



# Resistance Stories

*Case Studies*



# Birthing Justice: The Community Care Collective

## Background:

In a historically marginalized urban community, systemic racism and reproductive oppression have created disparities in maternal and infant health. The local hospital has been cited for disproportionately high rates of maternal mortality among Black and Brown women, driven by medical neglect and a lack of culturally respective care. In response, a coalition of birth workers, community organizers, and reproductive justice advocates came together to resist these harms and reclaim autonomy over their community's birthing practices.

## The Story:

The story begins with Layla, a Black midwife who grew tired of witnessing women in her community receive substandard care. After losing a friend to postpartum complications that were ignored by medical staff, she founded a community collective.

The community collective was built on a shared vision of reproductive justice: centering the lived experiences of those most harmed by the system and reclaiming care practices rooted in cultural traditions and collective healing.

The collective provided free prenatal and postpartum care, nutrition education, and mental health support to families who lacked access to affordable healthcare. Layla also recruited other birth workers, including doulas, childbirth educators, traditional healers and lactation consultants, to create a holistic care network.

What made this collective unique was its use of storytelling as both a healing and advocacy tool. Layla organized "Birthing Circles," safe spaces where survivors of obstetric violence could share their stories. These stories were documented (with consent) and turned into powerful zines, videos, and public art projects. The storytelling initiative highlighted patterns of neglect and harm, amplifying voices that were often ignored.

The collectives' work gained attention when they used these stories to mobilize the community and advocate for policy change. They successfully pressured the local hospital to hire more Black and Brown obstetricians and implement mandatory training on implicit bias and trauma-informed care.

# Birthing Justice: The Community Care Collective

## Community Care Model Elements:

- **Shared Care:** Birth workers trained community members as peer doulas to extend the reach of their services.
- **Resource Redistribution:** Donations from local businesses provided baby supplies, meals, and transportation for birthing people.
- **Healing Justice:** Workshops on traditional birthing and postpartum practices reconnected families to ancestral practices.
- **Advocacy:** Survivors' stories were shared at town halls and rallies, leading to state legislation mandating doula access for Medicaid recipients.

## Impact:

Layla's story demonstrates resistance to reproductive harm by reclaiming the community's role in care and dismantling oppressive systems. The collective's efforts decreased maternal mortality rates in the community, empowered birthing people to advocate for themselves, and created a model for grassroots reproductive justice.

## Discussion Questions:

1. How does Layla's story demonstrate resistance and reclamation in the face of reproductive harm?
2. What role does storytelling play in advancing the goals of the collective?
3. How might you apply a community care model to other forms of systemic harm?

## Prompts:

- Reflect on how reclaiming cultural traditions (healing justice) can serve as a form of resistance.
- Explore the connections between storytelling and policy advocacy in addressing systemic injustices.
- Brainstorm ways to amplify the voices of marginalized individuals in your own work.

# Freedom to Choose: The Collective Voice of Las Comadres

## Background:

In a Southern state with one of the nation's strictest abortion bans, Maria, a young Latina woman, was arrested and charged with "fetal endangerment" after experiencing a miscarriage. Her case became a symbol of the rising criminalization of pregnancy, especially for low-income women and women of color.

Maria's experience was not isolated. Across her community, pregnant individuals were surveilled, shamed, and often criminalized for making decisions about their bodies. In response, a grassroots group of Latina reproductive justice advocates, birth workers, and formerly incarcerated women formed a collective called Las Comadres de Libertad (The Comrades of Freedom).

## The Story:

Las Comadres started by creating a safe network for individuals seeking abortion care and support. Using encrypted messaging and word-of-mouth, they connected people to underground resources like abortion pills, out-of-state clinics, and emotional support.

They also launched "Voces Libres" (Free Voices), a storytelling initiative where women like Maria could share their experiences of criminalization and reproductive harm. In one powerful story circle, Maria spoke publicly for the first time about the trauma of her arrest, the dehumanization she faced, and her healing journey supported by Las Comadres.

