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Interview transcript participant #06

Auriluz Pacheco

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**NEW YORK CITY MATERNAL HEALTH ORAL HISTORY
PROJECT**

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INTERVIEW TRANSCRIPT PARTICIPANT #06

Interviewer: Auriluz Pacheco

Date of Interview: May 11th, 2020

Location of Interview: New York, NY

NYC MHOP Interview Transcript #06

Transcribed by Auriluz Pacheco

Auriluz: It is May 11th, 2021, and today I am conducting an interview via Zoom, doing an oral history for the New York City Maternal Health Oral History Project, which aims to document the experiences of women who underwent or are currently undergoing pregnancy during the Covid-19 pandemic. Before we begin, I'll just be asking a few demographic questions, is that alright?

Participant 6: Yes.

Auriluz: Okay, great. Would you be able to tell me your age please?

Participant 6: Yes, I'm 32.

Auriluz: Salary?

Participant 6: Well, prior to COVID, I was unfortunately laid off. So currently, I am. Well, actually, I'll share the salary before income I'm sorry, salary before COVID. I was at 50k.

Auriluz: Borough?

Participant 6: Queens

Auriluz: Highest level of education achieved?

Participant 6: Bachelor's degree.

Auriluz: Ok, thank you. So are you currently pregnant? Or did you already give birth?

Participant 6: Currently pregnant.

Auriluz: When did you first find out you were pregnant? Was it before? Or during the shutdown? And how many months? Are you currently?

Participant 6: I would say during the shutdown. Actually, no things were opening back up again. And found out in November 2020. And currently, I'm 30 weeks.

Auriluz: Oh, how are you currently feeling? And how were you feeling when you found out?

Participant 6: When I found that I was super ecstatic. It was a planned pregnancy. We talked about it a lot because of the pandemic. You know, how are we going to give birth? Our support system? Is it smart to even get pregnant right now? Do we want to be parents? Or do we just want to be on set on goals? And then after you know, currently right now, with things opening back up, you know, it's obviously May 2021. And I'm feeling a lot more confident and a lot more resourceful for sure. I'm not too sure

how I feel about the vaccine yet during pregnancy. But I know that postpartum it's something that's definitely on my list to do.

Auriluz: What concerns do you have moving forward about your health, the baby on your pregnancy appointments? And what concerns did you have when you first found out you were pregnant?

Participant 6: My main concern was my husband not being allowed into the room because you need that support system there. And it was it was on one occasion with my former gynecologist's office that he wasn't allowed to be in the room during the sonogram. And you know there's already so many firsts that are going through your mind as a first time mother. So you want to make sure that this person is a part of the journey, that they're not just seeing a video, it's very impersonal. So I know that women last year had it worse than us, because I'm happy that he was at least able to make it to two appointments of mine. But the other ones he wasn't able to get to the weight outside because of you know separation and social distancing. My other concerns were interactions with baby because I've been reading a lot about that with babies, I've just been inside cooped up, have not been able to, you know, socialize with other people. So it just ain't gonna make them even more antisocial or socially awkward, or, you know, clingy to their parents because they don't know anybody else. But then, I would say health concerns only because I'm giving birth in a health center, I'm starting to birth in a birthing center. They are not doing a lot of the tests. So that's something that I had to search for. And it was honestly a little bit of a headache. And I wish I'd done a heads up a lot sooner. So I didn't have to freak out about having to do three specific newborn tests. And thankfully, it was resolved, you know, after searching for a pediatrician and having the support of my doula who helped us with finding a good pediatric center. And they're able to perform these three newborn tests because they have to be done. I believe the midwife told me 24 to 36 hours after they're born. So it's like, Okay, I'm recovering. Now, I also have to go the next day to a doctor's office. So that's a little bit you know, I know that people have asked me like, oh, why a birthing center? Why not a hospital? So I feel much more comfortable on that women's health is being advocated more in a birthing center, we have more of a voice, as opposed to a hospital setting where it's treated as if it was an emergency and birthing isn't an emergency. It's a medical procedure, you know, but I know that I know that hospitals are necessary because if you have preeclampsia, you know, high risk pregnancy, like a couple friends of mine have had them, obviously, they had no choice but to give birth in hospital setting. But um, I would say, then the other concerns is just, you know, wanting to make sure that we don't get neglected, because with the risk of taking, you know, the First things first, as soon as you show up to a doctor's office, as it was check your temperature while you around anybody with COVID. And it doesn't feel like you're really getting the one on one attention. So because there's so they're so cautious at the same time it could be passed as negligence.

