Regina Mahone: Welcome to What Else Happened?, a show for people who want to know what stories this week may have slipped under the radar. I'm Regina Mahone.

Kat Jercich: And I'm Kat Jercich and we're the managing editors at rewire.news where we deliver evidence-based journalism for people who are passionate about health, rights, and justice.

Regina Mahone: This week, we'll talk about how charter schools are more racially segregated than other public schools. Wisconsin is in the running for being the first state to drug test food stamp applicants. And Illinois has launched a new program to combat the opioid crisis.

Kat Jercich: And I'll chat with Jasmine Sherman, a clinic defender with ProChoice Charlotte about a recent anti-abortion rally that drew thousands, and why she believes Charlotte has become an epicenter for clinic harassment. Let's get going.

A new AP analysis out on Sunday shows that at charter schools, students of color "study in the most extreme isolation." Although student performance at charter schools varies widely, those at schools with 99% students of color tend to do worse on average in reading and math.

Regina Mahone: The AP quotes Daniel Shulman, a Minnesota civil rights attorney as saying "There is no amount of money you can put into a segregated school that is going to make it equal."

Kat Jercich: Of course, this isn't a huge surprise to many people who have been tracking the issues involved with the growth of school choice all over the country, especially after Betsy "school choice" DeVos took over, that's her new nickname, as the head of the Department of Education. It's important to remember that school choice can take many forms. Regina, you and our listeners have definitely heard me talk about the many problems with Chicago's public school system.

Regina Mahone: Maybe a few times, Kat.

Kat Jercich: Yeah, indeed. It's really frustrating for a whole number of reasons, most of which I won't get into right now, but the most recent news is the city is going to invest millions of dollars into three new magnet schools as part of a Department of Education initiative to desegregate school systems, but what we're seeing in Chicago at least is that black students aren't being selected for enrollment at the top magnet schools in the city. So even though magnet schools are being labeled as a way to make the school system more diverse, they're not always.

Regina Mahone: That's not even getting into private schools, which are whiter than average in most states. In fact, the Southern Education Foundation found last year, 43% of the country's private school students attended schools that were, effectively, entirely white.
Kat Jercich: So much for Brown v Board of Education I guess.

Regina Mahone: Those schools aren't great for vulnerable students in general. A Government Accountability Office study from this week shows that parents of students with disabilities often aren't being informed of their federal rights.

Kat Jercich: I'm not sure of the best solution to protect students here. I'm not an education policy expert and it's all tricky. Many other public schools are segregated, too, although not as badly as charters, but at the end of the day, vulnerable students aren't getting invested in and they're getting left behind, and that will be something I will continue to feel so much rage about.

Regina Mahone: Kat, can you name one of Republican lawmakers' favorite pastimes?

Kat Jercich: I could probably name a few. I don't know.

Regina Mahone: Come on, you've got this.

Kat Jercich: I don't know, like getting in between people and their doctors.

Regina Mahone: Definitely that and passing unconstitutional bills into law for funsies. Anyway, it seems that way. This week, Wisconsin governor Scott Walker is taking home the gold for his support of the bill opponents say is designed to humiliate and degrade food stamp applicants.

Kat Jercich: Wait, is there actually like a medal for that?

Regina Mahone: Maybe there should be. I don't know. In any case, the Republican governor is a longtime supporter of drug testing policies. Just last April, meaning April of 2016, Walker along with 10 other Republican governors signed a letter pleading with Congress to allow the policy through. They sent the letter because the federal government doesn't permit drug testing for food stamps. The government does, however, allow it for welfare applicants.

Kat Jercich: The governor sent their letter two months after one of the dozen or so states that does drug test welfare recipients found their program fell flat. That state, Tennessee, reported that less than 1% of the people applying for welfare tested positive for drugs over an 18-month period. 1%.

Regina Mahone: Yeah, let that sink in, especially since, get this, Kat, Tennessee spent upwards of $23,000 on the testing program during that time period.

Kat Jercich: Right, great. I wonder how many poor families could've benefited from that.

Regina Mahone: If we were talking on Slack, this is where I'd send you the eyes emoji, so many eyes, Kat.
Kat Jercich: So what's next for Wisconsin?

