



ABORTION & REPRODUCTIVE JUSTICE CONFERENCE 2024



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ABORTION & REPRODUCTIVE JUSTICE CONFERENCE 2024



FROM THE DESK OF THE COORDINATOR

340 participants from 63 countries!

We had the privilege and pleasure of welcoming safe abortion rights activists, advocates, program managers, artists, writers, theatre activists, feminists, persons of all ages, genders, sexual orientations, religions, abilities, all gathered under one roof for a unique conference.

ARJC is the only conference of its kind in the world. Its focus is on abortion in the context of reproductive justice and it remains true to its roots. It was founded by Professor Colleen MacQuarrie at the University of Prince Edward Island in 2014 and has always been held in a University campus since.

Why Reproductive Justice?

Why not Reproductive Health? Or Reproductive Rights? Or Reproductive Choice?

As SisterSong Women of Colour Reproductive Health Collective argued, one of the key problems addressed by reproductive justice is the isolation of abortion from other social justice issues that concern communities of colour: issues of economic justice, the environment, immigrants' rights, disability rights, discrimination based on race and sexual orientation, and a host of other community-centered concerns.

By shifting the focus to reproductive oppression – the control and exploitation of women, girls, and individuals through our bodies, sexuality, labor, and reproduction – rather than a narrow focus on protecting the legal right to abortion, Reproductive Justice is developing a more inclusive vision of how to build a new movement.

The founders of reproductive justice saw that despite having the legal access to options such as abortion, they were not able to exercise reproductive choices as easily as their more privileged White, middle-class counterparts. For them, reproductive politics was not simply about choice, but about justice. The reproductive justice lens is therefore used to address issues related to abortion, contraception, immigration, welfare, HIV/AIDS, environmental justice, racism, indigenous communities, education, LGBTQ+ rights, and disability, among other issues impacting people's reproductive lives

For example, the right to parent in safe environments would encompass issues such as police brutality, refugee status, water crisis, climate change, prenatal policies and other issues that are largely absent from pro-choice advocacy which focuses mainly on services and the law. Thus, the focus of RJ is on structural and systemic changes that can support rights.



ABOUT ARJC 2024

ARJC IV builds on three previous conferences with the same name held in the University of Prince Edward Island in Canada in August 2014, in Ulster University in Northern Ireland in July 2016 and in Rhodes University in South Africa in July 2018.

AIM:

This conference aims to bring together academicians and activists and provide a forum for shared learning and strategising as well as networking on the issues of abortion and reproductive justice.

Reproductive justice is based on the theory of intersectionality which states that people have different life experiences and opportunities based on how identity categories, such as race, class, gender, and sexuality, interact with each other. This means that it is often harder for oppressed people to access healthcare because of factors such as education, income, geographic location, immigration status, and potential language barriers.

OBJECTIVES OF THE CONFERENCE:

This interdisciplinary conference will aim to

1. Bring together researchers, activists, policy makers, health professionals, artists and performers, drawn from a range of stakeholders such as social policy, criminology, sociology, law and policy, human rights, women's health and rights, medicine, psychology, history and the arts working for safe abortion from around the world.
2. Provide a platform for delegates to explore, identify, share and pursue learning and research opportunities on a range of issues relating to abortion and reproductive justice in context, including access to abortion, activism and abortion politics.
3. Create a potential for cross movement collaborations and synergies to strengthen the safe abortion advocacy work with allied movements in social justice such as the queer movement, rights of people living with disabilities and others.
4. Contribute to the vision of universal access to safe abortion and reproductive justice for women the world over.

VISION:

Our vision for this conference is to create a safe, inclusive, feminist, political, diverse and engaging space to look at Abortion & Reproductive Justice and also the politics of safe abortion in the context of the cis-heteropatriarchy, neoliberal-capitalism and the military-health-industrial complex.



❖ PRE CONFERENCE ❖

PREPARATORY VISITS

ARJC IV started with envisioning the conference that we wanted to organise way back in 2020. However, that year the global pandemic broke out and we had to take a pause. When the pandemic started to recede and international travel resumed, we started working with our partners in Thailand to find a university space to host the conference. Over the course of the next year we worked closely with the local Thai partners and the local event coordinators to plan these visits and schedule meetings and appointments in advance as per the agenda for the visit.

The local partners in Thailand connected ASAP with the **Faculty of Public Health campus, Mahidol University, Bangkok, Thailand** and we visited the campus to see the venue and meet the team in November 2022. The space was suitable for our purpose and we decided that this will be the venue for hosting ARJC IV. Therefore, we went back in February 2023 to finalise the campus as the venue for the conference and get formal permissions to organise ARJC IV. We visited again in June and November 2023 and in January 2024 for preparations for ARJC IV. During these visits we would survey the venue, look at the classrooms and arrangements available and finalise the requirements with the Mahidol University team. The visits helped us to plan the layouts or placements for the registration desks, the pennants, safe abortion rights and feminist messages throughout the venue. We also noted gaps such as lack of ramps in the auditorium and not enough accessible toilets and therefore the local event coordinator worked with a team to build ramps for the main auditoriums and two toilets which post-conference we gave away to the university.



The local partners in Bangkok, Thailand were able to arrange meetings with officials from the **Ministry of Public Health (MoPH), Government of Thailand**. The MoPH extended their support to co-host ARJC IV in Thailand and they worked with relevant departments to ensure the participants could travel to attend the conference with ease.

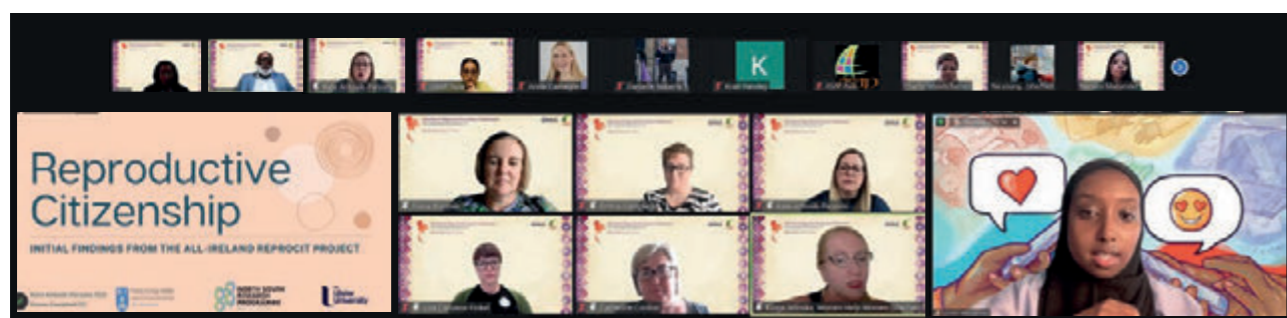
In November 2023 we got 20 local Thai team members to work on-site for the conference days and supervised by the local event coordinator. In November and December 2023 we had orientation meetings and calls with them, and in January 2024 we also hosted a 2-days Youth Advocacy Institute (YAI) for the local Thai team. The purpose of the institute was to discuss the importance of safe abortion rights from the gender, SRHR and human rights lens, with the local Thai team. Therefore the criticality of organizing ARJC IV which is the only global conference on safe abortion rights through the reproductive justice lens.

During our preparatory visits we visited several other vendors and markets and checked and these visits helped us visualise and plan the conference. We met the caterer, **Love Eaten Catering**, for tasting samples of the food they would serve at the pre-conference and conference. These tastings helped and we gave them feedback to prepare the meals keeping in mind the diverse group of participants from all over the world, and made provision for veg and non-veg halal food throughout the conference. We also met **Muy and visited her organization, Full Yin Women Wellbeing Center**, and checked samples for the conference. We met the photographer and videographers for the conference and discussed our requirements with them. Overall, the preparatory visits helped greatly and we checked the space and ensured better accessibility, checked the technical requirements for the conference, contacted the vendors for the conference and made important connections in order to organise the conference successfully.



