

Black Mothering and Self-Care in the Age of COVID-19

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Abstract

This article examines the experiences of Black mothers during the COVID-19 pandemic through a lens of self-care. As a group of people particularly impacted by persistent gender inequality, the economic and health disparities laid bare by the pandemic, as well as the structural racism that underscores these inequities, Black mothers' self-care emerges as an important topic of conversation as women everywhere confront the challenges of parenting, running households, and attending to their own well-being. Communicated through a collection of short case studies, this piece presents a broad range of narratives that demonstrate the way Black mothers engage the practice of yoga to attend to their needs and the needs of their families. Presented with statistical and analytical context, this piece demonstrates the ways yoga supports Black mothers and how it falls short.

Keywords: Black; Mothering; Self-Care; Women; Yoga

Introduction

The COVID-19 crisis has irrevocably changed life for many people across the world. The loss of loved ones, income, and the ramifications of prolonged isolation mean that we will have to reckon with societies experiencing compound traumas after the pandemic is declared over. As the pandemic rages on, it has become clear that some groups are more affected than others.

For the purposes of this article, I explore how some Black mothers practice yoga (broadly defined) as one type of self-care in their quest to mitigate the challenges associated with being parents, being Black, and living through a global crisis. One of my goals with this piece is to honor Black women's experiences without reinforcing the trope of the "Strong Black Woman." This trope does not account for the ingenuity with which Black women care for themselves and their families; it erases Black women's suffering and contributes to a false narrative that Black women are always okay. Ultimately, this trope dehumanizes Black women.

The fields of Black feminism and maternal theory offer scaffolding from which to understand discourses concerning Black women, parenthood, and yoga practice. As such, I present the following concepts as contextual groundwork for this piece: 1) Historically, Black women's perception of motherhood is fundamentally different from that of white women given Black women's histories of bodily and reproductive control, constant presence in the workforce, and the notion that care work is "humanizing labor ... the very gestures of humanity white supremacist ideology claimed black people were incapable of expressing" (hooks 1984, 133-134); 2) Black maternity is marked by ancestral trauma, "which is conjured innately and is

inescapable even in moments of supposed rejuvenation and solace that frames [Black women’s] lives” (Morgan 2018, 857); 3) Mothers of color are chronically scrutinized in American Society (Gumbs et al. 2016) such that “the cult of true womanhood requires motherhood [be] connected to a sense of virtue that is denied Black womanhood and motherhood alike” (Morgan 2018, 860); 4) Black women experience a higher “allostatic load” than women of other races, that is, “greater cumulative environmental and social stressors, which may accelerate aging within this population” and has ramifications for chronic health conditions (Nichols, Gringle, and McCoy Pulliam 2015, 169); 5) Black children are valued less in society than white children such that they experience discrimination and unequal access in everything from schooling to a fundamental right to life (McClain 2019); 6) “[B]lack motherhood ... [is] a site constituted by grief and expected loss and [is] a political position made visible (only) because of its proximity to death” (Nash 2018, 700); 7) “[V]isible parenting” by Black women is a revolutionary act, (Morgan 2018, 858); and, 8) It is imperative that we attend to our own well-being. As Audre Lorde says, “we can learn to mother ourselves.” More specifically, we “affirm [our] own worth by committing [ourselves] to [our] own survival” (Lorde 1984, 173).

Beyond these concepts, I acknowledge the importance of the work of people like Amy Argenal and Monisha Bajaj whose co-authored essay “Reclaiming Spaces, Reshaping Practices: Yoga for Building Community and Nurturing Families of Color” (2021) offers us a blueprint of how to serve families through yoga publicly, therefore normalizing of intergenerational practice in communities of color. Deborah Flashenberg, director of the Prenatal Yoga Center in New York, hosts a podcast called *Yoga|Birth|Babies* where topics range from pelvic rehabilitation to teaching children anti-racism. This collection is one of the most comprehensive resources available at the intersection of yoga and parenting. Although it is clear that producers of the podcast have made it their practice to include diverse voices, the ratio of white, cisgender women to all other types of people featured on the podcast speaks to a lack of representation in the fields of yoga, doula work, midwifery, clinical pre- and postnatal health, parental coaching, and self-help. Of particular interest to this piece is the February 3, 2021 episode featuring Certified Nurse Midwife and Director of Professional Education and Programing for Spinning Babies, Rhea Williams. I reference this episode later on in a discussion of the challenges Black mothers face in the American health care system.

In what follows, I present seven short case studies of Black mothers from across the country; all volunteered to be interviewed for this piece. These case studies are among the first to illuminate specific challenges experienced by Black mothers during the pandemic as they relate to yoga practice. Although the experiences of the interviewees are not representative of the Black community as a whole, their stories highlight the ways that yoga both benefits their well-being and falls short in these unprecedented times.

