Good morning. My name is Sharon Irish. I'm an historian at the University of Illinois here in Champaign-Urbana, and I'm also active with the Society for the History of Technology, which is an international group of scholars that is obviously interested in things technological and their relationships to technology and culture. This fall in 2013, I'm an instructor with CL Cole and Sharra Vostral of a seminar, a graduate seminar, called The Dialogues on Feminism and Technology. And last year a small group of people involved in this collaboration got together and we identified key words or important words that have experienced a lot of scholarship and study among feminists over the last several decades. And so one of those topics or keywords is "bodies," and that's what we're here today to talk about. The idea of the video is to contribute it to an archive of videos that will be drawn on for future courses of feminism and technology that might be related to this distributed open collaborative course that we're involved with. So today I'm so privileged to be with Karen Flynn and Dorothy Roberts. Dorothy Roberts has been visiting campus here at Champaign-Urbana for the last couple of days, and we're lucky to have Karen Flynn here on campus. So Professor Flynn is an Associate Professor in the Department of Gender and Women's Studies, as well as the Department of African-American Studies. And she received her Ph.D. in Women Studies from York University in Toronto, Ontario in 2003. Her research interests include migration and travel, black Canada, health, popular culture, feminist, diasporic and post-colonial studies. Dr. Flynn's 2011 book from the University of Toronto Press is called Moving Beyond Borders: Black Canadian and Caribbean Women in the African-Canadian Diaspora. Currently she's working on a second book about the travel of blacks across borders and how gender, class, and racial identities are shaped and re-shaped across spatial and geographic locations over time. In addition to her academic work, Dr. Flynn writes, among other forums, in newspapers and specific journals about race, gender, sexuality, age and nation. She also was recently nominated as a dean's fellow for the College of Liberal Arts and Sciences here at the University of Illinois, which is a program intended to strengthen and expand the cadre of leaders in the College of Liberal Arts and Sciences. Dorothy Roberts is the George A. Weiss Professor of Law and Sociology at the University of Pennsylvania. Now she has a number other titles that acknowledge her inter-disciplinary scholarship in law and public policy regarding urgent contemporary issues in health, social justice and bioethics. I'm not going to name them all, but we can put them on the screen. But one of her roles in the Penn Law School is as the Inaugural Sadie Tanner Mossell Alexander Chair. So Mossell Alexander was the first African-American to receive a Ph.D. in economics in the United States. She was from a very highly educated family whose parents had also been highly educated and she was the first woman to receive a law degree from the University of Pennsylvania Law School.

[Sharon Irish:] First African-American woman.

[Sharon Irish:] First African-American woman -- sorry -- to receive a law degree from the University of Pennsylvania Law School. So Professor Roberts' major books include Fatal Invention: How Science, Politics, and Big Business Recreate Race in the 21st Century and Shattered Bonds: The Color of Child Welfare; as well as Killing the Black Body: Race Reproduction and the Meaning of Liberty from 1997. She received her J.D. in 1980 from Harvard. So welcome. Thank you so much. So among other activities, both of you are passionately committed to addressing the staggering and deplorable health
inequities among people due to racism. So let's begin first talking about how your interests brought you to research on bodies and health. Why don't we start with you, Dorothy?

[Dorothy Roberts:] Okay. Well, my very first research project had to do with the prosecution of women who used drugs during pregnancy in the late 1980s, early 1990s. I started to read about the prosecutions of these women for various crimes like child abuse and fetal abuse, even assault with a deadly weapon -- distribution of drugs to a minor through the umbilical cord -- and I was very concerned that these women were being punished for being pregnant. I also suspected that they were probably poor black women who were being prosecuted. And after doing some investigation, I learned that that was the case. About 80 percent of the women when I started doing my research were poor black women who smoked crack during pregnancy. And I felt that the current way in which the topic was being treated as a question of maternal versus fetal rights didn't capture the racism that I saw in these prosecutions, and so I wanted to write about how race intersects with gender in the punishment of, especially, poor disadvantaged mothers and the way in which these prosecutions took what is a public health problem, and had always been seen as a non-criminal problem having to do with health, the health of the fetus, the problems that the mother might have, and turn it into a crime, which came along with all sorts of very negative images about the women and their children. So the image of the pregnant crack addict which fueled these prosecutions and then her giving birth to a so-called crack baby who was supposed to be destined to criminality and welfare dependency. And so that was the urgent topic, the alarming topic for me that got me interested in women's reproductive bodies and health and the way in which sexism and racism work together to control women because they give up -- for the sake of the fetus, you know, the way in which pregnancy becomes a justification for the state to control women. But then understanding that it's not just because of gender inequities, but how racism also works together with that to justify this very brutal and dehumanizing treatment of women.

