



Sexual Health and Rights under Pressure: Resistance and Challenges



ABSTRACTS

PART 1: Setting the scene – sexual rights under pressure

Neil Datta, EPF (European Parliamentary Forum for sexual and reproductive rights)

“Restoring the natural order or disregarding human rights”

In 2013, 20 US and European campaigners began strategizing ‘achievable goals’ to roll back human rights for sexual and reproductive health in Europe. Their strategy, called Restoring the Natural Order: an Agenda for Europe, seeks to overturn existing laws on basic human rights related to sexuality and reproduction, such as the right to divorce; for a woman to access contraception, assisted reproduction technologies or have an abortion; equality for lesbian, gay, bisexual, trans or intersex (LGBTI) persons; or the right to change one’s gender or sex without fear of legal repercussions. The initial group of campaigners has grown to attract over 100 anti-human rights, anti-women’s rights and anti-LGBTI organizations from over 30 European countries and now goes by the name ‘Agenda Europe’. Agenda Europe is a Vatican- inspired, professional advocacy network, whose members meet in secret, and which is directly responsible for implementing a detailed strategy to roll back human rights. The Agenda Europe strategy is producing concrete results, such as the 2016 Polish bill to ban abortion, bans on equal marriage in several Central European countries and over a dozen comparable acts at national level and in European institutions aiming to limit women’s and LGBTI rights.

Understanding the organisation and strategies of anti-gender groups is crucial for human rights defenders to effectively respond to the group’s efforts to undermine sexual and reproductive health rights.

Cyrielle Huguenot, Amnesty International Section Suisse

Campaigning for abortion rights: challenges, strategies and learnings from Argentina

Today, strategic work on abortion is of crucial importance. While great strides have been made in terms of progressive abortion law and policy reform over the last decades, countries around the world are facing rising fundamentalisms, nationalisms, and polarization – each of which impacts access to abortion and sexual and reproductive rights (SRR) broadly. The United States Supreme Court’s recent overturn of *Roe v. Wade* will likely have a reverberating impact across the globe, paving the path for increasing abortion restrictions, reduced SRR funding, and a stronger platform for anti-abortion advocacy. It is also a time of crisis, with ongoing conflicts in several regions and on the heels of the COVID-19 pandemic.

Campaigning for abortion rights in this context is particularly challenging. This presentation aims at identifying effective strategies to advance abortion rights, focussing on the specific case of Argentina, where in december 2020 a successful campaign led to the adoption of a historic law enabling the legal termination of pregnancy up to the 14th week of gestation, We will draw from the main challenges faced by the « Green Wave » in this

country before and after the new law to identify approaches and lessons that could be useful in strengthening activism for abortion rights in other contexts.

Talent Jumo, Katswe Sistahood (Zimbabwe) and Hafid Derbal, terre des hommes Schweiz

Building Collective Voices, engaging in Advocacy: Experiences and lessons from Zimbabwe

Katswe Sistahood is coordinating a network of youth-focused SRHR organisations within the programme of terre des hommes schweiz, taking a collaborative approach in driving evidence-based advocacy towards improved SRHR outcomes and the prevention of gender-based violence. We work with young people to mobilise and organize at the grassroots level through dialogue, arts, and theatre as entry points for community engagement. Their local level work enables them to collect stories and data that is used to facilitate national dialogue on emerging SRHR issues including advocacy targeted at policy reform through Parliamentary engagement. Critical issues of concern include sexual offenses against young people. The presentation will focus on how youth mobilised to challenge impunity and deliver stricter legal frameworks and a GBV survivor centred justice system.

Susanne Rohner, Sexuelle Gesundheit Schweiz

BAR TALK: Advocacy strategies to counteract anti-gender movement in Switzerland

Sexual and reproductive rights are under pressure. Anti-SRHR-groups work with similar tactics around the globe, which are also visible in Switzerland. SEXUAL HEALTH SWITZERLAND can observe this in their daily work. Current examples are the two anti-choice-initiatives which want to install new barriers to abortion and contribute to stigmatisation. Another example is the regular attacks against comprehensive sexuality education which culminated this year in a criminal charge against our organisation and two staff members. We also observe with concern increased attacks against the rights of young trans people which have recently led to campaigns and the dissemination of misinformation.

