

advances the fiction of reverse racism. As author and activist Ijeoma Oluo notes, "Racism is any prejudice against someone because of their race, *when those views are reinforced by systems of power*."[28] The systems, structures, laws, etc., are set up in ways that assume the dignity of some persons, white men in particular, but place a burden of proof of humanity on persons of color, women and children, and queer persons. To say "all lives matter" is at best disingenuous and, at worst, white-supremacist. It is a way for churches to claim some vision of good-people-on-both-sides neutral ground, sidestepping real claims for racial justice that might impinge upon the comfort of white people and communities. To say that all lives matter may be technically true in an abstract, existential way, but it is hardly true in lived experience. In lived experience, claims that all lives matter increase the vulnerability, indeed the disposability, of Black bodies, female bodies, pregnant bodies, and queer bodies. It avoids the difficult but necessary task of taking the side of those whose vulnerability is most urgent.

To *matter* is to be important, to have weight, substance, intrinsic value, influence. It suggests subjectivity and agency. Things that matter must be taken into account.[29] Saying that all lives matter is essentially a way to say that no lives matter as much or more than affluent cis-gendered white men. Claiming the sanctity of all life might say something about who God is and what might matter to God, but it hardly describes the concrete decisions and actions of people with power and privilege, those who decide, in practical terms, what matters, who matters, to whom, why, and for what purpose. This is not a solidaristic assertion about the dignity of all persons but is rather a tool of white supremacy used to distort a fundamental claim

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justice Sojourner Truth delivered a speech later titled, "Ain't I a Woman," to the Women's Rights Convention in Akron, Ohio on March29, 1851.

[28] Ijeoma Oluo, *So You Want to Talk About Race?* (New York: Hachette, 2019), 27. Emphasis mine.

[29] jennifer s. leath, Nontando Hadebe, Nicole Symmonds, and Anna Kasafi Perkins, "Black Feminism, Womanism, and Intersectionality Discourse," *Journal of Moral Theology* 12, Special Issue 1 (2023): 157–175, doi.org/10.55476/001c.75199.

of Christian anthropology. As Cole Arthur Riley reflects in *This Here Flesh: Spirituality, Liberation, and the Stories that Make Us*, "Injustice has survived by cowering behind the guises of morality and ethics. The whole charade is diabolical. True justice has little concern for good and bad, and is much more interested in protecting and affirming dignity with tangible actions and repair."[30]

To say "Black Lives Matter," or "Black Mamas' Lives Matter," actually comes closer to conveying Christian theological and anthropological commitments. To say that Black mothers and their children matter is to capture the heart of reproductive justice and a preferential option for the poor and vulnerable.

White supremacy, Christian white nationalism, and misogyny are particularly virulent in the United States with devastating consequences for the sexual and reproductive participation of BIPOC and LGBTQIA+ persons in the common good. The Catholic Church has been and continues to be complicit in perpetuating the unjust social conditions that undermine the dignity of particular persons and the common good of society and the people of God. The Catholic Church's reproductive politics have had consequences that belie its claims to value the intrinsic dignity and sanctity of all human life. We can no longer ignore the link between the programs of white supremacy and misogyny in the U.S. and campaigns to end the legal rights to abortion, to limit access to birth control, to end the right to marriage for same-sex couples, and to exclude transgender, non-binary and non-conforming persons from religious, educational, and healthcare spaces. The practical effect of measures taken by the Church to severely restrict reproductive healthcare access for women and girls and gender affirming medicine and mental healthcare and to expand the "right" to discriminate against LGBTQIA+ persons in employment has not decreased the number of crisis pregnancies and abortions. It has not improved the maternal and infant mortality rates

[30] Cole Arthur Riley, *This Here Flesh: Spirituality, Liberation, and the Stories that Make Us* (New York: Convergent, 2023), 123.

among Black women and children. It has not advanced the health, well-being, and the fundamental and inviolable dignity of women and girls. It has not shored up the resources that all parents and families, especially vulnerable families, need to promote their children's flourishing. Rather, these measures have bolstered support for political candidates who advocate for disenfranchising BIPOC voters through voter suppression, easing access to guns and military weapons, criminalizing Black and trans bodies, undermining accountability for sexual assault and the murder of Black and trans bodies, eroding vital resources for equitable public education, erasing the histories of racism, settler colonialism, and accounts of BIPOC achievement, legitimizing anti-immigrant hate, denying healthcare to poor people, and dismantling protections for the natural environment.[31]

Sexual intimacy, reproduction and parenting, and gender presentation and performance are all forms of social participation, all ways in which people both build the common good of society and receive its benefits. Like access to education and meaningful work, reproductive justice as participation in the common good requires conditions and institutions that are characterized by intersectional justice, which is justice that recognizes multiple forms and historic patterns of oppression that overlap and reinforce each other like racism, gender inequity, fear of queer bodies, and poverty. Sexual intimacy, reproduction, parenting, and gender presentation are human goods, but they must not be romanticized or idealized; they require the arduous work of informed personal and communal conscience. An "all lives matter" approach favors a vision of the human in the abstract (which is white, cis-gendered male, heterosexual), denies history, invalidates lived experiences, and thwarts genuine solidarity across difference. It is an attempt to give moral credence to claims of color blindness, gender blindness, status blindness. It prefers a disingenuous