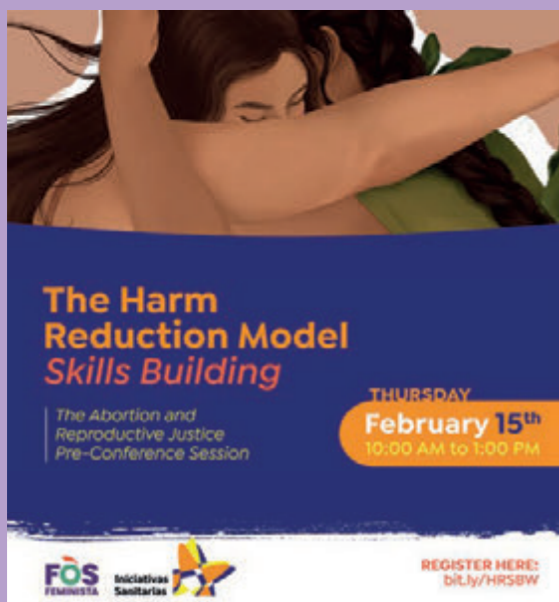
PRE CONFERENCE

REGIONAL WEBINARS: ASAP's ARJC Regional Webinars held in the months leading up to the conference provided a platform to spotlight local issues within the context of safe abortion rights advocacy across different regions. These sessions covered a wide range of topics, reflecting the diverse challenges and successes in advancing reproductive justice globally. From the **SWANA and SA Region's** exploration of reproductive justice in the context of freedom from war, to discussions on shaping better laws and the impact of demographics and population policies on safe abortion rights in **Asia**, each webinar delved into critical aspects of the advocacy landscape. Participants gained insights into the contrasts of abortion policies and laws in **Latin America**, explored reproductive justice systems advocacy from a Muslim perspective in **North America**, and examined the evolving landscape of abortion access in **Canada**. Furthermore, the webinars offered a glimpse into future directions for abortion and reproductive justice from a **European perspective** and highlighted possibilities and challenges in **Africa**. These sessions fostered crucial dialogue, knowledge-sharing, and collaboration, contributing to an informed and empowered advocacy community working towards safe abortion rights and reproductive justice worldwide.



WORKSHOPS: The pre-conference workshops featured a diverse array of empowering sessions such as cross-movement building and access through interventions, online safety for advocates organised by Asia Safe Abortion Partnership, the meaning of reproductive justice, cliteracy, self-managed abortion and the law in the Global South, reproductive citizenship through arts, and the intersection of disability, abortion, and prenatal testing.

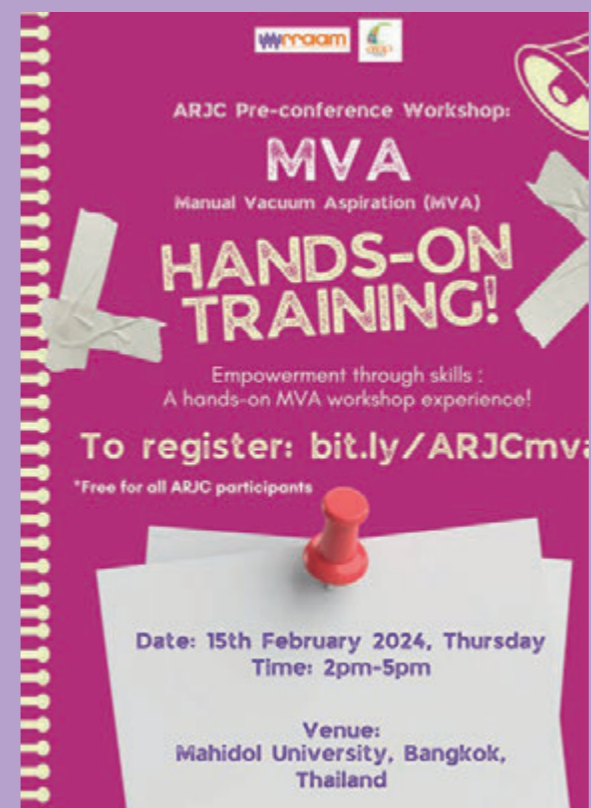
Fos Feminista facilitated an informative session on **harm reduction skills building:**



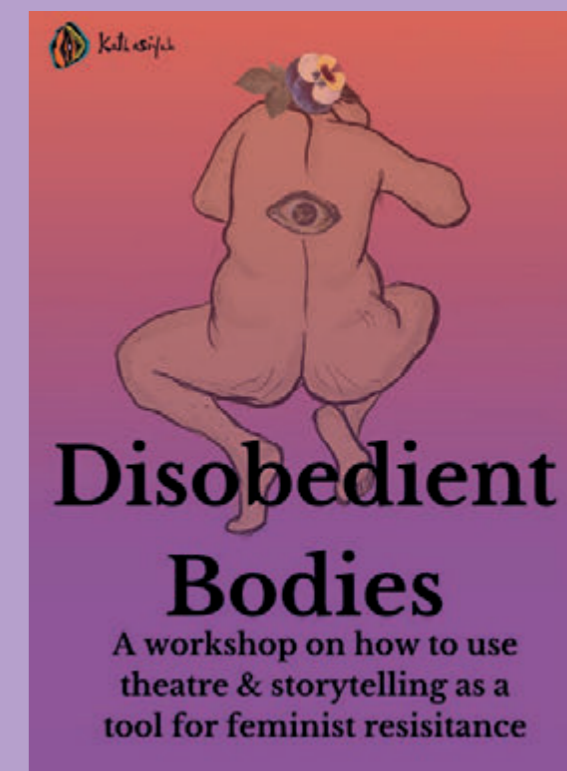
Tamtang Group, Samsara, WGNRR, RRAAM, and Women on Web collaborated to **shape feminist narratives on safe abortion in Southeast Asia:**



Participants had the chance to engage in hands-on experiences, such as the **MVA workshop** by the Reproductive Rights Advocacy Alliance Malaysia (RRAAM):



Participants explored innovative avenues of advocacy with Ayesha Susan Thomas' **"Disobedient Bodies" theatre workshop:**



Workshop on **protecting defenders of sexual and reproductive health and rights** by Amnesty International:



Workshops also delved into the complexities of advocacy, including discussions on the **decriminalization and criminalization** led by RESURJ, Hidden Pockets Collective, The A Project, ACCEDER, and Vecinas Feministas:



These workshops provided valuable insights and skills to participants, fostering a stronger, more inclusive movement for reproductive rights and justice globally.



OPENING CEREMONY

The welcome address was given by **Dr. Suchitra Dalvie, Coordinator, ASAP**

Karibu, Namaste, Marhaba, Swadiha, Ayubowan, Afio mai, Bienvenida, Selamat Datang, Eoseo oshipshio, Swagatam, Witamy and Welcome!!

It is an unbelievable milestone on this remarkable journey that started in March 2008 in a meeting room in Kuala Lumpur, Malaysia. 35 individuals from across the region had gathered to deliberate on a question that was challenging and critical.

Do we need a regional forum for safe abortion rights advocacy?

After much discussion we agreed that indeed we did and then set about choosing a suitable name. As we deliberated between women's health/ reproductive health/ maternal mortality and such other 'safe' names, Dr SP Choong spoke up.

He asked us to consider that if we self-censor from the very beginning, what kind of advocates would we be?

And that dear reader was the founding of the Asia Safe Abortion Partnership.

Boldly declaring what we stood for. Firm, unapologetic, passionate and centered. That was just the start of a collective journey that has evolved into a movement.

In the words of a famous poet from India, Majrooh Sultanpuri,

मैं अकेला ही चला था जानबि-ए-मंजलि मगर
लोग साथ आते गये और कारवां बनता गया

(I set out toward the destination as a lone man, but people joined along and formed a caravan)

That same year, 2008, was when Apple had launched its first smartphone and the Whatsapp app was still being developed. We communicated through emails and conducted in-person workshops for print media journalists. Fast forward to this year, 2024, on the other side of a devastating global pandemic and where we can't imagine a world without hashtags, reels and Ai.

Today, we gather here not merely to commemorate the passing of time, but to celebrate a journey - a journey that transcends the ordinary and embraces the extraordinary.



OPENING CEREMONY HIGHLIGHTS

Prof. Phitaya Charupoonphol,
Faculty of Public Health, Department
of Family Health, Mahidol University:



Dr. Bunyarit Sukrat, Ministry
of Public Health, Thailand:



Dr. Krit Leethongin, NHSO:



Light ceremony opening the conference:



Traditional dance by the Nepal team:



As we stand at the threshold of the 15th anniversary of our organization, I am reminded of the timeless wisdom embedded in the hero's journey, a narrative structure that resonates with the very essence of our collective odyssey.

