NOTE FROM THE FRONT LINE

Abortion and reflections on racial justice

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ABSTRACT

On June 24, 2022, the Supreme Court of the United States dismantled federal protections for access to abortion, allowing a cascade of state laws that criminalize pregnant people, their healthcare providers, and other supporters. Through a racial justice lens, this article examines abortion rights as a demand for reproductive freedom. Psychotherapists on the frontline, listening to girls’ and women’s stories of sexual trauma, are encouraged to see our work in a historical and political frame.

KEYWORDS: racial justice; reproductive freedom; abortion; psychotherapeutic frame

I’m angry but I’m not hopeless. When I was invited to comment about abortion for this issue of *Psychotherapy and Politics International*, I opted to write about freedom from the perspective of a white woman inspired by Black women.

When offering these comments, I knew it was important to socially locate myself so that my comments could be considered through the identities and privileges I hold. I am a 68-year old, white-identified woman who is a mother, grandmother, daughter, and sister. I am financially secure, have adequate medical insurance, own my New York home, and have the means to provide financial support to my family and others. In 1981, I had an abortion between the births of my first two children because I became pregnant while my husband was incarcerated for a lengthy and indeterminate sentence. I disclose all of this to illustrate how my privileged experience of reproductive choice, that included decisions about birthing

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and abortion, was relatively easy and safe. I am humbled by the stories of Black women and girls who've struggled and fought back.

The freedom of reproductive choice hasn’t been fairly distributed in the United States. The USA has a violent legacy of forced pregnancy produced by racial capitalism and buttressed by the ideology of white supremacy. It’s important to consider the Supreme Court’s Dobbs v. Jackson Women’s Health Organization ruling on June 24, 2022, that overturned Roe v. Wade and the subsequent cascade of states’ rulings that prohibit abortion within this racist legacy. While all women have suffered, Black women and other poor women of color have always suffered disproportionately in comparison to white women. In my comments, I’ll highlight the struggles for reproductive freedom, including the right to abortion, led by Black women. I will explain why it is critical for those of us committed to fight for abortion rights to take leadership from Black women who have led the fight for reproductive justice.

This country has never respected and dignified the bodies and personhood of Black women and other women of color. Beginning in the 17th century, the racial slavery that expanded the slave economy privileged the value of the fetus as a commodity over the human value of the mother’s life. Black women were ‘brought here in chains, and worked like mules, bred like beasts, whipped one day, sold the next, and for 244 years were held in bondage’ (National Council of Negro Women, 1989, p. 2). The brutality and horrors of legally sanctioned rape are a central part of the legacy of reproductive injustices suffered by enslaved women and girls. Partus sequitur ventrem, adopted as law in 1662 in colonial Virginia, enshrined ownership of enslaved women’s children by their enslaver (Higginbotham, 1978; Morgan, 2018). Enslaved women were considered commodities that reproduced commodities of labor. The 1807 federal US Act Prohibiting the Importation of Slaves, rather than offer relief from the horrors of kidnapping, fueled a racist industry of breeding that was built upon the bodies of enslaved women (Johnson, 2013). The violation of Black women’s bodies extended beyond acts of reproduction. Black women have long suffered abuse and neglect from the medical system. It is now well known that Marion Sims, the ‘father of gynecology’ performed gruesome experiments on unanesthetized enslaved women to develop his science (Sartin, 2004). Continual medical experimentation on Black women like Henrietta Lacks (Skloot, 2010) has fueled anger and distrust of the medical industry within Black communities (Mitchell, 2022). In this context, I consider the contemporary anti-abortion movement another manifestation of white supremacy that is geared to violently control the bodies of Black women.

While the history of Black resistance and demands for self-determination is as long as the history of Black oppression, I want to highlight Black feminist organizing during the period preceding and following the Roe v. Wade ruling. In the late 1960s, Black women activists insisted on focusing on reproductive freedom and not merely abortion rights. Described by historian Keeanga-Yamahtta Taylor (2022), ‘Toni Cade Bambara, Frances Beal, Alice Walker, and Barbara Smith, argued that real equality could be achieved only by expanding the parameters of what constituted “reproductive justice” to include the entire context within
which decisions about having or not having children were made’ (para. 11). Reproductive freedom included access to birth control and abortion, and the right to bear children on their own terms. This included resources for childcare, employment, welfare, and other material necessities that help women take care of their children. Reproductive freedom was about equality, not just privacy or choice.

