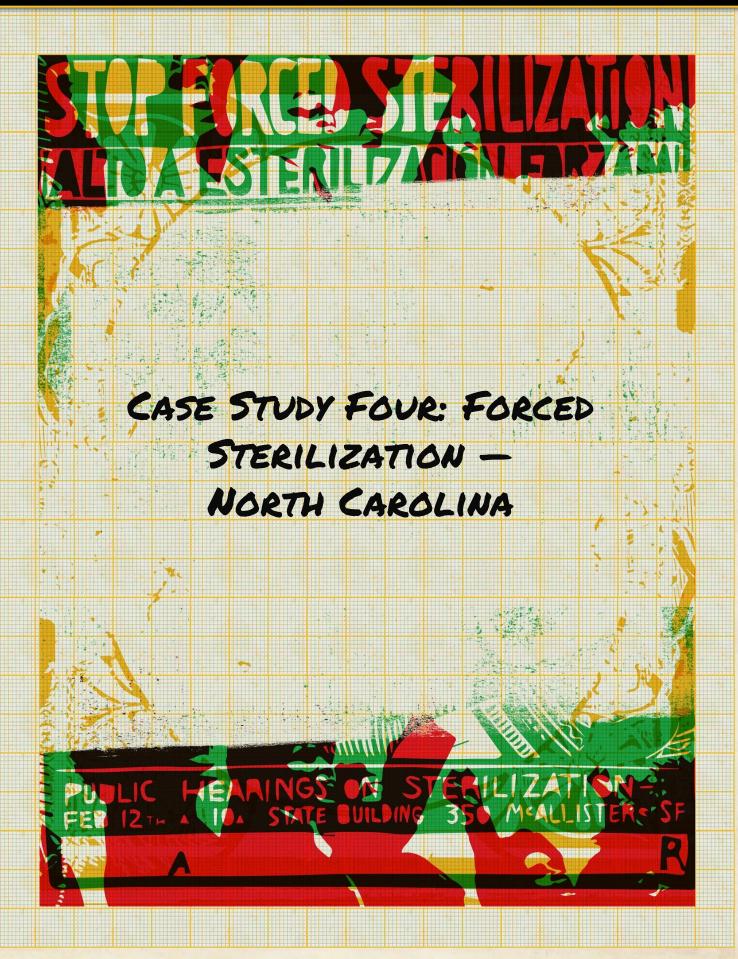
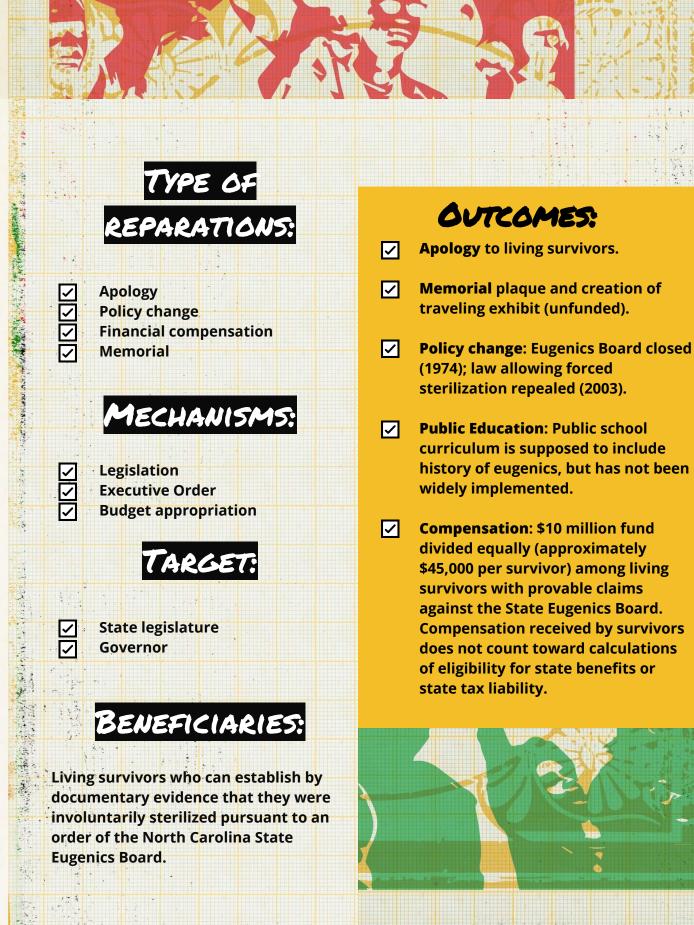
CASE STUDIES



