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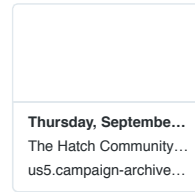
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ENTRIES IN HOLLY CARPENTER (2)

Tuesday
Sep182012

TUESDAY GUEST POST: "ABORTION IN THE RURAL NORTHWEST"

TUESDAY, SEPTEMBER 18, 2012 AT 9:00AM

ABORTION IN THE RURAL NORTHWEST

BY HOLLY CARPENTER



This summer, I road tripped around the Northwestern quarter of our country, hitting up Idaho, Montana, Washington, and Oregon. As a future rural abortion provider, I was keenly interested not only in getting a glimpse of what abortion culture was like in those states, but also to scope out possible places to live and work. I decided to make it into a sort of anti-protester trip, where I visited clinics to drop off little appreciation gifts and messages of support.

I started in Boise, but my schedule ended up conflicting with the clinic's hours and I wasn't able to stop by in person. So I sent them an envelope of Exhale cards, and a note to say that I appreciated their brave work in my home state. I traveled on to Missoula, Montana, through hundreds of miles of tiny towns and beautiful mountains. There, I asked friends and contacts about local health care options, and who the local abortion providers were. There was a Planned Parenthood, one of the two in the state of 145,545 square miles and almost a million people. I decided, however, to visit a private clinic, offering a unique mix of primary care, mental health, reproductive health care, and abortion services. I stopped by the local food co-op and picked out a few boxes of chocolate and a card (I know, so romantic!)

Pulling up to the clinic, I noticed the ten-foot tall metal fence surrounding the property. The gate was open, so I parked, noting the surveillance cameras covering the parking lot. Getting into the front lobby required pressing a bell, speaking to a receptionist, and then going through two thick glass doors, which I assume must have been bulletproof. Like many clinics, the receptionists sat behind another bulletproof glass window, and communication happened through a microphone. I introduced myself, realizing as I said the cheery words "Hi! I'm a UCSF nursing grad student and I just wanted to stop by to say thanks for the work you do!" that this wasn't something that happened often around there. It took a good deal of awkward explanations to convey why I was there and what I wanted. I handed over the chocolates and card, which they picked up gingerly and gave me a cautious "thank you?" for. I left shortly after, feeling disturbed and confused.

When I did a little more research online, I discovered that their first clinic had been firebombed and destroyed in 1993. The site I visited had been opened two years later, through collective efforts in the Missoula community. It dawned on me that there was no way they were going to eat those chocolates. They were most likely checking them for anthrax and then throwing them into biohazard bags. Our culture of stigmatizing, demonizing, and attacking people seeking abortions and their providers had created an atmosphere in which even the most well-intentioned visitor could inspire fear in the staff who work in clinics that provide abortion. This was so sad.

I gave up my naïve quest to visit these clinics, and instead spent time reflecting on the ways in which I can bring about a different culture, one in which people are respected and supported in making choices about their bodies, lives, and families. We need to create a world in

which abortion providers can accept thank you cards from patients and visitors, and protesters don't encircle people going into Planned Parenthood any more than they do patients at a dermatology clinic. I'm so grateful to my fellow BADP'ers, the New York Doula Project, and all the other full spectrum projects starting in urban areas around the U.S., and I'm looking forward to seeing the full spectrum doula movement percolate out to rural communities.

Holly Carpenter is currently an RN and full-spectrum midwifery graduate student at University of California, San Francisco and previously volunteered as a birth/post-partum doula at San Francisco General Hospital. Originally from northern Idaho, she became a California-convert while completing her B.A. at Pitzer College. After volunteering for reproductive justice for years, she decided to depart from politics and policy in search of more tangible, direct work in women's health care. She sought experience in a variety of settings, from patient care in rural teen clinics and Planned Parenthood to several years as an after-abortion counselor with Oakland-based **Exhale**. As a Pro-Voice Lead Counselor, she heard thousands of abortion stories and facilitated a team of thirty fellow counselors as they provided conscious, compassionate, and non-judgmental support to women and their partners. The missing link between emotional support and clinical services inspired her to work with this group of incredible women to found the Bay Area Doula Project. As a future clinician providing birth and abortion services, she appreciates every chance to support people through every pregnancy outcome, and to ease experiences that can be painful, relieving, complicated and empowering, to name a few.

