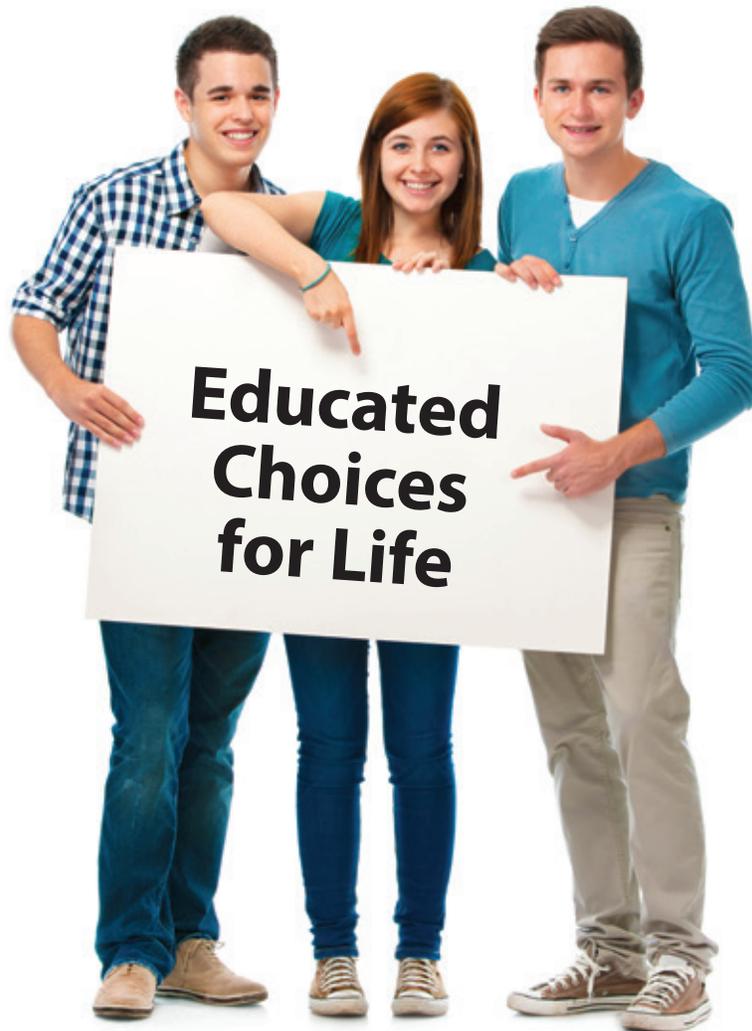




Voices for Choice

Summer 2021
QUARTERLY NEWSLETTER



Citizens for Choice promotes reproductive justice through education, health care access and advocacy. We exist to inform and enable choice.

WE ALL KNOW ROE MADE A HUGE DIFFERENCE—BUT HOW MUCH?

By Lynn Wenzel

According to statistics garnered by sociologist Dr. Constance Shehan of De Paul University, Roe v. Wade greatly improved the lives of generations of women across the U.S. in the final decades of the 20th century and into the 21st, giving previously unknown levels of freedom, autonomy and control over our lives.

How great? In 1970, three years before the Roe decision, the average age at first marriage was just under 21. Twenty-five percent of women high school graduates 18 to 24, were enrolled in college. Only about eight percent of adult women had completed four years of college. *In 1964, I was 19 and three months pregnant when I married. I dropped out of college.*

It wasn't yet common for married women with young children under age six to be employed; only about 37 percent of that group was in the labor force. Crucially, finding satisfactory childcare was a challenge for employed mothers. *My family was far away, and I couldn't afford childcare. So, like 63 Percent of women at that time, I stayed at home to raise the children, worked on the weekends and attended college at night when my husband was home. I graduated in 1976.*

By 1980, the average age at marriage had increased to 22. Thirty percent of women ages 18 to 24 were enrolled in college and 13.6 percent had completed a four-year college degree. 45 percent of married mothers with children were in the labor force. The changes that began with the Roe decision have continued unabated since.

By 2020, women were now marrying for the first time at age 28; about 46 percent of all men and 41 percent of all women had never been married. Some estimates suggest a quarter of today's young adults may never marry. *My daughter was 39 when*

she married after a successful professional life, and she had her first and only child at age 41.

