Ms. FOUNDATION
FOR WOMEN

Birth Justice Now

How Ms. Foundation for Women is resourcing community-based birth justice solutions

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Contents

Cover photo courtesy of Chicago South Side Birth Center

Executive Summary

Ms. Foundation for Women launched the Birth Justice Initiative in 2022 to address systemic disparities in maternal and infant health, particularly among Black and Indigenous birthing people. Recognizing that realizing birth justice must include and prioritize community-led solutions, the Foundation has since invested over $6.9 million in 68 organizations across 26 states, the District of Columbia, and Puerto Rico to support grassroots efforts and community-based care. Funding birth justice has taught Ms. Foundation valuable lessons we want to share with current and future funders of this work:

- **Birth equity and birth justice are distinct but complementary commitments, and both are essential on the path to liberation.** Birth equity focuses on improving outcomes within existing systems by ensuring more equitable access to the care that currently exists. Birth justice goes further by centering community self-determination and the active building of alternative care systems rooted in ancestral knowledge, cultural affirmation, and community trust. These are not competing visions, they are complementary commitments that reinforce one another. For funders, the distinction has practical implications: supporting birth justice means being willing to resource work that exists outside of, and sometimes in tension with, dominant healthcare institutions.
- **Birth justice is a movement, not a short-term intervention.** Long before philanthropy took notice, birth justice organizations were building community-rooted systems of care. This is a decades-old, grassroots-led movement with deep roots in reproductive justice, Indigenous healing traditions, and Black midwifery. Funders who treat it as an emerging issue to be seeded, and then moved on from, misunderstand both its history and its trajectory.
- **Birth justice requires a different funding posture, not just more money:** Birth justice organizations are under-resourced relative to both the scale of the problem and the opportunity at hand. But the movement's greatest need is not simply more dollars: how philanthropy funds matters as much as whether we fund. Short-term, siloed, or restrictive grants fall short and actively harm organizations by forcing them into survival mode rather than long-term strategic planning. The movement needs flexible, multi-year, general operating support, paired with a genuine willingness to follow the lead of community-based organizations rather than prescribe solutions from the outside.

At Ms. Foundation, we are committed to resourcing the birth justice movement so it can thrive, but we know we cannot do so alone. We call on our funder peers to join us as co-conspirators in building an abundant, well-resourced, and sustainable birth justice movement that ensures safe, dignified, and affirming birthing experiences for all.

This is a decades-old, grassroots-led movement with deep roots in reproductive justice, Indigenous healing traditions, and Black midwifery.

Introduction

Ms. Foundation for Women launched the Birth Justice Initiative in 2022 in response to mounting attacks on reproductive freedom, a growing awareness of the disparities in maternal and infant health, and a recognition of the abundance of community-led solutions advancing birth justice across the country. Building on the pioneering and visionary work of Groundswell Fund—the first funder to launch a portfolio solely focused on birth justice—we set out to expand the reach of this rich, multifaceted, and powerful social movement. Five years into this initiative, the Foundation wants to take stock of what we've funded, what we've learned, and where we hope the field can go from here.

The conditions in which we are writing this report are dire. The United States has been designed to consolidate resources and power in the hands of a few since its inception; today, this concentration is ruthlessly accelerating. The current administration's attempts to restore racial and gender hierarchies, dismantle the administrative state, curtail free speech, and weaken civil society are part of a coordinated effort to further consolidate power and marginalize dissent. These shifts are the result of decades-long and abundant funding of conservative organizations.

Despite these conditions—and because of them—Ms. Foundation remains steadfast in our commitment to building women's collective power to advance justice for all. We firmly believe in reimagining institutions and practices that do not serve all of us and resourcing and building alternatives. For Ms. Foundation, our Birth Justice Initiative offers a particularly important opportunity to be responsive to current conditions and build the future we deserve, taking our cues from movement leaders.

As you read this report, we invite you to explore Ms. Foundation's journey into funding birth justice, a field that has long been overlooked by philanthropy. We share how we developed our understanding of birth justice as a social justice movement, our grantmaking approach, and the wraparound supports that help build a thriving birth justice ecosystem. We ground this work in our learnings and the stories of grantee partners from across the country that showcase what is possible when we trust their vision and resource them appropriately. We hope this report serves as both a resource and an inspiration to join us in this mission.

We hope this report achieves the following goals:

- **Gives funders, grantee partners, and birth justice grassroots organizations** a clear sense of how Ms. Foundation approaches birth justice grantmaking and provides examples of the work being funded.
- **Shares some of the lessons we learned** in implementing this grantmaking initiative to help advance the conversation about what it takes to fund and achieve birth justice.
- **Inspires all funders—individuals or institutions**—to join Ms. Foundation in resourcing birth justice organizations at scale.

No more *living with pocket change*. Let's co-conspire to resource this work abundantly.

Photo courtesy of Southern Birth Justice Network

Who is this report for?

The intended audience for this report is funders focused on health, family wellbeing, early childhood, maternal health, perinatal health, the care economy, reproductive justice, and those applying a gender lens to their grantmaking. This report will be especially relevant for funders investing in—or interested in—birth equity, birth justice, reproductive health, and reproductive justice, whether they are new to these areas or bring years of experience.

Another intended audience for this report is birth justice organizations, particularly those funded through Ms. Foundation's Birth Justice Initiative. We hope this report supports Birth Justice Initiative grantee partners in understanding the broader portfolio of organizations funded and recognizing how their work fits within it.

What do we mean by birth justice?

While we do not have the pretense to impose our own definition of birth justice (we think that role belongs to the movement), we do think it is important to describe how we understand it within the context of this report, and how we make sense of it in relation to birth equity. Birth equity, as defined by Dr. Joia Crear-Perry, is "the assurance of the conditions of optimal births for all people with a willingness to address racial and social inequalities in a sustained effort."[1] By "birth justice," we refer to a decades-old and continually expanding social movement that addresses racial, social, and economic injustice in reproductive healthcare. We ground our understanding of the term in the Southern Birth Justice Network's birth justice framework, which describes birth justice as a framework that acknowledges the trauma that people of color, immigrant, and LGBTQ+ communities face when it comes to reproductive decisions, and stresses the right of birthing people to receive care that is holistic, humanistic, and culturally centered across the full reproductive spectrum. Oftentimes, birth justice is practiced beyond medicalized birth settings, and its practitioners deeply value ancestral and community-based models of care, such as Black midwifery and Indigenous healing. The birth justice movement is deeply intertwined with, and emerges from, the reproductive justice movement and, much like its elder movement, birth justice is grounded in international human rights.

Why do we need birth justice?

Before we dive into the various bodies of work that make up the birth justice movement, we think it is important to ground ourselves in the context of why birth justice is a necessary approach to ensure that birthing people of color and their children are safe, healthy, and thriving. First, it is critical to understand that Black and Indigenous birthing people, and their children, face significant, well-documented, and persistent maternal and infant health disparities.[2] These disparities are caused by a wide range of factors, including systemic racism, discrimination, and bias in the health care system,[3] as well as the delegitimization and criminalization of traditional birthing practices.[4] As a result, birthing people of color are frequently not believed and/or dismissed when they report symptoms,[5] are more likely to experience unnecessary and potentially harmful medical interventions such as cesarean sections during birth,[6] are more likely to die in childbirth,[7] and are more likely to receive lower-quality care. Given the reality that systemic racism is embedded throughout our country's history and medical system, we understand that having options for birth settings (hospital, birth centers, home birth), medical providers (midwives and obstetricians), and birth teams (doulas and familial support) are essential to ensure autonomous decision making and to promote safe and dignified choices. While birth justice champions the expansion of birth settings, in a small percentage of cases, births that take place at a home or at a birth center benefit from hospital support for more specialized care. In fact, research shows that the best outcomes for birthing people of color and their children occur when community-based midwives and doulas have strong, trusting and collaborative relationships with hospitals, thereby ensuring high-quality and multifaceted care for birthing people of color.[8,9]

It is important to note that while both midwives and doulas are invaluable sources of support during pregnancy, childbirth, and the postpartum period, their roles, training, and scopes of practice are fundamentally different. A midwife is a trained medical professional who provides primary healthcare with specialized focus on providing care throughout the reproductive life span, including during pregnancy, childbirth, and after delivery. Doulas are non-medical professionals who are trained to provide emotional, physical, informational, and advocacy support during pregnancy, birth, and postpartum.