[Sharon Irish:] Right. Really powerful intersection.

[Karen Flynn:] So I initially wanted to write at the time a social history about black women, black women and work. And given sort of the paucity of research around black women in Canada in particular, I wanted to think about a topic that didn't focus necessarily on the domestic workers, so in the 1950s and '60s, the Canadian government initiated what they call a domestic scheme -- actually that's the second domestic scheme; they had one in the 1920s -- to use these domestic workers in the homes of middle class white women. And so there's been a lot of extensive amount of research on the domestic worker. So I kept thinking, "Well, what do I want to do besides the domestic workers?" And then I thought about nurses. I had done some preliminary research, and one of the things that I discovered was that black Canadian-born women, young women who had wanted to train as nurses in Canada were excluded from Canadian nursing schools and actually were told to apply to the United States for nursing school, which I thought was interesting given that Canada, the way in which, as a nation it has positioned itself as a really benevolent nation that through the Underground Railroad and the development of these small black communities in southwestern Ontario, in Nova Scotia, and later Alberta, that this particular nation would then say to these women, "Well, you need to go back to the U.S." So that was something that I discovered in preliminary research and the second thing that I discovered was that, in terms of the -- during World War II, after World War II, there was a nursing shortage in Canada and so they started recruiting
nurses. But the immigration policy was that they wanted nurses from mainly Britain. So the immigration policies were rather exclusionary up until 1962 and '67 when they changed the policy and Caribbean nurses were admitted to Canada as cases of what they call exceptional merit. So, in other words, when we get really, really desperate, then we will consider you. So, and so those were two things I discovered. And then I noticed a lot of my Caribbean friends, that they, quite a bit of their mothers were also nurses. And also the church that I attended in Toronto at the time, there were always these nurses on duty. So that kind of propelled my interest in the research. And then I discovered there was a case with the Toronto General Hospital where a young black woman had applied to Toronto General Hospital and they said, they told her that she should apply to the United States and really, and so I was able to look at some of these archival documents that really, it became really about this fear of black hands on white bodies. So hence my sort of, my focus on black nurses, both Canadian-born and black Canadian and Caribbean women, migrant women. But it also tells us, the nurses tell us also a much broader story about the Canadian nation, about questions of identity, but also really what does it mean for black women to enter an occupation that's constructed on particular Victorian gendered ideals about femininity that actually excludes black women from that particular construct and that definition. So, in essence, they were, when we're thinking about this question of bodies, they're outside the norm, if you will, inferior bodies, bodies that don't really belong in nursing.

[Sharon Irish:] And that should not touch white bodies.

[Karen Flynn:] Absolutely, yes.

[Sharon Irish:] And when you talk about British nurses, those would be white British nurses, who were --

[Karen Flynn:] Right, except what was really interesting is that, because of the relationship between the Caribbean and Britain, there were nurses who actually were British, black nurses who were British subjects who then entered into Canada, as well...

[Sharon Irish:] Very complex. Well, because this is a dialogue about intersections of bodies and feminism and technology, I wondered if you could then talk a little bit about either what feminism and feminisms has meant to you, either at the beginning of your research or over time and kind of how that has shifted as you've looked at these. I mean, you've already mentioned the complexity, but we'll go from Karen to Dorothy.