[31] This passage is based on an essay that appeared in the North American Forum of *The First*, a monthly newsletter for Catholic Theological Ethics in the World Church. Mary M. Doyle Roche, "Parents' Rights, Politics, and Justice for Young People," April 1, 2022, https://catholicethics.com/forum/justice-for-young-people/.

equality to the pursuit of equity across difference. Differences do matter. People often attempt to convey commitment to intrinsic dignity on the interpersonal level with phrases like "it doesn't matter to me that you are [fill in the blank: BIPOC, LGBTQIA+, a girl]." In the pursuit of equity, differences in identity and experience do matter if we are to get intersectional reproductive justice right. It matters that my neighbor, colleague, friend, or family member has a racial or gender identity different from mine. These elements of their stories matter to me and should matter to church leaders. What brings them joy or sorrow matters. What endangers their lives matters. What brings a measure of safety and security matters. If intersectional identities don't matter then nothing compels us to closely examine the impact of laws and policies that on their face treat people equally but in fact simply shore up injustice based on race, gender, and class.

Characteristics of Reproductive Justice for Catholic Ethics

Informed by biblical narratives and themes in Catholic social teaching, including the dignity of the person, the common good, and solidarity with the vulnerable, reproductive justice is a comprehensive ethic that lifts up and prioritizes the experiences of Black women and girls. It is interested in healthy bodies, minds, and spirits, meaning not only the absence of disease and mere survival but also the flourishing of women in every aspect of their sexual and reproductive lives. Reproductive justice is comprehensive in the sense that reproduction includes conceiving, gestating, birthing, and raising another generation. Reproductive justice includes respect both for autonomy in making reproductive choices and for the relationality that is required throughout life, perhaps most especially in raising infants, children, and young people.

Reproductive justice considers reproduction to be a deeply personal experience but not one that has only the condition of privacy to guide it.

Reproductive justice's commitment to the dignity of the person is grounded in both autonomy and interdependence in the context of the common good. So, reproductive justice also envisions sexual activity, gender expression, reproduction, and parenting as matters of *participatory* justice. Sexual activity, gender expression, reproduction, and parenting are contributions to the common good of society. This is not to say that reproduction is meant only to serve the interests of the collective or the interests and the advantage of the affluent in the guise of what is common. The common good entails social conditions that allow people to flourish. The common good is stronger when Black women can make choices to have children, not have children, give birth in conditions they choose with access to the best prenatal medical care, and raise children in healthy environments without fear.

Intersectional approaches to reproductive justice also recognize the common good as both a set of social *conditions* and a set of social *constructions*. The social construction of human experience is inevitable as communities shape language, tell stories, create meaning, and organize social life. We are always in a process of constructing, deconstructing, and reconstructing experience. Experiences of gender, pregnancy, childbirth, motherhood, and maternal distress are socially constructed. Black and white bodies are socially constructed. The key question is whether or not the stories Christians tell and pass on about gender, pregnancy, childbirth, motherhood, and maternal distress are capacious enough to reflect the reality of the most vulnerable women and girls. Do they make space for the lament of Black women and girls? Cole Arthur Riley provides much needed nuance to lament as an intergenerational phenomenon in reflecting on Jeremiah 9:20, "Hear, O women... teach your daughters a dirge, and each to her neighbor lament." She writes, "I shouldn't need to recite a litany of wounds and injustices and decay in order to justify my sadness. In lament, our task is never to convince someone of the

brokenness of this world; it is to convince them of the world's worth in the first place."[32]

Reproductive justice is guided by subsidiarity in that it abides by the dignity of individual, personal conscience, prioritizes local and grassroots wisdom about health needs and priorities, and still maintains a role for multiple institutions, including the government, in advancing rights as both immunities from undue interference and positive claims for concrete support. As Roberts claimed in *Killing the Black Body*, "The abstract freedom to choose is of meager value without meaningful options from which to choose and the ability to effectuate one's choice."[33] There are a number of initiatives lead by Black women that operate at the local, national, and international levels. They provide concrete services for women and infants, conduct critical research into the causes of and potential interventions for maternal and infant morbidity and mortality, advocate for public policy change, and strive for cultural transformation around women's health.

From Rachel Weeping to SisterSong: Witnesses to Reproductive Justice

What does reproductive justice look like? Where have we glimpsed just responses to unjust circumstances, conditions, constructions? This essay has focused on the shameful rates of maternal and infant morbidity and mortality for Black woman and children in the United States, and to these grave injustices, we might add a school to prison pipeline for Black boys, parental separation due to the mass incarceration of Black people, and the murder of Black bodies by law enforcement and other white "stand your ground" proponents. Working for intersectional reproductive justice can take the form of lending support and solidarity to the innovative work of Black women.

[32] Cole Arthur Riley, *This Here Flesh*, 98, 104–105.
[33] Roberts, *Killing the Black Body*, 309.

