

AJPH Podcast— November 2022
Chenjerai Kumanyika's Series: Post Roe US, It's Up To Us To Act Now
Hosted by Brad Kramer

CK Hi, my name is Chenjerai Kumanyika, and I'm an assistant professor at Rutgers University Department of Journalism and Media Studies. I'm excited to introduce this podcast on the topic of abortion policy and its impact on women's reproductive health. The podcast focuses on the research that Professor Dovile Vilda published in the American Journal of Public Health in September 2021 and what her journey to this kind of research teaches us. The piece offers some important history as well as some of the less obvious ways that reproductive policy affects women's overall health. I'm also proud to report that this podcast is produced by one of my former students, Bradley Kramer, for a podcasting class that I've taught in Rutgers University's Department of Journalism and Media Studies. The class focused on how to take urgent issues and research and politics and turn them into compelling, widely accessible audio stories. In the increasingly confusing information environment, we feel it's crucial to make the best research and information as engaging as possible. Both Bradley and I are thankful for the opportunity to share this work with the public health community, and we're eager for your feedback.

[music in background]

This is one of the most historic decisions that have ever been made in the history of the United States. This is unprecedented.

The women affected by this the most need our support more than ever. It's not women like me, honestly; it's other women we're out here for, who don't have the means to travel or, are so scared and alone.

BK June 24th, 2022 was a pivotal day for America. After decades of chipping away at state level abortion protections by conservative politicians and judges, five justices on the Supreme Court of

the United States voted to overturn Roe v. Wade. This decision ended federal protection for women's control over their reproductive rights, and the constitutional right to an abortion no longer exists. I began work on this podcast in September 2021, just three months after the Texas Heartbeat Act was signed into law. That act was being discussed as a dramatic attack on reproductive rights, and I was curious about what it meant, where were things headed. To help elucidate my points, I interviewed Dovile Vilda. She's a researcher who grew up in Lithuania during the Lithuanian Revolution. She came to the US to study how various policies affect infant and maternal mortality. We talked for almost an hour about her background and her research, and I learned how significant the ramifications of rollbacks to reproductive rights truly were. She predicted that abortion access in the US would only become more restricted, and unfortunately, all of her predictions have come true.

DV In terms of reproductive health and reproductive rights, United States is seriously lagging behind a lot of wealthy and high-income countries.

BK After the heat of the Lithuanian Revolution settled, she went on to get countless degrees all throughout Europe, all the while hearing stories about how great America was compared to the chaos of her childhood home.

DV I had a very naive and idealistic view of the United States as the super power where everyone was fulfilling their dreams and living their lives.

BK But when she came to America, she saw people struggling in ways she never could have fathomed.

DV Not everybody can, you know, pursue these American dreams. Only those who are the most privileged, wealthy, white, and with access to resources can actually do that. When I had my conversation with Dovile, I was shocked at what I came to discover. While Lithuanians were

fighting to gain their human rights, some Americans were fighting to take them away from people. Lithuanians died in the fight for independence; Americans died in the fight against abortion.

Dr. David Gunn was shot after getting out of his car as he came to work at a Pensacola abortion clinic.

Dr. Tiller who performs third trimester abortions had been shot twice outside his clinic.

Dr. John Britton and James [Bearing] were cut down with shotgun blasts.

BK I went into my interview with her thinking only about abortions, but Dovile's research and the problems caused by legislation like the heartbeat act and the overturning of Roe v. Wade go way deeper than just abortion. America's history with women's reproductive rights has always been filled with questionable priorities such as these, and the stakes are even higher nowadays. But to truly understand how we got here, we have to back a bit.

[music in background]

BK One of the most important events in the history of US abortion law occurred in 1973, long before Dovile ever began her research. Roe v. Wade, it was another pivotal case in the fight to protect women's reproductive rights. It all began with a Texas woman named Norma McCorvey. The year was 1970, she was pregnant, and she couldn't legally abort her pregnancy under Texas law. Back in those days, abortions were only legal if a woman's life was at risk. So by using the alias, Jane Roe, she and her lawyers brought their case before the Supreme Court and won. In January 1973, the Supreme Court ruled that women were allowed access to safe and legal abortion under the Right to Privacy guaranteed under the 14th amendment in the Constitution.