In 1973, the US Supreme Court ruled that the equal protection clause of the Fourteenth Amendment afforded women ‘the right to privacy’ in decisions regarding their own bodies. Essentially, the protection of privacy was a civil right that gave women the authority to decide whether or not to have an abortion (Williams, 2022).

In the 1970s, Black Panther Party chairwoman Elaine Brown promoted a focus on holistic health for women as a human right, moving the platform well beyond the civil right to access abortion as provided by Roe (Farmer, 2022). Reproductive education was critical to the pursuit of self-determination, as the Black Power movement sought to liberate Black bodies from ignorance imposed by the state and protect Black people from further harms by a racist medical (‘healthcare’) system.

In 1986, Melanie Tervalon, a pediatrician and former member of the Third World Women’s Alliance, laid out the framework for reproductive justice as ‘a wide range of issues included under the heading of reproductive rights—right to quality prenatal care, right to bear healthy children, right to protection from sterilization abuse, right to protection from experimental and unnecessary surgery, right to information about sex…and of course, rights to safe and affordable abortions’ (Wilson, 2022, para. 1). This framework continues to inform reproductive justice demands today. It is literally a pro-life framework. Tervalon’s seminal contributions to a framework for cultural humility guides many healthcare professionals, including psychotherapists (Tervalon & Murray-Garcia, 1998).

On June 24, 2022, the US Supreme Court overturned Roe in their decision Dobbs v. Jackson Women’s Health. The ruling removed the federal privacy protections for women to decide what to do with their own bodies. According to the Guttmacher Institute (2022a), without federal regulation, thirteen states had trigger laws that automatically went into effect when federal protections ensured by Roe were eliminated and an estimated thirteen more states are likely to eliminate or restrict access to abortion. As of this writing, the Guttmacher Institute (2022b) has tracked the rapidly changing state laws about abortion (see ‘An Overview of Abortion Laws’).

These are some of the responses from scholars, journalists, writers, and activists whose voices guide and inspire me.

Keeanga-Yamahtta Taylor (2022, para. 6): ‘Overturning Roe doesn’t mean that abortions will end; it means that safe abortions will end.’
Jia Tolentino (2022):
We have entered an era not of unsafe abortion but of widespread state surveillance and criminalization—of pregnant women, certainly, but also of doctors, and pharmacists, and clinic staffers and volunteers and friends and family members, of anyone who comes into meaningful contact with a pregnancy that does not end in a healthy birth. (para. 3)

Jamelle Bouie (2022, para. 19): ‘What happens to the rights of citizens when their bodies become property under the law? When the state assumes control over our bodies, reproductive health, as if we are property.’

Fintan O’Toole (2022) warns that the Dobbs ruling will cause girls and women to suffer. They will reduce female personhood to the same level as that of a zygote. They will spread shame and silence. They will kill some women by terrifying and confusing the doctors who should be treating them. However, they will not change the necessity of abortion in women’s lives. (para. 30)

As mental health providers, we listen to stories of women and girls because they come to us in psychological pain. They bring histories of trauma from rape and incest. They are enveloped in shame that comes from stigma of having been sexually abused. They are frightened and they don’t feel safe. They fear being forced to carry an unwanted pregnancy. They fear that their bodies may betray them if they engage in the pleasure of sex and that the state will punish them.

I’m inspired by Black women who have fought for reproductive freedom. ‘This freedom—to choose and exercise our choices is what we’ve fought and died for’, declared sixteen Black women in their 1989 manifesto for the National Council of Negro Women (p. 2), ‘We Remember: African-American Women are for Reproductive Freedom’.

I invite us all to join Ashley Farmer (2022, para. 9) to ‘follow their example. Stop focusing on one legal decision and start creating a world where all people can safely decide what reproductive freedom means to them.’

REFERENCES


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