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Tuesday
Jul312012

TUESDAY GUEST POST: "GUATEMALA: ATENCIÓN DE MUJER A MUJER"

TUESDAY, JULY 31, 2012 AT 9:01AM

Every Tuesday we feature a guest post related to abortion support, reproductive justice, and other topics relevant to our mission as an organization dedicated to providing

nonjudgmental, compassionate and empowering full-spectrum doula services. If you are interested in writing a post for our Tuesday series, email [Kelly N.](mailto:kelly@badp.org)

GUATEMALA: ATENCIÓN DE MUJER A MUJER

BY HOLLY CARPENTER



As a full

spectrum doula and nursing student in the US, I have had ample opportunities to witness the ways in which the culture of hospitals can harm, rather than heal. Hospital caused infections, medication administration errors, and overly managed birth all have negative consequences for patients who enter the hospital environment in search of help and good health. As an intern at a women's health clinic and birth center in Guatemala, I have seen these consequences reach a pervasive and profound extreme I didn't realize was possible, especially for women seeking care during pregnancy and childbirth.

I arrived at Asociacion Manos Abiertas (AMA) on a Friday and by Saturday morning I was two hours away in a tiny village setting up a field clinic for cervical cancer screenings with Carmen and Sandra, two of the Guatemalan clinic staff members. We spent the next two days doing over 125 screenings in a makeshift clinic, battling moscas (flies) with electric fans and the faulty health care system with plastic speculums and vinegar. The real challenge, however, was hearing the stories, and not just because my Spanish leaves something to be desired. I've worked in many women's health settings, from a double wide trailer in rural Sonoma county to the inner city San Francisco General Hospital, but nowhere have I heard stories like these. Women who went to the national hospital for their six month prenatal visit and were told that the position of the fetus at that time was enough to warrant a planned c-section. Rampant domestic violence. Women who requested hysterectomies but were never able to find out whether they were actually performed after their c-sections. Babies half delivered and then manually forced

back into the uterus because of shoulder dystocia and delivered through the most grotesque and barbaric cesarean incisions one could imagine.

The theme that really stayed with me though, was the total disempowerment and lack of respect these women faced in the hospital setting. Let me qualify by saying that I haven't yet been to these hospitals, nor interacted with the health care providers employed there. I don't know what the pressures were that caused the providers to treat these women so poorly - if I could hazard a guess, I would say it's probably an extreme lack of resources, minimal funding, low quality education, and a political system that impedes most progressive and idealistic individuals. The doctors I have met are generous, intelligent, and extremely respectful of their patients. But the truth was in these women's downcast eyes, quiet voices, and complete lack of confidence in their ability to take control of their health. It took nothing more than a sympathetic word to start the stories flowing. The questions about bleeding and birth control. The embarrassment over a grade three prolapsed uterus and the relief from one widow that her husband was dead - setting her free from future pregnancies... she felt 11 was more than enough. These are not typical stories that you hear in the US, with all its health care problems. Occasionally, to be sure. But these stories came from many voices, and echoed the same theme over and over. They had no power.

Fortunately, las mujeres de Guatemala have at least one possible alternative: Asociacion Manos Abiertas. Manos Abiertas is the opposite of the impersonal, disempowering hospital system here. When women walk in the door of our brightly painted clinic, often accompanied by children and partners, they are greeted as peers. They are shown respect, interviewed about their wishes and desires regarding their health and family planning, and provided with a comprehensive set of services including psychology consults, pediatric care for their little ones, and complete gynecological care. Women leave empowered and eager to continue their care with AMA. Best of all, this is not a typical non-profit staffed by gringos with mediocre Spanish (with the exception of me!). The care is largely provided by Sandra and Carmen, women from this community who embody the concept of *atencion de mujer a mujer*.

If Manos Abiertas didn't exist, these women would have no alternative to the national hospital. I only wish it could exist in every community here, and indeed, throughout the developing world. It is a simple and beautiful solution to a problem that most international leaders acknowledge as being among the greatest facing our generation - poor maternal and child health care.

For more information, visit

<http://asociacionmamosabiertas.org/es/> or

email holly@bayareadoulaproject.org

Holly Carpenter is currently a full-spectrum midwifery student at University of California, San Francisco and volunteer birth/post-partum doula at San Francisco General Hospital. Originally from northern Idaho, she became a California-convert while completing her B.A. at Pitzer College. After volunteering for reproductive justice for years, she decided to depart from politics and policy in search of more tangible, direct work in women's health care. She sought experience in a variety of settings, from patient care in rural teen clinics and Planned Parenthood to several years as an after-abortion counselor with Oakland-based [Exhale](#). As a Pro-Voice Lead Counselor, she heard thousands of abortion stories and facilitated a team of thirty fellow counselors as they provided conscious, compassionate, and non-judgmental support to women and their partners. The missing link between emotional support and clinical services inspired her to work with this group of incredible women to found the Bay Area Doula Project. As a future abortion provider, she appreciates every chance to support women where they are, and ease an experience that can be painful, relieving, complicated and empowering, to name a few.

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