In every hero's tale, there exists a call to adventure, a beckoning to leave the comfort of the familiar and embark on a transformative quest.

Fifteen years ago, our organization answered that call. We embraced the challenge, the uncertainty, and the promise of change. Our journey began not as a quest for personal glory, but as a commitment to a cause greater than ourselves—an aspiration to make a profound impact on the world.

The road we traveled was not always smooth; we encountered trials and tribulations that tested our resolve. Yet, like the hero facing adversity, we learned to adapt, to overcome, and to emerge stronger. Our victories, both small and monumental, are the chapters of our saga, written with the indomitable spirit that defines our organization.

In the hero's journey, allies play a pivotal role in aiding the protagonist on their quest.

Today, I am honored to stand among allies—individuals whose dedication, passion, and unwavering support have fueled the momentum of our expedition. Each one of you is an indispensable part of our narrative, contributing your unique strengths to the symphony of our collective efforts.

In closing, I extend my deepest gratitude to each and every one of you who has played a role in shaping our story. Together, we are the architects of our destiny, and as we celebrate this milestone, let us reaffirm our dedication to the hero's journey that lies ahead.

May the next 15 years be filled with even more remarkable chapters, and may our organization continue to shine as a beacon of inspiration and positive change.

Thank you for being an integral part of this extraordinary odyssey.

What is it that binds us together as a community of solidarity and disruption and revolution?

We will find out over the next three days as the only abortion focused conference in the world unfolds!

RECEPTION DINNER AT ARJC IV

ASAP worked hard to present ARJC IV as a feminist space and to foster a spirit of community and celebration. This was much needed as advocates face severe backlash, a pause and even setbacks induced by the global pandemic and several crises and conflicts which has impacted the safe abortion rights movement. Therefore, ARJC IV was a space to gather and voice our issues, but also a reminder of solidarity and hope. And what better way to initiate this with a reception dinner for all on 15th February to celebrate our work and resistance, and encourage our hopes and plans for the future!

The dinner was an accessible and cheerful space, decorated with pennants made of local Thai cloth and fairy lights. There was music, dance and even a fashion show organised by ASAP's Country Advocacy Networks (CAN), partners and members.

The ASAP Youth Champions and members organised and participated in dance and fashion show and other fun activities that was planned and ably facilitated by Nujhat from YouthAID, Bangladesh and Joshua from PAN, Pakistan.

The caterers for the conference, Love Eaten Catering, a local group who works with small farmers to procure local and organic produce arranged a buffet dinner that was cooked with warmth and was delicious.

There was a 'witch-hunting' booth led by Ayesha Susan Thomas, a feminist theater artist and part of a group called KathaSiyah. Ayesha cosplayed as a witch and invited participants to play a game to find out if they were a witch or in other words if they were independent women and just about anyone who challenged patriarchy. (It turned out that almost everyone there were witches indeed!)

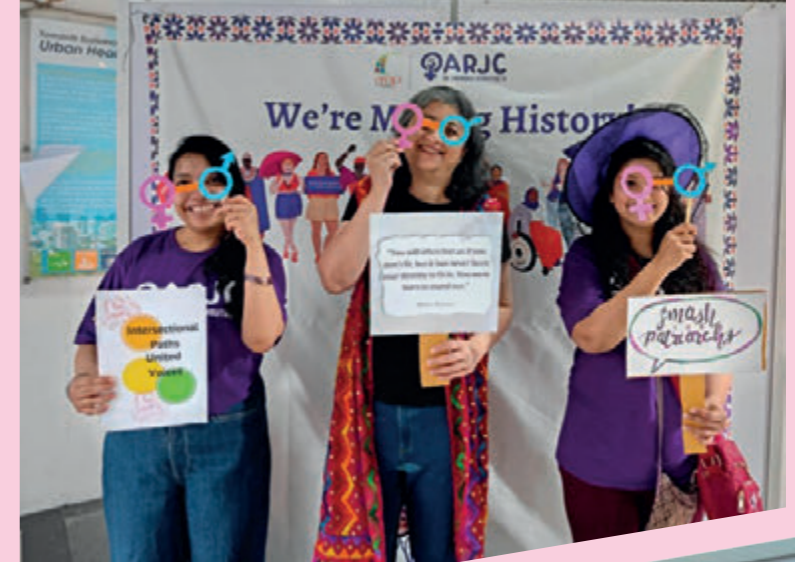
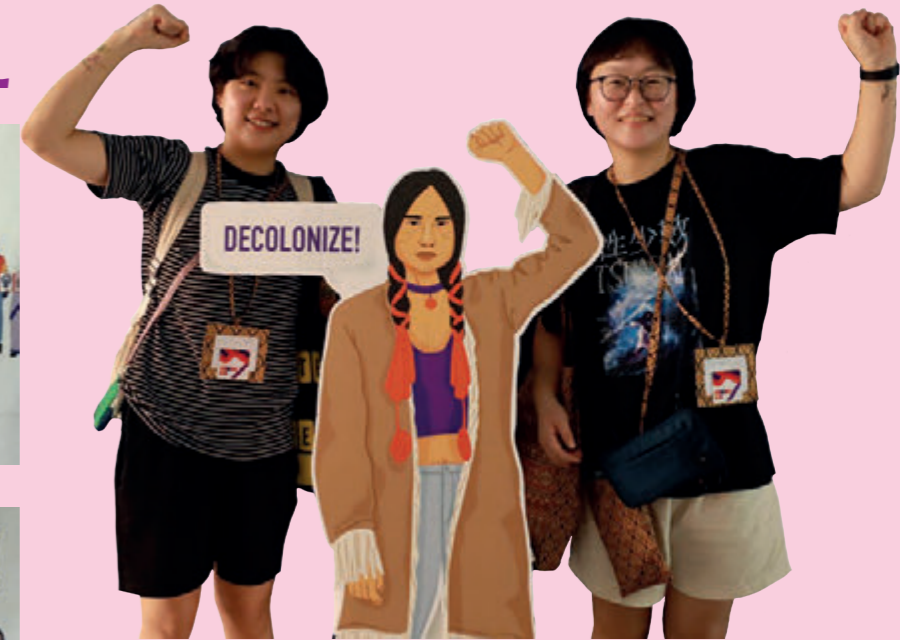
The reception dinner was a vibrant space for participants from all over the world working on safe abortion rights to reconnect with old colleagues, make new connections, share their experiences and aspirations, and set the tone for the very exciting conference over the next 3 days.



⌘ THE WITCH HUNTING BOOTH



⌘ THE SOLIDARITY WALL





8 CATERING

Love Eaten Catering were the caterers for the conference. Their goal is to provide nutritious, delicious and sustainable meals. Throughout the conference they ensure the food was prepared with care, right from selecting local, seasonal and organic ingredients to providing meals in biodegradable packaging. Their mission is to provide good food to consumers and support small businesses and farmers to help create a sustainable food and consumption system.



8 REGISTRATION MATERIALS

Muy is an activist who works to support activists with the help of a women led group she runs called the, Full Yin Women Wellbeing Center. She designs and creates materials and provides meals for activist groups. We contacted Muy to create materials for the ARJC IV and she worked with her group to create the registration materials, including, the tote bag, sling bag, lanyard with name tags, and the pennants for conference decor. All these items were made from local Thai cloth in vibrant colours and traditional patterns and added to the conference greatly. Muy also created some of the merchandise such as the menstrual cycle informational apron and the snakes and ladders game for raising awareness on safe abortion rights. Muy's contribution to the conference is immense - she delivered all materials on time and they were of excellent quality. Participants appreciated the materials and couldn't praise how colourful and yet functional the registration materials were and stood out from the regular conference give-aways!



KEYNOTE ADDRESS

THE UNFINISHED REVOLUTION

Address by **Dr Subatra Jayaraj, Chairperson**
Co-Chaired by **Prof. Phitaya Charupoonphol, Dr Fiona Bloomer**

Good morning, everyone, Sawasdee Kha, and welcome to the 4th Abortion and Reproductive Justice Conference here in the wonderful campus of Mahidol University, in Bangkok.

