

The Fight for Reproductive



FREEDOM

A NEWSLETTER FOR STUDENT and COMMUNITY ACTIVISTS

Striking In Solidarity

BY RYN GLUCKMAN

It's that time of year again, time to be mobilizing for the 10th annual National

Young Women's Day of Action! As we prepare to go to press with our fall newsletter, and recognize the ten year anniversary of Day of Action, we are also acknowledging that a year has passed since the tragedy on September 11, 2001. This year has been hard for all of us, especially as activists, as we struggle to figure out how to work for peace in the world.

It is fitting though that the one year anniversary of 9/11 and the ten year anniversary of NYWDA come on each other's heels. Last year we encouraged organizers to hold candlelight vigils, in remembrance of women and girls who have suffered violence. This year, we feel compelled to call upon women to disrupt their daily lives, to leave their workplaces, homes, and schools, to stand in solidarity with women around the world and to take back the sovereignty over our bodies, lives, land, and communities that is so often taken away from us through violence and armed conflict.

In that spirit, we are initiating a Strike for Sovereignty for NYWDA. If we have learned anything from this past year, it is that violence against women is occurring at every level at every corner of the world. Whether it is restriction to reproductive health care in the

military or the effects of sanctions and bombings in the Middle East, we are seeing

how women everywhere are harmed by war.

It is important to see this as a moment of possibility and promise. Let us use this knowledge to make connections between our lives and the lives of women on the other side of the globe. Rather than being divided, this is an opportunity to consider ourselves deeply connected with women around the world, to act in solidarity with them, in all struggles against violence.

At the same time that we are energetically organizing for Day of Action, we are challenging our own understanding of feminism, violence, and who is a part of our communities. Transgender people have been fighting violence for hundreds of years, and despite their powerful lives, courage, and activism, have often been rendered invisible...even to feminists. In this issue of our newsletter we explore the idea of "transfeminism" – an idea whose time has come – and the promises it holds for the reproductive rights movement.

In this issue you will also find an action alert on welfare reform and an announcement for our spring conference. We hope that you enjoy this issue, enjoy your fall, and have a fabulous Day of Action event!

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In solidarity, the Editors

The Fight for Reproductive FREEDOM

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2002 NATIONAL YOUNG WOMEN'S DAY OF ACTION

A Call to Action

The 2002 National Young Women's Day of Action is a call for women to unite in solidarity, across movements, to feel our power and secure our freedom. The mission of the Day of

Action encompasses the need to make connections between oppressions and between movements, recognizing that while any of us are oppressed, all of us are oppressed.

Ten years ago, the first National Young Women's Day of Action was organized to commemorate the death of Rosie Jiménez and to mobilize a grassroots campaign of young women working to empower and educate. Rosie died because she did not have access to a funded, safe and legal abortion. She was the first woman known to have died as a result of the Hyde Amendment, which denies women federal Medicaid funding for abortions. All women, across race, class, and age lines face the same violence that Rosie did. For ten years, young women across the country have organized around issues of reproductive and sexual freedom, racial and economic justice, and to end violence against women.

Such a response has never been more needed. Across the country and the world, violence against women is taking on new shapes and faces. The Hyde Amendment is still in effect, placing restrictions on access to abortion. President George Bush has reinstated the Global Gag Rule, which eliminates all U.S. funding to international family planning programs that even provide information about abortion. Bush has also proposed health insurance plans for fetuses while denying insurance to millions of low income women,

mothers, and children. Upcoming welfare reform legislation also threatens women's rights to food, housing, education, and safety from domestic violence. The rise of militarism since September 11th is also putting women at jeopardy, both internationally and in the U.S. Everyday, women in immi-

social services, food production, medical services and the media. Given this experience, we must unite in the workplace, on the streets, in prisons, at home, across class, race, sexuality, gender, and age to confront the violence and empower ourselves.

STRIKE IN SOLIDARITY! STRIKE FOR SOVEREIGNTY!

On October 24, 2002 women across the country will participate in a strike for sovereignty and solidarity, disrupting their daily lives to demand an end all forms of violence against women and girls. Throughout time and around the world women have disrupted their daily lives to strike for their right to food, equal pay, their safety, their health, their families, and their lives. In a time when women are the victims of war, domestic violence, hate crimes, and access to reproductive healthcare is increasingly under attack, we urge you to participate in the NWYDA and strike out against violence to take back our lives, our safety, our families, our health, our communities....our sovereignty.

grant communities are facing hate crimes, harrasment, deportation, and the disappearance of their husbands, sons, and brothers. President Bush has demonstrated his anti-women, anti-choice policies in numerous ways.