The majority of college students are now women who expect to work as part of their lives. We cannot know exactly what would happen if Roe v. Wade were overturned. But we can see the effect that teen pregnancy has on a woman's education. Thirty percent of all teenage girls who drop out of school cite pregnancy and parenthood as reasons. Only 40 percent of teen mothers finish high school and fewer than two percent finish college by age 30. Education affects the lifetime income of teen mothers. Two-thirds of families started by teens are poor; one in four will depend on welfare within three years of a child's birth. And their children? Only about two-thirds of children born to teen mothers earn a high school diploma compared with 81 percent of their peers who have older parents. *I returned to the work force full time when my youngest was in high school. **The irony of all this is that conservatives want to limit or eliminate financial support to women and children, yet they continue the attempt to force women to bear children by passing several hundred laws since 2011 that make abortions illegal or impossible to get.***

Even before 1973 and *Roe*, American women had legal access to medical abortion, or pills that terminate a pregnancy, and to a wide range of contraceptives, including diaphragms and condoms as well as the birth control pill that came on the market in 1960. *After my second child was born in 1970, I had an IUD inserted. It stayed in place, trouble-free for almost ten years. At the end of that period, my husband had a vasectomy.*

Both then and now, anti-choice activists



are attempting to restrict access to contraceptives. Five years after the pill was introduced, the Supreme Court ruled in *Griswold v. Connecticut* that married couples could not be denied access to contraceptives. In 1972, in *Eisenstadt v. Baird*, this right was extended to unmarried persons. The right fought this too.

Since 1990, the number of abortions annually has continued to decline, reaching its lowest point in 2017; this is due in large part to an overall decline in pregnancies and births. *My daughter and her husband have one child; my son and his wife have two.* Between 2016 and 2019, a record number of states have acted to advance reproductive health rights by introducing legislation to protect abortion access. Several states, including New York and California, now guarantee a woman's right to have an abortion. If Roe v. Wade were struck down, the state laws protecting abortion would stand—14 states as of now.

But this doesn't protect the rights of all women. The US has the highest maternal mortality rate of any developed nation, and states with more restrictive abortion laws already have higher rates of both infant and maternal mortality. People with low incomes - teenagers, people of color, migrants and refugees - are hardest hit by abortion restrictions because it is more difficult for them to pay, travel or take time off work. Black women are three or four times more likely to die in pregnancy or childbirth than white women in the US, and this shameful inequality would likely be entrenched by new laws making pregnancy more dangerous.

Continued on next page...



Voices for Choice

According to Shehan, “it seems unlikely that women’s status will ever go back to where it was before 1973, even if *Roe v. Wade* is struck down. And the U. S. economy’s strong demand for women’s labor all but ensures women cannot be re-consigned into working...in unpaid

domestic roles.” Cold comfort. *Roe v. Wade* greatly improved the lives of generations of women across the U.S. It is imperative that we not return to pre-1970—when abortions were difficult and life-threatening—and that we support any and all action to secure this right in

perpetuity. This includes pushing Congress to advance the **Women’s Health Protection Act of 2019 (S-1645)**, sponsored by Senator Richard Blumenthal (D-CT) which would enshrine the right to an abortion into federal law. It is currently in the Judiciary Committee.

SUPREME COURT: THREAT LEVEL FOR ABORTION RIGHTS RISES

By Elaine Sierra

In jarring news, the U.S. Supreme Court has decided to take up a Mississippi case where a lower court ruled that a law banning abortion, with very limited exceptions, after 15-weeks’ gestation was unconstitutional under the precedent of *Roe v. Wade*. Under *Roe*, women are protected by a constitutional right to have an abortion before a fetus is viable, that is, before it can survive outside the womb. That protection means that the government cannot ban abortions or regulate abortion in ways that might prevent women from exercising their constitutional right to choose to terminate their pregnancies before viability. The medical consensus is that the threshold of viability is 22-24 weeks in gestational age. By accepting the Mississippi case, the Court is signaling that it will revisit *Roe* and its reliance on the viability of the fetus for determining when states may step in and protect fetal life by making abortion illegal, regardless of the choice of the woman bearing the fetus.

The case before the Court is *Jackson Women’s Health Organization v. Dobbs*. The Mississippi 15-week abortion ban at issue ignores the viability standard. The Court states the question it is considering as: “whether all pre-viability prohibitions on elective abortions are unconstitutional.”

According to the Center for Reproductive Rights, which will be the lead advocate opposing the abortion ban...