Around 20 years ago, a twenty something brown skinned young lady landed in the Republic of Ireland, from halfway around the world; headed to university hoping to improve healthcare in her generation. Ireland was a country so vibrant and loving, where people were wonderful. She fell in love, was in relationships, had sex, could access contraception and yet, because of the intersection of colonialism, socio-political and religious dogma, safe abortions were still very much illegal and not accessible.

That young lady flew back home to work in this part of the world. To Malaysia - where safe abortion care was legal, despite many challenges. That young lady was me. And I stand in front of you today, as the only young, female, openly public, safe abortion provider in my country.

Savita Halappanavar, on the other hand, was not as lucky. She was my age, we both started our careers in healthcare around the same time, and she came to continue her work in Ireland. In 2012 she became pregnant, till she had an antenatal event at 17 weeks of pregnancy. Her request for an abortion could have saved her life. Savita died from infection after her request for a termination of pregnancy was denied on legal grounds.

2 similar people, 2 different outcomes - and if you ask me, it all came down to luck. Luck of where we are in the world, luck of the colour of our skin, luck of access to healthcare and luck of evading the patriarchy. A cat and mouse game where we gamble individual lives everyday to uphold a system of global power based on the gender of men, that is totally unacceptable in 2024.

Well, I've had enough. And that is why I continue to fight. Along with feminist activist in countries globally, such as in Argentina, in Sierra Leone, and of course, here in Thailand.

Women in Ireland decided it was unacceptable too. In the wake of a nationwide outcry over Savita's death, and the wonderful work of Reproductive Justice campaigners with The Repeal campaign, Irish voters passed a landslide amendment to legislate for abortion - and the fight continues so that every abortion should be safe, free, legal and local.



As it should be around the world. Without compromise.

And yet, we continue to see poor access to reproductive health, options and care globally. Technology has come a long way in improving safe abortion services. But it is not reaching the communities where it is needed the most.

Everyone has the reproductive right to decide if they want to have children, when they want to, and how many they would like to have, if any. But there cannot be expression of rights without justice.

And we cannot talk about Reproductive Justice without addressing power.

We, at the Asia Safe Abortion Partnership, brought this 4th ARJC to this part of the world, because it is essential that our voices here are heard as well, over the power of global hegemony. We set out to plan this conference to challenge the cis heteropatriarchy that attempts to control sexual and reproductive health. We also wanted to challenge the notion of medicine that sees women's health as a health industrial complex.

We realise, despite being a small organisation struggling with our own issues, that we are also positioned within the larger area big picture. We see it as essential, that we situate our advocacy in reproductive justice within

grassroots organizations from the Global South - who are most affected by injustices. Our journey in ASAP over the past 15 years has also focused on youth advocacy in countries across the region, which have empowered Youth Champions that you will meet over the next couple of days.

Friends, we cannot talk about Health as a Right without addressing the neo-liberal capitalist system that champions development but only for the select few. That is also why we need to decolonise our movement.

If, as the Nobel laureate economist from the global south, Amartya Sen outlined; when he described true development as the freedom to choose, then, (I always thought why the hell) should women be left out of the equation?

This is why we fight for our voices. Because disempowered healthcare is not justice. Non-inclusive healthcare is not justice. Medical patriarchy is not justice.

The COVID-19 pandemic magnified health inequalities globally and within countries. I remember, once at the height of the crisis, being in a moonsuit and facemask deep in the emergency response, and I was on a phone call with a colleague, where nearly every bed in her ICU was occupied by a pregnant person - something which we never

saw before. In Malaysia, our Maternal Mortality Ratio doubled in the period of a year, canceling out gains that we had accomplished over decades. The pandemic proved what we keep saying – how that in crises, when push comes to shove – services, funding, and political will for women’s health and SRHR is the first to go.

The unmet need for healthcare is stark.

We hear the voices of women in conflict, and they keep shouting that: Miscarriages in Gaza have increased 300% under Israeli bombing and that Palestinian women undergo C-Sections without anaesthesia; Congolese women take contraceptives for fear of getting pregnant due to rape as a weapon of war. Rohingya women have no menstrual hygiene products; and Indian pregnant persons wonder whether ending their lives if raped is a sin.

Decolonisation is not a buzzword to us. We live it every day.

Health inequalities exist because of long term systematic disadvantages, not necessarily what we do as individuals. So our focus should be on health, not just the healthcare industry. And on social determinants of health and for example, demedicalisation as one of our joint strategies in reproductive justice.

When we speak about health inequalities, I also believe that we should be critical of knowledge in relation to health equity. And also to be critical of ethics in health – specifically for this conference, thinking about the ethics of where knowledge is generated, how knowledge is distributed and how it is consumed.

We take note also, that as a movement, we haven’t been entirely welcoming to other social justice efforts.

The queer community, people with disabilities and people living with HIV are frequently left out of reproductive justice conversations because yes, it takes more effort, more thought, more resources at times. So we put it on the back burner – because we are already fighting so many fires.

But we are not free unless everyone is free. And we must commit to being a more inclusive movement in practice not only in words.

Granted, we know that it is not easy. As an Asian woman of Indian heritage, practising in the medical patriarchy, inclusivity is not something that was taught to me. In fact, it was more of a realisation that I am not the only person left out of the system.

Medical education fails us from the get-go,

complete with misogyny from textbooks, discrimination from our colleagues, and punitive action by policymakers. We need to mainstream the gender lens in medical practice, because ultimately, it is the experience of our service seekers that is the most important. Our next panel kicks off this conference exactly because of that, because we know that abortion seekers are the most important stakeholder in all our conversations.

Lived realities matter.

It is not enough to me in 2024, that abortion is still a question about life and death. It is also not enough that women merely survive. I want all of us to be free and to have thriving lives!

Everyone should have the choice over their own reproductive decisions, no matter who I am, what the colour of her skin is, where in the world they are to live or what gender identity he chooses to have.

And so, the revolution continues...

How are we going to finish the revolution? How are you going to take things forward?

I am a challenge to the patriarchy just by being me – a 40 something, brown-skinned, never married, IUD wearing, Malaysian woman, who

has sex whenever I choose to, who provides safe abortion care no matter to who – I am radical just by being me.

And every single one of you in this hall today is radical in your own right. So my challenge to each and every one of you, is to ask yourself, “What radicalised you?”

And rekindle that energy over the next couple of days of the conference, and channel it into our Global SAFE Campaign, which we will launch here on our last day. The Safe Abortion for Everyone Campaign will be our Call to Action that we commit towards, here at the ARJC, to take our movement forward.

And over the next 3 days, please come up and say hi. We hope that this ARJC is a good space to share, learn, laugh, cry, and find your tribe. Stand in solidarity with our Reproductive Justice colleagues of movements from more than 65 countries around the world. Find your spark, amplify your voice, and take bold steps to think outside the box.

Because God knows, the Revolution HAS to continue.

Thank you very much, Khap Khun Ma Kha, and have a wonderful conference.

INCLUSIVITY, ACCESSIBILITY, DIVERSITY



FIRST PLENARY

EXPERIENCE OF SEEKERS

Co-Chaired by **Prof. Kritaya Archavanitkul** and **Jedidah Maina**
Facilitated by **Dr. Suchitra Dalvie**

The objective of this panel was to understand and explore the experience of a range of seekers and the challenges faced in obtaining safe abortions due to various individual, structural and systemic issues. We speak in solidarity with seekers who have and continue to lose their lives due to unsafe abortions and in solidarity with the people currently suffering through conflict, war and oppression.

The presentation sent by the **ASAP Member from Palestine** was made by **Rafi Maesto from Lebanon**. They are a researcher and clinical social worker based in Beirut, Lebanon.

The other speakers included:

- **Ms. Seema Ghani** from Afghanistan who is a Human Rights Advocate and currently the President/Chair of Afghan Family Guidance Association (member of IPPF).
- **Catherine Osita**, member of Mobilizing Activists Around Medical Abortion (MAMA) Network in partnership with Rural to Global Organization.
- **Medea Khmelidze**, an abortion and HIV activists and one of the co-founders of the Eurasian Key Population Health Network working on rights of transgender people and is also a member of the "ASTRA Network".
- **Nandini Mazumder**, Assistant Coordinator, ASAP.

