

THE LAURA FLANDERS SHOW

POST DOBBS CRISIS: VISIONS FOR ABORTION ACCESS & RADICAL CARE

LAURA FLANDERS: It's hard to know where to focus. Almost two years after the US Supreme Court ruled in *Dobbs v. Jackson Women's Health*, overturning *Roe*, and paving the way for states to ban abortion outright, 14 states have gone ahead and passed abortion bans with very narrow exceptions. Some impose criminal penalties on providers. And according to a recent tally by *The Guardian* newspaper, it is today the case that 65,000 rape survivors have been unable to obtain an abortion in their state. The impact on people's lives, health, and wellbeing is obviously huge. At the same time, there's been a lot of learning going on and an extraordinary response, especially from Black and Brown reproductive justice activists who are experienced in serving people who were never guaranteed quality healthcare, let alone abortion, even before *Dobbs*. Many of their organizations have been drawing on traditional lineages and frameworks for community care that have much to teach in this moment. To co-host today's conversation about some of those initiatives, I am very happy to welcome someone who knows this field very well. Adaku Utah is an organizer, a strategist, a healer. She's the senior manager of Movement Building Programs at the Building Movement Project and former organizing director at the National Network of Abortion Funds. Adaku, welcome to the program. This is a complicated story to tell.

ADAKU UTAH: Thank you so much, Laura, for inviting me to the show. It's wonderful to get to be here. I'm really excited to have two of my favorite reproductive justice warriors who know exactly where to focus our attention and have been fighting for our bodily sovereignty for many, many years. Chelsea Williams-Diggs, who is the Executive Director at the New York Abortion Access Fund, where I've been a board member, and Elizabeth Estrada, who is the New York Field and Advocacy Manager at the National Latina Institute for Reproductive Justice. So when I look at the abortion landscape, I'm filled with both heartbreak and hope. Literally, as we're speaking right now, cops and courts are increasingly investigating and punishing people who are trying to access abortion care, in addition to folks who are supporting those folks are getting criminalized. And there's also increased lack of access to gender-affirming care. And of course the genocides that are happening in Palestine, Sudan, and Congo are destroying land and bodily autonomy. And simultaneously, with all of that devastation, which is awful, we have folks like all of us who are choosing to show up and say we're gonna be here for our people, we are going to create ecosystems of care that can organize and mobilize our folks to do right by our people and not just let the state betray us. These times are unprecedented, and they're also not new. The folks who are on this call, like myself, who've been organizing for a minute, we've been paying attention and expecting conditions like this for quite some time, and we know what to do. I wanna kick things off to Chelsea to actually lead this conversation, sharing a little bit about how has the landscape of abortion access shifted since *Dobbs*.

CHELSEA WILLIAMS-DIGGS: There were barriers to abortion access long before the Dobbs decision, but of course the Dobbs decision, and the end of Roe, and national protections meant that there were sweeping bans and further restrictions, as well as criminalization, and honestly just fear, stigmatization, further stigmatization, as well as deep confusion. So what we're seeing is people who are in banned and restricted states being forced to leave their state to access care. We're also seeing people who are in protected states still figuring out what is, what isn't legal, where there is, where there isn't access, and of course still experiencing barriers that existed pre-Dobbs, right? It's caused a level of confusion, of chaos, of grief, right, from folks. And it is really showing us the power of community in spite of the failures of our systems, right? When Dobbs was decided and really when the leak came out about a month before the decision, right, we saw in writing, right, we knew that our systems, our government was not going to uphold our bodily autonomy. And we tapped into existing community models to find that power, to find that support.

LAURA FLANDERS: What would you add to that, Elizabeth, from your perch at the National Latina Institute for Reproductive Justice?

ELIZABETH ESTRADA: I think that for us, a community that is not English-speaking, who are immigrants, of mixed status households, there's always been a lack of information, quality, accurate information on sexual and reproductive health education. And now it has really just spiraled into a big web of misinformation, targeted disinformation, targeting non-English speaking communities. I live in the Bronx, so we already face a lack of access to healthcare, whether it be because of affordability or because of the abundance of anti-abortion crisis pregnancy centers, which are already targeting our communities with misinformation around abortion. But we're seeing folks that perhaps would be considered knowledgeable, who do speak English as their first language, are still experiencing a lot of confusion given that there are restrictions or bans popping up every single day. And so when you already are having to navigate a complicated medical industry, I would say even folks who do speak English find it hard to figure out what's covered under their insurance plan, what isn't covered under their insurance plan.