[Karen Flynn:] Well, I think for me I, I think feminism influences the kinds of questions that I ask, like the kind of methodology that I utilize in my research. So part of my primary evidentiary data, if you will, are oral interviews. And it's not to suggest that either disciplines don't really rely on oral narratives, but I feel that feminist scholars have legitimized this particular source and methodology as useful. And so for me, I started out using a socialist feminist framework, if you will, to think about power relations between physicians and nurses. However, while socialist feminists enriched my understanding of those power dynamics, what is absent is really sort of an analysis of race and racism within the occupation. So, in fact, that led me to really look at what at the time was anti-racist feminist scholarship in Canada, so the late '80s, 1990s, using the work of Linda Carty, some of these women, Dionne Brand who... pushed for analysis of the Canadian State, in particular. So looking at the immigration laws and how
they're racialized and gendered, how the political economy of Canada meant that some women, some black bodies, occupied lower niches in nursing as an occupation. And then later on I started drawing on sort of post-Colonial feminist theorizing, if you will, even though I found that a lot of that really was focused on black expressive cultures, I wanted to take some of that analysis and put that into thinking empirically about black nurses in Canada, if you will. And then, so I see how over time my trajectory, if you will, has changed. And so part of what I also drew on was Kimberle Crenshaw's idea of intersectionality, but in my own research I wanted to extend that further to think about the question of religion, for example, in addition to just focusing on race, gender, class; but sort of thinking about the role of religion which, for Caribbean girls growing up and black Canadian girls, was really, really significant, and how religion influenced how they navigated nursing, but also their own sexuality. But also think about the nation, the Canadian nation, and also, and think about education, how migration, so adding into or sort of maybe expanding, if you will, how we think about intersectionality as a theoretical and analytical framework.

[Sharon Irish:] Yeah. Always getting broader and broader in your analysis, which is the truth-seeking. And how about you and feminism over the years?

[Dorothy Roberts:] I think I have a very similar story to tell that clearly feminist theory, especially feminist legal theorists, were very influential in my work looking at the way in which mothers and motherhood has been an important aspect of the subordination of women. And understanding that seeing women as potential mothers has been a reason for the state to try to manage women's bodies. But it was clear to me early on that most of the feminist literature about motherhood was about compulsory motherhood, the value that women have as mothers, whereas what I was saying in respect to black mothers was that black mothers were devalued and that there was a reproductive caste system in the United States and around the world where some women's childbearing is more valued than other women's childbearing. Some women are regulated in a way to push them toward motherhood, and other women are regulated in a way to deter them from becoming mothers. And so it was very important to me to start with this basis of feminism, primarily white legal feminist scholars who understood the way in which motherhood relates to the regulation of women, but then adding to that or complicating it with a notion of the differing value placed on mothers and the way in which black mothers, in particular, and other mothers of color, but my focus was primarily on black mothers, have been devalued and how that has a long history of the regulation of black women's bodies. And also conversely the way in which reproduction has been important to white supremacy and domination of the United States. So that relationship between gender inequality and racial inequality is important in understanding both the regulation of women, but also the way that racism operates in the United States. And so that was the way in which I developed my thinking. And Kim Crenshaw's work was also very important, intersectionality. But I was more interested not so much in the way that these identities intersected individual lives, but the way in which power relationships, more broadly, relate to each other in the regulation of different women's bodies.

[Sharon Irish:] Right. Well, both of you have worked on reproductive bodies, but also families and the importance, both the negative regulation of families as well as the positive. But I'm wondering now if we could shift to administrative bodies and talk about how these structures are permeated with racism and sexism and classism and a lot of oppressive structures; and how these administrative bodies, such as professional organizations or funding
agencies further control but also constrain -- I've been so amazed in reading Fatal Invention, the ways in which research questions are narrowed and hobbled by the ways in which these administrative bodies work. So perhaps you could talk, and then we'll go to Karen.