These stories were collected and shared anonymously through community murals, podcasts, and zines distributed at local bodegas and churches. The murals featured vibrant depictions of resilience: women standing tall with images of their children and families, surrounded by symbols of justice and freedom.

Las Comadres also worked to resist systemic harm through collective advocacy. They organized town hall meetings, connecting impacted individuals with legal experts and human rights organizations. The stories from Voces Libres became the heart of their campaigns, giving a face to the injustice of criminalized pregnancy. The collective also offered community care, including free legal aid, mutual aid networks, doula services for incarcerated pregnant individuals, and postpartum support for those re-entering society.

# Freedom to Choose: The Collective Voice of Las Comadres

## Community Care Model Elements:

- **Legal Advocacy:** Partnered with lawyers to provide pro bono defense for pregnant individuals facing charges.
- **Mutual Aid:** Raised funds for abortion travel costs and provided childcare for those attending court or activist events.
- **Healing Circles:** Held culturally grounded support groups for people who had been criminalized, combining art, storytelling, and ancestral practices.
- **Policy Change:** Shared stories at the state capitol, leading to the introduction of legislation aimed at decriminalizing pregnancy outcomes.

## Impact:

Maria's case was eventually dismissed, but the work of Las Comadres continues. Through their efforts, the community reclaimed its power, challenged oppressive laws, and created a model of reproductive justice rooted in solidarity and care. Their work reframed pregnancy and abortion as deeply personal and human experiences, deserving of compassion rather than punishment.

## Discussion Questions:

1. How does Las Comadres' use of storytelling challenge dominant narratives about abortion and pregnancy?
2. What role does community care play in resisting systemic oppression?
3. How can similar models be adapted to other communities facing reproductive injustice?

## Prompts:

- Reflect on how storytelling can humanize complex issues and mobilize communities.
- Consider the intersection of race, class, and gender in the criminalization of pregnancy.
- Brainstorm ways to integrate advocacy, direct care, and cultural healing in addressing reproductive injustice.

# Three Generations Reclaiming Reproductive Freedom

## Background:

In a rural town where access to reproductive healthcare has been systematically dismantled, Rosa, a 65-year-old community elder, recalls the days when midwives and herbalists served as the primary caregivers for women in her community. Over time, systemic racism, restrictive laws, and disinvestment stripped the community of these resources, leaving a single underfunded clinic as the only option for reproductive care.

When this clinic was forced to close due to new state-level abortion bans, Rosa's granddaughter, 18-year-old Sofia, was devastated. Sofia had recently learned she was pregnant and wanted to explore her options, but she now had no legal or local resources available.

Rather than accept defeat, Rosa, Sofia, and Sofia's mother, Elena, came together to resist the reproductive harm facing their community.

## The Story:

Rosa began by reclaiming knowledge she had learned as a young woman from her own grandmother—healing practices, herbal remedies, and traditional reproductive care. She hosted small gatherings in her kitchen, teaching these practices to younger generations, including Sofia, who began to see her body and choices as connected to a legacy of resilience rather than shame.

Elena, a former teacher, mobilized her local network of activists to launch “Mothers for Liberation,” an intergenerational collective committed to addressing reproductive injustice. The group held workshops that combined Rosa's teachings with legal and medical advocacy, creating a safe space for community members to share stories, build power, and organize.



# Three Generations Reclaiming Reproductive Freedom

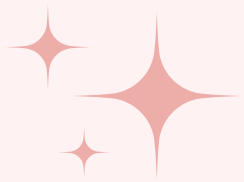
Sofia, inspired by the strength of her mother and grandmother, started documenting the stories of women in her community who had been impacted by the clinic's closure. These stories were compiled into a short documentary titled "Our Bodies, Our Fight," which premiered at a community gathering attended by people of all ages. In one particularly moving moment, Sofia shared her own story of finding support through her family and choosing to parent her child with the collective's help.