This session also had a special video recording from **Galina Maistruk, Ukraine** Executive Director of Woman Health & Family Planning (WHFP). Since the Russian full-scale invasion of Ukraine on February 24, 2022, WHFP has launched humanitarian response projects to mitigate the consequences of SGBV and facilitate access and quality of essential sexual and reproductive health services for the people affected by the war.

Some highlights from this plenary session:

- Challenges faced by Palestinian women include the criminalization of abortion and of course the current war going on in their country. > 25 percent of pregnant women were exposed to tear gas in the West Bank causing them several consequences. Women also face reproductive violence because of which population growth and control have become crucial.
- **Rafi Maesto** spoke about why we are afraid of doctors. And explained how the power imbalance affected the service utilization because the service seekers were slut shamed and judged.
- **Ms. Seema Ghani** noted that since the Taliban came to power, many organizations that worked on SRHR, had to change their thematic area to RHR just so that the government would let them continue the work. 9/10 women are raped by the Taliban and 6 of the raped women get pregnant. Unsafe abortion practice is conducted inside prison. Female doctors aren't trained anymore so one wonders what the future is going to bring.
- **Catherine Osita** noted that in their part of the country, if women sex workers become pregnant they have to wait for 25 weeks to get an abortion service. The major challenge here is that people can't access medical abortion.
- **Medea Georgia** mentioned that for PLHIV intimate partner violence was 2x there as compared to that of the general context. Only 38% of people living with HIV only have access to abortion services.
- **Nandini Mazumder** noted that ASAP along with 8 CAN networks had been working on inclusivity via working with the deaf and hard of hearing community. The major challenges were to find data in this field, greater vulnerability to forced marriages, sexual abuse, and unwanted pregnancies, and inadequate sign for SRHR contents.



PROVIDER'S PERSPECTIVE

Co-Chaired by **Dr. Phan Bich Thuy** and **Rola Yasmine**
Facilitated by **Suzanne Belton**

The objective of this panel was to understand the challenges faced by providers managing systems which are not gender sensitive or rights based. The discussions will also create awareness of the leadership role being played by providers in challenging and changing the status quo.

- **Dr Erica Miller from Australia** stated that there is a medical monopoly regarding abortions, in some states medical abortion is free but in some people have to pay a huge amount.
- **Dr. Kalpana Apte, DG, FPAI** and **Dr. John Nyamu from Kenya** spoke up in support of demedicalisation of abortion and the supportive role doctors and healthcare systems should continue to play. Dr John Nyamu also noted that in Kenya women are provided abortion in the private sector in the private sector and not in the public sector.
- **Kaithabjeet Singh from ISAY, India** spoke about gender stereotyping even in the choice of post-graduate specialization where in India male students choose orthopedic while women take up gynaecology and paediatrics.
- **Dr Sandra Suryadana from Doctors Against Stigma, Indonesia** said that the new law had allowed for abortion to be provided under some circumstances.



BREAKOUT ROOMS

All the relevant abstracts are available in [the compendium](#).

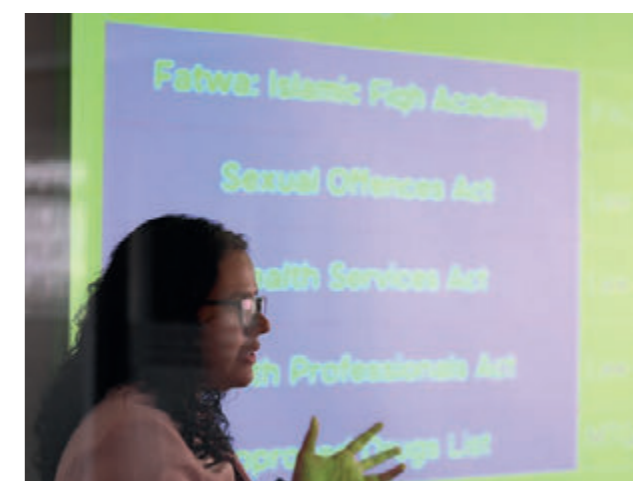
On day 1 the breakout room sessions explored the themes of **Service Delivery** and delved into experiences and perspectives from seekers and service providers. Very unique information was shared from across the region and below are a few key highlights of the day:

A common theme was the lack of universal access to safe abortion rights and the various barriers that exist: Panelist **Dr. Nanthakan Sungsuman Woodham, Executive Director of the Planned Parenthood Association of Thailand (PPAT)**, shared about the challenges of the host country Thailand where abortion has been decriminalised and available legally, and yet negative attitudes of service providers and lack of universal access to services particularly in rural areas continue to be a challenge. Even in well-resourced countries such as Australia developed, **Anna Noonan, Australia (recorded)**, shared that there is no national data and abortion access in rural Australia is extremely limited as abortion clinics are mostly in densely populated areas or big cities.

Panelist **Kaithabjeet Singh, a medical student and member of ISAY, India**, shared his experience of attending a YAI by ASAP which helped him understand the sexism that exists in how medicine is taught and practiced, and how it becomes a barrier for reproductive justice and prevents access to safe abortion rights. **Fathimath Shanaa, IPPF SARO, Maldives**, gave some context about the country and shared that there was no CSE available properly, high levels of stigma around the issue and lack of SRHR counseling or services even though the number of seekers were increasing by the years.

In many panels speakers also shared the various tools and mechanisms that they have developed and worked on to push forward the agenda of safe abortion rights:

Inggrit Dea Narulita, Indonesia, presented work led by SAMSARA organization where they are engaging with midwives in remote and rural areas on boats to strengthen the two-way referral mechanism. The referral system helps people access CSE information and get support and assistance, especially in cases of violence and unplanned pregnancies.



Dr. Suchitra Dalvie, Coordinator, ASAP, shared about ASAP's initiative, 'Safe Abortion Goals' (SAGs) which is an adaptation of the SDGs for abortion rights. She highlighted the importance of measuring the safe abortion rights landscape towards better planning and strategizing. However, she also acknowledged the complexities of measuring an issue as complex as abortions with our patriarchal social contexts.

Raquel Irene Drovetta, Argentina, shared about safe abortion manuals in Latin America. The manuals are based on feminist principles and provide information on the legal framework around abortion in 5 countries in Latin America - Ecuador, Argentina, Chile, Peru, and Bolivia. They include practical information for abortion seekers such as the detailed protocols for medical abortion, and what to do if a woman needs to seek medical assistance or encounters the law enforcement.

There were also discussions around marginalised communities and the greater challenges they face:

Silvia Okoth, Kenya, shared about access to sexual reproductive health and safe abortion services for adolescent young girls. She shared about the specific experiences of adolescent girls engaged in transactional sex and highlighted the challenges they face in accessing sexual and reproductive health services due to legal and societal concerns.

Mrs. Kemba Ranavela, Madagascar, shared about the realities of clandestine abortion practices in the country. She shared that CSE was discontinued in schools in January 2023 and teachers were asked to teach abstinence instead. Abortion was criminalised in



the country and women had to seek unsafe abortions. In 2023, an estimated 550 unsafe abortions occurred and 15 women died.

Ramatou Ouedraogo, Kenya, shared about the lived experiences of pain associated with manual vacuum aspiration during post-abortion care in Kenya and highlighted the lack of sensitivity among most service providers.

Panels also explored how national and international politics and conflicts impact access to abortion rights adversely:

Seema Ghani, IPPF-SARO, spoke about her struggles in Afghanistan, especially as a woman and an advocate. She spoke about how in Afghanistan, work has to be carried in an extremely quiet manner through underground networks using language that only they can decide.

Soudeh, IPPF-SARO, Iran shared about the struggles faced by them as a queer activist and the fact that they cannot return to their country because of the same fact. They spoke about the online models of activism and campaigning that they have adopted to work in a very restrictive environment. Panelist Ignatia, YONI, Indonesia, shared about the abortion laws of Indonesia and how restrictive they are in nature. Only in 2009 did it become legal to perform an abortion in cases of rape and that also was allowed only up to 6 weeks. Both the doctor and the woman would then face imprisonment or a hefty fine or both if found to be violating the law. She also spoke about how contraception is strictly regulated by the government.

These and many more important discussions marked a very rich and informative opening day.





SELF CARE ROOM

It was a busy vibrant conference but sometimes you just need some peace and quiet to recharge!