[Dorothy Roberts:] Okay, okay. Well, with respect to what you're talking about, for example the NIH regulations that push researchers into using biological racial categories in their research, dividing research subjects by race as a biological innate division of human beings and then constructing their study according to race to look for racial differences and then reporting their findings along racial lines. I think that's a great example and disturbing example of how a very powerful administrative agency, because of the funding that it gives to researchers and the reliance of many researchers on that funding, has a lot of power to shape the very research questions, the very design of the research. And then to shape the products of the research that, of course, affect the way that the public understands bodies, human bodies. And I think it reinforces the understanding of human bodies as naturally divided by race. I also want to mention, though, when you talk about administrative bodies, some of my recent work looking at the intersection of the foster care system and the prison system. And this ties together my book, Shattered Bonds: The Color of Child Welfare, which was on racism in the child welfare system, and Killing the Black Body, which was about the regulation of black women's reproductive bodies, but focused heavily on the way in which criminal prosecution is a mechanism of that regulation. And I've recently been thinking about and writing about the way in which the foster care system and the prison system work together to devalue black mothers and supervise the relationship with their children. And both of these systems, you could see them as parallel systems that are primarily made up of black mothers. Both the foster care system and the prison system are disproportionately filled with black mothers. In the foster care system, black mothers who've been charged with abuse and neglect and their children are removed from them and placed in foster care. And the prison system, disproportionately filled with black women who are there mainly for nonviolent offenses that you can tie back to poverty, substance abuse, domestic violence, and other ways in which these women have been victims of disadvantage, and the way the state addresses that is by locking them up. And one of the, most of those women are mothers and primary caretakers of children. And so the systems interact with each other to paint a picture of black women who are irresponsible mothers, who shouldn't be taking care of children, who pass down criminal traits to their children, but also very practically and materially make it very difficult for these women to maintain a relationship with their children. And so it's an example of two administrative bodies that work together, both in the messages they send and the real impact on women's bodies and their relationship to their children, that come together in a very, very horrific way, I think, to make women's lives difficult. And also, and this is a message that I like to hope that my work sends out, that this is a way of blaming the most disadvantaged women for their position and for social problems. You say it's not because of inequities, race and sex and class inequities; it's because these women are bad mothers. That's why their whole communities are at risk. Instead of seeing how these administrative bodies put them at risk for suffering and disadvantage.

[Sharon Irish:] Which are really bodies of white supremacy.
Karen Flynn: You know, I remember when I migrated from Jamaica to Canada and my dad, he'd say, "This is a white man's country." He would repeat that, and that meant that you really had to do well and, of course, I didn't understand what white man's country meant because you become racialized once you migrate, so I didn't understand blackness, didn't understand that I was black until I moved to Canada. But what's interesting about the role of the state is that Mackenzie King, one of Canada's prime minister, actually said, "This is a white man's country." And so what this meant was that we want the right stock from certain European countries and that meant the exclusion of... people from the Caribbean, even though there has been a black population in Canada. So we see how the immigration officers who sometimes made these determinations about who would enter in sort of arbitrarily. So I remember one of the archival evidence that I came across was these four women had applied. I can't remember from which Caribbean island. It was probably one of the smaller Caribbean islands. And they applied and they were rejected. But then they wrote back to the immigration officers to say, "Well, you know, two of our friends who have pretty much the same qualifications, they were looking for nurse's aide," again sort when we think about the specific niche of nursing, they're at the bottom of the nursing hierarchy. And so they wrote back to the immigration officials, "We don't understand because we know Janet and June, that's not their names, they applied but they also got in." And then the immigration officials wrote back and said, "Well, I think we'll consider allowing these two women in," demonstrating some form of agency. But what I also thought was really interesting about the role of the state and how it managed and acted as a gatekeeper was also how certain Caribbean nations were positioned vis a vis each other. So, for example, they preferred when it was necessary to admit nurses, nurse's aides, from the Anglo, English-speaking Caribbean, if you will, but had these very pejorative descriptions of Haitian nurses from Haiti, which I thought was really, really fascinating. And also when we think about the nursing associations. From the nurses that I interviewed, one of the biggest issues that they had was how the inability of the nursing associations to sort of adjudicate their credentials when they migrate, which we see happens all the time. So when they came, so you have people who were trained as nurse midwives, who had no clue when they had migrate to Canada that midwifery was prohibited at the time that they migrated. And also when we think about the nursing associations. From the nurses that I interviewed, one of the biggest issues that they had was how the inability of the nursing associations to sort of adjudicate their credentials when they migrate, which we see happens all the time. So when they came, so you have people who were trained as nurse midwives, who had no clue when they had migrate to Canada that midwifery was prohibited at the time that they migrated. And also when we think about the nursing associations. From the nurses that I interviewed, one of the biggest issues that they had was how the inability of the nursing associations to sort of adjudicate their credentials when they migrate, which we see happens all the time. So when they came, so you have people who were trained as nurse midwives, who had no clue when they had migrate to Canada that midwifery was prohibited at the time that they migrated.