In a landmark ruling, the Supreme Court today legalized abortions. The majority in cases from Texas and Georgia said that the decision to end the pregnancy during the first three months belongs to the women and her doctor, not the government.

BK The passing of Roe v. Wade caused a shift in reproductive rights discourse that hasn't been closed to this day. There was a group of people who felt like women shouldn't have access to abortions at all. These anti-abortion people didn't see aborting a pregnancy as a public health matter; they saw it as murder, and in their eyes the life of a child who hasn't finished developing in its mother's womb is just as valuable as any other living person.

I want to be part of the people supporting the cause to fight for the unborn who don't have voices, so we are the voices fighting for them here today.

Women do have the right to choose, but I also think that, um, they don't have the right to choose for someone else.

So, this pro-life movement set their sights on the Supreme Court. If they could fill the Supreme Court with pro-life judges, they'd be able to overturn Roe v. Wade, and they spent the rest of the 70s and 80s trying to do just that. Little by little, they filled the Supreme Court with pro-life judges. An organization called the Federalist Society played an important role in this process. Federalist Society judges re-framed abortion and other issues as neutral matters of interpreting the Constitution. As they did, they sprinkled in small constraints here and there that made abortion harder to access. They did things like banning certain abortion techniques and making patients watch sensationalized videos about the dangers of abortion prior to getting one. Their strategy was to slowly chip away at the protections Roe v. Wade offered until they were almost non-existent. And by 2016, America's problem with abortion access grew to a point Dovidia couldn't ignore.

DV It was 2016; Trump was elected as, you know, president; the big question like do we really want to move into Trump's America?

BK Trump's election marked an important moment in the fight against abortion rights. The change from a slow chip-away to a full-scale attack, he vowed to only appoint Supreme Court justices who were a part of the pro-life movement and opposed Roe v. Wade, and this is where things start to escalate.

DV The United States has the highest maternal mortality rates compared to other wealthy and western countries, and it's not only that it's really elevated but it's been increasing over the last, you know, few decades.

BK It's clear that America has a problem with infant and maternal mortality, but why? Dovile Vilda boils it down to two things: wealth inequality and structural racism. These are longstanding issues in America's legacy, and they create a world where safe childbirths can't consistently happen.

DV What I find shocking to this day is that paid maternity leave is not guaranteed, and meanwhile, maternity leave in Lithuanian is two years. We need to implement a set of policies that improve these living conditions for all women.

BK We also need to make sure that everyone in America is getting adequate care during their pregnancy.

DV A disproportionate number of Black women face multiple barriers and accessing quality and affordable reproductive healthcare, and this is not a finding from my own research. This is a very consistent evidence that comes across from any study on maternal and child health.

BK And because of that--

- DV Black women are three to four times more likely to die during childbirth compared to white women.
- BK But all these factors pile up. There's the low quality healthcare and the complete lack of paid maternity leave just to start. When the heartbeat act passed, women in Texas had to worry about the constant risk of lawsuits and arrests just for seeking abortion. These stakes will undoubtedly be higher now, and in states where movement against women's reproductive rights are a cultural force, letting it slip that you're having an abortion will get you endless public shame, only creating more stress and more paranoia. And all these stressors start to weigh on you, and it's not just a general feeling of being exhausted. There's a real scientific term for this. Having all these stressors pile up in every aspect of your life, especially during a difficult process like pregnancy--
- DV They trigger a chain of biological processes known as weathering. Basically, the long-term psychological toll of racism on Black women's bodies means that we have a higher risk of medical complications that threaten their lives and their babies' lives.
- BK Back in November in my first draft of this reporting, I worried that if the public health impact of the abortion bans in Texas wasn't clearly understood and addressed that infant mortality would increase. And since then, it has gotten worse. States like Texas, Arkansas, the Dakotas, and nine other states have abortion bans that were set to go into effect just a month after Roe was overturned. Unfortunately for those states--
- DV What we found was that states that have a higher number of abortion restrictions have higher maternal mortality. The correlation is clear, but it's easy to see why some may not understand. The common stereotype is that women seeking abortion were irresponsible and had a child they didn't plan; but more often than not--

