## Alicia D. Bonaparte

# **Global Health and BFS**

## Diasporic Research and Interventions Rooted in Advocacy

### Introduction

Bonaparte compares Black feminism and African feminism's value of Black and African women's lived experiences and the historical power dynamics that persistently impact Black and African communities. African feminism can extend Black feminism with "its openness to an apolitical stance" and by recognizing how benefits for the individual also benefit their community (p. 155). She explains how Black feminist sociology (BFS) can incorporate ideas and practices of both feminisms to examine reproductive healthcare interventions proposed by Black feminism and African feminism.

## **Examples of Black Feminist Interventions**

Jennie Joseph leads Commonsense Childbirth Inc. which empowers Black birthing parents and their families to promote and fulfill their needs. Community health workers act as "cultural brokers" who mediate between physicians and parents within marginalized populations. They practice Black feminist **communal enrichment** by encouraging health literacy for Black families.

Black Mamas Matter Alliance is an NGO working with members of the American College of Gynecology to rebuild policy and practices to support Black birthing parents before and after birth. Their efforts to reform links between parents and practitioners builds upon **antisexist coalitions** built by Black feminism.

## **Examples of African Feminist Interventions**

African feminist scholars challenge assumptions that democracy and modernization at large have benefits for mothers and wives. African feminists instead highlight how **local cultures and postcolonial systems dictate maternal health**. Working with knowledge of how economics and traditional gender roles specifically affect Zimbabwean women, the SHAZ! program aims to reduce HIV risk, improve reproductive health outcomes for young women, and relieve financial stress via microgrants and vocational skill training.

### Conclusion

The efforts of these groups and programs amounts to **collective resistance** against poor health outcomes for Black women. Bonaparte insists that centering lived experiences, autonomy, and government accountability are key to incorporating Black feminism and African feminism into BFS.

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