Through their work, Rosa, Elena, and Sofia helped to normalize intergenerational dialogue about reproductive rights. They also created tangible change:

- Rosa led a project to establish a community apothecary offering herbal care for pregnancy and postpartum needs.
- Elena organized transportation networks for people needing out-of-state abortion care or prenatal services.
- Sofia used the documentary to lobby state lawmakers, successfully garnering support for increased funding to rural health initiatives.

## Community Care Model Elements:

- **Intergenerational Healing:** Elders taught traditional care practices while young activists shared digital storytelling and advocacy skills.
- **Resource Sharing:** The collective created a mutual aid fund to support individuals seeking reproductive care.
- **Advocacy:** Stories from the community were presented at the state legislature to challenge harmful policies and propose alternatives.
- **Healing Justice:** Events celebrating ancestral practices and honoring reproductive freedom created a sense of pride and solidarity.





# Three Generations Reclaiming Reproductive Freedom

## Impact:

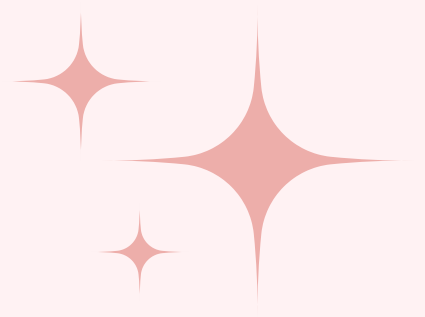
The work of Rosa, Elena, and Sofia reshaped their community's response to reproductive harm, turning despair into collective action. Rosa's wisdom, Elena's organizational skills, and Sofia's passion united generations in reclaiming reproductive autonomy. Together, they proved that resistance is strongest when rooted in the power of family, community, and tradition.

## Discussion Questions:

1. How does the intergenerational aspect of this story strengthen the collective's resistance to reproductive harm?
2. What role does reclaiming cultural traditions play in challenging systemic injustices?
3. How can storytelling amplify intergenerational collaboration in social justice work?

## Prompts:

- Reflect on how intergenerational relationships can foster healing and resistance.
- Consider how cultural knowledge can intersect with modern activism to address reproductive injustice.
- Brainstorm ways to involve elders and youth in collaborative advocacy within your own community.





# Reclaiming Period Power Through Digital Activism

## Background:

For years, Nadia, a 22-year-old college student, struggled with heavy and painful periods. Despite frequent visits to the campus health clinic, her symptoms were dismissed as “normal” or attributed to stress. After finally being diagnosed with endometriosis, Nadia faced another challenge—affording the high cost of menstrual products and treatments while navigating systemic stigma around menstruation. She soon learned she wasn’t alone; students at her university also reported missing class because they couldn’t afford pads or tampons, and many were embarrassed to speak up about their needs. Determined to fight menstrual stigma and advocate for equity, Nadia turned to social media to amplify her voice.

## The Story:

Nadia created an Instagram account called “Period Power,” where she shared her story of delayed diagnosis, menstrual inequity, and the broader injustices surrounding reproductive health. Her posts, written in both English and Spanish, resonated with students and community members who shared their own stories in the comments and direct messages.

Using the momentum, Nadia organized a virtual campaign called #PadsForAll to demand free menstrual products on campus. She invited others to share photos of their school bathrooms with empty or absent dispensers, using captions to explain how this lack of access impacted their education and dignity. Within weeks, the hashtag had thousands of posts, attracting attention from local news outlets.

Nadia also collaborated with community activists and health professionals to host a series of Instagram Lives focusing on the history of menstrual stigma, the environmental impacts of disposable products, and policy solutions for menstrual equity. One particularly powerful session featured an older activist who discussed how menstruation had been silenced in her time, connecting Nadia’s fight for digital visibility to a long legacy of resistance.

The Period Power account evolved into a hub for menstrual equity activism, offering digital toolkits for advocacy, instructions for DIY sustainable period products, and calls to action for systemic change. With community support, Nadia crowdfunded enough money to create “Menstrual Equity Kits,” which included reusable pads and menstrual cups, distributed to students for free.