So we had organised a Self Care Room, a quiet space designed keeping in mind that discussions and constant inputs can become overwhelming for some of us. For all of us who are advocates/activists and constantly dealing with several challenges, the space was their reminder to care for themselves.

This was in continuation of our feminist conference plan, and inspired by Audre Lorde who had stated, "caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare".

We also conducted a self-care survey that had some interesting findings! The survey participants were given a Thai herbal massage oil as a gift. The purpose of the survey was to understand the level of stress and burnout that advocates and activists face, the support systems that are available to them and how they cope with the stress and burn-out; the findings of the survey will be developed into an article and shared soon.



FEMINIST BOOK EXCHANGE

One of the most fun and exciting things at ARJC IV was the feminist book exchange! Participants were requested to bring at least one feminist book of their choice (in English) if they wanted to participate in the exchange and almost everyone brought along if not more books. It was amazing to see the sheer range of books available at the exchange as it reflected the rich diversity of the participants themselves - feminist books from Bangladesh and Pakistan to Fiji and Maldives, everything was there and ready to be explored, and everyone participated with great enthusiasm.





FIRST PLENARY

THE PERSONAL IS POLITICAL

WHERE IS SPIRITUALITY, SEXUALITY, AND THE SELF IN MOVEMENT BUILDING?

A conversation between **Dr. Kalpana Apte, Dr. Suchitra Dalvie** and **Rola Yasmine**

The work we do as safe abortion rights activists and social justice movement building to create a better, safer, healthier more just world that respects autonomy, agency, equality and rights, **we often neglect ourselves as individuals.**

Some of us suffer chronic stress and even burnout as a result of always giving but never receiving. Battling on many fronts. This plenary was a conversation based on our collective decades of experience of the three speakers in this work and also their personal learnings.

There are **three components** they spoke about that are rarely or never spoken about in the business as usual SRHR conferences.

Not just patriarchy and feminism but Spirituality, Sexuality and the Self.



Some key insights from this conversation were:

- We can only build a stronger movement if we are all strong in ourselves.
- **As Audre Lourde said: Caring for myself is not self-indulgence, it is self-preservation and that is an act of political warfare.**
- Why is the idea of Self important in this context? Because all journeys begin with Self. Universe is within us.
- Beyond a certain point, whether you go higher or deeper, some truths are universal. We are the source of our own experience. Our relationships with others and with life depend mainly on our relationship with ourselves.
- We are conditioned and put in boxes from birth or even before. Given a name, a sex, a gender, a nationality, even a career path, a life plan. But we are none of those. We are so much greater and more powerful that it can be terrifying actually. And that is probably why many of us prefer to play small, prefer controls.
- Vulnerability is scary when we don't have a safe space to be ourselves. But once you reclaim your power, vulnerability is like a river, it just flows.
- A divorce is not only between intimate partners. It is merely a divergence of paths. Going in two different directions.
- Frontline to higher level. We are all in the business of management. The more in control of ourselves we reduce triggers and our mind is at zen level. Even if you don't have a title as manager you are managing. MBA is not the only manager.
- We feel alone in our struggle but the truth is that these are connected and universal. There are common threads of injustice that we seek to challenge and change. We need to lift each other up. Responsibility to hold the others.
- What kind of spaces are we creating in the movement and this is the fuel of the movement? Compassion, collaboration vs competition. Revolution, resistance and move beyond the labels and frameworks and competing. We are here to ignite change, disrupt, no longer reductive measurement to our lives as people in the movement.

SECOND PLENARY

DECOLONIZATION & DECRIMINALIZATION

Co-Chaired by Lana Dakan, Packard Foundation and Anand Tamang, CREHPA, Nepal
Facilitated by Shelani Palihawadana (YANSL, ASAP)

Panelists:

- Dr. Kalpana Apte, FPA India
- Primah Kwagala, Uganda
- Jedidah Maina, TICAH, Kenya
- Agustina Ramon Michel, CLACAI, Peru
- Na Young, SHARE, South Korea

Objective of this panel was to explore the scope and scale of how colonization and criminalization continues to impact the lives of women and pregnant persons on a daily basis, to see this in the historical context and to address the challenges we face and the strategies we are working with in order to decolonise and decriminalise.

Some key highlights of the discussion:

- The countries that colonised are very developed today but those that were colonised are still seen as developing or even poor countries.
- Abortion is criminalised due to colonization.
- Colonization was not just in the past, there is still a colonial hangover in the present context.



THIRD PLENARY

UNDERSTANDING OPPOSITION & SAFEGUARDING RIGHTS

Co-Chaired by Anand Sinha, The Packard Foundation, and Rada Tzaneva, Amesty International
Facilitated by Dr Fiona Bloomer

Panelists:

- Neil Datta, European Parliamentary Forum, Belgium
- Raquel Drovetta, Argentina
- Catherine Conlon, Ireland
- Ignatia Alfa Gloria, Youth Network Indonesia (YONI)
- Ayesha Bashir, ASAP

The speakers shared a wide ranging and critical perspective on the various ways our movement faces attacks and insidious erosion from opposition.

Neil Datta's presentation was a shocking eye opener with the magnitude of funding that is going into anti-choice propaganda and work. What we have as a safe abortion rights movement is barely a tenth of the resources. It was quite chilling and also a wake up call! The funding situation for civil society groups working on safe abortion advocacy has become very challenging in recent years. Meanwhile the opposition is gaining ground and the political environment has become more conservative and even hostile towards pro-choice work.

Catherine and Ignatia spoke of the specific country contexts which make it so difficult to work on the issue openly and to offer evidence based information to those who truly need it.

Ayesha brought in the critical piece of opposition online and how we need to navigate it safely in order to continue to do the work we are all here to do as a movement.



BREAKOUT ROOMS

On day 2 break out rooms explored the themes of **Law and Policy and Shifting Discourse**. Here are some key highlights from the day:

A panel explored the connection between academic and activism and while much needs to be done for academia to listen to communities and work alongside them, all panelists agreed that there was a need for stronger collaboration with feminist academics and feminist activists.

Jeanne Hefez, Democratic Republic of Congo, shared how after a long lengthy process of activism and advocating the law was amended to effectively cancel penal provisions against abortions. Guidelines were drafted as a set of women-centric comprehensive standards based on holistic evidence and best practices. This legalised telemedicine during COVID-19 for abortions up to 9 weeks and they also adopted Universal Healthcare coverage provisions in 2023.

Rie Takahashi, Japan (IPPF) shared that abortion is considered as a criminal act but under the Maternal Body Protection Laws certain classes are allowed to get an abortion. The challenges include a male dominated healthcare system and stigma around SRHR. However, the country is making some progress as the government responded to UPR 2023 and responded saying that they will include abolition of abortion as a crime and on 28 April 2023 the oral abortion pill was approved.

An open session on **Movement Building** was

held, and panelists shared some strategies that worked and some challenges. Ireland worked with communities to raise awareness, had door-to-door clinics, and mobilised people for protests. While, countries like Vietnam and Bangladesh shared challenges to build an inclusive safe abortion rights movement as there is a lot of stigma around allied issues such as LGBTQ+ rights.

A member from Tunisia shared a recording on the right to abortion in Tunisia where it has been conditionally liberalised. Since 1965 abortion care has been free in government facilities under the Family Planning (FP) programme. Since 1973 all women including minors can access abortions and yet there remains restrictions and the member herself was refused an abortion. These discussions were a reminder how long a way we had come as a movement as countries are legalizing abortions, and yet the fact that legalizing abortions would not automatically imply increased access also remained.

Another panel discussed the dilemma of selective abortions and panelists from **China and Nepal** discussed the one-child policy and the sex-selective abortions due to son preference respectively which led to fewer girl children that has left a deeper impact on society. The panelists agreed that while abortion was often conflated with sex selection, there was a need to address the real reason which is patriarchy that continues to control's women's bodies and agency.

Dr. Polyphil, World Health Organization (WHO) emphasised that if we don't recognise medical providers, we can not move forward. Therefore, it is important for the comprehensive approach which includes diverse stakeholders. The WHO guidelines on abortion care is an important knowledge resource and available in different languages, it is comprehensive, and centered around the individual.

It was also interesting to see how panelists shared innovative strategies and allies in non-traditional spaces.