Before presenting the case studies, it is necessary for me to put the difficulties I reference into perspective. As demonstrated by the foundational concepts presented above, Black mothers face remarkable adversity even when there isn’t a global crisis happening. The COVID-19 pandemic has exacerbated existing hardships that make self-care both a necessity and a challenge.

Perspective

For women broadly, the pandemic has been described as an economic crisis – a “shecession” (Madowitz and Boesch 2020). In 2020, women left the workforce at four times the

rate of men (Gogoi 2020). In heteronormative households, men generally make more money (Barroso and Brown 2020). Therefore, when a decision has to be made about who will leave work to take on the duties of the household in the absence of childcare and eldercare, women are more often the ones to do so. Since the pandemic began, Black women are “twice as likely to be responsible for all of their family’s childcare and housework during COVID-19” as compared to white women (Robertson 2020). Overall, Black families constitute a higher percentage of families for whom mothers represent the sole breadwinner (Robertson 2020). “Half of black households with children are headed by single women ... By contrast, only 20 percent of white households are headed by a single woman” (Fitzhugh et al. 2020).

Women who do not leave the workforce work more essential jobs than men overall. “About one-half of all workers are women, but nearly two-thirds (64.4 percent) of frontline workers are women” (Rho, Brown, and Fremstad 2020). To complicate matters, women of color are overrepresented in frontline occupations. Black women are most overrepresented in the childcare and social services industries at 19.3 percent of total workers, but only about 13 percent of the total population in America (Ibid). The essential jobs women perform often offer few protections when they must miss work to care for family or personal health reasons. These circumstances leave many without an option when it comes to choosing between making an income or risking exposure to COVID-19.

Regarding COVID-19 specifically, Black people have been found to test positive for COVID at twice the rate of white people (Ford et al. 2020). Further, Black people are dying of COVID-19 at about three times the rate of white people (Ibid). It has been shown that about 31 percent of Black people know someone who has died of COVID compared to just 9 percent of white people (Goldstein and Gushkin 2020). In general, Black people experience more comorbidities than white people (Adegunsoye, Ventura, and Liarski 2020). Dr. Michelle Albert, director of the CeNter for the StUdy of AdveRsiTy and CardiovascUlaR Disease (NURTURE Center) and associate dean of admissions for the University of California San Francisco School of Medicine argues that “about 80 percent of health relates to social factors, and only about 20 percent to genetics” (Chur 2020). Her statement challenges a popular assumption that Black people’s health disparities are inherent states of being.

Compounded by the fact that healthcare for Black women in America has been marked by demonstrably inadequate care that includes everything from lack of appropriate pain management to systematic underdiagnoses, Black women find themselves mired in medical racism and misogyny that creates mistrust of the medical community that increases a need for advocacy in doctors’ offices. Since the start of the pandemic, many offices are barring companions from attending appointments with seekers of care so advocacy is stymied. Pregnant women and those requiring post-natal care are in particular peril as Black women in America are generally three times more likely to die in childbirth and from complications after giving birth than white women (Chalhoub and Rimar 2018). According to Rhea Williams, some may assume that education could be a contributing factor, that perhaps Black women aren’t getting the information they need to have healthy pregnancies. Williams says this is not the case, “A Caucasian woman with a grade-school education [is] less likely to die in childbirth than an African American female that has a high level of education” (Flashenberg 2021).

In addition to the pandemic, state-sanctioned murder is a very real stressor for Black women. The murder of Breonna Taylor, a Black woman and essential worker in the early days of the pandemic, demonstrates the ways Black women are inherently unsafe in American society.

The systemic murder of Black men is also concerning for Black women who worry about their sons, partners, and other relatives.

The emotional impacts of the concurrent pandemics of COVID-19 and racism are as dire as the physical impacts. On average, women are twice as likely as men to have anxiety with physical manifestations like unexplained bodily pain (*LeanIn* and Survey Monkey 2020). Women also experience sleep issues born of stress at higher rates than men and Black women are more likely to experience autoimmune disease than most any other group (Chae et al. 2019). Autoimmune diseases are thought to be exacerbated by stress.

The gamut of circumstances outlined above spells hardship for Black children too. Decreased economic power in many Black homes means that Black children are experiencing increased food and housing insecurity during the pandemic. With a disproportionate number of Black caretakers not having enough computers or other devices to aid in their children's learning during school closures (Wong 2020), Black children are falling behind in their education. Health-wise, Black children are more susceptible to severe cases of COVID-19, which causes multisystem inflammatory syndrome in children (MIS-C) (Van Beusekom 2020). The isolation and uncertainty of the pandemic means that some children are having trouble coping and are engaging in self-harming behaviors. Some are even committing suicide. Rates of suicide among Black people – children and adults – spiked during the pandemic (Mann 2020). All of this adds to the emotional load Black mothers are carrying during the pandemic.