“Roe is also a part of the fabric of interconnected constitutional rights to make personal decisions beyond abortion, including who to have intimate relationships with, who to marry, and [whether] to use contraception—and the Court cannot just pull out one thread without threatening these other protections.”

If *Roe* is weakened or reversed, half of the states in the country would immediately ban abortion, because they have previously adopted laws banning abortion before

fetal viability that would then go into effect. Other states, like California, have enacted laws that provide their own *Roe*-like protections under their state constitutions, which preclude abortion bans like Mississippi’s, and generally, any pre-viability ban. Thus, whether a woman would have the right to make her own decision about whether to carry a pregnancy to term up to 22-24 weeks may well depend on where she lives and what her state prohibits or allows.

The prospects for a positive decision upholding *Roe* seem slim, given the pronounced conservative tilt of the Court since Justice Amy Coney Barrett replaced revered women’s-rights champion Ruth Bader Ginsburg last year. The conservative-liberal split is now 6-3 (conservative: Roberts, Thomas, Alito, Gorsuch, Kavanaugh and Barrett; liberal: Breyer, Kagan and Sotomayor). A decision in the *Dobbs* case is expected by June of 2022.



Gifts in any amount are always welcome!

Each donation helps us support *the Clinic!*—utilities, rent, supplies—as well as social media outreach, CA public policy such as the Family and Medical Insurance Leave (FAMILY) Act, and community advocacy, among many other activities and services toward women’s reproductive health.

There is a donate button on the website. If you prefer, you may send a check to: Citizens for Choice, P.O. Box 3525, Grass Valley, CA 95945. Please be sure to include your address, email and phone on your check.

The board of Citizens for Choice is grateful for your generosity!



Voices for Choice

FAMILY PLANNING FUNDING UNDER TITLE X—POST-ELECTION

By Elaine Sierra

Citizens for Choice stands behind Title X, the only federal funding program devoted exclusively to family planning. Historically, Title X has been a significant source of funds sustaining Women’s Health Specialists and WHS’s ability to serve its most vulnerable clients, those with the least income. That includes our own Nevada County clinic clients. If you’ve followed our newsletter coverage over the last few years, you know how the program was drastically altered, in fact gutted, by the prior administration, and how we and other advocates have fought back—through administrative action and through the courts—while keeping you, our supporters, informed.

WHS and Planned Parenthood both were forced to drop out of the Title X program, rather than comply with the “gag rule” that banned counseling or referrals for abortion. In fact, after the rule went into effect, about one out of four Title X sites nationwide left the program, dramatically reducing the number of family planning providers. In California, our Title X provider network was drastically reduced from 366 service sites in 38 counties to 238 clinic sites in 20 counties. The number of patients served in our state dropped by more than 80%, from one million to fewer than 200,000. Abortion providers will remain outside the program and will receive

no federal funding for the services that they provide until and unless the program is restored and the gag rule eliminated.

Fortunately, the Department of Health and Human Services has proposed doing just that, by replacing the Trump-era regulations to restore and strengthen Title X. Citizens for Choice submitted comments to HHS on the proposed regulations, stating in part that, “The Proposed Rule is a critical step toward revoking the harmful 2019 Title X regulations and ensuring that Title X family planning patients nationwide can once again access the health information and care they want—when they need it—with dignity and respect.”

Meanwhile, the U.S. Supreme Court dismissed cases challenging the Title X “gag rule,” when informed that the Trump-era rule will remain in effect until the proposed rule is finalized. We expect that that won’t happen until a new program year begins in the spring of 2022.

Thanks for supporting us as we support Title X. We will always stand in support of programs and policies that enable women, men and teens to get the reproductive healthcare that they want and need, including abortion counseling and care at our clinic. Thanks for standing with us.

PROTECTING ACCESS TO TELEHEALTH & PRESERVING PATIENT CHOICE

By Elaine Sierra

Our clinic in Grass Valley and the full-time clinics run by Women’s Health Specialists have increasingly relied on telephonic methods to serve our clients. Expansion into video visits is underway. We believe that these new modalities for providing reproductive healthcare must be supported and sustained, both to increase access to critical services, but also to ensure the financial health of WHS and other providers serving vulnerable, lower-income and rural Californians.