# Reclaiming Period Power Through Digital Activism

## Community Care Model Elements:

- Digital Activism: Leveraged social media to build a platform for marginalized voices and organize collective action.
- Resource Redistribution: Crowdfunded products to ensure access to menstrual care for those in need.
- Education and Awareness: Hosted workshops and digital panels to break the stigma around menstruation and highlight its connection to broader reproductive justice issues.
- Policy Advocacy: Worked with campus leaders to successfully implement free menstrual products in all university restrooms.

## Impact:

Nadia's campaign led to tangible changes on campus, including the installation of dispensers stocked with free menstrual products and a student-led task force for ongoing menstrual equity initiatives. Beyond the campus, Period Power sparked broader conversations about menstrual stigma, inspiring similar campaigns in neighboring schools. Through digital storytelling and community care, Nadia and her supporters reclaimed the narrative around menstruation, transforming shame into empowerment and access.

## Discussion Questions:

1. How does Nadia's use of digital storytelling challenge menstrual stigma and create community?
2. In what ways does her story connect personal experience to systemic advocacy?
3. How can digital activism intersect with grassroots organizing to address reproductive harm?

## Prompts:

- Reflect on how digital platforms can amplify marginalized voices and build coalitions.
- Explore the connections between menstrual equity, environmental justice, and reproductive health.
- Brainstorm ways to use storytelling to reclaim narratives around other stigmatized health issues.

# Global Voices Against Forced Sterilization

## Background:

Ana, a 40-year-old Indigenous woman from Peru, was forcibly sterilized during the 1990s under a government program targeting poor and Indigenous communities. For years, Ana lived with the trauma of the procedure, which was done without her informed consent during what she thought was a routine visit to a health clinic. She carried the pain of losing her reproductive autonomy and the shame imposed by her community, which often blamed victims rather than the oppressive policies.

In 2023, Ana learned through a local women's rights group that similar forced sterilization programs had been implemented globally, from the United States to India and South Africa. She realized her experience was part of a larger pattern of reproductive injustice rooted in colonialism, racism, and class oppression. Inspired by this knowledge, Ana decided to act.

## The Story:

Ana began by joining a local collective of survivors. The collective, led by women from Indigenous and Afro-Peruvian communities, held healing circles where survivors could share their stories in safe and supportive spaces. Ana's first time speaking her truth was transformative. She realized that reclaiming her narrative was a form of resistance.

With the support of this collective, Ana became an advocate. She participated in a global solidarity campaign that connected survivors of forced sterilization worldwide. Through virtual forums, Ana collaborated with activists from other countries, sharing strategies for seeking justice and amplifying each other's stories.

Ana also helped organize a transnational solidarity march on the International Day for the Elimination of Violence Against Women. Survivors from around the world carried banners bearing their testimonies and demands for justice in their native languages. The march brought visibility to the issue and pressured global organizations to address forced sterilization as a violation of reproductive rights.

# Global Voices Against Forced Sterilization

## Community Care Model Elements:

- **Healing Circles:** Survivors shared stories in culturally affirming spaces, fostering collective healing.
- **Global Solidarity:** Connected with international organizations and movements to amplify voices and demands.
- **Policy Advocacy:** Collaborated with global human rights groups to demand reparations and accountability from governments that implemented sterilization programs.

## Impact:

Ana's activism led to significant outcomes. In Peru, the government reopened investigations into forced sterilizations, and survivor testimonies were included in policy recommendations. Globally, the campaign influenced international conversations on reproductive justice, pushing organizations like the United Nations to recognize forced sterilization as a form of gender-based violence and issue guidelines for reparations.

On a personal level, Ana found a renewed sense of agency and purpose. Through solidarity with survivors across the globe, she reclaimed her narrative and became part of a larger movement that demanded justice, accountability, and dignity for all.

## Discussion Questions:

1. How does Ana's story exemplify the connection between personal healing and global activism?
2. What role does storytelling play in fostering solidarity across borders?
3. How can global solidarity movements address the intersections of race, class, and gender in reproductive injustice?