Auriluz: Were there anything that you heard about COVID and pregnancy that you weren't thinking of? Over the last few months or prior to becoming pregnant?

Participant 6: Yes, um, well, I had heard about, you know, the virtual visits, and a lot of moms that I'm sorry, two months to mom, friend, specifically, they gave birth last year. And they're not only were their significant others, not a lot in the room, but their visits with their gynecologist were virtual. So that to me is a really scary enough as it is because you need to do all these routine blood work, you know, urine culture analysis, and you kind of do need a doctor or at least someone who's certified a midwife or doula to check in and make sure that things are okay, and they're going on pace, baby growth is going normal, you know, baby isn't breached. But that was, that's me probably wouldn't be the scariest part. Because how could a doctor or any medical staff diagnose you over zoom? That doesn't make any sense to me. So I think that could have been done a lot better, they could have saved that the appointments, you know, this is something that's, you know, we're still battling day in and day out, and we're still learning about it, you know, all the variants that have come out. But that was my biggest fear. I said I'm not doing a virtual visit, like, who are you? How are you even going to bill my insurance for a virtual visit when I wasn't even in the office?

Auriluz: And can you describe what your experience has been like, to me, I know, you mentioned that you're doing like a birthing center. So it's like, planning for that, going, and just your experiences when interacting with medical care?

Participant 6: Yeah, well, I had a really bad experience with my ObGyn and it's just more because of her stuff. And it's the doctors amazing. But if her staff were just to be switched around, then we wouldn't have any of these issues. But at the birthing center, it's like night and day, it's crazy, how much more supportive much more attentive they are, not only to me, but to my husband, and make sure that if he asked questions, they get addressed. They don't just push him to the side, which is unfortunate. And that happens a lot. You know, you kind of focus on the birth on the person who's giving birth, as opposed to, you know, a father's also being born. So that, to me is a big deal. The birthing center, like they're there, they work under gynecologist, so it's not like they're free for all. And that's where it's a misconception that people think that you're ready to just, you know, pull up, a baby pool and just give birth in there, when it's really not, there's a lot of protocol that goes through it. I'm still set to get my T-Dap vaccine in the next couple of weeks. Because, you know, they still want to make sure that you're going to protect your baby as well as you what the antibodies you give to it. But I just feel like it's so personal, like they greet you by your first name. And they also know my husband's name as well. And they know that you know, we've been going together, they met my they met my in laws, they met my parents, so they know that not only we're looking for support there, but we also have support outside.

Auriluz: Can you describe what the experience was like figuring out that you wanted a birthing center and that you wanted some and getting information around? And how easy or difficult was that?

Participant 6: Yeah, so I decided a few years ago that a hospital wasn't for me, not only because of the system, the systemic racism that happens around especially like, you know, they just celebrated black maternal month or black maternal week, I forgot which one it is, but there's so much negligence that

happens and I'm aware of my privilege as a light skinned woman, I know that I'm probably won't even face discrimination. But my last name is still very much Latina. But I wasn't comfortable in the hospital setting because I also have a back injury. So I was hit by a car in 2012. And I never really fully recovered from my lower back. So prior to getting pregnant, I did discuss this with my husband years ago from I think even before he proposed like I had told them I'm not giving birth in a hospital. I don't know what I'm going to do. And that's when I discovered water births and that's what I mean by the water births have been around for a while and I know people labor at home as well. But I'm waterproof pretty much been around for I think from my research like five to 10 years now I've done a little bit longer, and there's a lot of knowledge that's out there is being shared a lot more still very much taboo and to each their own. But, um, I felt that that was the best thing for me to bring me comfort, because in a hospital setting, I'm not a priority. And I understand the priority is to get the baby out to be born, I get that. But I also have those, these pre existing conditions that limit me. And during my first the majority of my first trimester, and even into my second, my back was killing me all day, every day, I had never felt that back pain since getting hit by a car. And this is something that I knew was gonna happen. But I didn't expect it to be this intense. So researching for the birthing center, I kind of just got on Google and put birthing centers. And I also started to look at their Instagram accounts, and I noticed so many women of color were photographed. So that was a lot more reassuring to me that I'm like, Okay, I'm not going crazy for going down this route, that I know sounds, you know, really, really hippie-ish, if you like, I've seen a lot of people use that were like, Oh, this is a hippie way of giving birth. But if we really think about it up until 60 years ago, people were really born in a hospital, they were born at home. So it's very new age, it's definitely very different. And I'm an open book. So if anyone has any questions, I'm here to answer them. But the research wasn't as hard as I thought it would be because it's getting really, really common.

