

What Else Happened? 205: A Bold North Carolina Campaign to End Shackling of Pregnant People

- Kat Jercich: 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 Kat Jercich.
- Regina Mahone: I'm Regina Mahone, 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.
- Kat Jercich: This week on What Else Happened, we'll talk about what the Trump Administration is, and isn't, doing to address domestic violence; how rural communities are disproportionately affected by toxic drinking water; and about the Catholic health systems looking to get into the drug business.
- Regina Mahone: And, we'll chat with Omisade Burney-Scott, about a campaign to end the practice of shackling pregnant people in North Carolina prisons.
- Kat Jercich: Let's get going.
- Regina Mahone: At The Guardian this week, Lois Beckett reported on intimate partner violence in a way that I thought added a different perspective to the national conversation.
- Kat Jercich: Domestic violence has been in the news over the last week, thanks to the White House, so what about this Beckett piece caught your attention?
- Regina Mahone: The reporter discussed the issue through the lenses of people working on the front lines to help survivors, and the most vulnerable in our society: undocumented survivors of abuse.
- Kat Jercich: Oh, interesting. I have seen pieces reporting about the ways in which the criminal justice and immigration systems fail undocumented folks who experience intimate partner abuse. So, what about this piece felt different?
- Regina Mahone: I like that it showed how messy this entire situation is. The piece came out before some other things happened, which we'll get in to, but it addressed some questions I had about how traditional service providers are faring under the current administration, and amid a growing movement to call abusers out.
- Kat Jercich: The #MeToo movement?
- Regina Mahone: Yeah. According to the piece, the CEO of the National Domestic Violence Hotline seemed hopeful about the Trump Administration, "Engaging in a new conversation on its policy approach to the issue." Not least of all because the issue is now at its front doorstep.
- Kat Jercich: Well, it has been a dark cloud over his entire presidency, given what, like 20 women have come forward with allegations of sexual misconduct against the President?

Regina Mahone: Right. Then, last week, two White House staffers resigned in the same week amid abuse allegations. In response to mounting pressure, the President said on Wednesday, in pure Trumpian fashion, that he's, "Totally opposed to domestic violence of any kind."

Kat Jercich: This is the same person who Tweeted over the weekend that, "People's lives are being shattered and destroyed by a mere allegation," right?

Regina Mahone: That's the one.

Kat Jercich: Okay, got it. Cool.

Regina Mahone: Yeah, so one quick side note I wanted to bring into the conversation, a day after The Guardian piece came out, the White House released its 2019 budget proposal. That includes a modest increase in funding for programs tackling Violence Against Women. This all has to be taken with a bowl of salt, of course, because nothing happens in a vacuum ... to mix my metaphors.

What I mean by that is, if Trump wants to ramp up immigration enforcement by providing ICE with additional funds in 2019, the situation will only become more dire for undocumented folks experiencing abuse. As we've reported at Rewire, they are less likely to be able to leave their home situation if they or their partner might be at risk for immediate detainment or deportation. Or, as The Guardian piece noted, they might be turned away from family or friends if those folks also are concerned about detainment or deportation.

We haven't even touched on how some people who migrated here are likely experiencing multiple levels of trauma, and mental health crises. Who knows what their journey to the United States might have entailed? But, for women and girls crossing the southern border into this country, the statistics suggest they were assaulted on the way. So, yeah, a small increase in funding for Violence Against Women programs is just that. Small, and likely insignificant for many people experiencing abuse, and that's citizens and non-citizens alike.

Kat Jercich: For undocumented women in particular, the National Domestic Violence Hotline CEO, Katie Ray-Jones, told The Guardian that abusers are now threatening things like, "I am going to get you deported if you call the police," or, "I am not going to help you get your visa now."

Regina Mahone: Do you think Trump is also opposed to this kind of domestic violence?

Kat Jercich: Nope, I do not. So, about the Hotline?

Regina Mahone: Yeah, so I appreciated how Beckett, the author of The Guardian piece broke down how, if at all, the people running the Hotline can help callers like the people Ray-Jones describes.

Kat Jercich: How can they help them?

Regina Mahone: Becca reported that the organization may be seeing higher rates of burnout because at times advocates are at a loss for how they can help folks, especially those who aren't able to go to law enforcement. And not only undocumented women may fear calling police on their spouse. As we've reported, people of color disproportionately experience police violence and mass incarceration.

So, it's not difficult for Rewire readers to see how folks might want to wait to call the police on their partner, if they do at all. In those situations, and if the caller is unable to get into a full shelter, the Hotline staff has to talk the person through how they might survive another night or several nights with their abuser.

