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Belly Woman: Birth, Blood & Ebola: The Untold Story

By Benjamin Black, London, Neem Tree Press, 2024, 368 pp., ISBN: 978-1911107576

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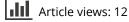
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BOOK REVIEW

Belly Woman: Birth, Blood & Ebola: The Untold Story by Benjamin Black, London, Neem Tree Press, 2024, 368 pp., ISBN: 978-1911107576

A moving and deeply personal account of Benjamin Black's time working as an obstetrician/ gynecologist with Médecins sans Frontières (MSF), or Doctors Without Borders, during the 2014-2015 West African Ebola outbreak, *Belly Woman* paints a picture of impossible choices and the struggle for maternal health in unprecedented circumstances. Despite, or perhaps *because* of, my prior extensive experience working on a busy maternity ward in a peripheral, rural region of Tanzania, Black's account of even the everyday obstetric emergencies he faced in Sierra Leone was chilling. I could picture the women in the throes of eclamptic seizures or fighting to hang on to consciousness as they hemorrhaged after giving birth. I read most of the book with my 7-month-old baby asleep next to me during naptimes and after he went to bed, feeling never more grateful for the access to care I had during my pregnancy and immediate postpartum period.

Due to years of conflict, Sierra Leone has long had one of the worst maternal mortality ratios in the world; the Ebola epidemic set the country back, erasing small gains the country had started to make. Black describes the impending epidemic, bringing the reader along with him as confirmed Ebola cases creep closer and closer to his location in Gondama, Sierra Leone. When the hospital he is working at receives the first pregnant patient with suspicious symptoms, coming from an area of known Ebola infections, the hospital staff members are faced with critical decisions that have implications for the pregnant woman's life and that of her baby, as well as for the healthcare workers caring for her. The wrong call could expose everyone to copious amounts of Ebola-infected bodily fluids. With little information about Ebola during pregnancy, the infectious nature of the placenta, breastmilk or amniotic fluid, or the baby's infectious status, healthcare providers were working blind for much of the epidemic. Black describes the excruciating process of trying to weigh choices for the safety and survival of all against the backdrop of an epidemic that resulted in many infected healthcare workers.

While MSF has long been criticized for its apolitical stance and for its emergency only operations, Black demonstrates what the organization excels at—rolling out care with little notice in some of the most inaccessible and dangerous places in the world—as well as what it was never made for—long term operations and systems building. I was left thinking MSF needs to be operating in the space it is but couldn't help but feel Black's frustration at the insufficiency of pulling up stakes and abandoning local patients and colleagues when a 'mission' is over. Likewise, Black provides some insight into complicated relations between expat MSF staff and locally hired MSF healthcare workers. This dynamic, however, was not thoroughly explored, likely because Black chose to concentrate on other important elements of his experience.

For medical anthropologists, Black's personal account offers insight into many pervasive global health challenges, not just those related to maternal health or Ebola. Black starts the work of critical analysis of the political economics and systems involved in the inequalities that result in maternal death in places like Sierra Leone and in the spread of Ebola. Weaving his experiences as a physician working in London during the height of the COVID pandemic in 2020 throughout the book also provides fruitful connections between epidemic landscapes and demonstrates how shockingly little we tend to learn from the past. However, it was beyond his remit here to fully engage in analysis of political economics or pervasive inequities undergirding pandemics

more generally. Medical anthropologists have been engaged in analysis of the Ebola epidemic, including Paul Farmer (2020), Sharon Abramowitz (2017 and Abramowitz et al. 2017), Annie Wilkinson (2017), Kelley Sams and Alice Desclaux (2017), as well as several others. However, often in the past, the community setting has been the domain of anthropologists. *Belly Woman* offers an important first-hand perspective from inside the clinical setting where fewer anthropologists tend to venture. Black's account should prompt us to continue our work in these clinical settings, too. Personally, I can envision using this book in classes on global health and critical medical anthropology. The easy to read, personal tone of the book makes it a valuable resource for teaching global health and it could easily be paired with ethnographic articles to prompt readers to engage in critical medical anthropological analyses of the events Black discusses.

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