Over the years, we have developed various advocacy strategies to defend sexual and reproductive rights and to counteract opposition. In doing so, we build on our expertise as an umbrella organisation relying on the knowledge and experience of SRHR-professionals and refer to international human rights standards. In this regard, we also participate in monitoring processes for example in the context of CEDAW and the Istanbul convention. On national, European and on international level, we are collaborating with partner organisations and networks. This cooperation enables us to strengthen our position, to coordinate messages, to speak in one voice and to reach out to new audiences. It is key to also have politicians, civil servants, academics and the media on board. We reach out with adapted messages to different target groups and also address the moveable middle. Importantly, we do not only counteract opposition, but we proactively contribute to set the SRHR-agenda. Therefore, we also push for the revision of outdated legislation, which builds on values, that stand against human rights standards. We did this for example at the occasion of the 20th anniversary of the abortion legislation in 2022 with a parliamentary initiative that wants to remove abortion from the Swiss penal code.

PART 2: Intergenerational queer/feminist panel, Senegal

Codou Bop, Aminata Dieng, Fatou Diatta (Sister Fa) and Serena O. Dankwa, IAMANEH Switzerland (Moderation), Loes Oudenhuijsen (Whisper translation for Aminata Dieng)

Resisting « anti-genderism” in Senegal, yesterday and today

Three women activists from three generations are discussing the stakes and strategies of working on sexual and reproductive health and rights in Senegal over the last five decades. Following a brief individual input from their different perspectives, the panel will discuss old and new ways of resisting (neo)conservative forces that seek

to prevent the rise of local women's and queer movements, limit initiatives for Comprehensive Sexual Education (CSE) and prevent the implementation of existing abortion laws. While the panel focuses on Senegal, it also puts this case into a broader transnational and postcolonial perspective.

PART 3: Service providers and access to sexual and reproductive health and rights in challenging environments

Nelly Staderini; Médecins sans Frontières Suisse

Safe abortion care and new approaches

From 2016 to 2020, a recent WHO report shows stagnation or worsening of Maternal Mortality Rate in most regions of the world. 287 000 maternal deaths were reported in 2020 worldwide. More than 13% of this mortality can be attributed to Unsafe Abortion. This is a known leading but entirely preventable mortality cause as Abortion Care is a common health intervention. 45% of all abortions are unsafe, of which 97% take place in developing countries.

MSF has invested since few years on this issue. In 2004, MSF had an institutional statement on Abortion Care. In 2014, a critical internal review was done, showing slow progress of the integration of Abortion Care into Health care practices. Barrier to seek or to received care where analyzed. A dedicated Task Force was endorsed with a catalytic ambition to increase the access to Safe Abortion Care. After few years of implementation of a dedicated strategy with innovative tools, results are here and available to be shared with a broader external audience. More than 35 000 Safe Abortion Care where provided, yearly, in the last 3 years. Various model of care where piloted including Self Care. Sensitization, training, and research were done to increase internal knowledge and understanding about needs and medical answers to provide. Today, medication abortion is mainly done with rare complication and no mortality associated. Despite this internal highlight and success, the offer of Safe Abortion Care remains fragile in many settings. Stigma, legal frame, politization and polarization of abortion are external barriers that remains. Turnover of staff, lack of prioritization and fears are internal barriers that need permanent attention. Patient based approach, as a key strategic pillar of MSF intervention is a paradigm shift that is helping to empower women to decide for their own health. This need recognition and support as an innovative strategy showing great results.

Lack of access to safe, timely, affordable, and respectful Abortion Care is a critical public health and human rights issue that need to be solved.