Prior to the COVID-19 public health emergency, many Californians in rural and urban regions and

low-income communities were already struggling to access sexual and reproductive health services. Some living in rural areas faced distance and transportation barriers. Others couldn’t take time off from work or get child care or had confidentiality concerns. These challenges were exacerbated during the current COVID-19 crisis.

A report by the Guttmacher Institute revealed that 45 percent of Latinas, compared to 29 percent of white women, now face difficulties accessing birth control as a result of the

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Nevada County
Citizens for Choice

pandemic. Further, lower-income women were found to be more likely than higher-income women to experience delays or to be unable to get contraceptive care because of the pandemic (36% vs. 31%).

Citizens for Choice and other reproductive health advocates know that telehealth has become a crucial pathway for Californians to access sexual and reproductive health care and other essential health services during the COVID-19 pandemic. Access to telehealth increases access to healthcare. Telephonic care in particular has become a reliable and convenient way for people to

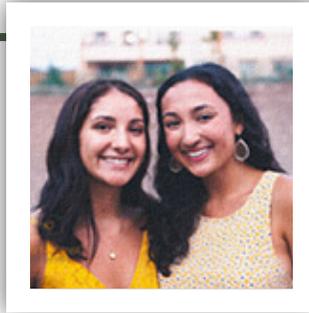
get healthcare services. Surveys conducted by the California Health Care Foundation and Essential Access Health found that most patients, including teens, would likely choose a phone or video visit with their provider over in-person whenever possible. Audio-only telehealth visits will also remain vital for patients who cannot easily get to a provider in person and who lack reliable internet access, as many in our county do.

Therefore, we are supporting legislation in California that seeks to preserve the telehealth flexibilities enacted during the public health emergency and ensure

reasonable compensation rates for services after we emerge out of the COVID-19 crisis (AB 32). We are also working on an alternative track to preserve patient choice after the COVID-19 crisis ends, by including the telehealth provisions as part of the state budget. We want to make expansive telehealth policies permanent, to improve health care outcomes and promote health equity. We are closely watching both the legislative and budget options, which, fortunately, are advancing toward adoption. One way or another, we hope to get this done.

REACHING OUT VIA INSTAGRAM

By Xochitl Husted and Syenna Velasquez



The Citizens for Choice Instagram was an initiative intended to increase awareness about the reproductive health clinic in Grass Valley. Initially, the Instagram started as a way to let members of the community know about what kind of services were available to them. It then grew into a project centered around education regarding various intersections of reproductive health, such as gender, anatomy, birth control, relationships, consent, and more.

Citizens for Choice hopes to answer questions regarding sex and reproductive health through the Instagram account, especially considering much of our follower base is in the 18-25 year old demographic, an age range that is often just starting to explore their sexualities and bodies. The goal of the Instagram fostering an educational and accepting space at the Clinic has also occurred in tandem with other work that the Instagram managers

have completed with members of Citizens for Choice. Those running the Instagram, Syenna Velasquez and Xochitl Husted, spent time working with board member Elaine Sierra and a lawyer from the ACLU on ensuring that the sexual education provided in high schools in Nevada County was medically accurate, comprehensive, and up to state mandate.

This project involved meeting with the District Superintendent, Brett McFadden, where Elaine Sierra, Xochitl Husted, Syenna Velasquez, and ACLU lawyer, Jennifer Chou, made inquiries regarding the sex education curriculum being taught at the local high schools as well as recommendations on potential improvements. In preparation for this meeting, the commonality of teenagers receiving incomprehensive or biased sex education was realized through Xochitl and Syenna's personal experiences and accounts provided by Jennifer Chou.

Through information posted on the Citizens for Choice Instagram, Xochitl Husted and Syenna Velasquez attempt to mitigate this issue by including information that is often stigmatized or excluded from sex education that is taught at home, or in schools. This includes posts regarding sexuality, gender, and abortions, as both Xochitl and Syenna hope to foster an online presence that is both comprehensive and inclusive while embodying the main tenets of the Citizens for Choice organization.

Through their volunteer positions with Citizens for Choice, both Xochitl and Syenna hope to increase awareness and accessibility to sexual and reproductive services and information through the Instagram, and other projects. With both being long term advocates for women's rights and accessible healthcare, working alongside Citizens for Choice has inspired and motivated them to further advocate for related issues while making a local impact.