Regina Mahone: Good question. It sounds like the bill is a hop, skip and a jump away from becoming law, which raises the question, will the federal government allow? With this government, anything is possible, but listeners should know that a federal appeals court blocked Florida from implementing a similar law for welfare recipients because that law constituted an unreasonable search. The court ruled that the state had not "demonstrated a more prevalent, unique or different drug problem among welfare applications than in the general population."

Kat Jercich: So just to make sure I'm understanding this, even though the state government probably knows this is unconstitutional on a federal level, they are pushing the policy through anyway?

Regina Mahone: Exactly, and in 2015, the state of Wisconsin filed a lawsuit in hopes of gaining clarity on the issue and if it could proceed with its attack on the poor as advocates described the policy, but that case didn't go anywhere and so, Walker, the determined man that he is, asked then President-elect Donald Trump in December of last year if the policy has his administration's support. The administration hasn't responded, and so the governor is now taking matters into his own hands. I say all of that to say "we'll see," but if Walker gets his way, Wisconsin will become the first state to drug test applicants for food stamps. Way to go?

Thousands of anti-abortion protesters gathered in Charlotte last weekend to march in a loop around A Preferred Women's Health Center, the city's busiest abortion clinic. It wasn't the first anti-abortion rally in Charlotte and it certainly won't be the last, but it was significant for a few reasons. Most notably as Robin Marty reported for Rewire, it showed "exactly what sort of impact a large presence can have outside a clinic."

Jasmine Sherman, a clinic defender with ProChoice Charlotte joins me now to talk more about that demonstration, her work and why she believes Charlotte has become an epicenter for clinic harassment.

Jasmine, how's it going?

Jasmine Sherman: It's going great. How's it going with you?

Regina Mahone: It's going well. Thank you so much for joining us. For starters, for people who may not know or familiar with your work, you are a clinic defender with ProChoice Charlotte and from my understanding, the only black member? What's been your experience as the only consistent defender of color in Charlotte?

Jasmine Sherman: This question is a hard one to answer because I don't want to portray all black women as aggressive and short tempered, but I do happen to be an aggressive and short-tempered black woman. I'm very direct and I've noticed that that type of flavor, as being one of the leaders of PCC or ProChoice Charlotte, does cause some
conflict with some of the older women, white women, or softer feminists that attempt to join the movement or be a part of the group. It makes waves because they're more interested sometimes in not necessarily beating around the bush, but they don't want to just come out and say what they have to say. They want to play politics and I have found that while that does work at times, I've seen more success with just saying, "This is the problem and this is how we need to handle it." It can at times be really amazing to work with people, but it can be a real big point of contention, just different attitudes on how we handle things.

I personally feel that I'm going to continue to be a part of this movement and this group because a lot of the anti-choice protesters are white men and to me, this is a personal civil rights issue. The clinic is in front of a black neighborhood so, the police don't do a good job or not necessarily don't do a good job, but they're focused on keeping black families in that neighborhood in a quiet happy neighborhood, isn't as strong as I would like to be. It's also a lot of the patients are black women or persons of color and so, when we're oppressed or abused, I don't see enough people standing up for us. And so, that's where, until more people take up the slack, I know I personally have to be out there taking up the slack even if that means I'm the only black member.

Regina Mahone: Why do you think Charlotte has become such a hub for anti-abortion activists and activism? You mentioned the clinic, this clinic in particular is in a black neighborhood, and for sure, black neighborhoods have not been strangers to this sort of anti-choice activism. There've been billboards and that sort of thing. I'm not sure if that has anything to do with why Charlotte in particular has become a hub, but I'm curious if you could elaborate on that.

Jasmine Sherman: Charlotte has become an anti-abortion hub for several reasons. Not many people know that North Carolina was one of the first southern states to relax abortion restrictions in the '80s. At the same time, some of the Operation Save America anti-abortion extremists, they relocated to Charlotte or to North Carolina specifically to push back against those new laws. Then they had families, very large families in fact, and right now, we're looking at the second generation of abortion extremists in this area.