ADAKU UTAH: I just wanna pick on that point that you just offered and laid down right now. The concentration, the intentionality around access is such a key component of reproductive justice and a key distinction between the framework of reproductive health and reproductive rights, all three which are really important strategies for how we transform the conditions that are impacting reproductive oppression right now. And shout out to the 12 Black women who came together in 1994, folks like Toni Bond, Loretta Ross, who coined the term reproductive justice, that recenters our human rights to have children, not have children, and to parent the children that we have in safer and thriving communities, and not just focusing on our ability to reproduce but have really pleasurable and satisfying sexual lives.

CHELSEA WILLIAMS-DIGGS: So if we're only focusing on rights or even legal protections, which are important but are just one part, we know that Black and Brown bodies do not experience injustice in silos, right? We know that every day that we wake up and we experience the world, we are hit with all the things, whether it be, as Elizabeth talks about, immigration status and language access, right? Adaku, as you mentioned, what does it mean to be able-bodied or not. Of course issues of anti-Blackness, of criminalization, of course gender injustice, and so forth, and so forth. So when we think about reproductive justice, we're understanding our bodily autonomy and we're understanding our ability to, as you mentioned, experience sex, experience pleasure, right, to have the rights and protections of our experiences, and to be able to do so without kind of siloing them from the other pieces of our lives.

ADAKU UTAH: You all know that as organizers, in order to win, we have to have this clear assessment and pay attention to what's happening on the right. And the right has had a really long game, very strategic, very, very generational, very well resourced. They've been focusing their attention on the courts on a federal and local level. They've been removing critical race theory so that we're not talking about these multiple sides of oppression and talking about our bodies in expansive ways. They're targeting medication abortion right now and then highly criminalizing bodies in healthcare. So I'm curious, and we can start with you, Elizabeth, what are you seeing coming down the pike around the rights playbook against abortion rights right now?

ELIZABETH ESTRADA: So I often say that the first barrier to access exists in your own home, because if you seek the support of family members and they bombard you with, you know, misinformation that they heard at their church or with a lack of compassion and understanding, then that may completely derail you from accessing the abortion care that you need and deserve. So then let's say you do finally get the support that you need and you make your appointment, you're then confronted with an anti-abortion crisis pregnancy center that might be either in the same building or across the street, from a legitimate clinic, in New York even. Anti-abortion crisis pregnancy centers outnumber legitimate healthcare clinics. And they outnumber legitimate healthcare clinics nationwide. And so we're thinking about non-English speaking communities, but then even rural communities, right? I was talking to a colleague saying that in her community in New York, they don't even have a clinic. It is lack of information, but it is also the continued barrier of affordability. One having a right doesn't mean that they can access that care.

CHELSEA WILLIAMS-DIGGS: I think, for me, when I think about my role as a reproductive justice practitioner in 2024, it's to take the lessons, the frameworks from all these amazing folks and continuing to push it forward to the new and different realities of our time, and constantly going back and saying, you know, we don't always have to create something new, right? The blueprints are often already written for us, right? And that doesn't mean we can't critique, challenge, push further, but there is already so much beautiful groundwork that's been laid. So

when we look at abortion access, as somebody who works for an abortion fund, when we work with folks who are on the calls, who are telling us about their experiences, we understand that we are not saving them by giving them access to abortion. We are providing a concrete need. And we need to understand how and why that need has existed for them.

ELIZABETH ESTRADA: And I think what most comes up for me is the continued effort to draw our point to the intersection of economic justice. And I think that's a lot of the things that we've been lifting up today, right? If you cannot afford to go to your appointment, if you cannot afford to seek the healthcare that you need, if you are a newly arrived immigrant that is waiting five years to access healthcare, because newly arrived immigrants cannot have access to public benefits, they have to wait five years in order to access, that's a matter of life and death. The reason that reproductive justice is intersectional is because the godmothers of reproductive justice knew that their lives were not one single issue.