Voices for Choice



Voices for Choice Public Policy CALIFORNIA LEGISLATION ADVANCING REPRODUCTIVE JUSTICE

Citizens for Choice has had an early big legislative success and other legislative priorities are gaining steam. The success was the March 19, 2021 enactment of emergency paid sick leave during the COVID-19 crisis (AB 84/ SB 95). The law provides funds for up to two weeks of supplemental paid sick leave related to COVID-19 for all workers, private and public, retroactive to January 1, 2021, through September 30, 2021. It covers leave for COVID-19 illness, quarantining, care giving for family members and receiving COVID-19 vaccinations and for resulting illness; it applies to employers of 25 or more.

Priority bills that are nearing passage in one legislative chamber include those that would:

- Make abortion care and contraception more affordable and accessible (SB 245 and SB 523).
- Address the disparate maternal mortality rates of Black, indigenous and other women of color with additional supports and services (SB 65).
- Improve access to early abortion care using telehealth (AB 32 and related budget proposal).
- Provide more resources and improve services to address the ongoing epidemic of sexually transmitted diseases (SB 306).
- Provide compensation to victims of forced sterilizations (AB 1007).
- Increase subsidies for pregnant foster youth (AB 366)

We support these and other proposals that aim to foster freedom of choice and true reproductive justice. We work constantly toward the day when everyone has access to the knowledge and healthcare services needed to maintain sexual and reproductive health, for ourselves and our families. Thanks for your ongoing support of this aspect of what Citizens for Choice does and stands for.

—Elaine Sierra
Public Policy Director

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You help us provide services at *The Clinic!*, education programs and advocacy for us all.



E-scrip Contributions—They Really Help!

Thank you! Contributions may be made to Citizens for Choice through e-scrip at Safeway, Save-Mart, and SPD Market.



Remember to shop at smile.amazon.com. When you #StartWithaSmile, Amazon donates to Nevada County Citizens for Choice.

THE ECONOMICS OF REPRODUCTION:

Using Facts And Figures As Leverage In The Right For Reproductive Justice

The Center on the Economics of Reproductive Health (CERH) at the Institute for Women's Policy Research (IWPR) recently released ground-breaking research showing how costly abortion restrictions are to women, business and the economy. State-level abortion restrictions cost the U. S. economy \$105 billion per year by reducing women's labor force participation and earnings and increasing turnover and time off from work among women 15-44 years old. Without restrictions, the national GDP would be nearly half a percent greater.

IWPR's research accounted for a wide range of abortion restrictions including TRAP laws, procedure bans, public funding restrictions, private insurance coverage limits, provider refusal rules, mandated counseling, waiting periods and required parental consent for minors.

If state-level restrictions were eliminated, women would have higher labor force participation rates and earn more money. An additional 505,000 women aged 15-44 would enter the labor force and earn about \$3 billion annually. Currently employed women would gain \$101.8 billion in higher earnings annually.

Black and Hispanic women suffer the largest economic impact from state-level abortion restrictions amplified by the Hyde Amendment. IWPR's analysis shows that eliminating abortion restrictions would

increase labor force growth of Black women by 1.27 percent and Hispanic women by 1.28 percent, thereby narrowing the wage gap.

States are passing an unprecedented number of abortion restrictions—in the first four months of 2021, state lawmakers introduced 536 abortion restrictions in 46 states and enacted 61 restrictions in 13 states, with devastating financial impacts on women and businesses.

Businesses over the years have spoken out on gay marriage, bathroom bills and voter suppression, but there is dead silence on abortion rights says Linda Greenhouse in her recent New York Times guest essay. She quotes Yale School of Management professor Jeffrey Sonnenfeld: "Some companies waffle, trying not to make enemies. You can't get away with that anymore," he says. "Silence is acquiescence—it's a decision."

IWPR's research is an important tool for activists to persuade businesses to speak out against attacks on their employees' and customers' fundamental rights to bodily autonomy and reproductive control.

Thanks to Carrie N. Baker, J.D., Ph.D., a professor in the programs for the study of women and gender at Smith College and a contributing editor at Ms. Magazine for the material in this article. She may be reached at carriebakerphd.com.

IWPR's analysis estimates that, on a national scale, if all state-level abortion restrictions were eliminated:

- An additional 505,000 women aged 15 to 44 would enter the labor force and earn about \$3.0 billion dollars annually.
- Annual earnings for working women aged 15 to 44 would increase by \$101.8 billion. On average, gains would amount to \$1,610 per capita—with an impact from \$0 in Vermont to \$2,879 in Nebraska.
- National GDP would be nearly 0.5 percent greater—ranging from zero percent in Vermont to over one percent in Missouri.