Simeon Thodi, MSI, and his colleague shared about harnessing support from religious leaders for abortion law reform. Malawi and how the local religious leaders are leading the conversation of abortion rights with their members.

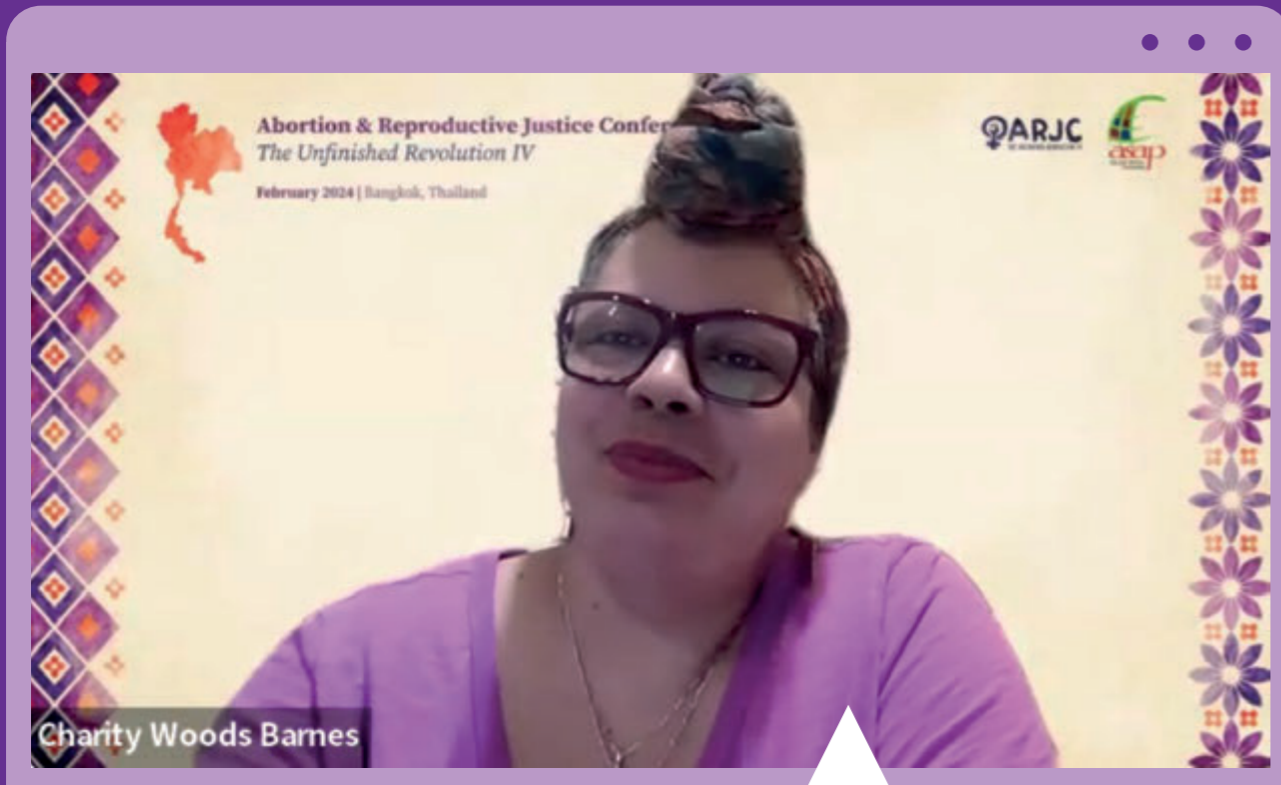
Rev. Dr. Andrea Vassell, USA, shared her work on combating religious fundamentalism and advancing reproductive justice under the initiative, Spiritual Alliance of Communities for Reproductive Dignity. Another panelist spoke about the need to normalise the redistribution of power in all hospitals, Values Clarification (VCAT) with doctors, nurses and midwives. The need for demedicalising hospitals as a strategy to shift the abortion discourse in society. And finally, emphasise the need to TRUST PREGNANT PEOPLE when they seek an abortion on and provide abortion on demand at all gestational lengths!

With these and many other powerful discussions break-out sessions on Day 2 came to an end.



RJ TURNS 30!

Transcript of address by **Charity Woods Barnes, Founder of Reproductive Justice Resilience Project, Global Advisory Group Member for ARJC**



Greetings everyone! I am Charity Woods Barnes, reproductive justice leader and advocate, and Founder of the Reproductive Justice Resilience Project (RJRP), where we center the healing and resilience of Black, Latina, and Indigenous women using our spiritual, cultural, and ancestral ways of knowing.

This summer reproductive justice, or as we call it, **RJ, turns 30!**

It is amazing to see how the theory and framework have evolved and been adopted around the world. The movement has progressed phenomenally and is increasingly used as the lens from which to understand, analyse, and organise around the issues and impact of reproductive policies.

We should not be discussing and using this framework without the historical knowledge of the Founding Mothers and the political moment that gave birth to this work. Although it has been expanded by, and been applied to other women of colour and even white women, it is imperative that the **12 Black "Mothers of RJ"** receive the recognition for creating this theory.

RJ is based on human rights AND Black Feminist Theory.

Black feminist theory challenges assumptions and norms at the intersection of sexism and racism and arises from an **understanding of intersecting patterns of discrimination**. It is grounded in a sense of communality and responsibility for the larger community and is the balance to the individualism of human rights. It also allows us to see how our struggle is interconnected with the struggle of other marginalised people.

At its core is also intersectionality, a term coined by Black pioneering scholar and writer on civil rights, critical race theory, and Black feminist legal theory, Kimberle Crenshaw. Intersectionality is the interconnected nature of race, class, gender, etc. as they apply to a given individual or group. Intersectionality also addresses the overlapping and interdependent systems of discrimination.

In short, **systems of oppression are interlocking** and the impact of them on marginalised communities are also interlocking. This is how issues like religion, climate change, access to transportation, access to food and education, among other things, can impact the reproductive and sexual lives of people. Reproductive justice also demands that we interrogate and challenge white supremacy on a macro and micro scale. We understand the insidious nature of white supremacy and that often, it can be most destructive when it is not blatant and touted in words and political rhetoric, but perpetuated in systems, policies, places of worship, schools, and so on.

In its most simplistic explanation, RJ stands on four principles:

1. **The right to HAVE a child/children.**
2. **The right to NOT HAVE a child/children.**
3. **The right to parent the child/children you have with all the resources and support needed. And the last principle that was added later,**
4. **The right to sexual pleasure without procreation. We believe that every individual is granted the agency and autonomy (human rights) to determine their lives free from coercion.**

Furthermore, those of us who work at, and value the impact of, the intersection of reproductive justice and faith and religion, know that we also have **moral authority over our decisions** and should be trusted to use it. Contrary to some beliefs, reproductive justice was not created as a counter movement to the reproductive rights movement, which historically has been dominated by abortion and led by white women. But rather it is a complimentary frame to reproductive health and rights, understanding that we do not live single issue lives.

The Founding Mothers of RJ were advocates and activists who were brought together because they felt their lives and experiences were not reflected (and had never been) in the in the discourse and strategies in support of universal healthcare and reproductive freedom. **RJ is also a framework that is used for movement building**, particularly intersectional movement building. Whether we are working around issues of abortion access and legalities, LGBTQ+ rights, the environment, immigration, education, and so on, we understand that we largely face the same opposition and hurdles.

In the US we are experiencing an unprecedented level of attacks on reproductive freedom since the passing of Roe over 50 years ago. The detriment to our reproductive and sexual lives is enormous and many people are living in fear and experiencing trauma. These oppressive efforts are **rooted in white supremacy, hurtful theology, and patriarchy**, among other things.

In closing I am so happy to be connected to ASAP Asia and the ARJC conference space and commend not only the organisers and sponsors, but all those who attended. There is a wealth of knowledge, experience, and resources in our spaces as well as endless possibilities to expand our efforts to achieve true reproductive autonomy and freedom.

Most of us have a reproductive story to tell. We know that our reproductive lives are impacted by a myriad of intersectional dynamics and circumstances. Although people of colour and women have unique perspectives and considerations, many people have reproductive justice stories and experiences. There are numerous individuals, organizations, and resources to support one on their reproductive justice journey, many of which are shared in this month's Abortion Gazette issue.