A Preferred Women's Health Clinic is specifically targeted because of the location and the size. It's one of the largest independent clinics in the south, but it's positioned at the very end of a cul-de-sac. If you can almost imagine a teardrop, it's at the round part of the tear. It's not a public street so people aren't able to see clearly. Unless you're drawing major attention to it, you can't see their shenanigans. They're pretty much protected to behave and say what they want to say out there.

One of the things that comes to mind when I think about this is there's an anti-choice protester leader, Daniel Parks for Cities4Life and he always says, "We've been out here for 10 years doing this and no one's ever said anything." To me, that's an admission, "I've been breaking the law for 10 years and I'm upset now that you're calling attention to it." So I think that's part of the problem, but I also
think again is because of the neighborhood where this clinic sits, nobody really cares what little kids have to hear, if they can hear it when they're over the decibel limit. Nobody cares that black families don't get the luxury of peace and quiet on a Saturday morning. That's not a big concern and I can guarantee that this type of behavior, these types of actions would not be allowed in a white neighborhood in Charlotte, especially a white neighborhood of means, it would not go down for long like that.

Regina Mahone: What effects do you see protests like the one that happened this past weekend having on access to care, or other areas that you see as problematic?

Jasmine Sherman: It has been clear for anyone volunteering that the protests have an effect on the patient's emotional health. I started as an escort and I would always see women crying, crying when they came in just because they couldn’t deal with people saying the horrible things that they were saying. Because of that, ProChoice Charlotte and the clinic are partnering with UNCC researchers that measure that impact so we’re hoping to get some real data behind that.

As far as the access is concerned, the protesters physically will stop cars and use misleading statements to either scare or confuse the patients. A majority of the patients will figure out what's going on, but if clinic defenders aren't on site to help the patients, they do get turned around or get trapped on those RV buses. If access isn't physically blocked, the manipulation and confusion really block the individual going to the clinic emotionally.

I guess my theory on those parades are, peaceful or not, a parade creates an environment of fear, harassment and shaming, and it's unacceptable for anyone to have to endure that while they're trying to access safe and legal medical services. I always want to know where some of the anti-choice people go to doctor's appointments, because I would love to stand out there and protest and shame and harass them.

Regina Mahone: What are the priorities of clinic defenders moving forward? Are there, for example, ways to defend the clinic that do not involve being physically present?

Jasmine Sherman: PCC, for us, our priority right now is to work with the city and CMPD to clarify and enforce the ordinances that are on the books. We had some forward movements at one time in this area, but anti-choice protesters pushed us back about this and actually are currently suing the city. The city sat both sides down and they said, "These are the rules and regulations going forward about what kind of signs you can have, how you could hold your signs." Both groups were there the same time and the anti-choice protesters got all the same information, a PowerPoint, pictures and images about what we should and shouldn't do, and they still chose to violate the ordinance. The city came through one day and were like, "We’re trying to enforce the ordinance,” and they confiscated signs and a tent, and so now they're being sued.
So it's not going to be easy to get the city to continue enforcement of the law, but we do need equal protection under the law because we're committed to protecting patients whether it's through physically being at the clinic or trying to push proper legislation. We do, right now, we're feeling, especially the new city council members that were sworn in on Monday, we feel support now at the city government level, but the support isn't translating to enforcement by CMPD so that is going to be a major priority. On their part, it seems to be like CMPD has some confusion about how ordinances are interpreted.

For example, in Charlotte, there is a “no solicitation” ordinance. Solicitation does not mean asking for money. It could also mean stopping vehicles that offer services such as ultrasounds or pregnancy counseling, but CMPD doesn't see it that way. They interpret it as just if you're asking for money, that's soliciting. If you're not asking for money, then it's not solicitation, so that's a problem.

Regina Mahone: What other things can people do to help?

Jasmine Sherman: We have an opportunity to apply for sound permits. We need people to help us apply for those permits online. It occurs at midnight Eastern standard time and when we get the permit, it keeps the anti-choice protesters from using amplified sounds to harass patients. We also need donations. We use the money directly for patient care and to buy baffling equipment, uniforms, things to help people recognize that we're not anti-choice protesters, and educational materials and signage. What we mostly, we need people to participate in talking about the issue. We really need to help elevate the story, try to take the stigma and the shame out of abortion. It's a legal procedure and everyone has the right to access it.