Violence against women occurs in government harassment and intrusion into the lives of immigrants and communities of color, the expansion of the criminal justice system, the new movement to sterilize poor women and women of color. It also happens through the ongoing silence around domestic violence, the continued threat of harassment and physical harm based on sexual orientation and gender identity, and the increasing power that corporations have over national

Last year, women lit candles across the U.S. to stand in solidarity with women around the world who were victims of violence. This year, we call for a strike against this violence. We urge women to disrupt the flow of their everyday lives to demand that this violence end today. ✕

For more information about the National Young Women's Day of Action or to plan a Day of Action event, please contact the Civil Liberties and Public Policy Program at 413.559.5506 or email nywda@hampshire.edu.

URGENT ALERT: Challenge Welfare Reform Now!

This fall, the buzz in the newspapers, television, feminist organizations, Capitol Hill, and in the streets is “welfare reform.” The current welfare program, Temporary Assistance for Needy Families (TANF) will expire in the Fall of 2002. After suffering under a conservative and punitive welfare system for seven years, women across the country are demanding a better answer. So what’s the deal with welfare reform and what can you do about it?

HISTORY

In 1996, President Clinton signed into law the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) which replaced the current welfare program with Temporary Assistance for Needy Families. TANF reflected a conservative political agenda which ended 60 years of guaranteed federal aid to poor families and blamed and punished women, people of color, and immigrants for poverty.

The PRWORA shifted the responsibility of welfare from the federal government to the jurisdiction of individual states. As a result, welfare became an erratic system, its policies varying wildly from state to state. It also moved towards the privatization of welfare, offering incentives to private companies who could streamline welfare systems and make them more cost-effective. The parts of the welfare system that were privatized were less transparent and more susceptible to gender and racial discrimination.¹

It was women, particularly immigrant women and women

of color, who were most affected by PRWORA. Under new TANF legislation, a series of punitive and conservative laws have been implemented that make it all but impossible for women to overcome poverty and, in fact, discourage families who need public assistance from getting it:

FAMILY CAPS

Family caps limit the number of children a woman can have if she is on welfare. Not only is this a violation woman’s right to choose to have or not have children, it puts pressure on women to be sterilized or use risky, long-term contraceptives.

INADEQUATE CHILDCARE

Under TANF, many women were forced into low-pay, unskilled jobs without adequate childcare, a situation which made moving out of poverty nearly impossible.

FAMILY VIOLENCE “OPTION”

The Family Violence Option allows individual states to decide whether they will waive welfare requirements that make it difficult for women and children to escape domestic violence.

MARRIAGE PROMOTION

Under TANF, states receive federal funds as a reward if they reduce out-of-wedlock births and abortions, and implement “abstinence-only” curricula in schools. In addition, at least fourteen states have adopted “marriage promotion” pro-

grams as a part of their welfare system. Such programs promote heterosexual marriage as the solution to poverty. These programs are extremely dangerous to women and girls. Not only do they deny young women the education they need to protect themselves against unintentional pregnancies, STI's and HIV, they also punish single mothers and women who choose to have abortions. A welfare system that promotes heterosexual marriage as the ultimate solution to poverty attempts to legislate women's sexuality and reproductive health and denies the true causes of poverty. Such a system threatens women's safety by coercing them into marriages that may not be based on mutual respect. It also makes invisible same-sex partnerships and single parent families.

NARROW DEFINITION OF WORK

Under TANF, caring for children, literacy education, English as a Second Language, and post-secondary education are excluded from the definition of "work" activities in which welfare recipients can engage.

EXCLUSION OF IMMIGRANTS AND THEIR CHILDREN

The current welfare system denies assistance to undocumented immigrants and only a small percentage of documented immigrants receive welfare, often after a long waiting period. This is a hardship, particularly for children of undocumented immigrants, who may be U.S. citizens, but will not receive welfare because of their parents' non-citizen status. For immigrant women who may not speak English or rely on their husbands for economic support, the welfare system is

What you can do:

The House has already passed the Republican welfare plan, H.R. 4737, which is strongly supported by the Bush Administration. H.R. 4737 increases work requirements, while decreasing the number of countable work activities, and provides only minimal funding for childcare. It also designates \$200 million to go toward marriage promotion programs. H.R. 4737 will make it more difficult for women to attain self-sufficiency, forcing them to choose between inadequate welfare assistance and providing care for their children; and wrongly emphasizing marriage as the key to overcoming poverty.²

You can help make welfare successful for women. Call your Senator and urge them to support welfare legislation that:

- includes education and training as countable work activities,
- increases sustainable support for childcare
- rejects government promotion of marriage
- supports comprehensive, abstinence-plus sex education
- provides immigrants with equal access to assistance

You can get more information and updates about the 2002 welfare reauthorization at www.nowldef.org and www.arc.org.

