My RRASC placement was with Ibis Reproductive Health, a research organization that, in their own words, “aims to improve women’s reproductive autonomy, choices, and health worldwide.” Their research covers a large breadth and depth of topics, but has a strong focus on abortion care, contraception, and HIV/STIs- both from a medical perspective (for example, newly developed abortion procedures, contraception options, and HIV/STI treatments) and around issues of accessibility (for example, the impact of the Hyde Amendment and other restrictions on abortion). The organization conducts research in numerous countries, though its three offices are in Cambridge, Massachusetts (their headquarters and where my internship was located), Oakland, California, and Johannesburg, South Africa. Ibis Reproductive Health was my first choice placement, because I wanted to learn more about the research side of reproductive justice and I felt it would round out my past grassroots and congressional internship experiences nicely. Overall, my internship was Ibis was extremely worthwhile, and I certainly learned a lot about the role of research within a reproductive justice framework.

During the course of my internship, I had three large tasks to complete: the first one was to create a newsletter for the Cervical Barrier Enhancement Society (CBAS), a coalition headed up by Ibis that serves as resource on different cervical barriers and new developments. The second one was to transcribe interviews which Kelsey Holt and Kate Grindlay - two of the Ibis staff - which had been conducted with women in the U.S. military who had been deployed overseas. And the third one was translating a study protocol from English into Spanish for an
evaluation of a harm reduction service delivery model currently being implemented in Lima, Peru by the Instituto Peruano de Paternidad Responsible (INPPARES) with whom Ibis has worked closely. Additionally, I had several smaller, short-term tasks- such as creating Excel spreadsheets for Ibis staff to use to track their progress in meeting their organizational goals, updating the website, and organizing the office library. Unfortunately, I was not able to complete as many transcriptions as my supervisors and I would have liked, mainly because I was ill for most of August. But with that exception, I was able to see everything else to its finish.

The CBAS newsletter was the first project I was given to work on during my internship with Ibis. I wrote and organized the newsletter according to the topics Kelsey wanted me to include and created different versions of it- one using Microsoft Publisher and one using Constant Contact. Kelsey warned me that small inconsistencies in spacing and the like can often pop up in Constant Contact that call for a bit more of an effort to solve. Even with my attention to detail, I certainly did run into these flaws when I examined preview versions. I was usually able to solve them on my own eventually, yet there were a few that proved to be more difficult. However, I put off asking for help because I did not want to be a “bother” or appear to be inept. When I finally did ask Kate for advice of what to do, she mentioned there was a tech support number I could call if I was indeed at the point where I had tried every solution I could think of to no avail. I did end up calling the number and received the assistance I needed. In turn, I (re)learned that if I really have made a concerted effort to tackle the problem on my own, nobody is going to think negatively of me. Producing the CBAS newsletter highlights one of the skills and abilities I have developed from my internship- being more comfortable with Microsoft Publisher and Constant Contact as well as juggling multiple projects at once.
During the course of my internship, Kelsey and Kate were starting to conduct interviews with women who were serving in a branch of the U.S. military (or were veterans) and had been deployed overseas. The interviews for Kelsey and Kate’s research project centered on these women’s experiences accessing health care—particularly reproductive health care—while deployed and therefore, identifying potential gaps in health care access within the U.S. military. As new interviews came in, I transcribed them. Even though the research project was not at the point where coding could start, I learned a lot just transcribing them. For example, it was clear to me that the U.S. military does not have a strong sense of how to provide women-centered care nor care to address the alarming rates of sexual assault within its ranks head-on. I suppose it was not surprising that numerous interviewers spoke of how those who reported sexual assault (or knew someone who did) did not have their claims taken seriously and those who did not report it did not do so because of this. I believe a significant area of gaps in reproductive health care and experiences around sexual assault are related to the concept of the “Old boys club” that continues to pervade military culture, despite the growing numbers of women who enlist. Therefore, I learned not only how important cultural change is within the fight for reproductive justice, but also about how certain sectors of the movement envision their larger goals. Certainly imperialism and militarism intersect with reproductive oppression, so addressing these intersectionalities does make a lot of sense. Yet if our goal is reproductive justice for all, shouldn’t that include U.S. military women as well, even if we may have (very legitimate!) misgivings with the military as an institution? Is it possible to both resist imperialism and militarism and address issues of reproductive oppression within the military—such as abortion restrictions under the Hyde Amendment, alarming rates of sexual assault, and difficulties accessing contraception or reproductive health care while enlisted? Considering how the reproductive justice movement has
a focus on building creative coalitions, I am surprised that there is not a whole lot of work being done with advocacy organizations lead by U.S. military women and their allies to tackle these issues.