Given the discussion above, it is necessary for Black mothers to engage in self-care. Though yoga does not eradicate any of the problems mentioned above – a yoga practice will not end racism, for example – it can help to manage stress related to the pandemic, address some of the comorbidities that disproportionately affect the Black community, and help combat isolation, especially when done in community. Thus, some Black women have cultivated or deepened an existing yoga practice during the pandemic. Others have struggled to keep a yoga practice going out of a lack of mental capacity to hold self-care as a focus during the pandemic. The demands of work, parenting without breaks, and the stress of the uncertainties of the pandemic contribute to this lack of capacity. Other Black women have taken it upon themselves to create the safe spaces they wish they experienced early on in their yoga journeys.

All of the women interviewed for this piece are in more-or-less heteronormative relationships and/or households. Though I hoped that some queer-identified parents would volunteer for the study, it is quite possible that the wording of my call for participants who are “Black mothers” did not feel inclusive of non-heteronormative experiences. Even so, Black women's experiences as mothers in heteronormative contexts is a necessary area of inquiry in a patriarchal culture where women experience adversity. It is also necessary to examine the experiences of the LGBTQIA+ community, and my hope is to deepen this work as part of a larger initiative to highlight Black experiences through the lens of self-care and embodied practices including yoga.

Methodology

In late February and early March of 2021, I posted calls for interviewees on Facebook and Instagram. I indicated that I was looking for “Black mothers” who could speak to their experiences throughout the pandemic and their yoga practice. In particular, the *BlackGirlYoga Group*, a private group of over 12,000 members on Facebook, was a space where much interest was shown. Of those who indicated their interest through post comments and direct messages, I

was able to schedule five interviews. One interviewee came from a direct message thread on Instagram. One person was referred to me by a Facebook respondent. With each of the women, I began our conversation with a series of scripted questions that included their name, age, location, number of children, whether they are co-parenting, parenting with extended family/community or single parenting, partnered, single, or in a non-traditional relationship. I asked participants to describe their relationship to self-care, and to describe their yoga practice. After answering those questions, I asked them to speak freely about their experiences with the pandemic and self-care; I asked follow-up questions as needed. In writing the case studies, I used first names and give a general area for their whereabouts for anonymity. Interviews were conducted in March 2021.

Case Studies

Shailey is a thirty-five-year-old who lives on the coast of Virginia with her partner and their two young children, aged two and four. Shailey describes herself as a stay-at-home mom who takes on the majority of care responsibilities while her partner works full time as a mail carrier. Before the pandemic, Shailey started her own business as a contract yoga teacher, teaching in various spaces around town. Though she said her self-care regimen was irregular before the pandemic due to her children's needs – “it would happen whenever it would happen,” she quips – her teaching was helpful in centering her yoga practice because she felt she needed to maintain a practice to be an effective instructor. Prior to starting her business, Shailey says that she felt like she didn't have a yoga community in her town, “It felt like it was just me.” An avid social media user, Shailey follows many Black yogis online as a way of being connected to a broader community. She notes that her disconnection is due, in part, to the lack of capacity she has to foster new friendships. “As a parent, I've noticed I just don't want any new friends,” she laments. Even as she struggles to cultivate community around her yoga practice, Shailey feels that her practice is important to her parenting journey. With yoga, she is “more patient” and “more present.”

Once COVID-19 forced the country into lockdown, all of Shailey's contract jobs stopped. Her yoga practice came to a halt as did many of her other methods of self-care for the first several months of the pandemic: “I got into a mood.” With her four-year-old home from daycare, her workload at home increased. Stress about her partner's job increased too, “I think he was feeling worried about how I'd treat him as a result of him being out, as if he was a walking virus.”

Shailey says that his risk of exposure led to changes in their home routines like not touching the kids until he washed his hands and changing clothes after coming home. In addition, issues of race on the job were present. When stimulus checks were mailed, mail personnel were escorted by police to mitigate theft by citizens who may attack or manipulate mail carriers. Thieves could include mail carriers themselves. Shailey says,

[my partner] was 'escorted' by the police when the first stimulus check was distributed which was daunting due to how police tend to treat Black people. During the protests we were definitely concerned. It took a toll on our mental health because he was out there with potentially racist and afraid people. This was especially the case during the election.

It took the opportunity to begin working with clients virtually to inspire Shailey to pick up her practice once more. “My intention is to learn and grow with them,” she says. As she looks to continue her years-long *asana* and meditation practice, Shailey is leaning into areas of yoga philosophy she had yet to explore, and is encouraging her clients to do the same. Inspired by

current events in the socio-political landscape, Shailey is also delving deeper into the politics of representation in yoga by looking to South Asian and other Black, Indigenous, People of Color (BIPOC) yoga practitioners and influencers to help guide that work.