Kat Jercich: This is a horrifying time for so many people.

Regina Mahone: It is, and that's what The Guardian piece showed in clear detail. From my vantage point, until the Trump Administration sees the issue of intimate partner abuse, police violence and immigration as linked, we can anticipate little progress, despite what his budget proposal suggests. Actions speak louder than words, and in this case, Trump has defended accusers more times than he sought to create actual change for survivors of assault. All survivors of assault.

Kat Jercich: Again, I can't help but think about the 20 women who accused the President of sexual assault or misconduct.

Regina Mahone: #MeToo.

Kat Jercich: Leading medical organizations say the shackling of people before, during and after they give birth is dangerous to both the pregnant person and the fetus. Still, it's an upsettingly common practice in prisons all over the United States. Some people in prison are even chained directly to their hospital beds before contractions.

In North Carolina, a coalition of organizations led by the Reproductive Justice Organization, SisterSong, stepped up to end the practice in state prisons and the Department of Public Safety took note. SisterSong's Omisade Burney-Scott joined me to talk about the campaign, and her hope for the next steps around the country.

Thank you so much for being on with me today.

Omesha Scott: I'm glad to be here. Thanks for asking. I'm excited for this conversation.

Kat Jercich: Yeah, me too. So, let's just get started. Given that people of color are more likely to have diverse interactions with police and disproportionately represented in the prison system, how does this issue prison shackling make things even more dangerous for people from vulnerable communities?

Omesha Scott: I think when people don't understand the over-representation of people from communities of color--poor people, queer folk, folk who have mental health issues, and things of the like—in mass incarceration, they don't think about how they're going to be impacted by mass incarceration at all levels. One of the things that absolutely is not clear to people is what happens when a person comes into the system, and they're pregnant.

If they come into the system and they're pregnant, what type of care are they receiving? What does that look like? What does prenatal care look like while they're incarcerated? What does their labor and delivery look like? What does post-natal care look like? Where are their opportunities for lactation, and where are the opportunities for unification with their child?

These are all of those questions that kind of get lost when you have people who are in cages, that you get dehumanized in so many ways, that it's never even a consideration to think, "Oh, I would not even begin to think that there might people who are pregnant who are incarcerated." And you know that last year in the state of North Carolina, at the state level, there were 81 deliveries of people who were in custody of the state.

Kat Jercich: Oh, my God.

Omesha Scott: Right.

Kat Jercich: So, what did those deliveries typically look like?

Omesha Scott: That's another question that I actually don't know the answer to, which is why when we received information from one of our partners -- SisterSong is currently working on an anti-shackling campaign, and we are also a member of a Perinatal Care and Incarceration working group. One of the partners of that working group reached out to the group to say that there were two incidents of shackling that had occurred in January.

Kat Jercich: Oh, my God.

Omesha Scott: These were people who are pregnant, who are in custody at the women's prison. On these two separate incidents, the medical personnel asked the correctional officer who was there, I guess in their custody responsibility with this person, to remove the shackle. In both instances, they were told no.

Kat Jercich: Oh, my God. So, the medical personnel said the shackling was dangerous, and it didn't matter.

Omesha Scott: The medical personnel said the shackling is dangerous. The medical personnel said that, "Based on our understanding of the policy as it reads," which is very ambiguous and left clearly to interpretation, in North Carolina right now, said that "Once a person is in active labor, that they could be unshackled." So, they were challenged by the correctional officer over what actually constitutes active

labor, though the correctional officer is not a medical professional, and when it got to the point we were like, "We should probably speak to someone who is in charge at the state level," so they reached out to personnel there to say, "We have a situation. Can you all talk your correctional officer and have them remove the shackle." They said, "Let me get back to you," and then they called back and they said, "No, actually we define active labor as pushing."

Kat Jercich: Wow.

Omesha Scott: Right. So, both these instances that happened in January, we had people who were pregnant and in labor, who were not going to be allowed to be unshackled from the bed. It was risk shackle, hand shackle, while they were in active labor. So, you know that meant that they likely were not going to be able to receive an epidural, because when you receive an epidural, you have to be in a certain position to receive medication.

That also means that if that person ... which means that they weren't going to be able to alleviate pain. I cannot drive that home enough. Labor in and of itself is a very painful experience, and to not be able to alleviate that pain because you're shackled to the bed and you can't receive an epidural, that's one aspect. So, we decided as a coalition that we would write a letter to Secretary Hooks, who is responsible for the Department of Public Safety in North Carolina, and other Department of Public Safety personnel, to express our concern.