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DISCUSSION QUESTIONS:



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How could survivors have been more involved in the struggle for reparations for sterilization in North Carolina? How might that have changed the process and outcomes?

How could this struggle for reparations have made stronger connections between forced sterilization and anti-Black ableism (historic and structural violence against Black people who are—or are framed as—disabled)?

What challenges do we see in seeking reparations for harms experienced predominantly, but not exclusively, by Black people?

How can we specifically highlight the ways many harms committed are directly connected to slavery and anti-Blackness even though they may impact non-Black people or may have started after the passage of the 13th Amendment? For instance, shackling incarcerated pregnant people while giving birth is driven by the fact that the majority of women historically and currently incarcerated are Black women—and, therefore, the treatment of incarcerated people giving birth is rooted in the assumption that the people experiencing this treatment will be Black women.

How can we address documentation challenges in our demands for reparations, particularly where the documentation of harm is in the hands of the state or records are likely to have been destroyed?

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CASE STUDIES

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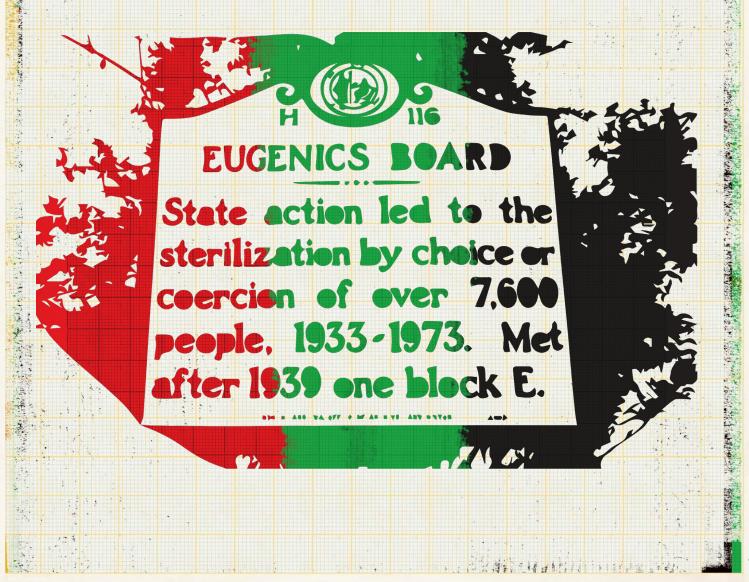
WHAT HAPPENED? Between 1929 and 1974, the North Carolina State Eugenics Board ordered the sterilization of 7,600 people against their will. Hundreds more were sterilized under orders issued by county governments based on petitions by local doctors and social workers. Eighty-five percent of people overall, and 98% of people sterilized in the 1960s, were Black. More than 75% of forced sterilizations in North Carolina occurred at the height of the Jim Crow era.

North Carolina's sterilization program was first challenged through two lawsuits filed against the state in 1973 and 1974 by Black women sterilized under threats of institutionalization or termination of welfare benefits. The lawsuits did not produce compensation from the government, but raised awareness of the issue, leading to **policy change**: the Eugenics Board was closed in 1974, and the state law that allowed forced sterilization was eventually repealed in 2003.

