TIM HOFF: Welcome to another episode of the Author Interview series from the American Medical Association Journal of Ethics. I'm your host, Tim Hoff. This series provides an alternative format for accessing the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Crystal Hayes, a postdoctoral scholar at the Gillings School of Global Public Health in the Department of Maternal Child Health at the University of North Carolina at Chapel Hill. She’s here to discuss her article coauthored with Dr Anu Manchikanti Gómez, Alignment of Abolition Medicine With Reproductive Justice, in the March 2022 issue of The Journal, Toward Abolition Medicine. Dr Hayes, thank you so much for being on the podcast with me today. [music fades out]

DR CRYSTAL HAYES: Oh, thank you so much for inviting me.

HOFF: To begin with, what is the main ethics point of your article?

HAYES: So, I want to start out really briefly with a quick story. I think it'll help sort of contextualize the ethical implications that we’re trying to highlight in the article. My father was incarcerated for 45 years.

HOFF: Mm.

HAYES: During his incarceration, he developed severe, debilitating chronic health issues, including diabetes and high blood pressure and real chronic heart disease. Prison had effectively destroyed his health, and the prison health care system was incredibly inadequate and insufficient.

HOFF: Mm.

HAYES: It was a constant battle for him to get the health care that he needed and deserved while incarcerated. We had fought for years and years against a system that treated him basically like it didn’t matter if he lived or died. His health ultimately did not matter to them. He was an incarcerated person. But he was my dad, so of course it mattered to me, our family, and our community.

We were eventually able to get him a medical parole after battling for well over 15+ years. But unfortunately, by the time he came home in 2018, the summer of 2018, his health was so poor and had deteriorated so badly that he could barely walk from the damage done by his diabetes. He died 17 months after he was released from prison at the age of 72. In fact, we're recording this podcast three days before the second anniversary of his death. So, I wrote this article with my coauthor in part to honor my father and the countless others like him.

HOFF: Mm.
HAYES: But my scholarship specifically focuses on incarcerated pregnant women. So, the focus of this piece is on incarcerated pregnant people because, like my father, they are also extremely vulnerable to the kinds of health care violations and human rights violations that my father endured. Unfortunately, as you know, and I'm sure your listeners are aware that we treat health care in this country like a privilege, and it should not matter who you are. It shouldn't matter your incarcerated status. It shouldn't matter your class status or your racial identity. But unfortunately, in our culture, it does. It matters specifically because we also are living in a culture with a deep history of white supremacy that permeates everything from our justice system to our health care system.

So, we wrote this article to talk about the ways in which abolition medicine and reproductive justice are these sort of synergistic ideas that can help us to build a different kind of world that centers racial justice and human rights and health care so that people who are the most vulnerable—like my dad and like incarcerated pregnant people—for having their human rights violated and who are impacted by the carceral system are protected, right?

HOFF: Mm.

HAYES: So, it's about building an anti-racist society with prison abolition and health care at the center of that movement. Because we believe abolition medicine and reproductive justice sort of pushes us to work towards a racial justice and health equity lens so that we are constantly questioning institutions that are antithetical to those beliefs and values.

And so, the sort of broader ethical questions and ethical considerations that we're asking your audience to pay attention to has everything to do with this history of white supremacy and the ways in which our health care system is steeped in that and the ways in which people are vulnerable to have their human rights violated if they're incarcerated, if they're Black, if they're undocument, if they're poor, if they're people with disabilities and so forth and so on.

HOFF: Mmhmm. Yeah. Thank you for sharing that story about your father. I think it really highlights how vulnerable people who are incarcerated are made to be.

HAYES: Right.

HOFF: So, thank you very much for sharing that. I think it's an important point to make.

HAYES: Right.

HOFF: For students and trainees, those who are at the beginnings of their careers, who might not have experience with folks who are incarcerated or are maybe interested in working with people facing incarceration, what do you think is the most important thing for them to take from your article?

HAYES: Oh, that they should constantly interrogate their institutions wherever they land, right?

HOFF: Mmhmm, mmhmm.
HAYES: Like, if you are in a carceral institution, a correctional setting or environment, a hospital, private practice even, wherever you land as a provider, I want people to constantly interrogate those systems. Are they just?

HOFF: Mmhmm.

HAYES: Are they racially just? Are people being provided with the best health care possible, no matter their status in society as incarcerated or Black or brown or undocumented? I want people to sort of be thinking about, what are they doing once they take the white coats off, right? Their role as health care providers and people who are members of the health care profession doesn’t end once they take that white coat off. So, what are they doing in their communities to ensure that they’re building the kind of society that creates the conditions so that people can live full, thriving, healthy lives and can self-actualize their own destinies, right?

It’s one thing to heal the body, but are we healing systems? Are we healing this history of white supremacy? Are we healing issues with housing that make it really difficult for large populations in our society to live in safe communities where they have access to healthy foods? All of those things are obviously connected to whether or not we have the capacity to live a full and thriving life. And so, I would want people who are entering the health care profession and people who are emerging doctors to sort of be thinking about their role and responsibilities with the white coat and without the white coat.

HOFF: Mm. That’s a good point. Thank you. To wrap up, if you could add a point to your article that you didn’t get the time or space to explore, what would that be?

HAYES: That would be that the carceral system shapes everything around us. It doesn’t begin and end with the courts and correctional environments. It shapes our health care system. It shapes our education system. It shapes the way communities are structured. Obviously, it shapes policing. It shapes everything. And so, for folks within the health care system, I would encourage them to be thinking about how is the carceral system shaping the work that they do? And what can they do to work towards abolition? [theme music returns]

HOFF: Dr Hayes, thank you so much for being on the podcast today and for you and your coauthors’ contribution to the Journal.

HAYES: Thank you.

HOFF: To read the full article, as well as the rest of the March 2022 issue for free, head to our site, JournalofEthics.org. We’ll be back soon with more Ethics Talk from the American Medical Association Journal of Ethics.