

Key Victories Toward Birth Justice at Women & Infants Hospital

For five years, SISTA Fire members sat across from the leadership of Women & Infants Hospital, President Shannon Sullivan, Dr. Methodius Tuuli, Dr. Michelle Rosa-Martins, and others, to insist that Black women and birthing people deserve care grounded in dignity, safety, and racial justice. What follows documents the systems-level changes won through persistent community organizing, our Participatory Action Research, and our collective power. These accomplishments are not the hospital's benevolence; they are the result of community demands, lived experience, and our insistence that Black women deserve more.

1. Transforming Culture and Approach

Our first demand was clear: the hospital must rebuild its culture of care. This transformation must address access to *translation and interpretation, trauma-informed care, and informed consent*. WIH's own gap analysis confirmed what our research had long shown: Black women were not receiving the respectful, transparent, trauma-informed care they deserved. In response, the hospital adopted a series of changes:

- Patient satisfaction and emergency room satisfaction data is now collected, publicly reported, and broken down by race and ethnicity.
- Plain-language communication became a standard, with new interpretation and consent practices rewritten to prevent coercion and confusion. Consent was separated into three clear categories: delivery, cesarean section, and NICU admission, to protect patient autonomy.
- Leadership completed Racial Equity Institute training, and a Chief Diversity Officer role was created to oversee ongoing racial equity work and strengthen community engagement.
- Trauma-Informed Care is now mandatory for all medical staff, and staffing in patient experience roles was expanded to create a safer, more welcoming emergency department environment.
- Interpreter staffing increased, and the Patient Bill of Rights is now visibly posted in English, Spanish, and Portuguese.

These changes reflect years of community insistence that dignity and clarity in care are non-negotiable.

2. Expanding Language Access and Interpretation Services

We made it clear that language justice is birth justice.

- WIH shifted to an "opt-out" model of interpreter services, so patients are automatically asked about their language needs during intake.
- The hospital now tracks interpreter use and patient language preferences to identify gaps.

- Signs, educational materials, and discharge instructions have undergone a full language audit and are now available in English, Spanish, and Portuguese.
- Interpreter training is part of mandatory staff training, and the right to an interpreter is explicitly embedded in the Patient Bill of Rights posted throughout the hospital.
- Interpreter staffing expanded to 8.25 FTEs, and new technology, including iPads, QR codes, and updated training simulations, supports real-time access. WIH also renewed partnerships with UMass Chan School to strengthen interpreter pipelines and recruitment.

3. Strengthening the Workforce

As part of its *community impact* work, SISTA Fire pushed for a workforce that reflects the community it serves.

- WIH now reports workforce demographic data annually, revised nursing requirements to open pathways for two-year degree nurses and launched a mentorship program for women of color through the Rhode Island Foundation.
- Hiring practices have shifted: over two years, the hospital hired 37 nurses, 35% of whom were Black and 51% people of color. Recruitment efforts now target HBCUs and UMass Chan. Alongside SEIU1199, WIH established a training fund to support worker development.
- Care New England also updated its Code of Conduct, directly responding to our call for an anti-discrimination policy, to include a Workplace Violence Prevention Policy and a statewide anti-harassment policy.

4. Centering and Respecting Doulas

Because our community told us repeatedly that doulas are essential to safe birth, SISTA Fire demanded formal recognition of doulas as part of the care team.

- WIH affirmed that doulas must be allowed to accompany patients, even during COVID-19 restrictions.
- SISTA Fire partnered with community-based doula groups, including the Urban Perinatal Education Center, Doulas of Rhode Island, and The Doulas of Color Network, to review and strengthen WIH's Doula Policy. We also wrote the community doula's role description and Educational Statement to ensure all medical staff understand the purpose and value of doula support.

5. Creating Accountability Through the Community Review Committee

For the first time in the hospital's history, WIH agreed to meet quarterly with a community-led review body and to share critical patient satisfaction data disaggregated by race. These meetings provide *community accountability* through providing a space for transparent reporting on all six of SISTA Fire's demands and ensuring the community has direct oversight of implementation progress.

6. Building a Community Resource Space That Works

As another way to improve its *community impact*, SISTA Fire urged WIH to make space within the hospital to address some community needs.

- WIH redesigned the Community Resource Space so families can easily connect with local resources, Health Equity Zones (HEZs), and community-based organizations. Materials are now available in Spanish and Portuguese.
- The space is staffed by a Community Engagement Specialist, a Patient Feedback Supervisor, and a Chaplain, with plans to add a Community Health Worker to run a Diaper Sharing Program and provide deeper resource navigation.

Building Long-Term Accountability and Change

As we move forward, one of our core goals is to secure a long-term accountability structure that ensures Women & Infants Hospital, and any institution serving our community, remains answerable to the people whose lives are impacted by their decisions. Institutional change must not depend on goodwill or leadership personalities. It must be protected through durable structures that reflect the power of the community with transparent mechanisms that allow our community to track progress, address failures, and shape solutions. That is what we continue to fight for and build.

We also fight for the right for the community's vision to help shape the hospital. Our vision includes stronger pathways for Black doulas and doulas of color, increased compensation and institutional support, and deeper integration of community birth workers into Rhode Island's maternal health landscape.

However, SISTA Fire's Black Maternal Health Campaign has never been solely about transforming one hospital. From the beginning, our work has been about building the kind of world our communities deserve, one where Black women, Indigenous women, women of color, and nonbinary people of color experience safety, dignity, and joy in pregnancy, birth, and beyond.

Our path forward grows from everything we have learned, from the truths that hundreds of women and birthing parents shared with us, from the courage of doulas and birth workers who stood with families, and from the power our members demonstrated every time they organized, testified, facilitated, or showed up for one another. We move with the knowledge that the harm our communities face is structural, and so our solutions must be structural as well.