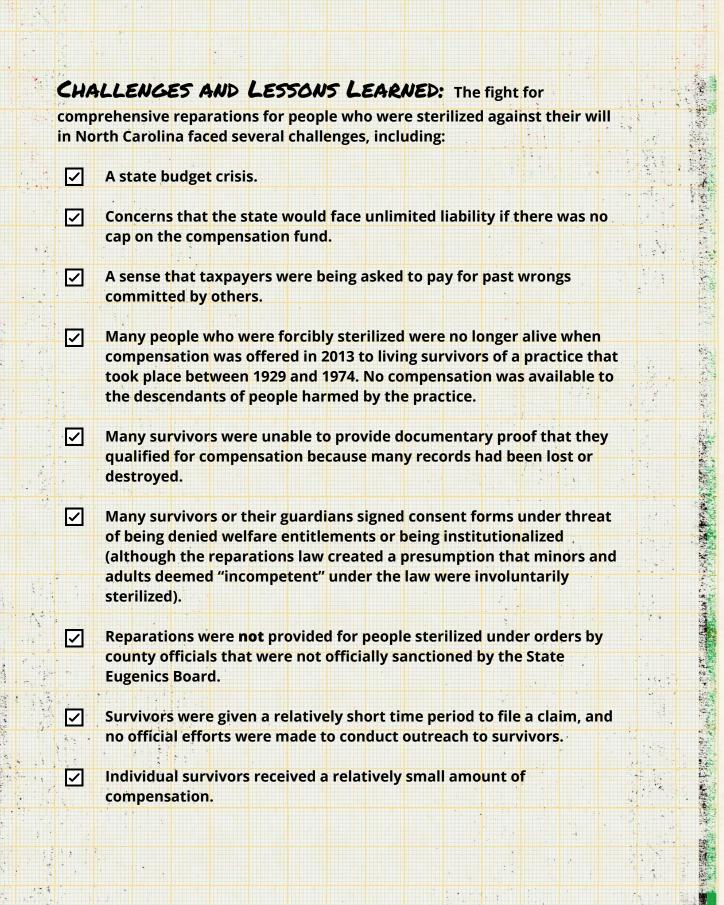
Thirty years after the lawsuits were filed, the Winston-Salem Journal newspaper published a 5-part series on the eugenics program in 2002, prompting North Carolina state representative Larry Womble to call the practice a "holocaust" and demand an apology, acknowledgment, and compensation. The Governor of North Carolina issued an apology later that year, and established a Eugenics Study Committee charged "with exploring the history of the [eugenics] program, ensuring it was never repeated, and making recommendations on how to assist program survivors." After the **Committee released its** recommendations, a memorial was created in the form of a traveling **Eugenics Exhibit and a Eugenics Board Historical Marker.** Additionally, the history of eugenics was to be added to North Carolina public school curriculum as part of **public education** efforts.



Representative Womble introduced a bill in 2003 calling for compensation for people subject to forced sterilization, and every year thereafter until 2013. In 2010, the Governor set aside \$250,000 to establish the House Select Committee on Compensation for Victims of the Eugenic Sterilization Program to develop a proposal for compensation, including health care, counseling, and educational assistance. Once established after some delay, the Committee heard testimony from survivors and family members, but did not include any survivors in the decision-making process. The Committee recommended \$50,000 in compensation per person to living survivors of forced sterilization, and that the funds not be counted as income for the purpose of calculating state taxes or benefits. It also recommended that mental health services be provided for survivors, and revival of the traveling exhibit. After a long legislative debate, the Governor signed a budget including a \$10 million **compensation** fund for living survivors.



CASE STUDIES

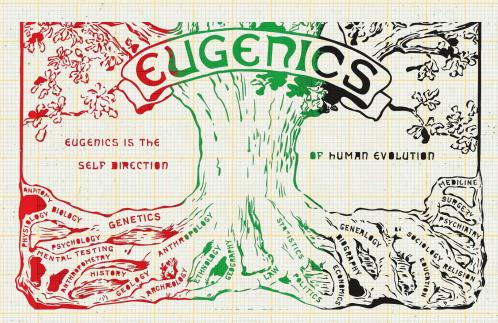


CASE STUDIES

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Due to these challenges and more, the number of people who received compensation (220-250) was small compared to the number of people who were harmed (more than 7,600). Payments are exempt from state tax and income eligibility requirements for state and federal programs, but are still counted as income for the purpose of federal taxes.