## Prompts:

- Reflect on the importance of centering survivors' voices in movements for justice.
- Explore how transnational solidarity can strengthen local resistance efforts.
- Brainstorm ways to use art and media to raise awareness about global reproductive injustices.

# Building Inclusive Healthcare for All

## Background:

Alex, a 27-year-old nonbinary person, had long struggled to find affirming reproductive healthcare. When they sought treatment for painful periods, a gynecologist dismissed their discomfort, making offensive comments about their gender identity and pressuring them to consider pregnancy despite their clear disinterest in having children. Frustrated and hurt, Alex avoided seeking care for years, even as their symptoms worsened.

After hearing about other LGBTQ+ individuals facing similar discrimination, Alex realized their experience was not an isolated incident but part of a larger systemic issue: the lack of inclusive, affirming reproductive healthcare for LGBTQ+ people.

## The Story:

Alex connected with a local LGBTQ+ health advocacy group. Through their work with the group, they met a diverse group of activists—queer parents, trans healthcare providers, and youth organizers—who were committed to creating an inclusive healthcare system.

Together, the group launched a campaign to raise awareness about the barriers LGBTQ+ individuals face in accessing reproductive healthcare. Alex spearheaded a storytelling initiative, collecting narratives from queer and trans people about their healthcare experiences. These stories highlighted the harm caused by discriminatory practices but also celebrated moments of care and affirmation, showing what inclusive healthcare could look like.

One particularly moving story came from Dani, a trans man who shared how a clinic with trans-competent staff supported him through pregnancy without judgment. Inspired by this, the group used these narratives to create a multimedia exhibit featuring videos, artwork, and written testimonies. The exhibit traveled to universities, hospitals, and community centers, sparking important conversations about LGBTQ+ healthcare.

Alex and the group also collaborated with healthcare professionals to develop a training program for clinics and hospitals. The program, designed by and for LGBTQ+ people, emphasized cultural humility, gender-affirming language, and intersectional care practices. Alex helped lead workshops, sharing their story to illustrate the stakes of creating safe and affirming spaces.

# Building Inclusive Healthcare for All

## Community Care Model Elements:

- **Storytelling and Advocacy:** Collected and shared stories to educate the public and healthcare providers.
- **Education and Training:** Developed training programs to improve healthcare practices for LGBTQ+ patients.
- **Mutual Aid:** Established a resource network to connect LGBTQ+ individuals with affirming providers.
- **Art and Community Building:** Used multimedia storytelling to foster dialogue and solidarity.

## Impact:

The campaign created tangible change in their city. Several local clinics adopted the training program, committing to gender-inclusive practices, and a coalition of LGBTQ+ activists successfully lobbied for the establishment of an LGBTQ+ health center funded by municipal grants.

For Alex, the campaign offered a sense of empowerment and healing. By reclaiming their story and working alongside others, they turned their experiences of harm into a collective push for justice. The campaign also highlighted the power of community care—building affirming spaces for LGBTQ+ people to seek care, share their stories, and demand better.

## Discussion Questions:

1. How does storytelling serve as a tool for resistance in Alex's journey?
2. What are some specific ways healthcare systems can become more inclusive for LGBTQ+ patients?
3. How does the campaign demonstrate the importance of community care in addressing systemic harm?

## Prompts:

- Reflect on a time when you or someone you know experienced discrimination in a healthcare setting. How might storytelling help address this issue?
- Imagine creating your own campaign for inclusive healthcare. What would it include, and who would you involve?
- Consider how intersectional approaches can address the unique reproductive healthcare needs of LGBTQ+ individuals.



# Reclaiming Care After an Ectopic Pregnancy

## Background:

Maya, a 30-year-old mixed-race woman, was rushed to the emergency room one evening with excruciating abdominal pain and heavy bleeding. After hours of waiting, her pain was dismissed as "normal period cramps," and her insistence that something was seriously wrong was ignored,

Maya was finally diagnosed with an ectopic pregnancy. By the time she received care, the rupture had caused internal bleeding, leaving her in critical condition.