And, to also kind of share with them, if they were not aware, that there are people who are working across the country to pass laws that prohibit shackling of people who are in child birth at hospitals and prisons, and making it clear that this practice should be halted at all levels. We wanted to give them information from organizations like the American Congress of Obstetricians and Gynecologists, and the American Medical Association, and say, "Okay, if that's what you need, let's do that as well. Let's be very, very clear."

Kat Jercich: Because that information is that shackling is dangerous for both the pregnant person and the fetus, right?

Omesha Scott: Exactly. That's exactly right. ACOG, which the American Congress of Obstetricians and Gynecologists said shackling interferes with the ability for physicians to safely practice medicine. It's demeaning, and it's unnecessary. The American Medical Association, they actually adopted a resolution that supports restrictions on using any restraints of any kind of people who are in labor, or delivering their baby, or recuperating from the delivery. Which, we haven't even begun to talk about the fact that postpartum is the most dangerous time for a person, because of blood clots and embolisms, and things that happen directly postpartum.

And, they immediately re-shackle the person postpartum. So, it's not even a question of, in these particular incidents, "Can you not shackle this person while they're in active labor," our preference actually would be in any of the revisions that now the Department of Public Safety says they're going to do this policy as a

result of finding out information from our coalition about what was happening, that they actually say, "We are not going to shackle people who are incarcerated, who are pregnant during prenatal care, during labor and delivery. Our preference would be postpartum out to eight weeks, and also during lactation."

Kat Jercich: So, now that you've heard back from the Department of Public Safety, do you have an idea of what the next steps are, or when action might be taken?

Omesha Scott: We've reached back out to them again, so I guess a long and short answer is not yet. We do feel encouraged. Their response was what we would like to hear. We received notification from the news media that a spokesperson from the Department said that they're going to revise the policy. They did not respond directly back to the coalition. We have not only sent a letter, but we have also put out this press release. So, we did receive some contact from their assistant counsel, saying that they were going to review the policy, and we've reached back out to them to encourage them to bring us to the table with them.

I think it's important for the folk who are part of our coalition to be at that table, because we have people who themselves are formerly incarcerated, or justice-involved people, we have attorneys, we have medical professionals, we have social workers, we have public health professionals, we have folk who are doing work around prison abolition, and we have folk like SisterSong, who we do work around reproductive justice, and our partners NARAL who do work around reproductive rights and health. So, I think the group that we have would actually lift up things that they may not take into consideration while they're re-crafting or revising this policy.

I'm hoping that we'll hear back from them. We are going to continue to press the issue. And, we're also going to continue to move forward with our campaign. We actually--we're planning to launch our anti-shackling campaign as an organization as SisterSong this year, and we're going to focus on kind of raising awareness with the general population, with the public, public education, public awareness around this practice, and what this means for folk who are pregnant and incarcerated, and making sure there was more transparency around why this policy or this practice needs to end. We know right now there are currently 50 pregnant people in custody at the state level, and I feel like every day this policy is in place means that every day that one of those 50 people are at risk.

Regina Mahone: Kat, when you hear "drinking water crisis," what cities or states come to mind?

Kat Jercich: Well, Flint is the first one that pops into my head. East Chicago, too, because I live here. Mostly big cities where I feel like the infrastructure has been around for a long time.

Regina Mahone: Yeah, you're not alone. Most people think of Flint and other major cities that have been in the spotlight in the past few years, including my hometown, New York City.

Kat Jercich: So, is this segment about the next Flint?

Regina Mahone: Sort of. So, a story I found interesting this week, and I'm thinking others may have missed it, noted how it's often small rural communities that are disproportionately affected by drinking water crises. According to that New Republic article, one study found that more than 50% of the drinking water systems, with health-based violations served 500 people or fewer. This piece goes on to show how the fight in these communities is challenging, most often because of their size.

Not many people are paying attention to them and what's happening. There's also the fact that the industries damaging water systems in these communities are also the backbone of the local economies.

Kat Jercich: What do you mean?

Regina Mahone: Last week you spoke about a spike in Black Lung cases.

Kat Jercich: Right. It's a giant cluster that's researching after the disease was mostly eradicated in the last few decades.

Regina Mahone: Right, and sadly, coal mining is also tied to damaging water supplies. A policy analyst with the National Resource Defense Council told The New Republic that some people are getting their water from abandoned mines.

Kat Jercich: Whoa. Like, the water wells are repurposed mines?