Kat Jercich: This week, Republican Illinois governor Bruce Rauner announced the creation of a 24/7 opioid help line to connect people to services. Dr. Maria Burni, who's the acting director of the Illinois Department of Human Services Division of Alcoholism and Substance Abuse, which is a mouthful, says her office receives on average 40 to 100 calls per day from people in the state seeking help.

Regina Mahone: Wow.

Kat Jercich: Yeah, it's a lot. Those calls can only be answered during working hours so people who are in crisis have to just leave a message or send an email, which is really hard for me to believe. This help line is part of a bigger task force created by the Governor and the Department of Public Health. That includes a wider availability of naloxone, which is an overdose reversal drug.

In Illinois as with the rest of the country, the opioid epidemic is devastating. In the state, it's expected to kill almost 2,000 people this year.

Regina Mahone: There's even research showing that 175 people in the United States die every day from drug overdose.

Kat Jercich: Oh, my God.
Regina Mahone: Yeah, and The Times even reported that the epidemic has expanded so much that it’s killing people at a faster rate than the HIV epidemic at its peak, The Times reported.

Kat Jercich: Yeah. I've actually been in a workshop the last couple days about the opioid crisis and it is more deadly in our state than homicides and car accidents, which is just mind blowing to think about. The goal for this task force that they're setting up isn't even to eradicate it. Their big high-in-the-sky goal is to reduce the number of deaths by one-third in the next three years. That's not even that big of an ask I feel like, but it's just so enormous and everyone is being affected from all walks of life.

Regina Mahone: Yeah. I mean it's great to hear the Illinois governor is taking steps to address the crisis, but as we know, the only way to make concrete change is support from the federal government. So I know people across the country and state legislatures are wondering, where is the federal government? As you know, the president called the crisis a public health emergency, which is like the tiniest of baby steps, but money hasn't really followed. And so words aren't helping here. We need action. And he hasn't yet, the federal government hasn't yet, approved new funding for it to help states fight this crisis. So Illinois is doing the best it can under these circumstances, I guess.

Kat Jercich: Right, yeah. I mean this hotline was funded through a federal grant, which raises the question for me, what happens when that funding runs out? It's a 24/7 help line, and apparently, it is bilingual, but I'm wondering, I was talking about this yesterday with some other folks, is it bilingual all the time? How many folks are you employing and what languages are they speaking? Also, what happens if someone calls in crisis and there just aren't just beds available to help them?

Regina Mahone: That too raises a lot of questions for me especially since we know that women of color are more likely to be arrested, put in prison for using drugs while pregnant, just because they're often relying on public health services in a way that other women aren't, white women aren't, and they're more likely to then be reported to the authorities. So, yeah, lots of questions there.

Kat Jercich: Right. Also, if they do make it into care or if anyone does, who's paying for it? If this tax bill goes through, Medicare and Medicaid are going to get cut, which also means that people who are relying on those services aren't going to be able to get care. I'm glad that a help line is starting, but it seems like the tiniest, teeniest step forward in terms of a huge panoply of services that could be provided if the state and federal government are willing to put money into it, which we're not seeing.

Regina Mahone: One other thing I wanted to mention related to the crisis -- as you probably know, last month, the White House Commission on Combating Drug Addiction and the Opioid Crisis released a report. And that was eight months coming, and in that report, they issued something like 50 recommendations on what states and the government need to do in order to help really end this crisis. Since the commission released its report, it's most likely dissolved. It looks like it was supposed to
dissolve within 30 days of the release of the report. So my biggest question is, what's going to happen to those recommendations especially if we're not seeing the federal government prioritize taking action on this crisis versus its other priorities like passing concealed gun legislation?

Kat Jercich: Yeah, I can recommend all day that my landlord fix our heater, but unless he actually does it, that doesn't mean anything. We're still going to be cold.

Regina Mahone: So Kat, what's bringing you joy this week?

Kat Jercich: I saw Lady Bird a couple nights ago, which was ... Have you seen it yet?

Regina Mahone: I have not.