DV Maternal death results from health-related complications that are developed or worsened during pregnancy; so, women with chronic health conditions who are not able to access abortion care, they will be forced to carry unwanted pregnancies to term even if their health and lives are in danger.

BK Not having the option to terminate a pregnancy can be a life or death matter; it's not just about convenience.

DV As [of] we speak now, Florida has proposed almost identical law to Texas; other states, especially in southern and Midwestern regions, they will be implemented similar abortion bans. Many women who suffer life threatening complications of pregnancy will be denied access to abortion.

BK But what if someone is denied abortion and still survives a dangerous pregnancy? Even then, they're not entirely in the clear.

DV Women who are being denied abortion have higher risks of mental health complications; their children have worse developmental outcomes; women tend to stay in unhealthy relationships more often when they are being denied abortion.

BK Getting to interview Dovile Vilda opened my eyes to just how deep this issue surrounding women's reproductive rights truly goes. This is about so much more than just abortion. The choices the Supreme Court and state legislatures make in the future can mean life or death for certain women. This is the time when those who value public health must pressure all branches of government. This will show whether those in power truly value the lives of those affected by these policies or whether the worst practices of our past will define our future. There is no way to sugar coat the impact of what I learned from Dovile, but there are a number of ways for people to fight back. I first want to clarify that abortion won't be impossible to access; but those in

affected states will have a lot more hurdles to climb. FDA-approved abortion pills can help abortion seekers self-manage their abortion, but there will be much more surveillance than there was before. Abortion seekers can also still travel out of state to receive their treatment, but because the entire US will be trying to access abortion from half of the states that haven't banned it, timely access to abortion will be throttled by weeks or even months. Whether or not abortion is legalized, women will still find a way to obtain it. The only thing that will change is the safety. Therefore, the most impactful thing we can do to ensure safe and accessible abortion is to donate money. Local abortion funds, practical support organizations, and independent clinics all need as much support as they can get. [Donationsforabortions.com](https://www.donationsforabortions.com) has a list of funds in every state, and these will help those who need abortions to pay for procedures. [Keepourclinics.org](https://www.Keepourclinics.org) facilitates donations to independent clinics. This will help them stay open or relocate if they have to and will help schedule patients to travel if need be. And, [apiaryps.org](https://www.aparyps.org) will help you find your local practical support clinic which helps abortion seekers with travel and other logistical needs. Sharing accurate information also helps. Websites like [ineedana.com](https://www.ineedana.com) and [abortionfinder.org](https://www.abortionfinder.org) can help find verified providers. [Reprolegaldefensefund.org](https://www.Reprolegaldefensefund.org) helps cover bail funds for those self-managing their abortions, should they be pursued by prosecutors or the police, and [plancpills.org](https://www.plancpills.org) helps abortion seekers access abortion pills. It can be easy to despair during times like this and assume that there's nothing that can be done, but it's important that all those who care about public health support each other, because right now there isn't much we can do in just the short term. We can't overturn the decision the Supreme Court made right away, but what we can do is act on a state level to elect representatives, judges, and prosecutors who care about safe abortion access. And, we must do everything we can right now to ensure

those who need abortion care can access it quickly and safely. It's up to us to act now in order to make sure America's past practices don't define its future.

This podcast was written, produced, hosted, and mixed by me, Brad Kramer, and executive produced by Chenjerai Kumanyika. Special thanks to Dovile Vilda for her research and to Lee Won Burn for providing protest footage. Music in this episode was provided by Blue Dot Sessions. The songs used are Warm Fingers, An Unknown Visitor, and The Caspian Sea by Blue Dot Sessions.