LAURA FLANDERS: It's all big picture and long-term. And we're for that. We need radical transformation of so much of our lives. But I do want you to give people some tools here. If they want to implement the kind of approach to community care that you're describing, what does that really look like? I mean, at the back of my head, I'm thinking, you know, before there was the legalization of abortion, just the legalization, before there was the legalization with Roe, there were community abortion providers all across this country who were finding ways, whether it's the Jane Project or many others, finding ways to provide care at a community level with as much safety as they possibly could given the condition of the law at that time. Is what you're saying, that in a sense we should never have abandoned that model, that we need to take care back into our communities, into our own hands, with legality, with resources. But is that part of it, that we need to embed care, take more responsibility for the care of those in our community, with all of their needs and intersecting conditions? Is that part of this RJ lesson? Elizabeth.

ELIZABETH ESTRADA: You know, it starts in conversations that we're having. You know, oftentimes at Latina Institute, because we're bilingual, we say "Chisme is revolutionary", right? Gossip is revolutionary once outlawed, you know? Because that is how we get recommendations for a good doctor. It's also how we say, oh, be careful with that provider because they may be harmful in X ways. It is in these community circles where we learn, and hear, and bear witness to people's abortion stories, which are transformational. Once you share your abortion story, I know that it was transformational for my own life to share my abortion story. Once we've built that trust, we become powerful, and we can start with policy advocacy, right? But that is not the only way we have. Here in New York, we've been trying to advocate for the Reproductive Freedom and Equity Fund, you know, initiated by Assembly Member Jessica Gonzalez-Rojas, that aims to fund organizations like the New York Abortion Access Fund, because again, affordability continues to be a barrier. But it's also about the relationships that we've built. And that's what it looks like to be in a culture of care to unlearn the mechanisms that keep us separated through

capitalism, through white supremacy. And it is a return back to traditions of the Black, indigenous, and people of color communities, right? Whether it's chisme, gossip, information sharing, trust building, community building. Hey, I'll let you borrow a hundred dollars so you can get the medication you need. I'll take you, I'll drive you to the appointment, and I'm also gonna drive you when we gotta go to the ballot box.

LAURA FLANDERS: What specifically is your message to people around the country who feel panicked or maybe feel like they're being treated like a kind of political punching bag by the politicians who bandy about the language of abortion rights or abortion access but are not speaking your language? Elizabeth.

ELIZABETH ESTRADA: What I would say to anti-abortion politicians or even those that claim to be champions for reproductive freedom, I would say, say the word abortion. Don't be afraid to say it. And look at the data that is clear that abortion is popular. Ballot after ballot initiative, voters in the United States are reflecting the attitudes and sentiment around abortion access that is across the board, highly popular.

LAURA FLANDERS: Including in the Latinx community?

ELIZABETH ESTRADA: Including in the Latinx community. It's reflective that the majority of Latinx people, Latinx voters, and US citizens support abortion access. And politicians should be aware of that.

LAURA FLANDERS: Chelsea, anything you'd add to that?

CHELSEA WILLIAMS-DIGGS: Yeah, I think it's really important for folks to understand that the worst has already happened, and it happened under a Democratic president, right? Let's be very, very clear. Dobbs happened. Abortion is no longer a nationally protected right. There are people who are struggling to access care today. They can't wait for November. They can't wait for insert whatever date where there might be an election or a ballot initiative. And I'm not saying that those things aren't important, but we can't get wrapped up in this political football. Roe is absolutely the floor, right? And we've been saying that. And reproductive justice practitioners, and founders, and godmothers have been saying that for decades. Roe was never enough. I'm not saying don't vote and I'm not saying that that's not important, but clearly that is not enough. So clearly we need to be building systems outside of government and state. And we need to continue to reimagine what we really need in our communities and connect those to larger issues, right? Our politicians are not gonna create like intersectional policy. Or perhaps they might call it that, but it often fails, right? We though, we living intersectional lives, we being an actual community with each other can connect these dots because the dots are already connected. You actually don't need to connect the dots. We live with the dots, right? And we

have the power to create new models of care. And those can be both outside of traditional nonprofits and within. And I think abortion funds are one entry point, but there are many others. And I actually am curious and look forward to folks creating new pathways and new visions of community care.

ADAKU UTAH: As you think about the future, what's the story that you hope can be told?