Auriluz: Thank you for that that's really informative. And how did your experience change? Or not change at all? In terms of attention from when you first became pregnant to now I know that earlier on pregnancy, the restrictions around COVID were a little stricter.

Participant 6: Yeah, well, it's kind of like what you just stated, the stuff has definitely eased up a lot. I could tell a lot more people are able to bring in more people more persons of support. Like I went to an appointment earlier this week. And I was able to see that there was a lady who brought in not only her mom, but like her cousin and then her sister. And I'm like, oh, wow, that's three people. Okay, like that's, that's amazing to me. I know that a lot of restrictions are being lifted. When it comes to the actual birth, like people are able to not only bring one more person or you can bring another person. So if you're going to a hospital, or birthing center. So I think that in itself is amazing.

Auriluz: How has it been accessing any resources that you need?

Participant 6: Well, I think that the community is very much opinionated. So it's been a little difficult to see who has the right resources, because like, for example, on the what to expect app, they share a lot

of resources and it gives you daily tips. So in one instance, I decided to click on an article for postpartum bands, you know, because a lot of women use girdles to help strengthen their core and no pelvic floor. But then in the same breath, you find people that are saying that you shouldn't be putting a sort of pressure on your midsection, but yet, we've been doing this since the dawn of time, because you're not you want to make sure that your organs aren't really hanging out. Things have to kind of come back in and be compressed together. So that's one thing I definitely noticed. Like, there is actual no concise information. Sometimes like with deli meat, for example. You shouldn't be eating deli meat because of hystera. But then I see people saying the doctors tell them, hey, as long as you heat it up for more than one minute, you're fine and kills off the bacteria. So it's kind of like double dutch, which you know, when do I get in? Do I try it and brisket or do I just say, Alright, let me fry it. And in order to avoid that. In terms of breastfeeding, I've noticed that things have been a lot more concise, which is a good thing. Everyone's kind of like talking more about tongue tie. And if babies have tongue tied, it'll make them hard to latch on. And it could also affect their speech. So that's something else to look out for, that I didn't even know about. But yeah, there's a lot of resources and as my doula says birthing is a business and its one thing I wish that the prices would be a little bit more affordable. I saw lactation I'm sorry. A birthing class, a breastfeeding console was charging just about \$200 for just a one hour course. And I'm just like, what is this going to going to provide me, besides just an one hour zoom call with a bunch of other women, I got to really see the benefit to it, I would have understood \$200, postpartum support, you know, for at least the first six, seven weeks, for example, but not just to see you talk about breastfeeding when I'm not even there yet.

Auriluz: Building off of that how have like finances or like, healthcare or Medicaid been for you. I know that you're going through a birthing center, as you mentioned, how does that work?

Participant 6: Well, I'm really happy to say that the birthing center actually does take Medicaid. And that was amazing to me, because had I been on my husband's insurance, then this is something that would have been a conflict because I wasn't too crazy about where my ob was delivering. I'm not too crazy about the hospital. But I knew that we were just going to figure it out, we're just going to outsource this because this is a lot more affordable than a hospital setting. I have seen the hospital bills from friends, and I thank them. Because that's, you know, it's a very personal thing to be sharing. One of his co workers actually shared that she got charged \$42 for skin to skin contact. Meanwhile, this is ridiculous, because how do the nursing staff even remember, hey, make sure to put skin to skin contact on that bill, when you're just, you know, rushing to get the baby out, put it on the mother and call it a day? So I have been reading that people have been asking for an itemized hospital bill. And they've been fighting the charges like what do you mean, I had 10? IV bags? No, I didn't even get one. So that's another scam that's going on in the hospital system because you know, they have to eat too. So really, really happy that they're taking Medicaid and they're working with us?