For example, SisterSong Women of Color Reproductive Justice Collective is a multiethnic collaborative, based in the southern US, that focuses on organizing for reproductive justice. Claiming reproductive justice as a human right, SisterSong emphasizes that reproductive rights are about access more than choice and widens the scope beyond abortion rights. They write, "Abortion access is critical, and women of color and other marginalized women also often have difficulty accessing: contraception, comprehensive sex education, STI prevention and care, alternative birth options, adequate prenatal and pregnancy care, domestic violence assistance, adequate wages to support our families, safe homes, and so much more."[34] Founded in 1997, SisterSong offers training in organizing for reproductive justice and recognizing the many intersecting oppressions that impact women's reproductive and maternal health. They build and sustain partnerships between many anti-racist grassroots organizations and raise funds to support birthing people of color.

The Black Mamas Matter Alliance (BMMA) similarly addresses policy change, culture shift, and innovative research programs that inform political policy and health practice. BMMA advocates for women's empowerment, "We intentionally center Black women's leadership. Black women have the knowledge, expertise, and skills to generate and implement solutions that will improve maternal health, rights, and justice, but sometimes lack the platforms necessary to support and amplify their work."[35] BMMA highlights "culturally-congruent practices" including Black midwifery and comprehensive doula services.

The Mother Lab (Maternal Outcomes for Translational Health Equity Research) at Tufts University School of Medicine Center for Black Maternal Health and Reproductive Justice supports research in maternal health from a public health perspective. Led by Dr. Ndidiamaka Amutah-Onukagha, the Mother Lab sponsors an annual Black Maternal Health

[34] SisterSong, www.sistersong.net/reproductive-justice.

[35] Black Mamas Matter Alliance, blackmamasmatter.org/.

Conference and fundraising initiatives to provide concrete support to birthing people, their infants, and families.[36]

One model of prenatal care being offered in the spirit of intersectional reproductive justice is the Centering Pregnancy Model®.[37] Featured in an article by Kiera Butler, "Pregnant While Black," the centering model uses group prenatal care appointments that build community and solidarity among women, leverage that space to deliver information and education more efficiently, and provide even more one-on-one time with a healthcare professional than is usually the case in traditional models of care.[38] Women's agency over their care is respected and encouraged as they record health data and help set the agenda for discussion. The approach leads to better outcomes for women and infants and mitigates racial disparities, and may be especially useful in areas that are under-resourced in terms of personnel but not practical knowledge and wisdom.[39] This confirms the wisdom of Dr. Prabhjot Singh, the director of the Arnhold Institute for Global Health at the Icahn School of Medicine at Mount Sinai, who studies community health worker models and how they can be used in the United States: "When you have an organized community-based team that connects technical clinical issues with a deep, embedded set of relationships, you can make real breakthroughs."[40]

Conclusion

In the gospels, women matter. They matter when they have been spurned and ostracized. They matter when they are making claims for their children, including their daughters. Those who are constructed as impure

[36] Motherlab, motherlab.org/.

[37] Information on the Centering Pregnancy® model can be found at centeringhealthcare.org/what-we-do/centering-pregnancy.

[38] Kiera Butler, "Pregnant While Black," *Mother Jones*, July/August, 2018, 13–15.

[39] The Centering Healthcare Institute in Boston links to a bibliography of research on cantering care at centeringhealthcare.org/why-centering/research-and-resources.

[40] Villarosa, "Why America's Black Mothers and Babies are in a Life-or-Death Crisis."

and unclean matter. Those with heavy burdens and few resources matter. Those who are grieving matter. Women and girls matter to Jesus. They matter in the reign of God. To be sure, their sexual, marital, medical, and reproductive histories matter to the stories of their lives, to their whole truths, but they are not weaponized by Jesus to exclude, shame, or demean. The reign of God is good news for them and their children, down through the generations.

Any adequate ethic of reproductive justice from a Catholic perspective must take its lead from the experiences and advocacy of women of color. It must begin with a lament, rising like Rachel's weeping over the deaths of Black women and children during pregnancy, childbirth, and the postpartum period. Rather than perpetuate a romanticized construction of pregnancy and motherhood, it must root itself in the experience of struggle even as it strives to alleviate suffering and build the common good for all people.[41] Improving the disgraceful, and deteriorating, statistics on maternal and infant morbidity and mortality for Black people in the United States will take effort at every level of healthcare delivery and research and requires structural changes beyond raising consciousness about inter-personal bias. Rhetoric about the sanctity of all life and the vocation of motherhood is empty without a steadfast claim that the lives of Black mothers and children matter. Rhetoric about choice too is empty when it is leveraged by white, affluent supporters of abortion rights without sufficient attention to the social conditions that allow for real choices that include not having children, having children, and raising children in communities of justice and compassion. Intersectional reproductive justice is rooted in lament but branches out toward the flourishing of Black women and children.

[41] See Bryan Massingale, *Racial Justice and the Catholic Church* (Maryknoll, NY: Orbis, 2010), 20–24.

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