Photo courtesy of Chicago South Side Collective

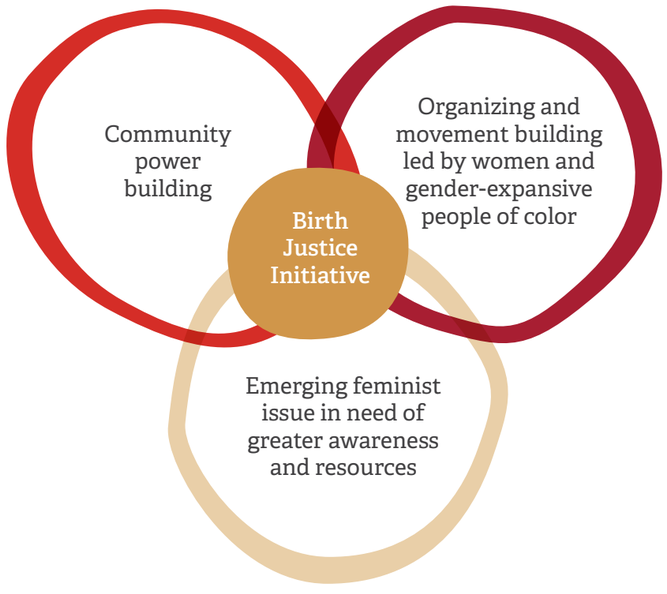
A brief note on methodology

Inputs that informed this report include:

- Eight interviews with grantee partners[10]
- Six interviews with funders and field leaders
- Multiple interviews and sense-making workshops with Ms. Foundation staff
- Review of birth equity and birth justice field reports and research sourced by interviewees and Ms. Foundation staff

The Birth Justice Initiative's story

Ms. Foundation's Birth Justice Initiative was made possible through a grant from the Robert Wood Johnson Foundation (RWJF). The Birth Justice Initiative presented a unique opportunity to advance RWJF's interest in community power building by leveraging Ms. Foundation's experience and skill in investing in movement building and organizing led by women and gender-expansive people of color, and providing capacity building and leadership development to organizations. Furthermore, Ms. Foundation saw an opportunity to elevate birth justice as an emerging intersectional feminist issue among peers. This sort of field-building work is central to our history and value proposition as a feminist public foundation and intermediary, making this initiative a natural and strategic extension of our response to current conditions.



> *"Ms. Foundation has a long tradition of supporting emerging intersectional feminist issues. We were one of the funders who supported the gathering that led Black women to coin the term reproductive justice. Today, we hope we can play a similar role in nurturing and uplifting birth justice organizations, who are building new systems of care for BIPOC and gender-expansive birthing people."*
>
> *– Ellen Liu, Chief of Programs, Ms. Foundation for Women*

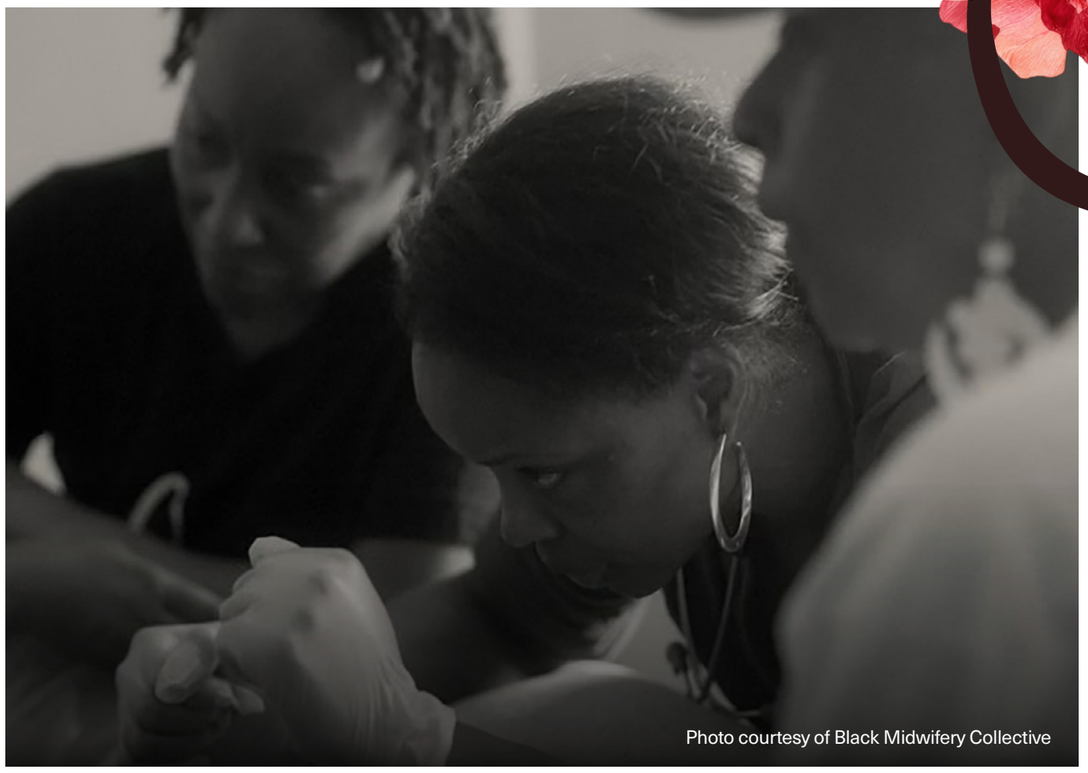


Photo courtesy of Black Midwifery Collective

Birth Justice Initiative's Grantmaking Approach

The Birth Justice Initiative's approach to grantmaking is informed by maternal and infant health research and studies documenting the effectiveness of community-based interventions, such as the midwifery model of care.[11] Ms. Foundation was also intentional in choosing the leadership for the Birth Justice Initiative, believing that the work would be at its strongest when informed by experts with lived experience in the work. Thus, the Foundation's Birth Justice Initiative's work is guided by the lived experience of its program officer, Sona Smith, who is a Black mother, birth worker, and former executive director of a state-level, youth-centered, grassroots reproductive justice organization. The ethos of the grantmaking strategy is rooted in Sona's desire for all birthing people, especially Black birthing people, to have self-determination and dignity in their birthing and parenting experiences.

Therefore, Ms. Foundation is mindful to not prescribe solutions through our funding priorities. For that reason, the Birth Justice Initiative supports birthing experiences across settings (birth centers, homes, and hospitals). Ms. Foundation's strategy aims to honor and uplift ancestral and traditional forms of birth work that have supported parenting people for generations.

In particular, the Birth Justice Initiative's grantmaking approach is grounded in an understanding of and appreciation for the Black midwifery tradition. This tradition, born out of necessity and resilience in the face of systemic racism and healthcare disparities, has long championed the inherent wisdom and strength of birthing people, their families, and communities. Rooted in African traditions, and centered around the experience of the birthing person, Black midwifery offers a powerful resource for promoting healthy and liberated birth experiences.[12] Other ancestral traditions, such as *Promotoras* (community health workers in Spanish-speaking communities) and Indigenous midwives,[13] have also been central to the tapestry of birth justice work, each contributing unique elements and traditions while always centering community and holistic care.

Concretely, Birth Justice Initiative funds...

- **Grassroots organizations led by women and gender-expansive people of color:** We fund birth justice organizations that are led by and directly accountable to the communities they serve. Within our own portfolio, 51% of grantees operate with budgets lower than $500K. These grassroots organizations are doing the heavy lifting of systemic transformation while navigating financial instability and competing for the same limited pool of dollars.
- **Movement building and organizing:** Organizations funded are typically focused on directly serving their communities, while also pushing for systemic change at the local, state, and national levels.
- **Full spectrum of birth experiences:** Birth Justice Initiative funds birth justice holistically. We support organizations focusing on: preconception health; mental health and wellness; infertility support; abortion access and abortion care; comprehensive sex and sexuality education; non-racist culturally affirming and gender-expansive healthcare; access to birth workers of color; access to lactation support and services,;postpartum health and wellness; grief and loss care and support; sexual assault prevention; and survivor support services. We believe each of these stages are critical to ensuring safe, healthy, and affirming birthing experiences.
- **Work that happens both within and beyond existing systems:** Birth Justice Initiative intentionally funds work that aims to shift current systems of care, as well as efforts that aim to build anew. The Foundation believes that movement building requires both an inside game (shifting harmful systems from within) and an outside game (imagining and building alternatives), and reclaiming the ancestral traditions that dominant systems have long sought to displace.