¹ For a comprehensive account of the effects of the 1996 PRWORA see The False Foundations of Welfare Reform. Prepared by the Applied Research Center. February 2001.

² A more complete analysis of H.R. 4737 can be found at the NOW Legal Defense Fund website: www.nowldef.org.

TRANS-ITIONING FEMINISM:

The Politics of Transgender in the Reproductive Rights Movement

By RYN GLUCKMAN and MINA TRUDEAU

In 1991, transgender* people and transsexuals, Lesbians, Avengers, and gender-variant women are expelled from the Michigan Womyn's Music Festival. Festival organizers cite the “womyn-born womyn only” policy as the reason for their expulsion. Despite over ten years of activism demanding that the festival become trans-inclusive, the policy is still in place today.

At the 2002 From Abortion Rights to Social Justice conference, the first Transgender Issues workshop is given. It is one of the first conferences on reproductive rights to address transgender issues. The workshop is so well attended that participants have to sit out in the hallway.

A “Transfeminism” workshop convenes at the 2002 True Spirit conference. Over 50 participants, most of whom are FTM's and their lovers and allies, talk about redefining definitions of masculinity and rejecting sexism and misogyny as “new men.”

So what's the big deal? What's this thing called transfeminism, and why even address it in the context of reproductive rights? Why aren't transgender folks allowed inside the Michigan Womyn's Music Festival? Why are the participants of a transgender issues workshop at a reproductive rights conference primarily young people? Are transgender issues the next frontier of feminism?

Discussions about transgender issues, gender identity,

debates over women-only spaces, and new theories of masculinity are changing and challenging the way we think about feminism. Transgender issues are increasingly being recognized as reproductive rights issues. The barriers to getting a gynecological exam, an abortion, or any kind of healthcare, when you present a different gender identity, are parallel to those faced by low-income women, women of color, and young women. Transgender people are more likely to be denied healthcare, more likely to be harassed at school and in the workplace, less likely to have access to sexual health education, and less likely to seek legal and social support for fear of backlash. If reproductive rights are the rights to make choices about your body freely, without the threat of violence and with the assurance of access to healthcare and support, then transgender issues are most definitely reproductive rights issues.

Easy enough in theory. But the reality is that the presence of trans folks and the issues that they bring to the table have been hot spots of debate, tension, and conflict for feminists of every gender and age. This is most clearly illustrated in the ten year debate of the “womyn-born womyn only” policy at the Michigan Womyn's Music Festival and the marked absence of the word “transgender” from discussions about reproductive rights.

In theory, feminism has been about the liberation of

women from violence, sexism, and traditional gender roles. First and second wave feminism worked to name the reasons that women were oppressed and what that oppression looked like on a day to day basis. As a way to overcome sexism, unite women, and mobilize a movement, feminists have often united around an assumed common ground: the biological “fact” of their womanhood. Because “womanhood” has so often been taken for granted as a biological fact, and because early feminism in the United States associated the experience of sexism with the “fact” of being a woman, the idea that only women-born women can experience the oppressive effects of sexism and patriarchy has become an assumption that has driven many of our movements. Efforts to create safe spaces to support women in overcoming sexism and throwing off traditional gender roles in their daily life resulted in “women only spaces.”

In the last couple of decades, the assumption that there is a common experience of womanhood, shared by all biological women of the world, has come under much criticism by women of color, women of other countries, lesbian and bisexual women, young women and girls, and working class women. Transgender people and transgender issues are now challenging the assumption that gender is a biological “fact,” questioning the idea of what it means to be a woman, and demanding that their experience of sexism, homophobia, and patriarchy be recognized as part of a common struggle.

Are you a woman if you have lived most of your life as a biological man, but are taking hormones and live your life as female? Do you experience sexism then? Should you be allowed into women-only spaces if you have lived your life as

a woman but identify as transgender, are taking testosterone, and have had chest surgery? Do you experience sexism then? Do you take on male privilege simply because you are perceived by the rest of the world as a man? The idea of “womyn-born womyn only” space was born out of the need for a safe space. But safe for whom? And what about the safety of transgender people for whom the negotiation of space can so often be a life or death issue?