Source IWPR.org: iwpr-launches-new-tool-in-the-fight-against-reproductive-health-restrictions



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There is a donate button on the website. If you prefer, you may send a check to:
Citizens for Choice, P.O. Box 3525, Grass Valley, CA 95945.
Please be sure to include your address, email and phone on your check.

The board of Citizens for Choice is grateful for your generosity!



Voices for Choice

HELP US EXPAND OUR CLINIC HOURS!

We are thrilled to report that we are working with Women’s Health Specialists to expand our Grass Valley clinic operating hours to 3 or more days a week, with longer clinic hours, as soon as this summer. Recruitment of additional local staff needed to do that is underway.

We also sought additional financial support from our Citizens for Choice family by mail last month. THANKS TO ALL WHO HAVE RESPONDED SO FAR! With their and your support, we can not only continue our essential, time-sensitive healthcare, but we can also serve more of our fellow Nevada Countians. Individual donor support ensures that the clinic endures, providing local, client-focused access to all pregnancy options, contraception and other sexual and reproductive healthcare, from annual exams to STI testing and treatment, from medication abortions to IUD insertions. We meet client needs.

As we mark the clinic’s one-year anniversary at its new location this June, 15 years since it was established, we are extremely proud of its success, and grateful for the generosity of our supporters for enabling all that we have accomplished. We welcome former clients and new clients, serving

ever more young women, men and teens coming to the new clinic or calling for telehealth appointments. While we currently serve more than 70 a month, we strive to reach many more by increasing our clinic hours and by using local staff, especially as COVID restrictions loosen. You can help by spreading the word: tell your friends and neighbors about the clinic location: 984 Plaza Drive, South Suite, in Grass Valley.

You might also be able to help with our recruitment. We are seeking an advanced practice clinician, that is, a physician’s assistant, nurse practitioner or certified nurse midwife, to work about 30 hours a week at the clinic. If you know of a candidate for the position, have the candidate email a letter of interest and resume to Cindy Xiong of Women’s Health Specialists, at cxiong@cawhs.org or apply on Indeed.com.

Everything you do to further our achievements is a gift to our community, one that we, the volunteer board of directors of Citizens for Choice, appreciate more than words can say.



Thank you to participating condom fairy locations throughout Nevada County!

- Asylum Down | Behind Closed Doors Fantasy Boutique | BriarPatch Co-op
- Classic Tattoo | Clock Tower Records | Common Goals | Community Beyond Violence | Cooper’s
- CoRR (Community Recovery Resources) | Crazy Horse Saloon and Grill
- Foggy Mountain Music | FoxHound Espresso & Coffee Roaster
- Gary’s Place Saloon | Goodtimes Boardstore | Mine Shaft Saloon | Nevada Club
- N.S.J.-Sierra Family Medical Clinic | Sierra Care Physicians (PV) | Sierra College Health Center
- Spirit Farmer Acupuncture | The Open Book | Tribal Weaver



Canastas de Informacion :Deseamos expresar nuestro agradecimiento a los siguientes negocios por su apoyo y ser anfitriones de estas canastas de informacion.



EXCITING NEW PROGRAM AND PARTNERSHIP

By Marty DeKay-Bemis

Citizens for Choice (C4C) has partnered with Bright Futures For Youth (BFFY; bffyouth.org) to bring an exciting new program to the youth of Nevada County. C4C, along with BFFY, has received a one year grant from American Association of University Women (Cleo Gibson Educational Project) to expand an existing peer education program to include a focus on reproductive health and sex education.

BFFY (formerly known as The Friendship Club, NEO and SAFE) serves over 200 youth in Nevada County, ranging in ages from 12-18. While The Friendship Club program serves girls only, the NEO and SAFE programs also serve boys. BFFY currently has a 50+ hour Peer Resource Program for members of The Friendship Club to be trained as leaders among their peers. C4C has expertise in reproductive health and is a trusted source for healthcare in a safe, confidential environment. C4C will provide technical support to BFFY with a goal of providing in depth training in sexual and reproductive health as well as skills in delivering effective sex ed presentations to their peers.