More Than Money: Intermediaries as Movement Catalysts

Ms. Foundation's contributions to the birth justice movement extend beyond our grantmaking. To truly grasp the Birth Justice Initiative's impacts on the birth justice movement, it is important to understand Ms. Foundation's role as a public foundation and intermediary,[14] and examine how the Foundation's staff leverage their relationships, knowledge, and social capital in service of grantee partners and the movement. For example, funders and field leaders interviewed for this report discussed how Ms. Foundation staff continually leverage their lived experience to educate peer funders on best practices to support grassroots organizations, particularly on how to challenge "issue silos" and fund intersectionally. By "funding intersectionally," we mean funding in a way that acknowledges and honors how different aspects of a person's identity intersect and can create overlapping (and often invisible) vulnerabilities to oppression.

Capacity building rooted in relationships

Similarly, grantees discussed how Ms. Foundation provides resources well beyond financial funding by investing in comprehensive capacity building, leadership development, and convenings. The Foundation partners with healers, consultants, and coaches to support its grantee partners in a wide range of areas such as healing, rest and restoration, financial management, fundraising, leadership development, people management, and safety and security. For the Foundation, capacity building is not just about passing on technical skills, it is a process rooted in relationship building. This relational underpinning fosters mutual trust, and enables Ms. Foundation staff to partner with grassroots organizations on a wide range of challenges such as navigating public funding, maintaining financial stability, and developing an engaged board of directors. For example, when Repro TLC received state funding as reimbursement-based grants and needed to find options to begin receiving the grant, Sona worked with them to seek options, such as program-related investments, advances on grant payments, and introducing them to different funders — all to ensure the organization was able to solidify the grant and begin working. *"Sona was a brainstorming partner and a true advocate and ally in the philanthropic space,"* said Latona Giwa, Executive Director of Repro TLC.

> *"Our portfolio includes a mix of organizations that are doing direct service, education, leadership development, movement building and organizing, and culture shift work... I wanted the portfolio to highlight that our strategies for advancing birth justice have to be as holistic and well-rounded as the barriers to achieving birth justice."*
>
> *– Sona Smith, Program Officer, Ms. Foundation for Women*

Leveraging social and institutional capital to shift narratives

In addition to supporting peer funders and grantee partners, Ms. Foundation staff also play an active role in shifting narratives within philanthropy around birth, maternal health, and the role of grassroots organizations in fostering long-term transformative change. While thought leadership work can feel less tangible and harder to measure than providing direct advice, it is critical in creating the conditions for more abundant and effective resourcing and opening further doors towards one-on-one relationship building. In fact, it is often through the Foundation's thought leadership work that new funders and supporters seek our advice and thought partnership. Through panel presentations, speaking engagements, and publications like *The Color of Infertility*, Ms. Foundation continues to leverage our social and institutional capital to challenge dominant beliefs and cultural understandings surrounding birth and reproductive health, and elevate the birth justice movement.

Convening with Purpose

Ms. Foundation takes its convening power seriously. Over the years, we have hosted dozens of events to share knowledge, encourage networking, and catalyze collective action. We have learned, much like other funders, that convening for its own sake can be useless at best and harmful at worst.

When it came time to bring our birth justice grantee partners together, we slowed down. We built individual relationships, mapped the landscape of grassroots organizations doing the work, and asked partners, directly, what format and purpose would best serve their needs. With guidance from an advisory council of grantee partners, we designed a virtual convening across three interconnected days with sessions where partners shared policy progress, explored the relationship between Palestinian liberation and birth justice, and held space for one another.

In our second year, we shifted to a quarterly virtual community-building series, designed to adapt to the group's emerging needs. The series blended content-focused sessions — navigating workplace conflict, and exploring new ways of working — with self-organizing methods like Open Space Technology and Offers & Needs Market that invite participants to collectively surface and discuss complex topics, share resources, and learn from one another.

Photo courtesy of Black Midwifery Collective

Field building and strengthening the funding ecosystem

Finally, the Foundation has played a critical role in strengthening the funding ecosystem through philanthropic advocacy, which, for us, means creating opportunities for funders to be in community and learn from one another, build alliances, coordinate strategy, and increase funding in our field. For example, Sona is a member of the governance committee for Funders for Birth Justice and Equity (FBJE). FBJE's mission is to end inequities in birth outcomes and improve experiences and outcomes for all birthing people by advancing respectful, physiologic care and providing equitable access to birth workers. They do this by serving as an organizing, learning, and collective action group of funders working together with the field to transform the system. Through Sona's involvement, Ms. Foundation has supported FBJE at different important inflection points of its history, including its first two convenings, and reimagining its governance structure.[15]

Building Connectivity Across the Ecosystem

To foster deeper connectivity across the birth justice landscape, Ms. Foundation we launched a strategic initiative to resource grantee partner participation at pivotal national and regional conferences. In the spirit of prioritizing presence and proximity, we provided conference registration and modest travel stipends to facilitate cross-movement synergy, ensuring local leaders stay connected to the broader movement and have platforms to amplify their work before wider audiences. In total, we supported over 80 individuals across 7 national conferences and convenings to further that connectivity.

The Birth Justice Initiative by the numbers

$6.9 Million awarded

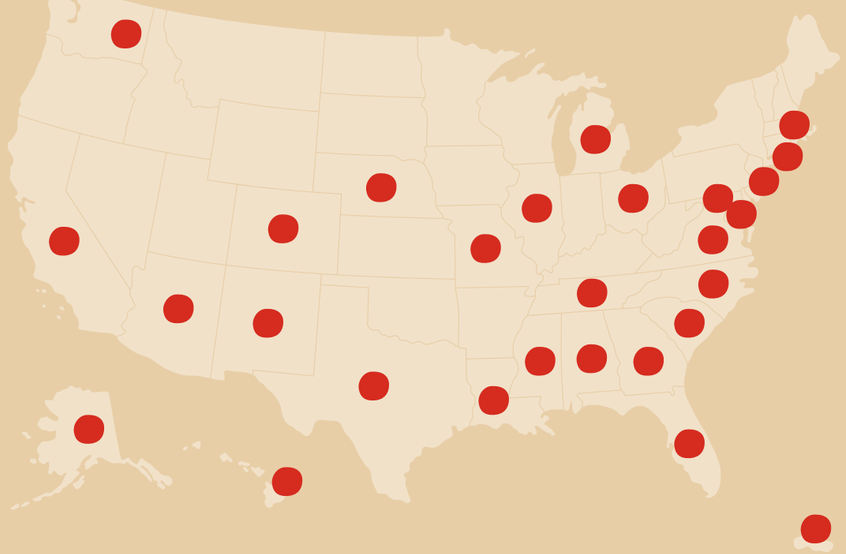
68 Grantees

26 States and the District of Columbia and Puerto Rico

80 Grantees attended 7 National Conferences through Ms. Foundation Support

$1,000,000+

Influenced Through Philanthropic Advocacy



States where birth justice grantees are located (or areas of funding): Alabama, Alaska, Arizona, California, Colorado, Washington, D.C., Florida, Georgia, Hawaii, Illinois, Louisiana, Massachusetts, Maryland, Michigan, Missouri, Mississippi, North Carolina, Nebraska, New Jersey, New Mexico, New York, Ohio, Puerto Rico, South Carolina, Tennessee, Texas, Virginia, Washington.

What we learned

Since the Birth Justice Initiative launched in 2022, the Foundation has gained invaluable insights by reflecting on our role within the ecosystem of funders supporting birth equity and birth justice and listening to our grantee partners. In this section we share some of the key learnings we've gathered through the course of the Birth Justice Initiative with the hope that they spur reflection and greater resource mobilization across our field. The first learning is a self-reflection on how Ms. Foundation works to continuously embody our values and commitments to our grantee and movement partners. The remaining four learnings are invitations for the philanthropic field to think more expansively, and act more boldly, in support of birth justice.