Though Maya survived, the experience left her physically and emotionally scarred. She couldn't forget the condescending tone of the ER doctor who dismissed her concerns or the nurse who accused her of exaggerating her symptoms. Maya realized her experience was part of a pattern of reproductive harm, especially for Black women, who are often disbelieved and face systemic racism in healthcare settings.

## The Story:

Struggling to heal, Maya turned to journaling to process her trauma. Over time, her journal entries transformed into a powerful narrative about her experience—one that she began sharing in small community spaces. At a local reproductive justice event, she told her story publicly for the first time, describing not only the harm she endured but also the resilience she found in reclaiming her voice.

Moved by the response, Maya started a storytelling project. Through workshops and healing circles, she invited others to share their experiences of not being believed in healthcare settings. Participants included people who had survived ectopic pregnancies, miscarriages, and other medical traumas. Maya ensured the spaces were trauma-informed, incorporating rituals like lighting candles and collective breathing to create a sense of safety and care.

The stories collected became the foundation for a zine that Maya co-created with local artists. The zine featured first-person accounts, poetry, and illustrations, blending personal narratives with calls for systemic change. Maya and the contributors distributed the zine at reproductive justice rallies, healthcare conferences, and clinics, ensuring it reached both community members and medical professionals.



# Reclaiming Care After an Ectopic Pregnancy

She also partnered with a local health equity coalition to launch a series of storytelling-based trainings for healthcare providers. Using storytelling, she challenged providers to reflect on how bias, racism, and gender discrimination shape patient care. These workshops sparked difficult but necessary conversations about accountability and the need for anti-racist practices in medicine.

## Community Care Model Elements:

- **Healing Through Storytelling:** Created safe spaces for survivors to share their stories and process trauma collectively.
- **Art and Activism:** Used storytelling and zine-making as tools for both personal healing and community education.
- **Education and Advocacy:** Developed trainings for healthcare providers to address systemic biases and improve patient care.
- **Mutual Support:** Built a network of survivors who provided ongoing emotional and practical support to one another.

## Impact:

Maya's storytelling project had profound effects. Survivors reported feeling validated and empowered after sharing their experiences, while healthcare providers who participated in the trainings pledged to implement more patient-centered practices. The zine became a powerful advocacy tool, raising awareness about reproductive harm and inspiring similar projects in other cities.

On a personal level, Maya found healing in her work. By transforming her pain into a force for change, she reclaimed her narrative and helped her community demand better care.



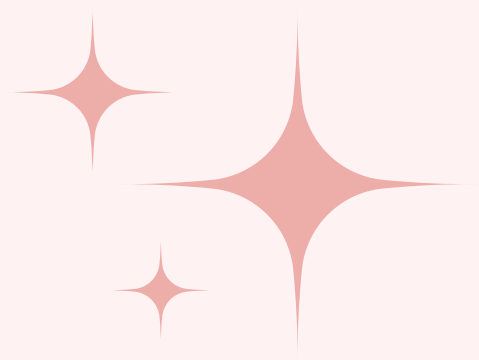
# Reclaiming Care After an Ectopic Pregnancy

## Discussion Questions:

1. How did Maya use storytelling to reclaim her voice and resist reproductive harm?
2. In what ways does Maya's project address systemic issues in healthcare?
3. What role does community care play in helping survivors heal and advocate for change?

## Prompts:

- Reflect on how storytelling can serve as a bridge between personal healing and systemic transformation.
- Imagine creating a similar project in your community. What stories would you center, and what change would you hope to inspire?
- Consider the importance of healthcare providers hearing patient stories. How might this shift their approach to care?



*These case studies were influenced by years of research, birthwork, and activism in the field of reproductive and birth justice. While most stories are fictional, they incorporate elements of real-life experiences to add depth and authenticity.*

*I created them with valuable input from friends and family who shared ideas, experiences, and feedback. All names used in the case studies are fictional.*

*Please feel free to use these stories to deepen your understanding or as tools in group settings to explore storytelling and reproductive justice collaboratively.*