Comprehensive sexual health education is mandated by the State of California in middle and high schools. In local schools, a gap remains in the delivery of this critical information, especially during this past year of the pandemic. In response to this gap, C4C and BFFY will hire and train two recent high school graduates (Peer Helpers) to provide peer sex education to the youth involved in the BFFY programs. Peer Helpers will be trained to educate and make presentations to their peers about sexual

and reproductive health, with an emphasis on contraception and HIV/AIDS and STD prevention and treatment.

It is widely accepted that peer education is more effective than adult-led education programs in terms of changing behaviors, attitudes and norms and studies have supported this concept. Teens who have learned from their peers about sexual health are more likely to use protection and to know where they can access local healthcare to support healthy decisions.

When delivering sex education in a peer-to-peer setting, teens use language that is familiar and are able to discuss current topics, such as sexting, that affect those in their age group. The familiarity of

language and common topics helps put teens at ease and they're not only better able to absorb the information presented, but they also feel free to ask questions in a safe environment. Peer Helpers are also available throughout the day to answer more personal questions or get clarification on important information in a one-on-one setting.

While the AAUW grant received is funded for one year only, C4C and BFFY intend to incorporate the peer sex education component into the existing BFFY Peer Helper program and eventually expand to reach BFFY youth throughout all of the programs.



Pictured left to right: Julie Hardin, Executive Director, InConcert Sierra; Bup Greenwood, AAUW; Elizabeth Rawson, Facilitator, the Caregiver Advantage Program; Colleen Bond, Director, Helping Hands Adult Day Program; Deborah York, AAUW; Dena Malakian, Bright Futures for Youth (BFFY); Marty DeKay-Bemis, Citizens for Choice; Elaine Sierra, Director of Public Policy, Citizens for Choice; Ann Shulse, AAUW, Project Leader for the CLEO Project

LOVING BEFORE LOVING

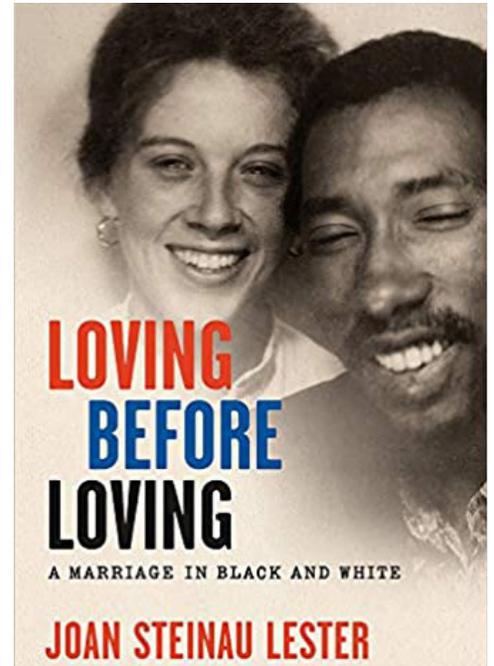
Book Review By Lynn Wenzel

“Primed to throw myself into the winds of the 60s, I flung my arms around my love and said yes. At twenty-two I was ready for love, ready for adventure. And like young lovers everywhere, I believed our passion was stronger than some musty old history,” writes Joan Steinau Lester in her new book, *Loving Before Loving: A Marriage in Black and White*.“ And, indeed, she was ready, but had no idea HOW ready she would need to be to experience and endure the poverty, betrayals and cruelty to come. And yet, amid all the pain and heartbreak, she found transcendent love across forbidden color and gender lines and, finally, in the end, great rewards and peace. (About Loving v. Virginia—Mildred Jeter Loving and Richard Loving, a Black woman and a white man, were married in Washington D. C. but were arrested when they returned to their home in Virginia. In 1958, sentenced to a year in prison, they left the state and filed suit. Though losing in District court, the Lovings eventually appealed to the Supreme Court. On June 12, 1967, nine years after the arrest, the Supreme Court overturned their convictions and struck down anti-miscegenation laws).

Lester has written a gorgeous memoir about being a white woman married to a Black man before it was legal in every state, about being a feminist from the earliest days of the Second Wave, and finally, about loving and marrying a woman. And, in the maelstrom of it all, she longed to be a writer, struggling to find “a room of her own,” in which to own and hone her talent and skill as an essayist, biographer and novelist. (Confession—I have known Joan for 26 years and we have had many warm and supportive discussions about writing and life.)