Learning #1: Building toward the stability our grantee partners deserve.

Consistent feedback we hear from our grantee and movement partners is that philanthropy's habit of providing short-term funding, switching strategies, and not fully committing to grantee partners for the long haul prevents organizations and movements from planning effectively and truly being strategic. As such, Ms. Foundation has consistently been a visible and fervent advocate of general operating support grants and long-term funding. As a public foundation and intermediary that fundraises the grantmaking dollars we grant out, we know firsthand how destabilizing short-term funding cycles can be for grantees. We ourselves hold that tension and experience that contradiction in operationalizing long-term funding. We are committed to pushing the field, ourselves included, not only to provide long-term funding, but to support the birth justice movement beyond the grant. The unique role we can play in the funding ecosystem as a public foundation is valuable beyond just grantmaking dollars, as this report highlights. Our ability to leverage dollars through introductions and relationship building to other funders, to be in trusting relationship on both sides as funder peers as well as partners to our grantees, and to provide creative capacity-building and skills-building offerings, are just a few examples highlighted throughout this report of our value-added approach.

Learning #2: Community is the foundation for Birth Justice.

Many funders in the birth equity and health equity space want to fund birth justice organizations, but assume birth justice work needs to be embedded into the dominant healthcare system to be successful. However, for many birth justice organizations, the goal is not to fit into the current harmful system, it is to build alternatives rooted in community, while reducing harm within current systems. Understanding this nuance is essential for funders who work to respect the self-determination and dignity of the organizations and communities they support.

> ***Birth equity still connects to the healthcare system. It's about integration, it's about working within the system, it's about providing equitable access to care. Birth justice, on the other hand, calls for a paradigm shift. For me, birth justice is about redefining the experience in your community of accessing care. Birth justice organizations are building hubs of care in their communities."***
>
> *– Tenesha Duncan, Founder, Orchid Capital*

Learning #3: Embracing the complexity and nuance of funding Birth Justice.

Many funders in birth equity and justice, like in other philanthropic sectors, adopt a "silver bullet" mindset, seeking quick, transformative wins followed by withdrawing attention and support from the issue. Instead, they miss the complexity and additional layer of support needed beyond the initial "win." This approach oversimplifies complex social change and harms nonprofits and the communities they serve.

An example of this dynamic is funders' current focus on seeking Medicaid reimbursement for doulas. While doulas are absolutely critical to the birth justice movement, Medicaid reimbursement policies have often heavily focused on the birth itself rather than encompassing the pre- and post-birthing period, and implementation has varied significantly across states. Many community-based doulas also find Medicaid reimbursement inaccessible due to low payment rates, burdensome administrative requirements, and a lack of childcare infrastructure to support a workforce on call 24/7, alongside credentialing hurdles that fail to recognize traditional paths of entry. Furthermore, the focus on doulas has reinforced competition among birthing professions and oversimplified the reality of systemic racism in healthcare, which can cause long-term harm to the movement. Funders have not always appreciated these nuances and have been quick to celebrate policy wins without acknowledgement of community involvement in the creation of these policies, or an understanding of when the policy is simply poorly designed and creating more harm than good. For us, effective philanthropy should see its role beyond policy wins, and include support for policy implementation processes.

To truly support birth justice, funders must let go of this mindset and instead approach the work with curiosity, humility, and an openness to learning the nuances of birth justice solutions rooted in communities. They must listen to grantee partners who are on the frontlines of this work and trust that they know what is best for them and their communities.

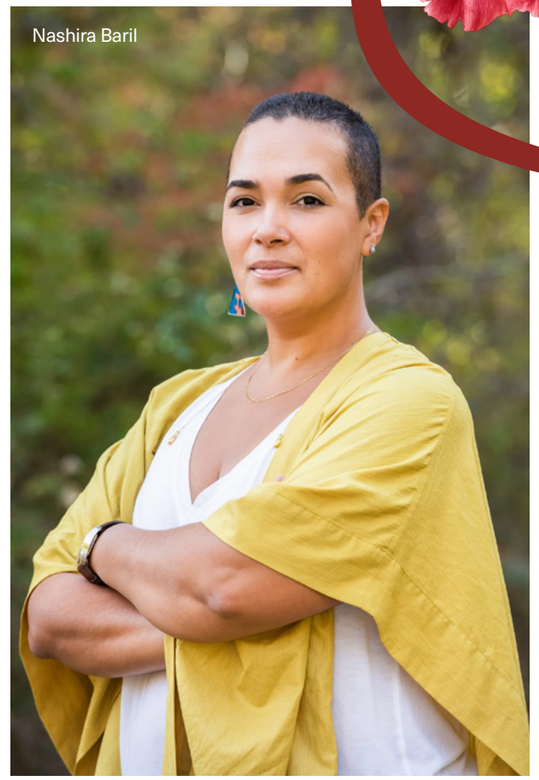


Photo courtesy of Neighborhood Birth Center

> ***While there has been more interest in birth justice from funders in the past decade, that interest sometimes feels very concentrated on bringing more doulas. While doulas provide an important and essential piece of care, adding doulas, especially doulas of color, to the bedside in a deeply inequitable system is not a structural intervention. As we liked to say at Birth Center Equity, 'you cannot just add doulas and stir.'"***
>
> *– Nashira Baril, Executive Director, Neighborhood Birth Center*

For many birth justice organizations, the goal is not to fit into the current harmful system, it is to build alternatives rooted in community, while reducing harm within current systems.

Learning #4: Funders as trusted partners in service of movements.

A funder's role isn't just to "move money to movements" or to be "allies" separate from movements. Instead, our role is to build authentic relationships and become funder organizers accountable to movements. This requires earning and building trusting relationships, addressing power dynamics with care, and practicing reciprocal accountability.[16] Ms. Foundation has discussed the importance of authentic relationships in our *Pocket Change report* series, and we will continue to stress this point. Too often, funders think, behave, and move in ways that look like they are helping people less fortunate than them (a charity model), rather than resisting unjust systems and building new ones for the sake of us all, including themselves (a liberatory model). An example of this learning coming to life is a 2025 governance shift at Funders for Birth Justice and Equity (FBJE), a national organization dedicated to educating and supporting funders interested in birth justice and birth equity. Since its inception in 2012, FBJE has made its decisions through a steering committee made up of funders. An advisory committee made up of community-based organizations was created more recently. In 2025, FBJE made a significant shift to its governing structure to include one decision-making body that includes both community-based organizations and funders. This change will certainly require some adjustments on both parts, but will also model a new way of being where funders and community-based organizations are working in closer collaboration committed to the outcome of liberated births.

Learning #5: Funders' investment in birth equity is growing, yet more resources are needed.

Since 2020, there has been an increase in new funders beginning to invest in birth equity and birth justice. This has translated into more funding available for BIPOC-led birth justice organizations focused on root causes and developing birthing options outside of the dominant healthcare system. This increase is a result of philanthropic advocacy by funders who have been early supporters of this movement, more national coverage and attention around maternal mortality among Black and Indigenous birthing people, and the 2022 Supreme Court decision on Dobbs v. Jackson Women's Health Organization.

While we celebrate this increase in funding support, we recognize the flow of resources remains insufficient given the scale of the injustices. This means grassroots organizations are still struggling with financial stability, often competing for the same dollars, and are not positioned to build the coalitions and infrastructure they need to build power.

Our hopes and dreams for funders

As the threats to our communities deepen, Ms. Foundation remains clear-eyed and unwavering in our commitment to dignity, self-determination, and liberation for all.

We hope to see a significant increase and sustained commitments to birth justice in the coming years, and we hope these commitments are provided in the form of flexible, multi-year, and general operating support dollars. We invite you to join us in nurturing the birth justice movement and building the collective power of women and gender-expansive people of color. What follows are our hopes and dreams for funders and an invitation.

As you read, we ask you to pause and sit with one question: what is one small, meaningful step you can take to help make our shared vision of birth justice a reality?