When the conversation turned to what kind of support Shailey feels like she needs as a mother, a Black woman, and a yoga practitioner, she says candidly that “another caregiver” would be nice along with a community of moms with whom to practice.

Autumn, 43, lives in New York City. She and her husband have an eight-year-old and an eleven-year-old. For a time, New York City was considered the epicenter for the virus in the United States.

As we begin our interview, Autumn reflects on her self-care before COVID wistfully and says that it was “regular.” She was teaching yoga classes four to five times a week, and took a few classes each week for herself. Though life presented its usual challenges, Autumn had access to tools and practices that helped her care for herself.

When COVID-19 hit, Autumn was initially very active,

For the first six months of COVID I was incredibly ‘on.’ I did a Forest Yoga foundational training. I was still teaching yoga all the time. I was hustling. I was doing most of the childcare ... So I was only teaching at night or in the morning. I was taking the kids out into the woods at least once a week ... I was out in the streets, protesting (following the murder of George Floyd). I dragged my kids to every single one of those protests to the point that my youngest was finally like, ‘not another protest.’

When her partner started working overtime in his job for a parent advocacy organization, Autumn felt mounting pressure to maintain regularity around her children’s schoolwork. Regular activities that weren’t a big deal in pre-pandemic days became gargantuan tasks. She describes five-hour trips to the food co-op that included waiting in long lines, buying weeks-worth of groceries and getting home to spend another few hours disinfecting it all. “It was exhausting,” she sighs,

And then suddenly September hit and all the uncertainty around school and the fact that family advocacy was morphing into Get Out the Vote stuff, which meant suddenly 65 hours was like 70 or 75 hours a week [for my partner], I just hit a wall. I climbed into bed sometime in mid-September and didn’t come out until October. I had this realization that if my body hadn’t just stopped, I might have still been making myself do it. I was actually deeply overwhelmed and didn’t know how to say no.

Following Autumn’s realization, she decided to let her relationship to household work become more fluid. If she doesn’t have the bandwidth to complete a task (like laundry, for example), it can wait.

Though Autumn tried to return to her mat more consistently, a lack of opportunity to practice in the company of others has been hard. Some days, she gets in a practice, some days, she doesn’t. “For me yoga was never a solo sport,” she says. Autumn also mentions that the perception that to be a good yogi or yoga teacher one must do yoga by themselves for two hours each day smacks of supremacy culture. She stays connected to her yoga communities through online platforms. Especially important to Autumn are her interactions with her Jew of Color networks, Yogis of Color networks, and staying in contact with other moms. These days, Autumn is staying connected in part by working from home leading anti-oppression trainings. She also continues to teach yoga online.

When I ask Autumn how she could feel better supported through the pandemic, she talks about social change and the need to direct her anger. She says,

My depression was an attack ... on myself because I couldn't attack the administration. I couldn't attack my partner. I couldn't attack my children, but everything was making me angry. I think of anger as a change emotion. It says, 'this isn't okay. Something needs to shift.' I didn't know which direction to let it out in. So, I hear you asking me that question, 'what would I need?', and what I need is so much larger than what I'm capable of by myself. I need huge social shifts ... a productive direction.

Maria is forty years old and lives in central Alabama. She co-parents her four year old daughter with her daughter's father who lives outside the household along with the help of her mother and her current partner.

Maria describes herself as someone who maintains a consistent self-care practice which she prioritizes as one of the ways she keeps herself physically and emotionally healthy, "I've always been a 'pamper-me' type of a person. I like the after-effects of meditating, doing breathing exercises, and doing yoga [*asana*]. I definitely take these things very seriously as a mother because I'm giving, giving, giving, and people are taking, taking, taking." Maria practices yoga on her own at home and also considers herself part of a yoga community in her city.

Maria began the pandemic working from home as a customer service specialist at an insurance company. A few months into the pandemic, Maria was promoted to the position of Adjuster within her company. Although Maria recognizes the privilege of being promoted instead of being laid off during the pandemic, her new position poses some challenges with her daughter at home from pre-school. In her new position, Maria pivoted from doing self-directed, flexible tasks like data entry and email communications to having to be on the phone for much of the day. The level of undivided attention needed to do her new job means that there is less time to attend to her daughter throughout the workday. To address the predicament of being attentive to her work and providing childcare for her daughter simultaneously, Maria converted her home office space into a working and learning space that she and her daughter share. She's worked hard to cultivate a routine for them both, so that her daughter has structure during the day and doesn't feel lonely while Maria works.