Kat Jercich: I mean it's kind of like your standard like a coming of age movie about a girl who is in her last year of high school at a private Catholic school in Sacramento, which was very consistent with my own experiences as a teen.

Regina Mahone: Baby Kat on screen.

Kat Jercich: Oh, God, parts of it were actually kind of uncomfortable 'cause I'm from Sacramento originally.

Regina Mahone: Oh.

Kat Jercich: Me and the main character both have a lot of love and hate in our hearts for Sacramento so it was kind of funny 'cause she was like, "I'm going to go to school in the East Coast and get away from here," like that's kind of how I was, too. So yeah, Baby Kat had a lot of feelings. And it was pretty familiar and wonderful and it made me a little homesick. Then I had to call my mom after.

Regina Mahone: Did she see the movie?

Kat Jercich: Yes, she did and it made her cry, too. I actually ...

Regina Mahone: Oh, no. Well, it's neat that you both like shared a moment after the movie, right?

Kat Jercich: Yeah. I actually texted her right after in all caps that said, "Lady Bird made me cry," and she just said, "Me, too," period, which is a very mom text so yeah.

Regina Mahone: I can imagine like having an experience, that would be a lot of emotions to go through, seeing your childhood effectively on screen so-

Kat Jercich: Yeah. Actually, my theater teacher's daughter was in it for a minute, which was wild.

Regina Mahone: Whoa.
Kat Jercich: I kept really bothering the person I saw it with because I would poke her and be like, "that's the street near where I grew up," and she'd be like, "Okay." Actually, she was very sweet about it, but I felt like I was being annoying. Anyway, how about you?

Regina Mahone: Well, I feel like the world is a pretty chaotic place right now.

Kat Jercich: What?

Regina Mahone: I think we can agree on that.

Kat Jercich: I feel so, too. (laughs)

Regina Mahone: Breaking news, the world is chaotic. No, the world is chaotic and it's just like you I'm sure, I've spent so many nights just staring at my phone waiting for news to break or reading people's reactions to what's happening and staying on top of things, and it's just been a lot. So one of the things that I've been doing this week is just engaging in some self-care. Not bath tubs or taking long baths. I know that's a thing that people do, but beyond taking long baths, we've been rearranging furniture, which has been really soothing. I highly recommend it 'cause you rearranged furniture, you go to bed, and you wake up and it's like you have a brand new apartment. You're just like, "Oh, everything is so new," and I've been in my apartment for six years so it's been a lot of fun.

Also, just taking care of my annual doctor's appointments, getting those out of the way and I bought some new winter shoes. I'm pretty excited about and so sort of just turning inward amid all the chaos and finding a way to find some calm and that's involved housekeeping stuff.

Kat Jercich: I don't know if I've told you this, but I only have one right angle in my room so I don't know how much furniture rearranging I could do. I love my new apartment, but it's sort of weird. You can't see into the back of it at all because it's kind of labyrinthine and it might be haunted.

Regina Mahone: I'm trying to picture it, but it's not coming to me.

Kat Jercich: I'll take a Facebook live tour of it someday.

Regina Mahone: Please? Oh, that would be great. As long as Venture's in the background crying 'cause without that, why would I do it?

Kat Jercich: Oh, God. Authentic experience, but yeah, I feel you. It's wintertime. It just started snowing here actually as we were recording, which made me really happy so I feel like making your home would be really nice as a great winter activity.

Regina Mahone: I highly recommend it.

Kat Jercich: That's our show for this week. If you liked it, please rate it on Apple podcast and
subscribe wherever you get your podcasts.

Regina Mahone: Thanks again to Jasmine Sherman.

Kat Jercich: You can find more about ProChoice Charlotte by visiting prochoicecharlotte.org.

Regina Mahone: You can follow Rewire @rewire_news and me, @byreginamahone.

Kat Jercich: I'm @kjercich on Twitter.

Regina Mahone: Good luck with the headlines and we'll see you next week on What Else Happened?

What Else Happened? is a Rewire radio production for rewire.news, created and hosted by Regina Mahone and Kat Jercich, the managing editors at Rewire. Nora Hurley is our producer. Marc Faletti is our executive producer and Rewire's editor-in-chief is Jodi Jacobson.