Be bold. The advancement of authoritarianism intensifies the chilling effect already underway, in which civil society actors (including funders) are increasingly reluctant to undertake legitimate and much-needed activities due to fear of legal repercussions, social backlash, and other adverse consequences. Particularly in a context where those in power make explicit and sustained attempts to erode human rights, reinstate and reinforce racial and gender hierarchies, and rewrite the rules to advance their interests, we dream of a future where funders resist the chilling effect, act boldly and courageously, and unequivocally support organizing led by women, girls, and gender-expansive people of color. We must also practice bidirectional accountability, recognizing that trust is not a one-way street. Trust-based philanthropy should not only ask if we trust organizations, leaders, and grantee partners, but also whether we have *earned* the trust of the communities we support through consistency and transparency.

Reframe conceptions of risk. Many grassroots organizations advancing birth justice are doing work that has not been attempted in the recent past, or are reviving practices intentionally dismantled (e.g., criminalization of midwifery care). As a result, this work lacks a recent track record of success. That reality can sometimes be perceived as a "risk" for philanthropy and used to justify not investing in an organization. And far too often, investments deemed "risky" by philanthropy are led by women and gender-expansive people of color. We hope funders embrace this moment with greater courage and a willingness to redefine conceptions of risk. Many philanthropic institutions have the capacity to support this work more boldly. If framing this work as innovation is helpful, we encourage funders to lean into this framework.

Operationalize intersectionality. There are no single-issue lives. Reproductive experiences exist on a full spectrum—from preconception and infertility to abortion care and postpartum wellness. Funding should reflect this reality. Funders who are serious about birth justice must be willing to move beyond narrow issue silos and resource the wholeness of people's lives.

Imagine what's possible with large, flexible grants. Funders are notoriously focused on short-term metrics and outcomes, and those in the birth justice space are no exception. But short-term, project-based funding prevents movements from planning effectively. It keeps organizations focused on survival rather than strategy. To be truly effective, funders must reckon with the long-term, nonlinear arc of systems change and fund accordingly. That means trusting grantees' expertise, remaining responsive to rapidly shifting conditions, and deploying large, multi-year, general operating support grants so birth justice organizations can focus on building lasting power, not chasing the next grant cycle.

Conclusion: From Resilient to Resourced—A Field in Motion

When we launched our Birth Justice Initiative in 2022, we did so with a clear conviction and commitment to confront systemic disparities in birth experiences and outcomes and to resource the abundance of community-led solutions advancing birth justice across the country that are chronically underinvested in. Since then, Ms. Foundation has invested over $6.9 million in 68 organizations across 26 states, the District of Columbia, and Puerto Rico. We have deepened relationships with grassroots leaders and organizations advancing birth justice, contributed to a stronger ecosystem through multi-year funding and capacity-building resources, and built greater connectivity through intentional convenings and facilitating partnerships.

While these milestones are significant, the movement stands at a critical inflection point. Despite the impact of investing in transformative, community-led solutions to advance birth justice, the ecosystem remains critically underinvested. Much of the funding committed to address race-based disparities in the wake of the 2020 racial reckoning following the murder of George Floyd has not been sustained. Many commitments have not only been withdrawn, they have contracted to pre-pandemic levels. In its report, *DERAILED: Rising Attacks and Retreating Resources for Racial Justice,*[17] the Initiative for Philanthropic Racial Equity reveals that overall institutional giving grew 44% between 2019 and 2023, but the share devoted to communities of color shrank. And that, even at its 2021 peak, funding for communities of color represented less than 10% of all institutional giving. Furthermore, by 2023 that share had fallen to 6.8%, lower than in 2014.

Ms. Foundation, like our grantee partners and fellow public funders and intermediaries, is witnessing a challenging funding environment. While our commitment to this movement remains strong and unwavering, we recognize that even at our fullest investment, our resources represent a fraction of what this movement requires. As contractions deepen across philanthropy and the public sector, the need for co-conspirators in this work has never been more urgent.

Organizations advancing birth justice are not waiting for philanthropy. They are creating bold visions, building collective infrastructure, and caring for their communities in an increasingly hostile environment. Despite mounting pressures from a contracting funding landscape and an unprecedented political climate, they have remained steady. In the midst of it all, we are witnessing policy wins led by community organizations, widespread culture shifts and narrative change successes, the restoration of systems of care after years of disinvestment, and new systems being imagined and built—all while responding to the escalating needs of communities, leaders, and staff facing economic hardship, burnout, and urgent threats to their survival.

Community leaders and birth justice organizations are tired of being resilient—they want to be resourced. They operate with limited support and infinite heart, staying steady regardless of shifting political or policy winds. They deserve to do this work with resources that match the scale of their vision and power. We encourage the philanthropic sector to become a true co-conspirator in this work, moving beyond the silver bullet mindset and embracing the complexity of the systems we seek to transform. When we fund these local leaders, we are not just paying for a service, we are investing in a permanent foundation of care that sustains a community long after a grant cycle ends.

Photo courtesy of Life After 2 Losses

Our Continued Commitment

It has been well documented that it is not race that creates disparities in birth experiences and outcomes, it is racism. Systemic racism, including anti-Blackness and anti-Indigeneity, is often evident in whose work we deem scalable, and which funding strategies we design, before ever stepping foot in the communities we serve.

To our colleagues in philanthropy, we invite you to come alongside us. Let us take a learning posture. Listen to the lived experiences of movement leaders and follow their lead, acknowledging that their expertise is valid and essential for achieving birth justice.

The future of birth justice depends not on what we grant, but on what we are willing to return to the communities who have always known the way forward towards **birth justice NOW!**

While our commitment to this movement remains strong and unwavering, we recognize that even at our fullest investment, our resources represent a fraction of what this movement requires. As contractions deepen across philanthropy and the public sector, the need for co-conspirators in this work has never been more urgent.

Grantee Highlights

The following seven profiles showcase Ms. Foundation Birth Justice Initiative grantee partners that are advancing birth justice through a powerful blend of direct care, systems change, policy advocacy, and putting community first.

From Indigenous midwifery collectives and Black-led birth centers to maternal health advocacy and provider-training networks, these organizations highlight how birth justice is being sustained and advanced at local, state and national levels through bold innovation, relational care, and sustained organizing power.

Southern Birth Justice Network: Relying on Ancestral Practices to Transform Modern Outcomes

Southern Birth Justice Network (SBJN) advances the movement for birth justice through storytelling, education, organizing, workforce development, and direct service delivery. Founded in 2008 by an Indigenous Nicaraguan midwife named Ada "Becky" Sprouse, SBJN is now led by Jamarah Amani, a Black midwife and activist.

This community-based organization started as a mobile midwifery clinic for migrant farm workers and has grown into a multifaceted entity shaping the narrative around birth justice and Black midwifery, and a leader in the birth justice movement. It trains and supports doulas and midwives, influences legislative and administrative policy, and provides compassionate midwifery care to underserved Floridians. In addition to its local, state, and national work, SBJN is in deep relationship with birth workers in Tanzania and Kenya, facilitating regular international exchanges for U.S.-based doulas, midwives and student midwives to learn from and build relationships with East African birth workers.

"Black midwives were the workforce that birthed America for generations," says Jamarah Amani, Executive Director of Southern Birth Justice Network. "They're also the workforce that can solve the current maternal health crisis."

Over the course of its history, SBJN has achieved numerous wins, including securing recognition for Black Midwives Day across multiple states and introducing it in the U.S. House of Representatives and Senate, establishing the National Black Midwives Alliance (now its own professional association), and raising funds to purchase a property to build an innovative birth and wellness center in South Florida. More recently, SBJN has collaborated with several community organizations to form the Black Maternal and Infant Health Equity Collaborative, an initiative designed to integrate birth justice doulas into a major Florida hospital system, significantly reducing the need for unnecessary medical interventions such as C-sections. Ms. Foundation has been supporting SBJN since 2020 and has continued to work with them to strengthen their birth justice work.

"When I first heard that the Ms. Foundation would be investing in birth justice work, I had a healthy amount of skepticism because a lot of funders use birth justice as a phrase without knowing its history, context, and framework," says Amani. "But when I saw they were bringing a birth worker and grassroots leader as program officer, I felt some relief. And since then, I really feel like Sona is working hard to build trust among the grantees and really trying to hold space for us in the philanthropy world."

Ultimately, SBJN urges continued advocacy for birth justice—not just as a public health issue, but as a movement. It challenges us to recognize, honor, and resource Black midwives' past, present, and future contributions in shaping birthing practices that support holistic, healing care for all birthing people.