These are some of the difficult questions facing feminist and trans activists as transgender people struggle for inclusion in feminist politics and in the reproductive rights movement. They are complicated and invested with intense emotion on all sides.

Yet, while there has been conflict and tension around these issues, we see them as a place of potential and growth for the reproductive rights movement, and feminism in general. Transgender liberation theory offers feminism a new perspective on seeing gender as a social construct. It offers the possibility of creating new meanings of gender, of male and female, and everything in between that transcends socialized patterns of sexism and homophobia.

Trans issues bring to the table the possibility that all genders are affected by reproductive rights issues and that feminism in its truest form must include the liberation of all genders from oppressive social roles and regulations. Many female-to-male transgender people are working to create new definitions of what it means for them to be men – deliberately incorporating their experience as women in the world, and understanding their responsibility to fight against sexism as “new men.” Many of us, trans people and allies alike, are

working to demand that the reproductive rights movement include us. At the same time we are holding ourselves accountable to standards of feminism as we transition into new bodies and differently gendered lives.

What will transfeminism require of us as activists? It will require that we rethink traditional strategies, such as “womyn-born womyn only” spaces. We should examine these strategies critically, not necessarily to get rid of them, but to bring to the surface both their purpose and value, and who they serve and harm. On every side, we will have to be willing to challenge ourselves to fight for issues that we haven’t previously considered “ours.” Trans people must work for comprehensive sex education, access to contraception and abortion, and their allies must work for accessible hormone therapy and inclusive hate crime legislation.

Most importantly, it will be necessary to have dialogues about all of these issues, bringing everyone to the table. So often, differences around how transgender identity is understood in the context of feminism has fallen along generational lines. Transfeminism will require intergenerational spaces and conversations. Ultimately these conversations will not only strengthen our movement for the future, but also give us a strong sense of where we have been in the past and why. The sustainability of any social justice movement or theory of liberation turns upon its ability to be flexible and inclusive. We need a reproductive rights movement that, rather than dividing on the basis of a rigid idea of gender, is willing to expand ever outward to explode those ideas. The more common ground we find, the more strength we will have, as communities and as a movement. ✕

FURTHER READING AND RESOURCES:

Websites

www.annelawrence.com/twr/

www.altsex.org/transgender/

www.amboyz.org

www.nclrights.org/projects/transgenderproject.htm

www.transfeminism.org

www.transgenderwarrior.org

www.trans-health.com

www.helenavelena.com/tsmenace/what.htm

Books

Gender Outlaw: On Men, Women, and the Rest of Us,
Kate Bornstein

Read My Lips: Sexual Subversion and the End of Gender
by Riki Wilchins

Sex Changes: The Politics of Transgenderism
by Pat Califia

S/He, by Minnie Bruce Pratt

Stone Butch Blues, by Leslie Feinberg

Trans Liberation, by Leslie Feinberg

* For the purposes of this article, we use “transgender” to refer to someone who presents a gender other than the one to which they were assigned at birth. “Transgender issues” refer to the challenges, potential, and experiences of those who identify as transgender. There is a lot of controversy and debate in the queer and trans communities about the definition of transgender and who is and isn’t. If you are interested in those discussions and debates you can take a look at some of the resources at the end of this article.

FINDING COMMON GROUND BETWEEN MOVEMENTS FOR REPRODUCTIVE FREEDOM AND TRANSGENDER/TRANSSEXUAL LIBERATION

BY SADIE CRABTREE

Both the trans-liberation and pro-choice movements have been relatively isolated from other social justice movements. Often activists working on other issues have seen taking a position on trans and choice issues as divisive to their own constituencies, and working in coalition with trans or choice organizations as disadvantageous to their own strategies. Yet, one of the most fundamental principles to both pro-trans and pro-choice movements is the right to control our own bodies. This article is an attempt to provide an example of the common ground between these issues, and encourage discussion of ways that we as pro-choice and pro-trans activists can help our movements by helping each other.

Many transsexual people seek medical care and access to reembodiment technologies, such as hormone replacement therapy (HRT) and various surgeries. These help us develop secondary or primary sex characteristics that in turn allow us to interact more comfortably in the world, and perhaps offer some protection from the violence and discrimination we often suffer when we are read as transsexual. Many other trans people are more comfortable with their bodies, or have fewer characteristics that make it difficult to live as their target gender, and do not seek these technologies.