Regina Mahone: Yeah. But, analyst Eric Olsen went on say that it's a truly horrific situation because, "The mines are loaded with heavy metals."

Kat Jercich: Yeah, no kidding. Oh, my God.

Regina Mahone: I know. Or, there's the issue of burning coal waste filling, or leaking into drinking water systems, which just sounds gross.

Kat Jercich: Yeah.

Regina Mahone: In other communities, it's large scale agriculture. We spoke in a previous episode about farm run-off, and how that's a major factor in contaminated drinking water for rural communities. While digging into this issue in preparation for the podcast, I learned that EPA Administrator, Scott Pruitt, hosted a Lead Summit on Thursday. The Administrator actually proposed a war on lead last month during a senate committee testimony. At the time, he said he even brought up the issue of lead-contaminated water to President Trump. Which is interesting, because as the Environmental Working Group noted on its site this week, Trump's 2019 budget proposal includes cuts to the EPA's programs for lead abatement.

Kat Jercich: Funny how that works.

Regina Mahone: I know. The Environmental Working Group released its own report this week based on the latest available federal data, finding hundreds of thousands of families across the country are living with lead-contaminated water. The Working Group also noted that the majority of systems with problematic lead levels, "Serve small populations."

Kat Jercich: This is a major problem for pregnant people and children, as Rewire has reported before. School systems, in particular, have come under fire for exposing children to unsafe lead levels. For rural, low income communities, it's a problem without a clear solution considering there's just not enough money in these communities to cover the cost of repairing damaged water systems.

Regina Mahone: As The New Republic noted, the water board of the county at the center of this piece, Martin County in Kentucky, proposed hiking up water bills to prepare for repairs. As you can guess, that didn't go over well.

Kat Jercich: Yeah, probably not.

Regina Mahone: As the New Republic authors explain, it's not insurmountable funding gaps. But without state or federal assistance, these communities continue to come up short. According to advocates, the President's big infrastructure plan won't solve this issue, either. The bottom line is, this issue isn't going away any time soon. Because it's one of those what we call "Evergreen Topics," it's important to continue the conversation.

Some states are making progress in citing public health goals to tackle the issue more holistically, but far too many aren't. And, as Sarah Jones and Emily Atkins said, "Toxic water may disappear from the headlines, but not from the bodies of local residents."

Kat Jercich: So, this next segment is maybe little bit wonky, but like the toxic water problem, it's an important one to keep an eye on. Three of the country's largest Catholic health systems are working together to establish a generic drug company. Its goal, according to Catholic Health World, will be to stabilize the nation's supply of essential generic medications, and to normalize the prices of the drugs.

Regina Mahone: That is wonky. But, given that the price of generic medication has been skyrocketing over the last years, that sounds okay so far.

Kat Jercich: Right, it always does.

Regina Mahone: Mm-hmm, but these companies' names sound awfully familiar.

Kat Jercich: Funny you should say that, Regina. They jumped out to me, too. Trinity Health, Ascension and SSM have all appeared on Rewire over the last few years. As we've talked about on the podcast before, the reach of the Catholic healthcare system is growing, and that means more people are being subject to Catholic

healthcare rules. In turn, that means patients are being denied essential care: like, abortion care, tubal ligation, trans-health services ...

Regina Mahone: Basically, anything that goes against Catholic doctrine. Although, of course, the way hospitals and healthcare facilities interpret that doctrine changes from facility to facility, which makes things even more confusing for patients.

Kat Jercich: Just to give you a sample of Rewire's reporting on these companies over the years, the ACLU sued Trinity Health for a "Repeated and systematic failure to provide emergency abortions to people suffering pregnancy complications." That was in 2015, but a different ACLU lawsuit showed how a Trinity hospital in Michigan sent a patient in excruciating pain home twice while she was miscarrying. Both of those lawsuits have been dismissed.

Regina Mahone: Ascension was the center of a story from investigative reporter Amy Littlefield about doctors at two Milwaukee hospitals run by the company who are forced to watch their patients get sicker and sicker before they could step in to help them--because of the Catholic rules.

Kat Jercich: Mm-hmm. I'm sure listeners are getting the idea at this point, but SSM is especially interesting to me because it's ventured into pharmacy services in the past. As Amy reported for us in 2016, it began running health clinics in 27 Walgreens stores inside Illinois and Missouri. Advocates were concerned that the clinics would not offer birth control, but according to the Associated Press at the time, SSM said that it would continue to do so for patients that had been prescribed it by their physician.

Regina Mahone: So, that's encouraging.

