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Women's Global Network for Reproductive Rights



25 years of taking a stand for Access to Safe, legal abortion for ALL women and girls

by Aika van der Kleij

WIA joins Aika van der Kleij, coordinator of the Women's Global Network for Reproductive Rights (WGNRR) in retracing the steps of the network, since the time it was founded in 1984 and in envisioning an even more challenging future.

The Seeds of Solidarity

WGNRR has a long history. Its origins were with a group of primarily European/Socialist – Feminist women who came together to share information and strategies, and to find mutual support in their fight for safe and legal abortion. They formed an *International Campaign for Abortion Rights* which was coordinated by a group in London. With the influence of Latin American women then living in Europe, this group later expanded to include the issues of access to safe and legal contraception and sterilisation, and changed its name to International Contraception, Abortion and Sterilisation Campaign (ICASC).

In 1984, ICASC organised the fourth International Women and Health Meeting (IWHM). Women from Asia and Africa as well as from Latin America, Europe and North America participated. This meeting made the decision to change the organisation from ICASC to Women's Global Network for Reproductive Rights (WGNRR). With this name change came a change in focus too. In addition to addressing issues of contraception, abortion and sterilisation, there was an emphasis on the context in which such services were made available to women.



Staff and volunteers at the WGNRR office in Amsterdam.

In the next IWHM held in Costa Rica in 1987, WGNRR members decided to launch the *Campaign on Maternal Mortality and Morbidity* with actions focused on an International Day of Action on Women's Health. May 28th was chosen as the date marking the day the decision to launch the campaign was made.

In this same meeting, many women proposed that work should be started in the area of maternal morbidity and mortality. Because deaths from unsafe abortion is a significant aspect of maternal mortality, it was decided that the focus of the campaign be the legalisation of abortion. However, women from several countries thought the best way to introduce abortion issues in their countries was through addressing maternal mortality and morbidity since abortion issues could not be tackled openly.

In 1990, another members' meeting was organised at the 6th IWHM in Manila, Philippines. By then, the Global network had grown and included members from Africa, Asia-Pacific and Eastern Europe. Broad policy decisions were taken regarding the future direction of the campaign. They particularly reaffirmed reproductive rights as a political movement. The campaign on *Maternal Mortality and Morbidity (MMM)* 1988-1998 was continuing, with its annual Call for Action focusing on a specific theme.

A Growing Tree

May 28 has become the day on which an increasing number of women's groups, and national and regional women's health networks organise a wide variety of activities focusing on different aspects of the Campaign and women's health. The themes take on different profiles in different regions, with varying regional involvement and actions. The Coordination Office (CO) plays the role of motivator for local activities. The selection of topics involves consultation with various groups, participation in meetings, and calls for ideas.

Because the topics change yearly, the level of involvement of the members varies, depending on the relevance of the issue to their respective organisations. Some members focus only on May 28th while others work on the issue for months. For example, Latin America focused on abortion from May 28th – September 28th annually. Abortion was and continues to be one of these topics.

Each year, background information and campaigning materials are sent out to members in three languages. Several members take the initiative to translate the information into their local languages. The method of campaigning on the 28th of May and onwards depended on the members in the different countries. Suggestions are always provided in the campaign materials. Since WGNRR felt

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WGNRR office in Amsterdam.

strongly about members adjusting the activities to their own realities, strategising took place at the local level.

In essence, the campaigns are best understood as operating at three levels -international, national, and grassroots. Campaign activities at each level reinforces and strengthens each other. The international level, coordinated by the CO, focuses on identifying issues which are common and/or relevant to all of the regions and then information on these issues are collected and disseminated. The national level of the campaign is organised by national networks or collectives, where these existed. The grassroots level is taken up by individual groups.

Twice, during the MMM campaign, the Call for Action focused explicitly on safe abortion. In 1993, we called for "breaking the silence about (illegal) abortion." The following year, the theme centred around "Safe and legal abortion." Because it was one of the subjects of the Cairo conference, the issue of abortion reached both press and the public in many countries. Although the program of action did not ultimately include a call for abortion to be legalised, it did identify unsafe abortion as a public health concern.

demographic targets and a narrow focus on family planning, replacing it with a

Cairo also moved away from



reproductive rights and health perspective. However, some WGNRR members were critical of the so-called Cairo consensus, arguing that, on the ground, only the words were changing, not the practices. Others in WGNRR such as those from India were concerned that women's health was being too narrowly seen as a matter of abortion and contraception. It was not until 2007 that WGNRR launched another Call for Action, specifically on Access to Safe and Legal Abortion.

Strategies from the Ground

The MMM was evaluated through regional meetings and a final meeting in 1997 with members. An essential aspect which emerged was the need to define the political, economic, and social forces impacting upon countries where participating organisations function in the field of women's health. These forces are characterised by privatisation within the neoliberal framework. It was evident that given the international political, economic and social neoliberal policies being enforced in many countries, particularly in the so-called developing regions, there was a necessity to refocus the campaign towards criticising these policies, highlighting their impact on women's access to quality health care, and work towards ensuring women's rights to comprehensive, gender sensitive, and quality health care.

For this reason, WGNRR decided to change the focus of the campaign. It recognised that maternal mortality and morbidity remains a major problem, and that many groups will continue to work around these issues. But, for the next period, the International Day of Action campaign targeted those international and regional mechanisms operating to decrease both access of women to Its new strategic plan includes organising an abortion advocacy institute. quality health care and diminish the rights which enable them to demand such access.

From 2003-2007, the Women's Access to Health Campaign (WAHC) was launched together with the People's Health Movement (PHM). campaign sent out an annual Call for Action on a key aspect of women's health. Women will be able to achieve social equality only if they can have access to proper health care, reproductive and sexual rights and reproductive options, and freedom from sexual violence. The WAHC is presently closed and under evaluation. Despite the considerable difficulty it takes to overcome obstacles that prevent abortion from being considered a reproductive right, such as the criminalisalisation of abortion, global trends are towards increasing access, safety, and legality however uneven the progress.

In 2007, several members mentioned their difficulties in using the Call for Action materials because the simple mention of the word "abortion" was taboo. On the other hand, in a regional consultation meeting organised in Nicaragua in November 2007, WGNRR members came up with a position statement that strongly condemned the new penal code of Nicaragua that criminalises abortion (including therapeutic abortion). Strategies suggested included an open debate on the maternal deaths resulting from unsafe abortions.

A Rich Harvest

In 2008, WGNRR will set a new campaign method. Based on past experiences, and with inputs from present members, WGNRR campaigns will be initiated while specific concerns of WGNRR members will be integrated

into existing campaigns. One other aspect of its new strategic plan includes organising an abortion advocacy institute. This idea was conceived in the 2005 International Women's Health Meeting. Interest in it was re-affirmed at the 2007 global safe abortion conference in London.

Tactics and strategic approaches will be exchanged between members who have experience as trainors and members who need to learn from the experiences as students. Linkages with diverse stakeholders working in the abortion domain will be set up through the strategic alliances. This new initiative will allow WGNRR to play an important role in the ongoing fight for universal access to safe, legal abortion globally!



Aika van der Kleij

Aika van der Kleij is presently the Coordinator of WGNRR since February 2007. She is asked to assure the transition of WGNRR and set up structures to position WGNRR, while it works to become a more participatory and active network based in the Global South. Aika studied International Law with a specific focus on Women's Rights at the University of Amsterdam, University of Fort Hare in South Africa, Université Paris I in Paris. Her past work experience is with Oxfam Novib, UNDP, and the Center for International Legal Cooperation.