Sharon Irish: So the skill set is...

Karen Flynn: Devalued. Absolutely, and most of them were nurse midwives, so you have these women who firmly believe that childbirth is a woman's domain. That's how, that was their, and they had a very real critique of medicine, of medical physicians taking over with all the technology. I remember one of the women, who is now deceased, said "Yeah," she goes, "I hear that when the forceps came out, the physicians walked around with it around their neck" and have a real critique of some of these technologies. So when they came it was really, some of the nurses, regardless of the qualifications that they had, they had to, some of them had to go back to school, some of them ended up working as registered nursing assistants which, again, they were RNs in England or the Caribbean and when they came to Canada because the nursing associations didn't have... first, how they determine obstetrics in Canada and Britain were very different. So the nurses were really disappointed with that. The second issue, concern that they had was later on in the 1980s how the inability of the registered nursing associations and other associations, the CNO, the Canadian Nursing Organization, to deal with questions of racism in the occupation. And so in the 1990s there were these lawsuits that black women brought against the Northwestern
Hospital in Toronto around questions of racism. But the organizations, and I think part of the issue what makes nursing really interesting is the gendered ideals on which the occupation is constructed. We're people who care. Nurses care. So if you care -- if that's how you construct the occupation, then you can't be racist. Which makes it really difficult to bring these claims or even to acknowledge that the occupation, just even the hierarchy itself, who does what? Black women lifting particular bodies, so it's, I think nursing is just really fascinating for a lot of what it tells us, not just about race, but the way in which, even with sort of the intensification of restructuring in Canada, the implementation of neo-liberal policies around healthcare itself, all of those kind of questions. Yeah.

[Sharon Irish:] The nursing profession becomes this nexus of all these things. And one of the things that I appreciate about your work, too, is the way that you insist on incorporating Canada so that we begin to see the black Atlantic route really broadening the multi-dimensionality of people's lives.

[Karen Flynn:] Yes. Yes, because when I moved to the U.S. and I would say to people, "I'm from Canada," and it's almost like, "There's black people in Canada?" You know, it's not just hockey and maple leaves and whatever. Even at a conference, like I find going to some of the conferences here, last week I was in ASWAD (The Association for the Study of the Worldwide African Diaspora) in Dominican Republic and I talked about sort of what it means to recuperate black women's history in Canada, and no one, I mean one person asked me a question and I know it's because...

[Sharon Irish:] They were in shock?

[Karen Flynn:] Were in shock or they just didn't know...

[Sharon Irish:] Canada?

[Karen Flynn:] Yeah, exactly, and I said it, I said, "We have to start thinking about what does it mean to have, to think about the African diaspora and think about Canada, in particular," because Canada has a relationship with the United States from the time those ex-slaves, the fugitive slaves, free blacks moved to Canada, those relationships have always been forged, like a real transnational relationship that we haven't really thought about. And scholars are really just trying to do some work around that. So yes, I'm very passionate about inserting black Canada into this larger discussion of the African diaspora. Thank you.

[Sharon Irish:] No, thank you.

[Inaudible] You know, by the way, my mother is from Jamaica, and she ended up moving to Liberia first, long story, but then to the United States. But two of her brothers moved to Canada. So when I was little growing up in Chicago, every summer we would drive to Montreal to visit Uncle Carlton and Aunt Lavina

[phoneic] and my cousins in Montreal. So I'm very aware of that route between the United States and Canada...

[Dorothy Roberts:] That's been going for a long time.