Photo courtesy of Southern Birth Justice Network

> *"Black midwives were the workforce that birthed America for generations. They're also the workforce that can solve the current maternal health crisis."*
>
> *– Jamarah Amani, Executive Director of Southern Birth Justice Network.*

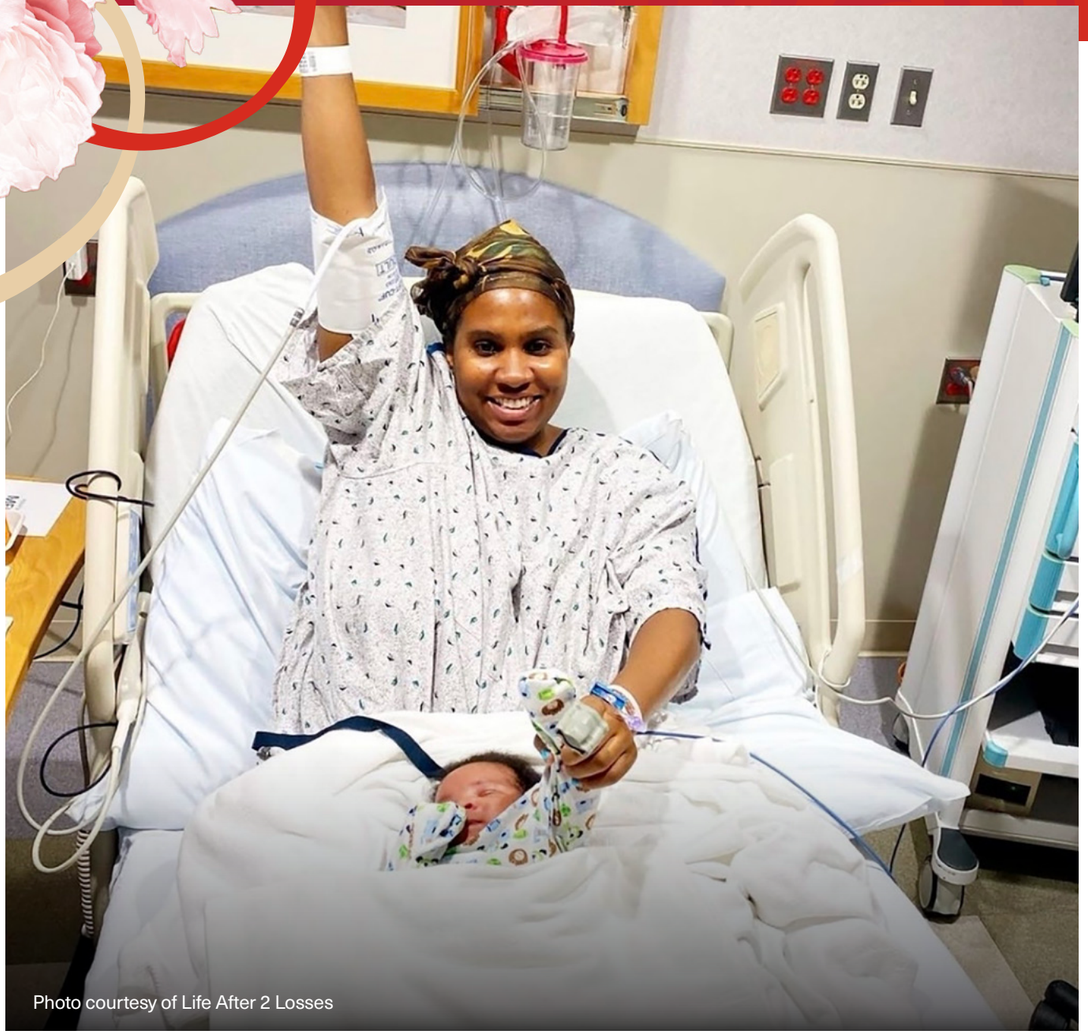


Photo courtesy of Life After 2 Losses

Life After 2 Losses: Transforming Grief into Advocacy for Birth Justice

Life After 2 Losses (LA2L) is a New Jersey-based organization that focuses on improving maternal and infant health for people of color, while advancing systemic change in the health care system. LA2L was founded in YEAR in response to deep gaps in grief support and reproductive healthcare for birthing people of color. After experiencing two preventable pregnancy losses and struggling to find culturally competent grief resources, LA2L's founder, Vu-An Foster, turned personal pain into purpose by creating an organization dedicated to preventing reproductive health injustices. The organization initially focused on grief support but quickly evolved to include health literacy programs, equipping women and families with advocacy skills to navigate a medical system that often dismisses their concerns. Vu-An's own journey of self-advocacy, which ultimately saved her life during postpartum complications, deeply informs every aspect of LA2L's programming. In addition to direct services, the organization plays a vital role in creating systemic change across New Jersey. Vu-An serves on key maternal health policy tables, advocating for legislative and institutional reforms. Her work emphasizes the power of storytelling in shaping policy, showing the people behind the data to influence decision-makers.

Photo courtesy of Chicago South Side Birth Center

Chicago South Side Birth Center: Creating a Sanctuary for Culturally Centered Midwifery Care

Chicago South Side Birth Center (CSSBC) is an independent, Black midwife-led birth center set to open in 2027.[18] Based in Chicago's South Side, an area with a dearth of hospital maternity services, limited community-based birthing options, and significant disparities in maternal and child health, CSSBC will offer a welcoming and supportive environment for birthing people of color to receive midwifery care that reflects their identity and experiences. In addition to direct care, CSSBC will serve as a hub for community engagement, offering workshops, prenatal dance classes, and other holistic services. The Center also seeks to create pathways for community members interested in birth work by providing opportunities to train as midwives, doulas, and patient navigators.

Founded by Black midwife Jeanine Valrie Logan, CSSBC embodies her vision of a birthing center rooted in community and her commitment to addressing racism in the healthcare system. In 2021, Jeanine, alongside other birth and reproductive justice advocates, helped write and pass HB738, a landmark bill expanding birth center access in Illinois, particularly in areas with the most severe Black maternal and child health disparities such as the South Side, West Side, and East St. Louis. Signed into law in August 2021, HB738 helped lay the foundation for CSSBC's creation.

Photo courtesy of Repro TLC

Repro TLC: Training the Next Generation of Full-Spectrum Reproductive Health Providers

Repro TLC (formerly known as Midwest Access Project) is an Illinois-based organization that trains healthcare providers in abortion, miscarriage care, contraception, and pregnancy options counseling. It was founded in 2006 by a group of Chicago family physicians and reproductive health advocates who observed that their patients and clients had difficulty accessing comprehensive reproductive health services. At the same time, Repro TLC founders were encountering many local health care providers who wanted to offer these services, but could not find the necessary training. Repro TLC fills a unique gap by offering comprehensive reproductive health care training to a wide range of professionals who have traditionally been left out of reproductive health care, such as primary care physicians, nurses, midwives, and residents. Today, Repro TLC trains health professionals across 26 states, and is continuously expanding the boundaries of who can access sexual and reproductive health care training.

Latona Giwa became the executive director of Repro TLC, in 2023, bringing their experiences as a Black and queer birth doula, registered nurse, lactation consultant, and birth justice advocate. Under their leadership, the organization is entering a new phase, expanding beyond sexual and reproductive health towards reproductive justice. This shift means the organization is grappling with new questions related to provider training, such as: how is medical hierarchy impacting our perception of who is worth training in sexual and reproductive healthcare?