Auriluz: Was that a conversation that you had with your doula?

Participant 6: No, that was, um, that was a conversation before even planning, when my partners coworker shared the bill with us.

Auriluz: What are some resources that you hope to receive after pregnancy?

Participant 6: Um, some of the resources, I would say, I've been reading a lot about what baby blues means. And I read that all women go through it. And I've been trying to figure out the separation between baby blues and postpartum. And it's very, very, very thin line. And it could lead into postpartum so that's like the tricky and finicky part of it. Because yes, you could be overwhelmed and yes, you are going to be stressed out because you don't know what you're doing. Granted, that's okay. No one knows what they're doing. This is a new thing. But um, according to according to the doctors have diagnosed it is that baby blues only last for like, two weeks at the most because it's the first time you know, you're adjusting your soul shock that you even brought life into this world. But then how it translates into postpartum is where, you know, you're expressing rage, but its different rage from baby blues rage.

Auriluz: mhm.

Participant 6: Yeah, so what I've seen the baby blues is that you are, it's the first few weeks. And you're just trying to figure out not only Are you overwhelmed, you're sad like you're you know, your hormones are all out of whack. And that's what they it is. They also say it tends to kick in a couple days after you give birth. So but then it's also contradictory because is that can we diagnose it right away with postpartum depression, postpartum depression lingers on for a longer period of time. So that's where I've learned that and postpartum depression is when you just have no interest in baby, where you just don't even care about its health, but then you feel guilty and you want to be able to help and you just can't bring yourself to mentally and physically want to do it. And, you know, it's also related to sleep, you can be sleep deprived, and meal deprived as well. So that's where, you know, so many so much advice you can give to a person who's experiencing this, but we just don't know because all bodies are different and every case is unique. But I've seen some women talk about how they had baby blues for a week. And just like cuddling with baby and their significant other was enough for them to kind of bring their levels down and say, Okay, we're gonna get through this way because I've, I've always, the only thing I hear is that the first six weeks are the biggest shock because you're still adjusting to life.

Auriluz: Thank you for that, I didn't know much about the fine line between them. You started circling back to what you were saying about the resources you wish you received. You were talking about how you learned-

Participant 6: -Well, I wish I had that. Yeah, go ahead.

Auriluz: -Oh, no, I was gonna say you could go ahead.

Participant 6: -Oh, I wish that there was a lot more of this talk about this, because it's very taboo. And maybe it's a cultural thing too. For from my background, like, it's, I asked my mom about and I'm like, well, do you feel like you had postpartum depression or baby blues? And maybe it's because she wasn't, she wasn't given the proper resources. And it was an unknown thing. Because you know, your motherly instincts are supposed to kick in, you know, you'll be fine. You got this. Meanwhile, you don't really get this you have no idea what you're doing. But meanwhile, that's also okay, in the same umbrella. So I asked her and she said, No, she's like, no, no one suffers from depression. She's like I don't know where they're talking about that lately. And it makes me wonder, Is it just because she was just like, I need to do this, and I have to do this. It'll be fine. And were the resources available for her in the late 80s? Probably not? Because we're so quick to say that, you know, oh, she's suicidal? How could she be so sad? She should be grateful she brought life into this world. It's never really always about the mom anymore and her wellbeing. Yeah.

Auriluz: Thank you for that. That was really insightful and should definitely be normalized as apart to shut out.

Participant 6: Exactly!

Auriluz: So how knowledgeable would you say you are around your options around childbirth about like the birthing processes...motherhood? It seems like you've done a lot of research and are well prepared. To add on to that would you say, the knowledge that you received was like formal, personal research, family members, etc?