As part of their routine, Maria shares her yoga practice with her daughter who benefits from learning self-regulation and how to slow down. In turn, her daughter shares her practice with her grandmother, Maria's mother. Maria says that keeping it all together is hard, but she remains committed to making it work through the pandemic because of the implications it may have for her daughter's well-being if she does not. She says, "It's one thing to not have to deal with losing work or losing money, but if you're losing ground in your household, it's the same thing. I'm not winning if my child isn't winning."

Maria's mother helps to keep the routine going too. With her partner out on the road as a truck driver for days at a time, Maria relies on her mother for help when she needs to complete tasks without her daughter in tow. Although her parents made it a point to isolate themselves from others so that they could continue to see their granddaughter, both of Maria's parents contracted COVID at the end of 2020. Maria says, "we did go a couple of months where we just weren't able to see them, and that was a really big adjustment." Maria was left to juggle all her responsibilities without a dependable support system.

As the pandemic continues, Maria says that her practice is even more important than it was before. She describes it as a source of “spiritual grounding” and a way that she can work to meet her daughter at her level. Maria says that she’s been doing yoga more frequently right when she gets out of bed and right before she goes to bed at night. “You can’t skip out on it,” she advises.

Stacy is a thirty-six-year-old mom to two sons aged four and sixteen. She co-parents with her husband. They live in eastern Pennsylvania. She says that before the pandemic, the care ratio in the home between she and her husband was about 70:30 with Stacy taking on the larger share of responsibilities. Before the onset of COVID, Stacy describes her self-care regimen as “very minimum and sporadic.”

When COVID lockdowns began, Stacy continued to take on the bulk of the household responsibilities, which now included monitoring her teenager’s school work and attending to her toddler’s needs. Additionally, Stacy’s job as a program supervisor for a treatment foster care program took up a lot of her bandwidth. Unable to meet clients face-to-face, Stacy was conducting counseling sessions for children and families virtually from her home. Stacy’s husband also works as a counselor and it became difficult to juggle everyone’s schedules. After some time, Stacy went to her husband and said, “I need your help.” Although they did work to create more balance through shared responsibility, it wasn’t until Stacy experienced a health crisis that things really shifted.

Just before the pandemic, Stacy was under a lot of stress. Her brother passed away of a non-COVID illness after an extended hospital stay. Stacy was traveling often to support her parents and other siblings. In May, shortly after the start of the pandemic, “I noticed that my legs were numb and tingling.” After a trip to the emergency room, Stacy learned that she has Multiple Sclerosis (MS), an autoimmune disease that affects the central nervous system. She believes it was brought on, in part, by “ongoing stress and lack of self-care.” After her diagnosis, Stacy made it clear to her husband, her family, and her job that she “needed to come first.” As Stacy was working to regain mobility following her MS flare, she relied on gentle yoga *asana* as a way to re-engage her body. She still does yoga regularly, about three times a week, for 30 minutes to an hour. “Since my diagnosis,” she reflects, “I feel like that was an eye-opening experience to my husband ... I think he realized how much I did because when I was not as mobile, he had to take on the brunt of [the work].” Stacy says that her yoga practice and self-care are now “non-negotiable.”

For Stacy, yoga has implications for her parenting as well. She feels, “[yoga] helps me to ground myself and to be more conscious of my feelings ... especially when I do it in the morning, I’m able to jump into running the household with that burst of energy.” Her four-year-old has gotten involved as well. Stacy and her husband bought him a yoga mat. “Sometimes I’ll wake up early and he’ll find me and he’ll do it with me. It’s been helpful for him too, to teach him some self-regulation.” Whether or not her older son does yoga is less of a concern. Stacy recalls that she was in the hospital receiving treatment for her MS diagnosis when George Floyd was killed. “It hit home ... because my oldest son turned sixteen in June [2020]. What happens if my kid gets pulled over? In July [2020], after talking to his dad, he decided that he was going to live in South Carolina with his father. So that transition [created] even more anxiety” because he was going to live in the South. During all of this, COVID came to visit her household as well. Stacy’s husband contracted COVID, but neither of her children did. Her nephew contracted COVID and three elders in her extended family passed away due to COVID.

In all, Stacy wants people to acknowledge the need for self-care for Black women, “As Black women, sometimes we carry the brunt of the household.” She stresses the need for breaks and for a release of the scrutiny mothers experience when they do take breaks. She feels that the perception that Black women are lazy when they attend to their own needs is unhealthy.