The State of North Carolina is one of two of the 33 states that operated forced sterilization programs to provide financial compensation to survivors. The State of Virginia issued an apology and recently approved legislation providing for a \$400,000 compensation fund to pay the 11 survivors remaining out of over 7,600 people subjected to forced sterilization approximately \$25,000 each.



California is currently considering passage of AB 1764, which would provide compensation to people sterilized under California's state-sponsored sterilization program between 1909 and 1979, as well as to survivors of involuntary sterilizations in women's state prisons after 1979. The California legislation would be the first to offer compensation to survivors of involuntary sterilizations at a women's penal facility.

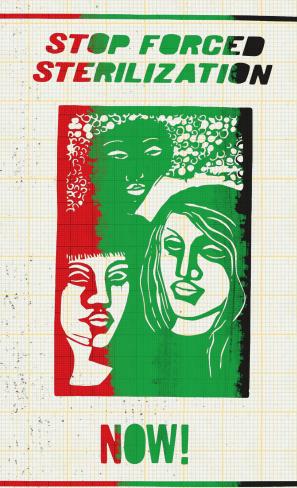
These represent some of the few instances in which Black women received or would receive reparations for reproductive harms which could be characterized as a "badges and incidents" of slavery because they are connected to abuses experienced by enslaved African descended women, and represented an exercise of total control over Black women's reproductive autonomy and bodily integrity. This was also one of the only instances where reparations were paid for forced sterilization, which is a common manifestation of ableism and harm to Black disabled people.

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CASE STUDIES

However, the struggle for reparations for forced sterilizations presents some complicated questions for those pursuing reparations as part of struggles for Black liberation. First, reparations for state forced sterilization programs are not exclusively owed or given to Black people, but to all individuals who are able to prove they were sterilized against their will, including white people. In fact, legislators actively promoted the fact that white people would be receiving benefits under the legislation in order to avoid perceptions that only Black people would receive compensation.

Secondly, the movement to obtain reparations for forced sterilization in North Carolina was not driven or led by the survivors, but rather by legislators, governors, and other system players without a direct stake in the outcome—and competing interests with survivors.



Third, the reparations ultimately obtained were limited to monetary compensation to living survivors who were able to prove entitlement through documentary evidence, and did not reach the hundreds of people who were illegally sterilized pursuant to county orders. Survivors only had three years to make a claim. The total amount of compensation was also capped at \$10 million, regardless of how many people came forward, creating a disincentive for survivors to seek out others, as that would reduce everyone's compensation. Although survivors received an apology and a permanent memorial of the program was created, the healing and educational services for survivors and their families originally recommended by the Task Force never became a reality and changes to the public school curriculum were never fully implemented.





ACTIVITY: REPARATIONS CASE STUDIES

DESCRIPTION:

In this exercise, participants will be given a scenario and will be asked to respond to the scenario by developing a set of reparations demands and a plan for seeking to have those demands met. Each group will be given the same short, pre-written scenario, relevant to the specific group of participants, laying out the harm being done to Black people in the scenario, the generational impacts of the harm, and contemporary expressions of the harm (note: you can use the case studies from this toolkit as scenarios).



Jentify someone to write down the group's demands and plan, and someone to report back to the large group.

Read the scenario together.

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Cessation and guarantees of non-repetition

Restitution

Compensation

Satisfaction

Rehabilitation

Describe what mechanisms or tools the group recommends to compel the demands to be met (i.e. legislation, executive orders or resolutions, budget allocations, direct action, media campaigns, etc.).

Give each group at least 30 minutes to develop demands and make plans, and at least 10 minutes to share their demands and plans with the larger group. *Note:* facilitators should be careful to calculate time for report backs from all small groups into the overall time allotted for this exercise.