Participant 6: Well, um, to answer the first part of that, I feel like, I always think about biology class. And we should have just learned this thoroughly aside from health class, and spent more time on this than anything else, because there's so much that you learn about and, yes, it could have been high school or like your last year of high school, but it still would have been fresh in your brain. But I feel like curriculum just solely on birthing, and teaching people about postpartum before and after, as well as super important because I think that none of none of us really had knowledge to figure out what we were doing. That would have been great to have received that. So the only sources that I've had have been friends. But even then I appreciate friends for limiting what they share with me because people get so eager to share in the community. And that's something I've noticed. And it's also turns into unsolicited advice, which I'm not really happy to receive. I'm very much like, I didn't ask you, I didn't don't offer it's been super simple. But they get super eager to share. And it comes across as very as a matter of fact that it's a little bit on the note offsets or something that's really turned me off because I didn't ask for advice. I was just venting, or you know, just talking to you just to talk to you. Um, but I've done a lot of basically just like, do a bunch of Instagram accounts. Like I said earlier, birthing is a business. So a whole bunch of postpartum pregnancy pages have been talking about it. A couple of them are led by psychologists, a lot a bunch of them also made by labor, nurses, gynecology accounts, as well, like they

talk to you about like C section recovery, you know, perennial tears, you know, what can you do to prevent a tear? So I'm just like, wow, like, this is all information that people still don't know, exist, they might just see it on their explore page, but then I'm going to click on it. So that would have been great. And what was the second part of your question?

Auriluz: You answered it, that's fine. It was basically just asking how we receive the information,

Participant 6: I'm still learning about childbirth, because I'm just like, there's so many unknowns that could happen. So I feel like maybe out of 100 I'm probably 60%. If that...yeah.

Auriluz: So what are some things that you learn throughout your pregnancy experience that changed what you consider your knowledge level around child birth? And what are some things that you wish you knew going into it?

Participant 6: Well, um, things I learned were a friend of mine she posted about, and I have the picture and that's why I took a screenshot of it a few months ago. She talks about rubbing essential oils everywhere. And she also says while doing her own research on labor and delivery, she came across a YouTube video where a woman recommended rubbing essential oils. She lists them--olive oil, coconut oil, almond oil, etc, around and inside your vagina, and this also helps the vaginal tissue. I'm sorry, the vaginal tissue becomes more elastic, and this actually prevents from tearing during labor. So you're apparently supposed to do this every night, once you get into your deep into your third trimester. So that to me was like, wow, this is really good knowledge screenshot, let me keep this in my back pocket when the time comes. But this is also very much holistic, because I'm sure a doctor would tell you, you don't need to do all that. If you tear you tear, you know, you will just do an episiotomy. And that's not necessarily helpful either. I wish before going into pregnancy, um, I think that one thing is body image. That's something that is talked about, but not enough. But this is also your own journey. Before pregnancy, I had lost weight on purpose to make sure that I made a hospitable environment for the baby. And I also wanted to be in the best shape as well. I didn't want to go crazy and gain too much weight either. But I feel like talking about body image, understanding what really understanding what gestational diabetes is, like, because I had my gestational diabetes test earlier this month, I'm sorry, late last month. And I was definitely panicking because I had like, too much rice in the course of a couple days. But then I said, you know, I talked to a friend of mine. And she said, well, just to let you know, it's just the way it insulates. I'm sorry. It's the way that the placenta distributes the insulin and it has, you can be the healthiest person. But it's just your placenta will dictate if you have gestational diabetes or not. So thankfully, I passed the test, but it's still you know, people still have the stigma that it's surrounding your food. And it's really not

Auriluz: Wow how come we don't hear more about this! Were you going to elaborate a little more about the conversation about body image? Or were you going to-