ELIZABETH ESTRADA: I love this question. I think that the future looks like a thriving community that can depend on itself, that has the resources it needs to thrive, and that doesn't depend solely on the law and policy to get there, but rather is informed by, you know, the folks that have taught us about abolition, about mutual aid, and about freedom. And I think that's the world that I wanna live in. That's the world that I'm working for by any means.

ADAKU UTAH: Thank you, Elizabeth. How about you, Chelsea?

CHELSEA WILLIAMS-DIGGS: It's a heavy question. I'll say I want the story of this moment to be one of resilience, right? I think, and we've already seen such beautiful resilience from people on the front lines of abortion access and people on the front lines of reproductive justice. And I dream of a world and I want the story of a world to be one that is deeply, unapologetically pro-abortion, right? So yes, I want the story of resilience, of unapologetic abortion advocacy, and of community care to be written. And I think we are writing it.

LAURA FLANDERS: Adaku, coming to you, you've mentioned it, it's been mentioned a couple of times, the attacks on critical race theory, and the attacks on memory, and the attacks on truth and storytelling. And I'd love to hear from you before we close. What's one of the stories, perhaps from the past, from your personal lineage, where you come from, that you want people to hear about how community care could look, could feel, could sound like?

ADAKU UTAH: Oh, I love that question. So I grew up in Lagos, Nigeria, specifically a small rural town called Festac, and come from a long lineage of farmers, and witches, and healers, and Marxist organizers.

LAURA FLANDERS: Good combo.

ADAKU UTAH: You know. But really, what they were up to is creating sovereignty, and really listening for each other, and reaching for each other, and using ritual, and song, and medicine to figure out how to be in integrity with the ancestry that we come from and also the future that's coming. And I actually remember distinctly, when we were coming to this country, we had many circles of our family coming together and folks sitting right in front of us and reminding us that you cannot forget who you're rooted to and who are your people. And so when I think about the

future that we're rewriting, that we don't forget about each other, that we don't forget who we belong to, and that nobody is forgotten in this long fight for freedom that we hope does not have any punishment, whether it's the prisons or it's the stories that we tell ourselves that imprison us, that we actually are able to move freely in free bodies that feel satisfying, in ways that are deeply rooted to who and where we're from, that not only forgets, doesn't forget people, but also doesn't forget the land.

LAURA FLANDERS: You're nodding, Elizabeth, and I suspect you have a version of that same story you wanna share. Do you?

ELIZABETH ESTRADA: I mean, I think Adaku said it beautifully. I think when you hear the term sovereignty, it just reminds me that our movement is rooted in bodily autonomy and self-determination. And a world in which we don't have either is not a world in which we can thrive, and that it goes against the tenets of reproductive justice. So, you know, growing up in Atlanta, we learned to trust Black women, and that's what I'm doing by, you know, being in this movement. And I think that we wouldn't be here if it wasn't for Black women, so, you know, I'm in for the long haul. And it's gonna take us all of us, that is not only Latinas, that is AAPI communities, that's indigenous communities, and that is who paved the way for reproductive justice, and they thought of us.

LAURA FLANDERS: Chelsea, what about you? Is there a lineage, a story, a foremother that you want to recall?

CHELSEA WILLIAMS-DIGGS: Yeah, I wasn't expecting this conversation to go here, so I will call in my grandmother. My grandmother's name is Iluminada Estrella, which means illuminating star. And I look at her as someone who is my feminist origins, right? My grandmother leads our family and has taught all of us to be independent and strong women. And as we were chatting on Monday, she was a little bit frustrated with some things happening in my family. And she said to me, "You know, women must have dignity. You must have your dignity." And I would broaden that to say, people, right, everyone must have dignity, must have their dignity. And I think that is at the heart of what reproductive justice is, right? It's dignity. And all of this work that we do is rooted in the dignity of humanity and the dignity of what we all deserve.

LAURA FLANDERS: Beautiful. Thank you all. Adaku, what a rich conversation. It's really been wonderful to be with you. Elizabeth Estrada, Chelsea Williams-Diggs, thank you for your work. I look forward to the next time we get to do this.

ADAKU UTAH: Thank you so much, Laura, for getting us all together. And thank you, Chelsea and Elizabeth. Grateful to be comrades with you in this lifetime.

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