Transsexual people who want or need technologies like HRT and surgery are often made to go through an arduous process of psychotherapy and evaluation before they are allowed access to those services. This process of evaluation is often wholly misogynist in practice, with trans women required to be stereotypically feminine in behavior and dress in order to pass inspection. Trans men may be assumed to

Gender identity disorder is a condition listed in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM)

simply desire the “perceived cultural advantages”¹ of being a man. For transsexual women who are not feminine, or who are lesbians, it can be difficult and sometimes impossible to find a therapist willing to treat them.

According to the most widely used standards of care² for transsexuality, a person must be diagnosed with gender identity disorder (GID) in order to qualify for treatment. Gender identity disorder is a condition listed in the American

**Our access to services is
not simply a health issue, but
a political and sexual one**

Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM). In addition to further stigmatizing transsexual people as mentally ill, and pathologizing gender nonconformity, this diagnosis has been used to justify non-consensual therapies done to gender non-conforming children – including institutionalization³ – largely out of fear that they will grow up to be homosexual.

The diagnosis gender identity disorder has been used as a tool of sexism and compulsory heterosexuality against both gender non-conforming children and transsexual adults, and many trans and feminist activists have called for it to be removed from the DSM⁴. The conflict which has brought much of this work to a halt is the idea that eliminating the GID diagnosis would make it more difficult for transsexual

people to get access to services, since the diagnosis is required under common standards of care.

Balancing many transsexual people's need for medical services with a feminist desire to eliminate gender nonconformity as a diagnosable mental illness has been a contentious issue within trans communities. In reality, a diagnosis of mental illness doesn't do much good in the face of bigotry: while transsexuality is still classified as a mental disorder, it is specifically exempted from the Americans with Disabilities Act, and from virtually all health insurance programs. On the other hand, a treatable condition with the potential to cause someone distress, whether physical or mental, can entitle that person to care without being classified as a disease or mental illness and taking away their choices. Fertility and pregnancy provide a model for completely normal conditions which warrant access to services as a necessity for an individual's right to self-determination.

Our access to services is not simply a health issue, but a political and sexual one. Both trans and non-trans bodies are restricted and regulated largely because our autonomy represents a threat to the patriarchal order our culture calls "natural."

Courts routinely deny transsexual parents custody of both their adopted children and biological children. In divorce cases, one parent can leverage the court's transphobia against another, either by using the DSM criteria to argue that they are mentally ill, or by asking the judge to nullify their legal partnership, because case law in many states considers their heterosexual marriage to be "same-sex" and therefore illegal based on the birth sex of a transsexual partner.

There is also a fundamental reproductive issue for transsexual people that is rarely discussed: in order to legally recognize a change of gender, almost every state in the U.S. requires a transsexual person to be irreversibly sterilized.

Our right to control our own bodies – whether or not we are transsexual or transgender — is denied by insurance companies that refuse us coverage for the medications we need, by doctors who question our judgment and our desires, by officials who create legal barriers to our self-determination, by an economic system that leaves so many of us powerless to claim our rights, and by all those in power who blame us and shame us and regulate our bodies and lives.

Trans issues are choice issues, access issues, and feminist issues. Movements for reproductive freedom and trans liberation are, I believe, ideologically invested in one another's success. I hope that activists working in both movements will recognize the interconnectedness of our issues, and search for ways to work in coalition around these challenges. ✕

1 *Diagnostic and Statistical Manual of Mental Disorders*, DSM-IV-TR

2 Harry Benjamin International Gender Dysphoria Association Standards of Care, 1998.

3 For a first-hand account, read Daphne Scholinski's memoir, *The Last Time I Wore A Dress*.

4 See www.GIDReform.org.

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SAVE THE DATE! April 4 – 6, 2002

FROM ABORTION RIGHTS TO SOCIAL JUSTICE: Building the Movement for Reproductive Freedom

17th Annual Conference at Hampshire College in Amherst, MA

This conference will explore the ways in which reproductive rights are linked to other social justice issues. Speakers from around the world will discuss racial equality, economic justice, queer rights, environmental justice, freedom from violence, welfare reform, access to healthcare and childcare, globalization, and support for immigrants. It is intended as a forum for learning and networking for all ages and experiences.

The conference is free, open to the public, and wheelchair accessible. Housing, childcare, and sign language interpretation are available with advanced registration.

**For more information, contact the Civil Liberties
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