Participant 6: Oh, no, for sure. So with body image, I wish that I think the snapback culture is toxic. I've been seeing that a lot lately, where it's like you expect the mom to look her absolute best the week or so afterwards. And even if you do power to you, you know, it's also based on genetics. You know; because people are like, oh, make sure to put this cream on your bellies to prevent stretch marks. And it's like, Listen, if I could stretch walk was not the end of the world. But I also have to understand that some women do not want a single stretch mark on their body. You can't control that. That's okay, I have to respect that. But body image is something that's not talked about enough. Like, you know, we look at celebrities, like for example, Ciara talks about, I forget the pronunciation, but I think its diastases recti. That's where the abs, your abs are separated from your muscles. And it looks like you have like a cone shaped abdomen. And she's talked about her journey. And I was on her Instagram profile, maybe about a week ago, she came up randomly. And she does have a little bit of a belly. And that's what kind of is the cons to it, you do end up not being able to lose this at all, I'm sure probably was surgery she could afford. I should probably do it. But she owns it. And I love it because she's still hot, in my opinion. And a whole bunch of people in the comments were like, Oh my God, is that a baby bump? That's also so rude. She just had her other child. Why are we assuming social media is given access to people with to have even more rude comments behind the screen and not find anything wrong with that? Meanwhile, others were chiming in and saying actually, she has this condition which prevents her from having her ABS back. So you know, correct yourself, you know, people are crazy when it comes to their idols. But I think that that's one thing that should be talked about more how they're not going to snap back that fast. And if you did, kudos to you, but do it for yourself. Don't do it for others. Yeah.

Auriluz: Ugh. So many stigmas and comments could be avoided if these kinds of conversations were more open and normalized, you know. Having to defend your body and why it looks a certain way is so demeaning.

Participant 6: It's just too much.

Auriluz: Would you be able to tell me a bit about how your birthing process is gonna go once you step into the birthing center and if you have like a plan. Do you set up what it is that you want to do? And how that looks?

Participant 6: Yeah, for sure. So um, we actually just saw one of the rooms the other day and it kind of made it a little bit more realer. I didn't think that the birthing pool was as small. But the birthing pool was on the left and I looked at it, I'm like, holy crap, like this is where I'm going to give birth. This is crazy. It's a very cozy setting. I have to say, I'm very comfortable. Like there's an actual bed, not just the hospital bed. There's a shower very next to it. So it's like as soon as you give birth or during your active labor You can also go in there if you just want to relax and just like, you know, literally just taking some hot steam and get back out there when you're ready. But the day of, we're supposed to wait for, for signs at home. And that'll let us know for inactive labor. So we're supposed to keep track of our contractions. Depending, there's an old, what, old, old wives tale that says that you're supposed to be giving birth the

same way that your mom did. And I hope that's the case for me, because my mom had pretty quick births with me and my brothers. Um, but they were talking about how many centimeters dilated, that they would prefer for you to be closer to six when you get to the center. And the really interesting part of this is that once baby and you were born, I'm sorry, technically, because a mother is born once baby is born. Um, they let you kind of just chill for a bit, there's no overnight stay, which I found really interesting. Um, and you are allowed to stay there for a maximum of six hours following birth. And then you're pretty much discharged and you go home. So there is no overnight stay, so let's say if I go at 12 o'clock noon, baby's born at 7pm, I might be going home at like 3am. So you know, you're off on your merry way. So, um, which I found really interesting. But they said that if you know, the midwives check you out, if there's no issues for you to have to go to the hospital, they could sit you up there too, if you if you tear during birth, they monitor you as well. They also give you your six week checkup. But they told us that they want us to bring food to bring water because you need the energy. You can't just go on an empty stomach, which is crazy, because in the hospital, you only allowed like one last meal, but it's because I know, they don't want you to you know, poop on the child or the pooping during birth. But it's normal. I'm sure that they've seen worse cases and flavor. But yeah, it was its very much intimate and seems like a much more relaxed environment. And from what I've read, giving birth and water, it's like, it's an experience like no other and people who have it. They're like; I would absolutely do this again, and recommend it.

Auriluz: And did they like elaborate on why it is that they let you go within those six hours as opposed to like the three days that I think a hospital makes me?

Participant 6: Yeah, well, they've said it if they don't see if you're not over bleeding if they don't see an issue for you. I'm like, if you're normal after birth, you're fine. And they can't I noticed there. I appreciate them for being a little biased. Because the midwives were like this is just the hospital's way of getting more money out of you. Because it's another hotel stay that was a little funny of an interaction.

Auriluz: How has contact with your healthcare provider been? Does it differ with a birthing center?