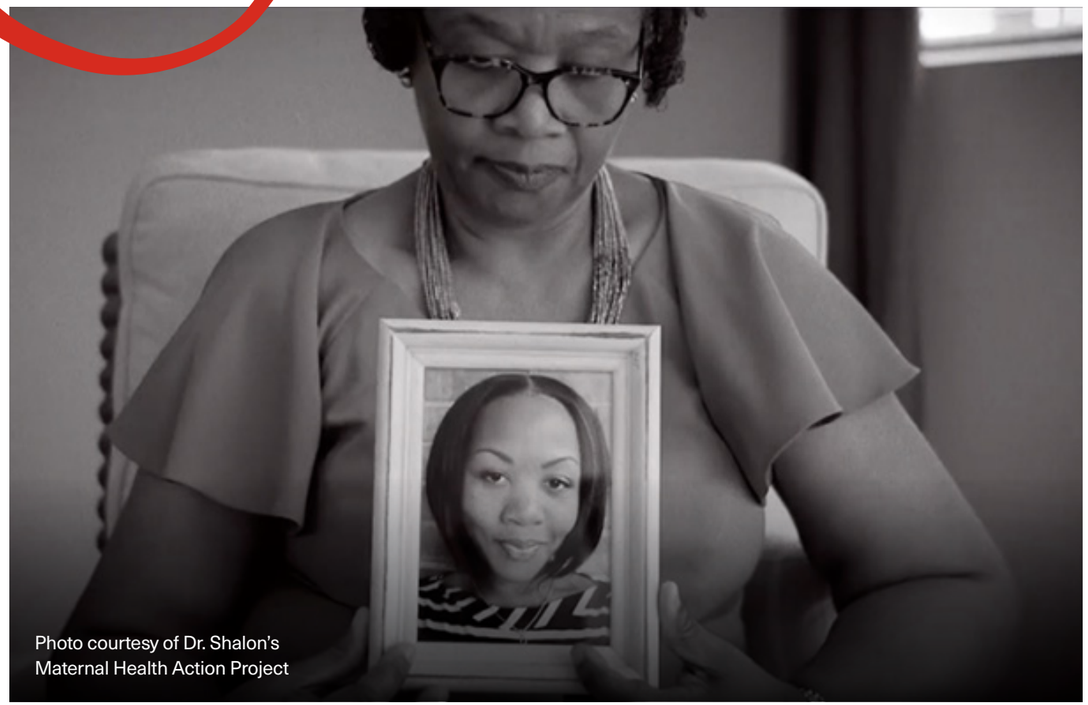


Photo courtesy of Dr. Shalon's Maternal Health Action Project

Dr. Shalon's Maternal Action Project: Reimagining Maternal Health

Dr. Shalon's Maternal Action Project (DSMAP) is a community-driven nonprofit dedicated to addressing Black maternal health disparities through direct support, advocacy, and systemic change. The organization was established to honor Dr. Shalon Irving, who died from preventable pregnancy complications, in January 2017, just three weeks after giving birth to her daughter. Led by Shalon's mother, Wanda Irving, DSMAP works to combat bias in healthcare through anti-racist training and education for health providers while equipping Black mothers with peer support and advocacy tools.

In addition to its direct services, DSMAP plays a crucial role in researching and advocating for systemic changes to address the long-term impact of maternal mortality on children and families. The organization highlights the often overlooked needs of caregivers—especially grandmothers—who step in to raise children after the preventable loss of a mother.

To further this work, in 2024, DSMAP formed Grandmothers Rallying Against Maternal Mortality Sisterhood (GRAMMS). GRAMMS is a dedicated peer support and advocacy initiative for grandmothers navigating loss while becoming leaders in the birth justice movement. By blending mutual aid, leadership development, and advocacy, GRAMMS amplifies the voices of grandmothers and ensures their experiences shape the fight for maternal health equity.

Most recently, DSMAP launched the SHALON Blueprint—a bold framework designed to transform maternal healthcare through accountability, equity, and systemic change. This initiative provides healthcare institutions, policymakers, and community leaders with actionable steps to dismantle the structural racism embedded in maternal care. By centering lived experiences, integrating anti-racist practices, and advocating for policy reforms, the SHALON Blueprint sets a new standard for protecting Black mothers and birthing people from preventable harm.

Through GRAMMS, the SHALON Blueprint, and its broader mission, DSMAP is not just fighting for change—it is leading a movement to reimagine maternal health with justice at its core.

Neighborhood Birth Center: Reclaiming Midwifery for Liberated Births

Neighborhood Birth Center is an advocacy and direct service organization, based in Roxbury, Massachusetts, whose core mission is to reintegrate midwifery into the community as a public health strategy to address the maternal health crisis, particularly for communities of color.

Nashira Baril, the Center's executive director, believes reintegrating midwifery in the community is a paradigm shift from our last 100+ years of hospital-based obstetrics, and is required to achieve health equity. In addition to building a birth center in an area currently served only by large hospitals, the Center tackles the multilayered systemic barriers to midwifery care, such as onerous state regulations for birth centers, insurance disparities for midwifery care, high construction costs, and extractive business models. Slowly, but surely, the Center has contributed to shifting policy barriers to midwifery care that will benefit its own planning, and the state of Massachusetts as a whole. Recent wins include:

- **passing legislation to license certified professional midwives, who are the midwives most often attending home births, allowing them to work in and lead birth centers, and**
- **updating state regulations to remove onerous barriers in the operations and facility design requirements for birth centers.**

Currently, the Center is working on a campaign for fair insurance reimbursement for midwifery services so their clinical costs are appropriately covered.

For Nashira and the Neighborhood Birth Center team, building a birth center is not just about creating access for the community, it is about shifting power to birthing people, allowing them to birth in a sanctuary free of capitalism, patriarchy, and racism.

Breath of My Heart Birthplace: Keeping Indigenous Communities Safe by Rematriating Ancestral Birth Practices

Breath of My Heart Birthplace / Navi Pin Haa Un Muu was founded over 15 years ago through the collaborative efforts of Indigenous grandmothers, midwives, and reproductive justice activists in the Tewa basin, today known as the Española Valley of northern New Mexico. Born out of circle talks and prayer, the organization began as a midwifery practice responsive to the disparities experienced by families living in the Valley during pregnancy and birth. With a commitment to restore Indigenous midwifery traditions, the organization also sought to address the dwindling number of licensed Indigenous midwives in the region. After years of growth, Breath of My Heart Birthplace officially became a non-profit in 2013, with an expanded vision of serving families by offering out-of-hospital birthing choices, reproductive health services, and holistic community care.

In recent years, the organization has made significant strides toward this vision, particularly in broadening its services and strengthening organizational as well as field-wide capacity. Notably, through successful coalition building, Breath of My Heart Birthplace secured state funding, enabling the long-awaited purchase of its own birth center. It also worked to ensure midwife and birth center pay parity, advocating for reimbursement rates and facility fees equal to those of OB-GYNs and hospitals, and Medicaid reimbursement for doulas—a major victory for maternal health equity. The organization is also training future generations of Indigenous midwives with the creation of a student program to formalize an educational framework rooted in traditional knowledge. It is also expanding its continuum of care for community members, offering mutual aid, financial assistance, healing spaces, and parental support to people living in underserved rural- and land-based communities.

Looking ahead, Breath of My Heart Birthplace will continue to provide safe and accessible birth and reproductive health services, seed the expansion of Indigenous midwifery, plan for its birth center expansion, and advocate for birthing people and birth workers. The organization is also prioritizing the sustainability of its staff and movement leaders, recognizing that provider wellness and securing long-term public and philanthropic funding is essential to sustaining its purpose and the broader birth justice movement.

Resources

If you are interested in learning more about birth justice, we invite you to explore our website, along with the following resources.