Lester’s honesty about what an achievement oriented and talented woman’s life was really like when marriage and family intervened shines on the page. One of the leitmotifs throughout the book is her attempt to meld her need for autonomy and self-actualization with the challenge of blurred boundaries and her own need to defer to her husband and, eventually, her children’s needs. The psychic split temporarily induced in her a desire to end her life, though, happily, she didn’t succeed. She also experienced the danger of an illegal abortion, severe poverty, and influxes of rats and cockroaches in the cheapest apartments she and Julius and their children could find. Julius Lester, her beloved, brilliant husband and early devoted race man, musician extraordinaire and author of the ground-breaking, *Look Out, Whitey! Black Power’s Gon’ Get Your Mama!* and Newberry winner of *To Be A Slave* and countless others, espoused equality of the sexes. But he was still a product of the patriarchy, simply assuming that housework and child-rearing would fall to the woman—in this case Lester, who spent practically their entire marriage disputing this and fighting for her own autonomy. “Drowning in loneliness, choked by pain and resentment, [she] wondered how [she] could survive.” She fed her soul with such major works as W.E.B. DuBois’ *The Souls of Black Folk*, Simone de Beauvoir’s *Memoirs of a Dutiful Daughter*, Franz Fanon’s *Black Skin, White Masks*, James Baldwin’s *The Fire Next Time* and Tillie Olsen’s *Silences and Tell Me A Riddle*.

And she not only survived, she thrived, her work appearing often in *USA Today* and *New Directions for Women* while she wrote such culture-changing books as *The Future*



of White Men and Other Diversity Dilemmas, Fire in My Soul: Eleanor Holmes Norton, Black, White, Other and Mama’s Child and birthing, developing and gifting to the world The Equity Institute in Emeryville, California.

Lester’s courageous and intimate memoir is instantly recognizable as our own lives—decades spent fighting for justice while coming to understand that it is only when we know and heal ourselves that we can change the world. “What can we do?” a woman once asked at Lester’s consciousness raising group. “First, tell our stories, understand what we have in common,” another voice chimed in. “It’s what women have always done,” said another... “Yeah, like choice around motherhood...that will lead to action.” The more things change...

RIGHT TO ABORTION MORE ILLUSORY THAN REAL

"It turns out that marriage and the rights of next of kin mean very little when the state takes control of a pregnant woman's body to protect the fetus," writes Michele Goodwin in her book, *Policing the Womb: Invisible Women and the Criminalization of Motherhood*. Goodwin, an Executive Committee member of the American Civil Liberties Union (ACLU), an elected member of the American Law Institute and one of the world's leading authorities on the regulation of medicine, science and biotechnology, warns that legislators increasingly turn to criminalizing women for miscarriages, stillbirths and for threatening the health of their pregnancies. The result sometimes includes women forced to give birth while in leg irons, in solitary confinement or in prison toilets.

Policing the Womb tells a frightening and horrific story about giving birth in the U.S. From escalating attacks on abortion rights to the criminal penalization of women unlucky enough to fall downstairs, or who refuse c-sections, Goodwin shows how prosecutors may abuse laws and infringe on women's rights with the complicity of medical providers who disclose private patient information to law enforcement. Often the women most affected are poor or Black. However, says Goodwin, poor women are simply the canaries in the coal mine—**some legislators now claim that women's constitutional rights equal those of embryos and fetuses.**

Goodwin brings into sharp focus compelling true stories of primarily poor women as she puts into context the risks to all women given today's political climate and the Supreme Court's current makeup. Using extensive research and advocacy, Goodwin shows how the intensifying punishment of pregnant women in the name of fetal protection comes at a devastating cost to human health and freedom. Professor Goodwin has written a definitive examination of the trend of policing pregnant women's bodies. She draws on contemporary narratives as examples that reflect how the creation and establishment of legal rights for fetuses--called "fetal protection laws"—define women's bodies as objects of the state that must be controlled and punished.

Lizz Winstead, Founder and Chief Creative Officer of Abortion Access Front, calls *Policing the Womb* the roadmap we all need right now to navigate the myriad of laws currently being created to claim ownership of women's bodies.

Considering the risks to Roe heightened by the imbalance of political power now on the Supreme Court and with the appointment of Amy Coney Barrett to the seat that once belonged to RBG, the right to reproductive freedom and safety are at major risk. This timely and essential book reveals how the unrestrained efforts to punish and police women's bodies have led to the United States "being the deadliest country in the developed world to be pregnant."