Participant 6: No, they talk to me all the time. And I love that because they messaged me on the portal like I like for example, I did a urine culture, which is very much standard procedure. And the results were uploaded. And I saw that in I got an in my email. I'm like, Okay, cool. Everything's clear next. So they call to let us know, like, Hey, we still haven't done the paperwork for the sonogram are cool, don't worry about it. I'll get in contact with that. It's a lot of differences I've noticed from my ob and it's terrible to say that it's really turned off so I won't be returning their postpartum.

Auriluz: How often were you speaking with your ob when you were still with them?

Participant 6: I only saw her once. And it's a shame to say that she's a brilliant doctor is just that that office is way too packed. Either she needs more she's better clinical staff or she needs an extra ob to ob

or two and that office was she's really the one who's doing it on her own.-And let me know if the dog in my background is disturbing the recording because I keep moving away.

Auriluz: No it's fine I don't hear it

Participant 6: Okay, cool.

Auriluz: So what are some things that you thought would happen during the pregnancy that didn't happen and what was something you thought didn't think would happen but did.

Participant 6: Um, something I didn't think was gonna happen in the process, but it did. Is that what is that right?

Auriluz: Yeah. And then the opposite outcome and

Participant 6: - the opposite. Okay, cool. Um, I would say, damn, that's a really good question. Um, I would say my back for starters; I didn't think that the back pain was going to be as intense. And then I have an anterior placenta and I didn't know what you know what it really meant, as opposed to it's in the front. But I didn't really I didn't know that it would take me longer to feel baby movement. So, around the 20 2020 week mark, I was like, Alright, I'm not feeling any flutters. I'm like, Dan, is his baby alive? What's going on in there? So I didn't feel fluid. I didn't feel anything. So we 25 and that was definitely a lot about the freaking out point. But when I spoke to the midwives, they're like, no, it's totally normal. This is good placentas in the front is preventing me to feel a lot of kicks. But lately, I'm feeling a lot more... Um, I would say, and I know this isn't really sounds cynical, um, my parents being overbearing, there haven't been overbearing at all. I expected them to be a little bit more annoying. And I think them because maybe, maybe I prepare them for it, because I could see that they're overbearing with my brothers. And, yes, they mean, well, and I and I, that's something that I remind myself of, but I also have to figure it out on my own. Because I can't call them all the time, I have to be able to find my resources. You know, they also figured it out on their own, I should be able to do a couple of things, I am asking them for help for, you know, like umbilical cord care and belly button care that what I want my kids to have at any. So my dad's, my dad's talked about how he took care of all his kids and their belly button. So I'm like, alright, maybe he can help us out with that. But it was it's a little bit of a shocker that they're not as annoying.

Auriluz: Hahaha, I'm sure they're really excited! Did you ever have a conversation with the healthcare provider about COVID? You mentioned the positive amount of information you've been receiving.

Participant 6: While they did tell us that before during birth, they will give us a rapid. And I could take...I don't have to wear my mask if I'm negative for the rapid which is amazing. Yep. And I would say you know that every time we go into the office, you know, to make sure that we're wearing a mask.

They ask us like, so have you've been around anybody, fever, sick feelings? Well, the whole routine of questions. But yeah, that was a one thing I know. That they're doing a rapid test before, when we go into when we go into for delivery.

Auriluz: Do you feel safe in medical settings?

Participant 6: You know, I don't, and this is where it was problematic. Because my first day at my ob, and this was back in March 1, I'm sorry, back on March 1, um, it was a packed office. And people were still quote unquote, social distanced, but it was just skipping one seat. And my husband was sitting next to me on another side. I'm sorry, on the other side of the chair, and one of the medical staff came and told him to leave and he was like, why are you telling me to leave? Meanwhile, you have 20 women in this room. And then there's still medical stuff behind the reception area, there's medical staff down the hallway. Like we were, they were definitely breaking the law. So what was the big deal with one extra person just because he was this poor person, he's not allowed to be there. I didn't really like that there, for sure. But at the birthing center, I noticed that there's a lot more control.

Auriluz: Do you have any concerns when you do go in and give birth or anything that you're looking forward to?