Merrisa is a thirty-two-year-old who lives with her husband and thirteen-year-old in Los Angeles County. Merrisa was thirty-four-weeks pregnant at the time of this writing and subsequently gave birth to a baby boy. Merrisa is an avid yoga practitioner and instructor who, in addition to working part-time as an essential worker in a restaurant (which has remained open throughout the pandemic), worked in yoga studios and community spaces through her own wellness business before the COVID-19 pandemic forced her teaching online. Notably, Merrisa taught donation-based yoga classes for parents in a handful of local elementary schools. Of her own parenting journey, Merrisa says that her yoga practice means that, “I am not only able to be aware of [my]self, but also aware of my husband, and my son. I’m a lot more intuitive ... and empathetic.” Deeply committed to self-care, Merrisa utilizes yoga and other practices such as meditation, postural practice, affirmation practice, spiritual baths, and journaling, among other modalities, to attend to her well-being.

After lockdown, “everything felt a lot heavier ... finding out I was pregnant in August [2020] after everything that went on with Breonna [Taylor] and George [Floyd], it was just a lot to process.” Nonetheless, Merrisa has been very active in social justice, which she considers part of her spiritual journey. In August 2020, following the mysterious death of Robert Fuller, a twenty-four-year-old Black man whose body was found hanging from a tree in Palmdale, Merrisa helped to organize a healing festival at the site of his death, “We were giving out fresh produce and offering Reiki, yoga, and sound. We prayed over [the tree]. We cleansed it and we brought fruit because we know that now Robert is with the ancestors.”

Prior to becoming pregnant and in response to the systemic murder of Black people, Merrisa became active in raising awareness about Black maternal health through a Los Angeles-based organization called the African American Infant and Maternal Mortality (AAIMM) Prevention Initiative. That was in February 2020 at the very beginning of the pandemic. Merrisa wanted and still wants people to know that Black maternal health is an important piece of the fight for Black lives in America.

At home, the dynamic within the household changed as Merrisa’s husband began teaching from home (he works for the school district), and her son began doing his school work from home. Apart from having to create designated spaces for her family to do their work, Merrisa worried about the amount of time her son was in front of a screen as compared to before the pandemic. Thus, getting outside together as a family became important.

More recently, Merrisa has been leading “Mommy Circle Mondays,” a virtual community “building sisterhood for all of us who are going through this pandemic pregnant.” As part of her own self-care, Merrisa is attending bi-weekly telehealth therapist sessions. She began the sessions upon the suggestion of her healthcare provider after she filled out a mental health questionnaire at one of her prenatal appointments. Merrisa continues to allow her yoga practice and her overall self-care practice to be fluid as her experience of her physical and emotional body, her activist work, and the pandemic, in general, change. Once the pandemic begins to allow more interaction between people and the economy in her community recovers, Merrisa hopes that people will shift their attention to supporting and participating in local health and wellness initiatives.

Marsha is fifty-two-years-old and lives in eastern Virginia with her husband and sons. Marsha is a certified yoga therapist who works in clinical settings, private practice with mental health professionals, and directly with clients who are experiencing substance abuse, mental health challenges, as well as cancer survivors. She also works as an electrical engineer. Since the pandemic started, a lot of her work transitioned online, but she continues to meet individual clients in her private studio with COVID protocols in place.

Marsha says, “The pandemic has really created a whole new life for me.” With four sons between the ages of 16 and 22, Marsha is taking on a lot more emotional labor than before the pandemic. She says her two older sons who are away at college are in contact with her more often than they were before the pandemic. She talks with them constantly about being safe from COVID and being Black men in a racist society, “You know, my sons initially had this false thought: ‘as long as I do well, I won’t be treated like other Black men.’ When my son travels home [from Morehouse], he does not stop [driving]. It’s 10 hours. He’s like, ‘Mom, I will call you. I need to make sure I hear your voice, you hear my voice’. So it’s an added level of anxiety around making sure that my sons are safe.” Marsha’s high school sons need support as well as they navigate doing their schooling from home. Marsha’s husband is factored into the people she worries about on a daily basis. She says, “I literally feel like I’m holding space for my whole family.” In addition to worrying about her sons and husband, Marsha’s in-laws were both hospitalized for COVID. They have since recovered, but Marsha says that their illness was a stressful time for the entire family.

As Marsha reflects on how she carves out time for her own self-care amid the presence of such stressors, she says, “I schedule it into my calendar.” She continues to say that if she doesn’t write it down, it doesn’t happen. Early morning is a favorite time for Marsha, “As soon as I wake up, I have my meditation time. I read some positive material ... I stretch, I clear my mind, I have a cup of tea.” Marsha says that outside of her personal practice, yoga is a family affair. One of her sons is even certified to teach.

Because Marsha works with those already dealing with trauma, I ask if she feels that yoga therapy is rising to meet the challenges of the pandemic. In response, Marsha says that she and her work are made for this time, “It’s actually exciting because I feel that the universe prepared me for this moment. Being a woman of color, being an electrical engineer in a male dominated world, I knew about gender trauma ... I knew about racial trauma because I had experienced it. And now as a yoga therapist, women are coming to me.”