Birth Justice and Equity

Birth Justice Origins Project
National Birth Equity Collaborative
Birth Justice Landscape Analysis
Black Mamas Matter Alliance
Birthing Cultural Rigor
Asè Toolkit : Moving Maternal Health Legislation Through an African Centered Lens
Birth Justice Bill Track
Irth App: Birth Without Bias
BirthRight Podcast
Why Connecting Disability Justice and Reproductive Justice Matters
Indigenous Reproductive Justice
Native American Women's Dialogue on Infant Mortality
Listen to Me Documentary

Midwifery, Doulas, and Birth Centers

A Look at the Past, Present, and Future of Black Midwifery in the United States
Birthworkers of Color Collective
Center for Indigenous Midwifery
National Black Midwives Alliance
Black Midwives Day Toolkit
Black Midwifery Collective
Commonsense Childbirth
Decolonized Midwifery Care
SMC Doulas
National Association to Advance Black Birth (formerly International Center for Traditional Childbearing)
HealthConnect One
Birth Center Equity
Mothers of Gynecology
Jamaa Birth Village

Infertility, Sexual Education, and Parenting

Birthing Justice: Black Women, Pregnancy, and Childbirth by Alicia Bonaparte and Julia Chinyere Oparah
The Color of Infertility by Jade S. Sasser, PhD, Ellen Liu, and Sona Smith
Voices for Birth Justice campaign
The Sex Talk Book: A Muslim's Guide to Healthy Sex and Relationships by HEARTWomen & Girls
Birthing Liberation: How Reproductive Justice Can Set Us Free by Sabia Wade
Trans Fertility Co
Black Infertility Awareness Week

Maternal Mental Health and Postpartum

Shades of Blue Project
Mothering The Mother by Shafia Monroe
Postpartum Awareness Week

Films

All My Babies: A Midwife's Own Story
Give Light: Stories from Indigenous Midwives
Birthing Justice
The Ebony Canal
With Woman
Aftershock
Deliver Us
The Last Partera
The Spirit of Birth

Funding Birth Equity and Birth Justice

Funders for Birth Justice & Equity
Funders for Reproductive Equity
Derailed - Rising Attacks and Retreating Resources for Racial Justice

This report was conceptualized and developed by Ms. Foundation for Women, in close partnership with Najam Consulting and Groundwork Partners. Report design is by Stephen Tierney of Alike Creative.

Endnotes

1. Susannah Hurd and Katherine Major, "From Silos to Synergy: How the Funding Landscape Is Shifting for Maternal and Newborn Health, Justice, and Equity," Global Health Vision (2021), https://uploads-ssl.webflow.com/5a25e6430f93020001836dfa/606743cfd637e24e3a8f2756_From%20Silos%20to%20Synergy.pdf.

2. Jennifer Torres, Tasha Kelley-Stiles, and DaSha Stockton, Racism and Inequity in Birth Outcomes for Black and Native American Families: A Review of the Literature (Michigan Public Health Institute, 2020), https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder1/Folder51/ABEST_Literature_Review.pdf?rev=4ad3d1096e4f45839bf5e4a310b4f019.

3. Thu T. Nguyen et al., "Racism During Pregnancy and Birthing: Experiences from Asian and Pacific Islander, Black, Latina, and Middle Eastern Women," Journal of Racial and Ethnic Health Disparities (2022), https://doi.org/10.1007/s40615-022-01475-4.

4. A Look at the Past, Present, and Future of Black Midwifery in the United States (Urban Institute, 2023), https://www.urban.org/urban-wire/look-past-present-and-future-black-midwifery-united-states#:~:text=The%20history%20of%20midwifery%20in%20the%20US%20is%20fraught&text=In%20the%20early%2020th%20century,births%20than%20hospital-based%20births.

5. "How Unconscious Bias in Health Care Puts Pregnant Black Women at Higher Risk," The New York Times, December 12, 2023, https://www.nytimes.com/2023/12/12/health/pregnant-black-women-bias.html.

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9. Stacy Vedam et al., "Mapping Integration of Midwives across the United States: Impact on Access, Equity, and Outcomes," PLoS ONE 13, no. 2 (2018): e0192523, https://doi.org/10.1371/journal.pone.0192523.

10. A full list of interviewees is included at the end of this report on page 31.

11. See pages 9-11 of this report for more information about public health and maternal and infant health research that informs our grantmaking approach.

12. For more on Black midwifery, visit the National Black Midwives Alliance: www.blackmidwivesalliance.org

13. For more on indigenous midwifery, visit the Center for Indigenous Midwifery: www.indigenous-midwifery.org

14. There is not a strong consensus about the definition of intermediary but common characteristics of intermediaries include being an institution that connects donors with nonprofits, which means it raises money and re-grants it. The term “movement-accountable intermediary” has also emerged to describe organizations that raise and re-grant dollars and allocate funding to people-powered activism.

15. For more details on shifting FBJE’s governance structure see page 16.

16. See the Center for Effective Philanthropy’s article: Philanthropy’s Responsibility to Movements is About More than Moving the Money

17. See From Mismatched to Derailed: Where Does Philanthropy Stand? (https://racialequity.org/derailed/)

18. See https://blockclubchicago.org/2026/04/07/south-side-birth-center-breaks-ground-bringing-equitable-maternal-health-care-to-area/

About Ms. Foundation For Women

The mission of Ms. Foundation is to build women’s collective power in the U.S. to advance equity and justice for all. We achieve our mission by investing in, and strengthening, the capacity of women-led movements to advance meaningful social, cultural and economic change in the lives of women.

For more than 50 years, Ms. Foundation for Women has shaped women’s philanthropy in the United States, providing a blueprint for the establishment of hundreds of local and regional women’s funds, influencing mainstream culture through nationwide projects such as Take Our Daughters to Work Day, and making grants totaling over $90 million to more than 1,600 grassroots organizations across the country. Through research, advocacy, and grantmaking, Ms. Foundation is the national model for sustainable, trust-based philanthropic support of women of color-led movements. With equity and inclusion as the cornerstones of true democracy, Ms. Foundation works to create a world in which the worth and dignity of every person are valued, and power and possibility are not limited by gender, race, class, sexual orientation, gender identity, disability or age.

Photo courtesy of Chicago South Side Birth Center

About Najam Consulting

Najam Consulting helps social change organizations walk in closer alignment with their values and get out of the way of their own progress. Through deep listening and strategic questioning, we help teams align around shared definitions of success, navigate friction, and move from aspiration to implementation. We believe rigor and intuition are not opposites, and we bring both to every engagement.

About Groundwork Partners

Groundwork Partners is a joyful, justice-driven consulting practice that helps foundations, donor networks, nonprofit leaders, and their communities advance racial, gender, and economic justice. Through strategic planning, organizational development, facilitation, and research services, we help our partners translate intentions into purposeful action, building alignment and momentum at each step. Groundwork was founded and is led by Lauren Marra, and all of its work is carried out in close partnership with a cadre of experienced, values-aligned practitioners.

About the Authors

Sona Smith (she/her) is the Birth Justice Program Officer at Ms. Foundation for Women, with over 15 years of experience in non-profit and movement leadership. Her career is marked by a steadfast commitment to supporting youth, families, and organizations in disinvested communities through developing and implementing impactful programs and direct services. Sona's dedication to birth and reproductive justice is deeply personal, forged through her lived experiences as a Black woman and mother confronting harmful systems of oppression throughout her reproductive health and parenting journey. A trained full-spectrum doula and lactation peer counselor, Sona has contributed to Health Connect One's Birth Equity Leadership Academy and the Human Milk Banking of North America's Donor Milk Health Equity Task Force. She is a proud alumna of the Cultivate Women of Color Leadership Cohort and the Rockwood Leadership Institute Reproductive Health, Rights, and Justice Fellowship. She serves on the governance committee for Funders for Birth Justice and Equity and is a founding member of the IL BEGIN Funders collaborative. Outside of her work, Sona is a mother to three amazing children. Birth Justice and Reproductive Justice are her political and movement homes, deeply interwoven with a spiritual practice that honors the legacy of ancestors who have birthed and midwifed babies, families, communities, and revolution, making her advocacy a holistic expression of identity and purpose.

Kheira Issaoui-Mansouri (she/her) is a philanthropic advisor, consultant, and advocate for racial, gender, and economic justice. Over the course of her 15+ years career, she has supported dozens of organizations and leaders in clarifying their goals, interrogating their assumptions, and acting with intention. Kheira excels at illuminating the way to thoughtful implementation, designing processes to get things done, and ensuring there's community accountability and learning along the way. As the founder and managing director of Najam Consulting, she leads client work spanning a variety of sectors including gender justice, reproductive justice, and strengthening the pro-democracy movement. Over the course of her career, Kheira held various positions within the philanthropic and social sectors, including roles at Arabella Advisors, the Irving Harris Foundation, and the Ford Center for Global Citizenship. Raised in Montreal by a single immigrant mother, Kheira grew up as a third culture kid navigating the intersections of race, class, and immigration. Her family's journey, made possible by access to social safety nets and community-based mutual aid, taught her firsthand how systems of collective care can create pathways to self-determination. These lived experiences fuel her work today.

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- Vu-An Foster, Life After 2 Losses
- Ausanette Garcia, Irving Harris Foundation
- Latona Giwa, Repro TLC
- Wanda Irving, Dr. Shalon Maternal Action Project
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