Participant 6: Um, I would say I always mention the fear of the unknown. I don't really know what to expect. And I'm thankful that I haven't listened to a lot of people's birthing experiences, because they're all unique. I had a friend of mine who just gave birth about two months ago. And I also noticed that she limited what she was telling me because she doesn't want to scare me. And I appreciate that because a lot of people are so quick. You know, they get happy sharing. And sometimes you have to be guarded with what you're sharing because I've never experienced this. So I watched a whole bunch of labor videos to kind of release my stuff from the trauma of birth and granted, some women don't recover from traumatic birthing experiences, and that's okay, too. Your body's going through a lot of changes and it's fighting something that's foreign to it. Yes, our bodies were made for this but when it comes on to labor, the body wants you to this baby out. Like we need we need this out right now. I will say I'm wondering, my emotions, because I haven't really cried all pregnancy. But uh, no, I'm going to let it go that day. Right? Um, I'm wondering what meals I should consume, to make sure that I'm giving myself enough energy. Besides like water, you know greens and all the healthy stuff? Um, yeah, it's just a lot of the unknowns because I really don't know what to expect.

Auriluz: Would you change anything about your experience?

Participant 6: Oh, I would say no, I would say no, thankfully, everything has been exactly how I wanted it. Because, you know, I left the OB GYN office and it was a fresh, fresh breath of air when the birthing center kind of just took over everything. So I'm really grateful for that.

Auriluz: Is there anything you wish you could tell your hospital and healthcare provider prior to going in?

Participant 6: Um, I would say maybe like, sometimes, you know, we see it in the movies, I push, push, push. And I think at the birthing center, they're very much on some listen to your body. Make sure. Make sure that you and your body are connected, and you and your partner are there. Your doula is aware of what's been going on. But I would say it's just maybe just having a little patience.

Auriluz: If you had the opportunity to receive something that would have made your journey easier. What would you have liked?

Participant 6: Um, I would say the process through applying for health insurance. I firmly believe that health insurance should not be attached to a job. But I don't understand why this country operates like that. And even if you don't have a job, it's just as expensive for you to get Cobra for example. It's not fair considering how other countries are. And I'm currently thinking about postpartum and how paternity leave isn't even offered in this country. And they just expect one person to be able to do it. But then they wonder why the mother is suicidal within four weeks. And it's because she's doing everything by herself. But it's expected because you know, "her maternal instinct should kick in." Now, that's still not fair. But I would say the insurance part was a big part of it, because it was a little bit of a headache to have to look for insurance in the middle of your pregnancy. And all February, we didn't get any care. So I know that I was a little bit on edge about that. Because I'm like, wow, like, what if? What if something goes wrong? What if the baby's not doing good? Okay, cool. We pass on the genetic tests. But still, it's, it was a little bit nerve wracking because insurance should have kicked in right away from the minute that we lost our insurance, especially because I'm pregnant.

Auriluz: Is there anything that you would like to tell anyone that you would like to add on to this that wasn't mentioned in any of the questions on your path, or anything that you wanted to add on?

Participant 6: Yeah, I would say, we're in an age where advocacy is important. And using your voice is much more powerful than ever before. Don't let this medical stuff dictate and service it but don't let medical sub dictate how your birth experience should be. Even if you have like high risk, you know, if they are expressing to you, hey, we recommend a C section. Just maybe go ahead with the C section. And don't try to do it on your own and have a vaginal birth because I have read that. And it's happened to two friends of mine that they tried vaginal births. They ended up being in the hospital for a week, because they ended up having a C section after all, so advocate for yourself, but be smart with your decisions is definitely one of those. And don't listen to what anybody else is saying. It's terrible as that sounds. I think that it's so easy to get lost in the world of Oh, tell me about your experience, or what bottles are you using? And I asked I asked for people what bottles are they using? And all four of them gave me different answers. You know, and I was like, Okay, cool...this was a waste of my time.

Because one friend of mine told me, listen, she uses this for now but I also went through for other bottles. Cool. So it's, it's, you know, people forget that babies. Babies also have selection. So they might not like what another kid like so go with your gut. You're doing the best you can.

Auriluz: Thank you so much for your time and for today's interview. I really enjoyed it

Participant 6: Awesome. Thank you so much for your time.