One of the most important pieces of learning for Marsha since the start of the pandemic is that she was not giving enough time to her friendships. Now, she schedules “girlfriend time” that is one to two hours a week. That time has been helpful in keeping Marsha grounded. When I ask Marsha how yoga and yoga therapy is helping her cope with the pressures of the pandemic, she says, “If I didn’t have yoga and yoga therapy, I would not be sitting here having this conversation with you today. The heaviness of the pandemic – of the increased responsibility, the increased anxiety, not knowing what’s going to happen with our businesses, what’s gonna happen with our families – if I didn’t have my clients to show up with, I would not be able to focus. I would not be able to be as productive as I have been during the pandemic. My practice of meditation, of having the physical *asana* practice and the breathing ... really allowed me to hold space for myself first and then for my family and then for my yoga community.”

Near the end of our conversation, I ask Marsha about what is needed for women in her community and beyond. She muses,

I think we can use more safe spaces where we can show up and do yoga, but talk. I mean, that's the difference between yoga therapy and yoga, right? As women of color, we always have these masks and capes on, like 'I am handling the world! There's nothing wrong!' And what I've realized in the sister circles that I've created is that women show up and they're able to say, 'you know what? Work is hard. Family is hard. Being a mother is hard. I'm not sure if I can make it.' Seeing the support of people coming together and sharing about their lived experiences, I call them *compassionate sharing experiences*.

Lasha is twenty-nine-years-old. She lives in southwest Ohio and is a mom to five kids between the ages of six and fifteen. She is a single parent who works as a firefighter and paramedic. She's one of a small handful of women working as first responders across her city; she is rarely on the same shift with another woman.

When she signed up to be a first responder, she knew that she would necessarily put herself at risk while on the job. However, she says that the pandemic has forced her and her colleagues to be more thoughtful about how they interact with patients, "We naturally put ourselves on the line in our field of work, so we're naturally exposed to different things. But this has really caused us to be more mindful." She says the additional steps in place to be able to care for people with COVID precautions affects the timbre of the care they provide. It feels less personal.

As part of her reflection, Lasha talks about the inevitable risk of exposure to COVID, but also not wanting to be away from her children. Where some of her colleagues have taken measures like staying in hotels, sleeping in basements and campers, Lasha chooses to be with her family most of the time. During the pandemic, she separated herself from her children for a short period after being notified that she had been exposed. However, because the notifications come long after one has been exposed (it takes several days for a COVID test to come back), there is little she can do to protect her family from possible exposure if she still wants to live in the same household, "It's difficult. But I'd rather just be exposed ... than be away from my family. Especially with our job, [family] is what keeps us level-headed a lot of the time."

Lasha says that yoga has been a big part of what kept her grounded during the pandemic. She completed a yoga teacher training just before the pandemic started as a way of deepening her yoga practice, which she began in earnest in 2016. She didn't have any intention of teaching, but, Lasha says, "I really wanted to show everybody, 'this is what I learned. You can feel great too!'" Over the summer of 2020, Lasha taught classes to friends and family outdoors. As she continued to reap the benefits of her practice, Lasha wanted to more actively respond to a lack of space for Black women to practice in her area, "It wasn't until I realized the change that the teacher training was making within myself that I was like, 'I need to teach the community.' It wasn't until I realized every day I went to my teacher training, there were no melanated people in the class. In yoga, you don't see us ... and we feel automatically like we can't do this." In early February 2021, Lasha opened the first Black-owned yoga studio in her city. Lasha gets excited talking about the new space, "My space is meant to pull in [Black women] so that we know this is for us."

Although Lasha has been experiencing the high of opening her studio, things at home were a struggle for a time, "When they shut down schools, that was a thousand percent overwhelming. We had five kids in a house and they had three devices. [The school] sent one computer home. We had two iPads. And then they expected our children do the virtual [learning]

as if they were in school.” Lasha felt that the expectations placed on her family by the school were untenable, “I emailed the teachers and said, ‘hey, we’re finished. You can email me the work that you want them to do and I will print it out for them to do it by hand, but they won’t be attending any more Google meetings. I can’t handle it. My babies can’t handle it.” With a more flexible schedule, she encouraged her children to get outside, “Once we got past the virtual learning, everything was beautiful.”

A third, and important, aspect of Lasha and her family’s experience of the pandemic is the violent, anti-Black racism made more visible by the media throughout 2020. She says, “Being at work, it’s predominantly white in my force and they watch the news constantly. So you hear the same thing over and over again. So you have no choice, but to think about it. Sometimes they make responses to things. That’s when you have to use your voice and it’s okay to use your voice. It’s okay to let a white person know, ‘you don’t and you won’t understand because you are white and that’s it.” Lasha credits her yoga practice with helping her breathe through these conversations, but that doesn’t make them any less difficult.