Diana Manilla Arroyo, IFRC (International Federation of Red Cross and Red Crescent Societies)

How to tackle safe abortion care in Emergency Response Unit

Red Cross and Red Crescent Movement (RCRC) teams providing health care in humanitarian settings may at any point in time face a request for an abortion. Globally, abortion is a common procedure, with 6 out of 10 unintended pregnancies and 3 out of 10 of all pregnancies ending in induced abortion. However, global estimates demonstrate that 45% of all abortions are unsafe. Each year, 4.7–13.2% of maternal deaths globally can be attributed to unsafe abortion. In high and upper-middle countries regions, approximately 30 women die for every 100,000 unsafe abortions; in low-income regions, that number rises to 220 deaths per 100,000 unsafe abortions (Say et al., 2014). This is a critical public health issue increasingly concentrated in developing countries and among groups in vulnerable and marginalized situations—the very places where RCRC emergency teams work.

There are a number of gaps and challenges related to the provision of safe abortion care, including legal barriers, lack of health workforce trained and competent to provide safe abortion care. However, unsafe abortion is a critical public health issue which cannot be neglected. For this reason, technical experts from the

RCRC Movement discussed how RCRC Emergency Health Units can provide reproductive, maternal, new-born, child, adolescent, and sexual health care, including safe abortion care to the full extent of law in humanitarian settings. Beside legal challenges, which may not even be the biggest barriers, risks to providers (local and expatriates), abortion stigma and other challenges need to be tackled. Say L, Chou D, Gemmill A, Tunçalp Ö, Moller AB, Daniels J et al. 2014. Global causes of maternal death: a WHO systematic analysis. *Lancet Glob Health*. Jun; 2(6):e323-33.

Estelle Wagner, IPPF (International Planned Parenthood Federation)

Delivering sexual and reproductive health care services in crisis: safe abortion care

IPPF is a global healthcare provider and a leading advocate of sexual and reproductive health and rights (SRHR) for all, with a presence in over 146 countries. At the heart of our mission is the provision of person-centred sexual and reproductive health care to all, that responds to the unique needs of the individual, no matter how remote or how challenging the political, social, or humanitarian context. Women and girls in humanitarian settings face increased risk of unintended pregnancies and are at a greater risk of sexual violence. However, weakened and overburdened health systems often means reduced access to both contraceptives and abortion care, including post-abortion care.

IPPF works in a variety of humanitarian situations, many of which also coincide with challenging social contexts and restrictive policy environments, to provide abortion care despite disruptions to health systems. This presentation will share the challenges IPPF Member Associations face in providing abortion care to internally displaced people, refugees, and those affected by climate-crises, and the innovative ways those challenges have been overcome in order to ensure abortion care for those who need it, even in the most difficult circumstances.

Lara Sponagel, SDC (Swiss Development Cooperation)

Sexual and Reproductive Health within the SDC

The Swiss Agency for Development and Cooperation (SDC) fosters a comprehensive three level approach to Sexual and Reproductive Health (SRH) based on interventions on a global, regional and local level. Through a diverse set of initiatives and projects, the organization connects global discussions to regional and local settings and challenges. Thereby addressing various needs within the political and socio-economic landscape through interdisciplinary actions. As a concrete example for such a holistic approach, we are introducing you to the Safeguard Young People Program (SYP), the flagship youth program of the United Nations Population Fund (UNFPA) East and Southern Africa Regional Office. The program supports adolescents and young people (aged 10-24) to be healthy and empowered by providing extensive knowledge and skills regarding their sexuality, their rights and their health seeking behaviors. It specifically addresses sexually transmitted infections, unintended pregnancies, child marriages as well as gender-based violence by encompassing concrete interventions on a global, regional and local level.

Part 4. Reclaiming sexual and reproductive health-rights-spaces

Workshop with all participants; facilitated by Martin Leschhorn Strebel

Conversation café: Reclaiming spaces for sexual and reproductive rights

In groups and provided with coffee or tea, the participants will have a deep dive into reflections on how we as actors can reclaim spaces for sexual and reproductive rights in an hostile environment. We will explore this question based on the guided conversation café-method. By this we will deepen the discussion on strengthening sexual health and rights, capture the reflections and ideas of all the participants, and achieve a common understanding on how to act on today's topic.