[Karen Flynn:] That is awesome. Wow. Talk about transnational movements of bodies across borders.
Critical borders. Yeah. Well, we're running out of time but I wanted to end with having some thoughts about future directions and Dorothy, you talked yesterday about the Trust Black Women campaign and the Sister Song, Women of Color Reproductive Justice collective, and I tried to find the documentary, We Always Resist. Is that something that's available?

I don't know if it is or not. You could probably contact the organization and get it, but I think one of the exciting developments I've seen since I began the work, I've talked about it, the prosecutions of black women during pregnancy to today is the growth of women of color organizations, particularly around reproductive justice. The whole, the growth of the whole concept of reproductive justice that resists the idea of individual choice being the focus of our advocacy and research to looking at the way in which whole arrangements of power affect reproduction and advocating for broader notions of social, realities of social justice instead of just the power of certain women to be able to make choices. And that has grown exponentially over the last couple of decades, including the strength and the activity and passion and excitement around organizations like Sister Song and others that focus primarily on women of color, but I think have made a huge contribution to the advocacy and organizing around women's issues in general. And so that's a really exciting development that I'm happy to be part of. I'm Chair of the Board of the Black Women's Health Imperative, for example, and I've always been very involved in organizing around women of color's health. And also just another thing I mentioned last night is the new allies, I think, that are coming out of some of the horrifying developments of neo-liberalism and the resurgence of biological racism and all of that, which is very frightening, but I think it has brought to light some common values and common interests among different social justice movements that can and are joining together in ways that give us hope for resisting and overcoming and developing a vision of a better future that supports our common humanity, recognizes our common humanity and the value of all human beings.

And, yeah, you mentioned disability rights and gender work and that all is hopeful. And some of the things that are most current for you right now?

Well, I'm still very much interested in sort of thinking about movements of people across borders. So I was talking to Dorothy about trying to figure out my next project. But I want to do a comparative project that sort of looks at African-Americans, Caribbean folks, English-speaking Caribbean, and black Canadians and looking at their, sort of mapping their travel itineraries across borders, if you will. We had a discussion about -- I'm also very interested in pop culture and I teach a course on, like I teach hip-hop feminism right now, Gender Health and Pop Culture, and so I was really interested in sort of why someone, for example, Dave Chappelle. When he had that supposedly breakdown, he went to Africa. And I was thinking about Snoop Dogg, the artist, who had his sojourn in Jamaica with Rastafarianism and now he's a Rastafarian and -- who has now changed his name to Snoop Lion. And I'm trying to think about what does it mean to move outside of the United States as a racialized body, but also a body that also has resources? So they have the resources to move and then to come back. And then Dorothy said, "Well, you know, who was in South Korea?" Dennis Rodman went to South Korea. And so I'm trying to think. Some of these folks are not necessarily going to Africa, so that 1960, '70 movement...
[Sharon Irish:] He was in North Korea, actually! He was in North Korea!

[Karen Flynn:] Okay, so right, but --

[Sharon Irish:] He was a stranger!

[Karen Flynn:] Right, right. Exactly. So we had a moment where folks were like, "I'm going back to Africa to find my roots," if you will, but this isn't what these folks are doing. And I haven't really sort of taken the time, I'm going to be honest about it

[inaudible], but that really interests me. And so that's kind of where I'm going. Still interested in bodies, but sort of the bodies that are racialized but they also have sort of resources. The Housewives of Atlanta, their trip to South Africa. What is that?

[Dorothy Roberts:] Globetrotting bodies, right?

[Karen Flynn:] Right, yeah...

[Sharon Irish:] That's a title. Black Globetrotting Bodies.

[Karen Flynn:] Right, there you go. Thank you. I like that. I think I'll write it down.

[Sharon Irish:] Well, thank you so much for contributing to this conversation and discussion about bodies. I hope that we have helped disrupt what is still the racial nationalist narrative and what Dylan Rodriguez calls the white bodily monopoly. So thank you.

[Karen Flynn:] Thank you.

[Dorothy Roberts:] Thank you.\^M00:38:29

[ Music ]\^E00:38:37