In her closing thoughts Lasha says that she wishes people had more understanding of how the pandemic has affected people mentally. With all the attention on the physical challenges of the disease, Lasha feels the conversation on our emotional well-being is not robust enough.

Analysis and Take-Aways

Though each of these women come from different backgrounds, it is helpful to consider the impact of their stories as a whole. The case studies in the previous section demonstrate the verity of the foundational concepts presented at the beginning of this article. Where hooks refers to the work of caring for one’s family as “humanizing labor” (1984, 133-134), the women’s stories demonstrate the ways they honor the humanity of their children, and, in the process, honor their own. Examples include Autumn taking her kids out into the woods while also bringing them to protests. These activities affirm their needs as people to experience peace and to speak up when their humanity is not being recognized. Lasha making the decision to halt online learning for the emotional health of her family is a choice that honored her family’s capacities in a hectic moment. Her situation highlights the challenges of educational access for Black families during the pandemic. Sharing yoga as an intergenerational practice is one activity that several of the women mentioned (Maria, Stacy, Marsha), and it speaks to their belief in the power of the practice and their desire as parents to pass on skills that their children can use in adulthood. Moreover, many of the women expressed how their yoga practice helps them to show up to their parenting in sensitive ways (Shailey, Maria, Stacy, Merrisa).

In her work, Danielle Fuentes Morgan (2018) says that Black motherhood is marked by ancestral trauma, while Jennifer Nash reminds us that Black motherhood is “a political position ... because of its proximity to death” (2018, 700). This is made most clear in the worry women in this study have for their children in public spaces, most notably those with teenage sons. When Marsha and Stacy discuss the concern for the safety of their sons as they travel through the South, it speaks to the repeated decimation of Black life by people who act out of fear. There is no apolitical way to look at this reality; to be a Black mother is to always be in contention with the legacy of white supremacy. It is also salient to mention that several of the women experienced sickness, hospitalization, or death of family members due to COVID, which can also be attributed to structural racism.

Contention with white supremacy constitutes a large part of the “allostatic load” experienced by Black mothers. When Marsha says she’s “holding space for my whole family,” she’s highlighting the extra emotional labor she and the other women must take on to meet the needs of their families. All but one of the women interviewed for this piece mentioned racism as a major stressor in their lives. No doubt, this stressor contributes to the emergence of challenges like depression, which is mentioned in three of the stories (Shailey, Autumn, Merrisa), and to physical conditions like the Multiple Sclerosis experienced by Stacy. Though one cannot clinically pinpoint the exact origin of a depressive episode or autoimmune disease, the compounding stress of increased family duties, racism, and uncertainty surrounding the pandemic have real emotional and physiological consequences. Because of the prevalence of maternal scrutiny, it is often long after one needs help that one actually stops to receive care. Both Autumn and Stacy reflect this pattern in their interviews. As part of her realization, Stacy specifically expressed her desire for decreased scrutiny by others.

Having access to the tools for self-care can be challenging though because as Lasha says, “you don’t see us” in yoga spaces. We aren’t there. In an attempt to do the work of holding space for each other, Black women have taken it upon themselves to create the kinds of spaces they need. It is notable that five out of the seven women created space for others to learn and practice. As Black women delve more deeply into their yoga practices, teaching becomes a natural step as low representation in yoga spaces persists. Although the creation of safe spaces for Black women is both necessary and a positive aspect of Black women in yoga, one wonders who holds space for those who hold space? For Black mothers whose yoga practice includes activism require moral support to be sustainable.

What can the yoga community do to better support Black mothers and their families? I believe the first step is greater awareness of the struggles that Black women and their families face. Platitudes about the benefits of yoga only go so far when Black people do not know life without the existential threat of harm. To create real and sustainable community structures that include Black women and their families, yoga communities must address their own biases and lack of knowledge about Black culture and the Black experience. There must be opportunities for Black women to show up without their “mask and cape,” as Marsha says, and not be expected to conform to dominant notions of respectability. If non-Black people in the yoga community wish to make space for Black women, they should consider joining them in the social justice realm. Action is yoga, as demonstrated by the epic texts like the Bhagavad Gita that underscore our philosophical understanding of yoga. Finally, there needs to be room for Black families. Childcare, intergenerational classes, and a general acknowledgement that Black women exist both as individuals and as part of interconnected units whose survival is crucial to breaking generational traumas brought on by white supremacy made more apparent by the COVID-19 pandemic are needed.

As Argenal and Bajaj write, “centering Brown bodies as strong, beautiful, and worthy of time and attention ... [is] a small form of resistance that we hope will offer our children a chance to imagine new ways of being and thinking critically in the present and future” (2021, 48). Mothers are an integral part of this work.

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