Kat Jercich: It is, and they weren't clear about whether they referred for abortion care, but it's nice to know that in this one aspect of care, especially where medication is concerned, the Catholic rules don't seem to be having an effect yet.

Regina Mahone: But, you're still concerned.

Kat Jercich: I am. For one thing, this is almost certainly only to target generic medications that the Catholic church approves of, i.e. not birth control, or abortion-inducing medication for that matter. I think it's great that medicines to treat diseases may become less expensive overall, especially for folks that might be experiencing instability with regard to their healthcare coverage. But, I have to point out the fact that birth control coverage is also becoming less stable, especially with Donald Trump continuing to undercut the birth control benefit in the Affordable Care Act.

Those drug prices might rise, too, and companies like these aren't likely to step in. There's more than one way to make healthcare inaccessible, as you and I both know, Regina. If this company starts lowering prices on some drugs, but not others, who's to say other companies won't follow its lead?

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

Kat Jercich: I am seeing Black Panther tonight. I am very excited about it. Yeah, I mean, I just ... the hype about it, I love a lot of the folks involved with it. Chadwick Boseman was like by far the best part of the last Avengers movie, so I am real jazzed. I've been looking forward to this for months, basically.

Regina Mahone: Is there a particular part of the film? Because, there's so much to unpack, right, with this movie and the cultural moment that it's being introduced.

Kat Jercich: Right.

Regina Mahone: Are there particular aspects of the film that you're looking forward to?

Kat Jercich: I mean, there is that. The idea that this is one of the first, if not the first ... it's the first superhero movie starring a black character, and pretty much an entirely black cast, which is amazing. I also love Michael B. Jordan. Did I mention that already?

Regina Mahone: Mm-hmm (affirmative).

Kat Jercich: I'm very excited to see him as the villain, Danai Guirira ... I don't know, I'm not a big Marvel fan, but I do like the movies, and again, I think this is probably going to be the best one period. Ever. So, I'm jazzed. Do you have your tickets? Are you going to see it?

Regina Mahone: I haven't gotten my tickets yet, but I'm definitely going to go see it. It's not a question, for sure. It's just because of life, and things, going on. I haven't looked into when I can go, but it's definitely on my list.

Kat Jercich: I won't spoil you. I will be very silent about it when I come back. I will give you a thumbs up or a thumbs down as to whether I liked it, and say nothing else.

Regina Mahone: Well, you won't spoil anything for me, I think I'll still appreciate seeing the film. I'm also going to be editing a review of the film, so it's all good.

Kat Jercich: I forgot about that. Yeah, nothing gives us spoilers like editing cultural pieces.

Regina Mahone: All the time.

Kat Jercich: What about you? What's bringing you joy?

Regina Mahone: I'm going to visit my parents next week. I leave on Sunday. Both my parents live in Florida in different towns, pretty close to each other. I'm just looking forward to being on vacation, taking a few days off to relax, clear my head. Also, just seeing my parents. It's always delightful to see them, and to get that parental ... I don't know, feeling that you get.

It's hard to put into words, but you know, when you're around your parents sometimes, if you have a good relationship with your parents, it can just remind you that you're an adult and you're responsible for things, but there are still people who have your back, and it's just a wonderful thing.

Kat Jercich: Yeah.

Regina Mahone: Yeah, maybe I'll take my little sister to go see Black Panther, if she hasn't already made plans to see it. So, that's on the list. It's going to be in the mid-80's and sunny.

Kat Jercich: Yeah, I was just going to ask you, right on the beach.

Regina Mahone: My mom, I love her so much, she has a list of things she'd like me to do for her while I'm there. I'm like, I'll do as much as I can, but my priority is to go to the beach, and just ... I don't know, listen to the ocean and the waves crashing. Yeah, so that means, because I'm going to be off next week, or at least out for most of next week, we aren't recording a What Else Happened next week, and we are actually taking a bit of a break.

Kat Jercich: Yeah, we're going on hiatus. But, will you record the sound of the ocean waves for me, personally, and send it to me?

Regina Mahone: Yeah, I can definitely do that. I will send it to you so you can live vicariously through my vacation.

Kat Jercich: Ugh, thank you.

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

Kat Jercich: Thanks again to Omisade Burney-Scott.

Regina Mahone: You can follow SisterSong on Twitter, at SisterSong_WOC.

Kat Jercich: You can follow Rewire @Rewire_news, and me @kjercich.

Regina Mahone: I'm @byreginamahone on Twitter.

Kat Jercich: Good luck with the headlines, and we'll see you in a few weeks on What Else Happened.

Regina Mahone: 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.

