

Paraphrased Remarks

American Poverty and Gender: Government Control and Neglect of Women Living in Poverty

Cherisse Scott, SisterReach

On February 27, 2018, Cherise Scott participated as a panelist at an event titled American Poverty and Gender: Government Control and Neglect of Women Living in Poverty, hosted by NYU School of Law's Center for Human Rights and Global Justice, CUNY School of Law's Human Rights and Gender Justice Clinic, the UC Berkeley School of Law's Center for Reproductive Rights and Justice, the SIA Legal Team, National Advocates for Pregnant Women, and the Center for Reproductive Rights. Below are her paraphrased remarks in response to questions posed by the moderator, Cynthia Soohoo (CS).

CS: Tennesseans who become pregnant find themselves caught between a variety of harmful, sometimes contradictory policies. Talk to us about some of the challenges a woman of color living in poverty will face when deciding whether to become pregnant, and what SisterReach does to help them?

It is really important to understand the political climate in the state of Tennessee. We have a supermajority Republican legislature. We have mostly southern white evangelical legislators. Even our Democrats, many times depending on the legislator, tend to vote conservatively around public policies that impact vulnerable people. It is also important to understand that we are in the Bible Belt, so even our progressive legislators are Christian and that matters in the way they craft and support public policy.

We saw in 2013 what happened with Amendment One, which changed the Tennessee State Constitution's privacy protection, around abortion meaning that in the event that we lose the protection of Roe, Tennessee women and people with birthing ability would could lose abortion coverage at the state level. Or even the Fetal Assault law of 2014-2016 which placed drug using mothers in prison instead of providing behavioral health access instead speaks to the type of punitive and judgmental climate we are navigating here in the state. The inequities exacerbated by that law in particular placed Black women in greater jeopardy for incarceration for using non opioids like marijuana, though the law aimed to incarcerate opioid using mothers.

Or the fact that Tennessee is an abstinence-based mandated state, but regardless to what we did not already have access to, the Trump administration cut Teen Pregnancy Prevention resources and gutted HIV prevention as well. These type of impacts are being felt across the deep south, which for us are all examples of reproductive oppression.

For example, an undocumented woman in Tennessee cannot access healthcare, but is targeted to receive a LARC upon her post-partum visit to a clinic. This is because women of color are the least supported around our reproductive and sexual health, but our bodies and ability to parent is policed by our conservative legislature and their supporters. HIV criminalization, growing abortion restrictions, voter suppression and economic justice are constant policy fights for us and our partners despite the success of groups like the Fight For \$15 campaigns across the northern states have succeeded, southern states have not seen that same level of progress for vulnerable families.

Because of these types of multiple issues, SisterReach works intentionally from a 3-pronged strategy of education, policy & advocacy and culture change work. Within that culture change focus includes research showing how issues like the fetal assault law has destroyed families in our state. We also have a robust Reproductive Justice & Faith advocacy and education component of our work, educating clergy across the country in order to leverage a more progressive agenda around reproductive rights, reproductive health, and reproductive justice issues.

CS: SisterReach is based in Memphis, but serves women of color across the state of Tennessee, which includes rural and urban settings. What are some of the differences you see between the needs of women living in poverty in rural areas versus those in urban areas?

Some of those issues would be transportation as one of the largest issues. Depending on where you live in Tennessee, even here in Memphis, we have a poor transportation infrastructure just like distance is a challenge in rural areas. Trying to get across town for an appointment in Memphis can be just as challenging as getting to a hospital in a rural area.

But what is really important to consider thinking of rural access disparities, is the closest hospital could be 45 minutes away and there may be no clinic available because that type of medical access infrastructure is unavailable. If a woman is trying to access a safe and legal abortion, only one of the seven abortion clinics we have is closer to a rural area, but that is in East Tennessee, which is very inaccessible for other rural communities throughout the state. Living between Memphis and Nashville could mean being 150 miles from a clinic. Somewhere between Nashville and Knoxville could still pose a transportation disparity.

We saw in the case of Anna Yocca, a white woman living almost 40 minutes from Nashville's Planned Parenthood, self-induced her attempted abortion with a coat hanger, lends us to ask questions like – what would have happened had she had better access to a clinic or better resources for an abortion procedure? She has since taken a plea deal after facing murder and child neglect charges. This should have never been the outcome for a woman who found herself in this type of situation.

That said though, legal counsel access disparities are also a real issue or women living in rural or metropolitan areas who may need counsel who is savvy around repro health legal issues. If you are a young person, transportation is an issue for you across the state, no matter your location. Even Behavioral Health and other medical and social services are limited if available at all among the 97 counties in Tennessee with only Memphis, Nashville, and Chattanooga being the metropolitan areas –

and that's it. Women and even trans women who are navigating intimate partner violence do not have access to housing and safety options needed. Tennessee touches seven other states, some of which come to Tennessee for services, and even with the transportation and access disparities I am highlighting within this question.

CS: How has the shift from a Democratic to a Republican administration affected the issues you are working on, if at all? If the changes in the White House have not affected your work, have there been changes at the state and local level that have?

Well, living in the South means that there really hasn't been a change. We have always been more marginalized in the South. The rest of the country is finally experiencing what we've been living since the beginning of this country's foundation.

CS: What gives you hope right now?

The awareness that our children have. I say that as the parent of a 15-year-old who is an active member of our SisterReach Youth Ambassadors, who is opinionated and navigating puberty during such a traumatizing political climate – he has an analysis that I didn't even realize he had. We talk. We communicate.

Our young people at SR are ready to fight, walk out of school because of gun violence, challenge our legislature because of in-access to CSE, challenge our school board to ensure that all of their peers have access to sex education. They want to change the law on the local level.

What gives me hope are Black women who from the very beginning of even the RJ movement – those 12 black women who came together in 1994 – made sure the experiences and disparities black women faced in America were brought to light and centered during the Clinton Administration's first attempt at healthcare reform, to me is hopeful. I am so excited about so many women running for office. But still being critical about that though there are women running, making sure their politics align with our values.

I am very happy about these things.