Even if it became excessively routine at times, transcription was a great example of learning just exactly what goes into producing clinical research. When conducting research, Ibis’ ultimate goal is often to have it published in a peer-reviewed journal or the like. I have to admit I was naïve to just how lengthy the process can be! I had not thought about how it includes, among other steps, designing the investigation, obtaining approval from an institutional review board, receiving funding, submitting the finished product for acceptance to be published in a peer-reviewed journal, and disseminating the results in other venues. A better understanding of this process, as well as the role of research conducted with a reproductive justice framework in mind, is all important knowledge I have developed as a result of my internship with Ibis. When lobbying or engaging in other advocacy work, research findings are commonly used as reasons to convince others to get on board with the social change envisioned- or to convince the individual to join in the advocacy work themselves. It also is one of the many tools that members of the reproductive justice movement often employ in deciding where their priorities should lie. Given my internship in the Washington D.C. office of Congresswoman Tammy Baldwin (a fellow Smithie at that!) last summer, as well as my internship with MassEquality two summers ago (a grassroots organization centered around LGBTQ rights in Massachusetts), I have begun to think about how such research can be used effectively to bring about necessary social change beyond publication in academic forums.

Considering I completed my RRASC internship after completing a semester abroad in Spain, being able to translate the study protocol was a great way to put my improved Spanish
language skills to use. Although this project did not come about until I had asked Kelsey about the different projects she was currently working on. When she mentioned that she had been developing a study protocol evaluating a harm reduction model currently being implemented in Peru for women who elect a medical abortion, I immediately suggested a project of translating the protocol into Spanish. I had been looking for a way to use the Spanish skills I had been able to improve upon while abroad and this was the perfect opportunity! More specifically, it was an opportunity which might not have been realized had I not suggested it. I highly recommend anyone with more developed language skills to try to find a way to put them into use, if desired. And for any future RRASC interns in general, to ask your supervisors (or other staff) about what work they are engaging in and see if you can’t come up with some project suggestions based on the skills you possess and or want to improve from there.

I had some prior experience with translation before, but certainly not a ~20 page, single-spaced study protocol ripe with research methods and reproductive health vocabulary. I strongly believe that translation is an art, often much more difficult than initially expected! As is a common obstacle when translating, Spanish is much more of a precise language than English, and a literal translation may not express the same intent. And not surprisingly, given the content of the protocol, I had to look for potential resources beyond my English-Spanish dictionary and my copy of *501 Spanish Verbs*. In the end, I ended up using bilingual fact sheets and other resources published by the Guttmacher Institute as well as those listed on Ipas’ website. In addition, I used several bilingual forms created by the New York Department of Public Health and several hospitals. Lastly, the WordReference.com forums served as a surprisingly helpful resource, because many of the users who post are experienced translators and/or native speakers. I would say this opportunity to use/develop my Spanish language and translation skills was
another skill I was able to employ during my internship with Ibis. My grasp of reproductive justice-related Spanish vocabulary is now much stronger as well. As someone who would love to engage in reproductive justice work that allows me to use my Spanish, being comfortable with the vocabulary of the movement as expressed in Spanish is particularly important to me.

Overall, interning at Ibis Reproductive Health was a wonderful opportunity and an invaluable experience I am glad I was able to have thanks to CLPP’s RRASC summer internship program. I was able to directly use my Spanish skills (and continue to develop them) from both my Spanish classes over the years and my semester abroad. As a Spanish and government double-major, I was able to use the academic foundations of both of my majors, as my strong background in how policy is made and the specifics of reproductive justice-related policy also came in handy when assisting with Kate and Kelsey’s research project. Additionally, the classes I have taken within Smith College’s Study of Women and Gender department were helpful in understanding the intersectionalities at the heart of reproductive justice. My internship placement very much related to my career goals and objectives. When asked what I want to do with my life, I often say that I want to examine what impact current policy has- particularly on groups who are often marginalized- and how we can ensure it has an impact that truly addresses existing needs and realities with a wider social justice framework in mind. The great thing is that there are many ways to engage in such work and I strongly believe that the original clinical research that Ibis conducts is one of them- one I admit I was not nearly as aware of before my internship with them. I had been thinking about possibly working for a think tank in the past and I do consider Ibis to be a think tank of sorts, so the experience proved to be great exposure. Just as my grassroots and congressional internship experiences have provided me with two very different
yet very relevant experiences, engaging with the research side of advocacy and politics has been beneficial in widening the variety of skills and environments I have been able to engage in.

Not only did I learn about the intersections of reproductive rights and social justice issues through my projects, but also through the brown bag lunches with Ibis staff held every other Wednesday. They included the work the Massachusetts Alliance for Teen Pregnancy is doing (both to prevent teen pregnancy and advocate for young mothers- and why the organization does not believe they are mutually exclusive!) and another Ibis intern’s postgraduate dissertation on sex work in Costa Rica. Tiffany Tai, the other RRASC intern in the Boston area, was able to join us for two of them and it was great to be able to meet her and hear about the work she was doing with the National Network of Abortion Funds. In terms of what I wish I did differently, I wish I had taken the initiative to ask Kelsey about what projects she was currently working on in order to think of new potential projects sooner. I also kept meaning to take up Corinna Yazbek on her reminder to ask individual Ibis staff if they would be willing to participate in an informational interview with me about how they got to where they are, whether they had any advice for me, and the like, but never did. Yet it certainly is not too late to do so even though my internship has ended, and it is something I do intend to do very soon. In the end, I had an excellent experience interning with Ibis Reproductive Health and I would recommend it as a placement to other interns who are looking to engage in the research side of reproductive justice.