My question to you: what's your reproductive justice story?

KEYNOTE ADDRESS

SO, WHAT IS THE UNFINISHED REVOLUTION?

Highlights from the Keynote address by **Manisha Gupte, Co-Founder MASUM, Lead Trainer at ASAP Academy**



- That abortion is not available to those who need it?
- It is still seen from a cis-hetero-normative framing?
- It is still provider and/or fetus centered?
- It is not seen as a non-negotiable healthcare issue?
- It is not seen as a public health issue?
- It is not seen as a Human rights issue?
- It is still denied?
- Made to sound scary?
- Posited as a sin?
- A dreadful thing to do to yourself?

Feminists have had a different trajectory throughout the world, global north and south. In many countries there were no distinct waves in many countries.

Whether emerging from challenging medical control over our bodies to dealing with GBV, we have always been stepping on BIG TOES.

We need to challenge any power structure that is arbitrary.

Abortion and gender-based violence are political issues. Global tensions, occupation, wars, refugees, internally displaced persons - all these create fear, 'loss of cultural identity', control over women and an environment for right wing to push an anti-abortion, anti-sexuality, segregation and veiling agenda. Yet, most laws are provider/foetus centred; not the body that is pregnant.

Identity politics and women's bodies as battlefields in the WE and THEY division (war, riots and institutional rape, 'our wombs' and 'our seed'). Pregnant and ill women face more violence. Transpeople face violence for just being who they are.

Where do national budgets focus on when wars take place? Increased militarisation and spending on



military. Unemployment and frustration grow. Vulnerable sections fall through many cracks. Totalitarian regimes, xenophobia and radical nationalist tendencies grow in such an environment. So does conservatism. Keep women at home or in unsafe jobs. Both impinge on SRHR and access to abortion.

Emergence of right wing - abortion restrictions for some, propose for / imposed upon others: like it's for disability right now. Racial purity of Nazi Germany didn't come out of the blue and hasn't been addressed until now.

Man-made and natural disasters as well as disability are gendered. Privatisation, neo liberal capitalism. Education and health care have to be provided free to everyone. Profit making on either has to be declared criminal.

Tensions and discomforts are good. Abortion rights and other movements (disability, gender -based discrimination). Lens of power structural violence needed to understand commonalities

Redistribution of resources inside and outside the home; dispossession and disenfranchisement in one leads to the other, and they face multiple vulnerabilities.

The gap between the rich and the poor has grown like never before. COVID-19 created trillionaires and poverty like never before.

Medical abortion is one way out of being controlled at the moment of seeking an abortion, but they're not available easily. Even in countries where one can buy Schedule H drugs over the counter, one cannot access medical abortion pills.

Kindness, compassion and love. Self-reflexivity needed. Caring and sharing should be the hallmark of feminist intervention.

Our ways have to be different.

"The master's tools will never dismantle the master's house," - Audreya Lorde

May we learn, unlearn and rebuild our lives with each other's help, and may we realise the dream of a world that is equal, beautiful, peaceful and non-discriminatory. While the homes in which many women live may not be worthy of protection, may our campaigns lead to the sustainability of our collective and shared home, Planet Earth.

Continuous revolution and universal revolution is needed so that rights gained are not eroded.

Revolutions are not funded. They come out of our hearts and pockets and voluntary time.

Revolutions can be small. I've seen numerous ones from women in the rural communities I work with.

Challenge terminology: The phrase pro- life for example. They're not pro- choice. They don't care about the lives of millions of women who die due to unsafe abortions. They're anti immigrants, anti- poor, anti LGBTQ+ lives. They support the death penalty. So why are allowed to be referred to as pro- life?

We have heard the bravest stories since yesterday. They were scary, disturbing and angering at one end, but also exhilarating and mind-blowing in terms of work that abortion rights activists have accomplished or are struggling to accomplish right now.

Revolutions can begin anywhere. This here is one such moment! At ARJC we have the largest global gathering of pro- choice individuals.

May this tribe increase!



FIRST PLENARY

BEGINNINGS, ENDINGS AND EVERYTHING IN BETWEEN

Co-Chaired by **Na Young** and **Suzanne Belton**, Facilitated by **Suchitra Dalvie**

Panelists:

- **Dr. Emma Campbell**, Research Associate in Social Studies at Ulster University on the Irish North/South Reproductive Citizenship Project (2022-Present), **Ireland**
- **Shelani Paliwadana**, member of YANSL; Lawyer; and Facilitator at Young Experts: Tech for Health, **Sri Lanka**
- **Revocathe Girimpudu**: As the Executive Secretary of **Rwanda** Women Doctors For Reproductive Justice, she stands at the forefront of a movement revolutionizing women's access to healthcare and bodily autonomy
- **Anusha D'Cruz**: a final year Medical student at Grant Government medical College and a member of the India Safe Abortion Youth Advocates, **India**.



The safe abortion rights advocacy and service delivery work that we do is always confronted by some deeper questions around bioethics that we, as a movement, are not always able to take time and space to unpack and understand how they weave into our narrative for choice and justice.

Religious groups and science both pose challenges to our position on safe abortion as early as possible and as late as necessary when life can be extended even before viability now and euthanasia offers death to those who might choose it.

This plenary had wide ranging discussions around the following questions:

What are your thoughts on the perception that a heartbeat equates personhood for an embryo when brain death of an adult whose heart is beating is the accepted threshold at which 'life support' can be switched off and organs can be donated?

Could you talk to us about the intersection of the ideological position of faith and Abortion Rights in this context?

How do you address this issue of abortions and the role of young women doctors?

The new event horizon has things like orgasm implants, tele-dildonics, personhood and human rights for sex robots, robot companions for sex, loneliness and marriage, sex robot brothels. How will these affect the moral, social and political environment within which we speak for and negotiate sex and sexuality as well as intimate relationships? What will this mean for sexual health and rights?

Given that more people are opting out of formal marriage and many people accept that a relationship can be only emotional but not physical, how about outsourcing that part to someone else? Maybe a weekend robot threesome?

There is already a brothel in Spain that has only robot sex workers. How will this change our perception of consent and the potential unpredictability of a relationship? What will it mean for the conversation on homosexuality and the spectrum to add in robosexuality?

With the mainstream and seemingly whole-hearted acceptance of access and communication tech such as telemedicine, chatbots, ChatGPT, holograms, data storage, self-driven vehicles for clinic visits, drones for medical supplies, what do you see as the future for access to health information and services?

We could be looking at a world which will simultaneously and paradoxically free live women from some of the stereotypical gender roles dictated by their bodies, but also populate the world with highly stylised and sexualised robots which will reinforce those stereotypes. What are your thoughts on the future of reproductive health and rights, including the impact of such tech on personhood, motherhood and safe abortions?

Can you talk to us about the Contract Theory and how that is being challenged by these new developments?

What does it mean for personhood in the face of the conflict and war as well as the value of every life being weighed against a different score?



YOUTH LEADERSHIP IN THE SAFE ABORTION RIGHTS MOVEMENT

Co-Chaired by Dr. Subatra Jayaraj, Chair ASAP, and Harjyot Khosa, IPPF SARO
Facilitated by Shreejana Bajracharya (YSERHA, ASAP)

Panelists:

- Fariha Hossain, YouthAID, ASAP
- Zarghoona Wadood, PAN, ASAP
- Jessica Work Fiji, IPPF ESEAOR
- Rafi Maesto, The A Project, Lebanon
- Dr. Zainab Engineer, ISAY, ASAP

Asia has the largest number of young people that it has ever had in history. Safe abortion restrictions, criminalization and lack of awareness affects them in a very critical way, becoming a life and death issue for many. Governments rarely give them space and a voice in policy and legal matters nor in accountability. Civil society has been increasingly ensuring a larger role for young people across all stages of implementation and leadership but can we do more and better

Some key highlights:

- 15% of the Pakistani population live with a diasability, and 50% are girls and women living with disability
- Exclusion from healthcare happens due to biases coming from family and doctors, Lack of awareness and accessibility
- Forced sterilization and hysterectomy, contraception, making a family (forced), abortion performed without free and informed consent
- Indepth research is required to understand how we can tackle the issues
- Difficulty in getting young people involvement - intergenerational mentoring as a solution
- IPPFs youth networkers below 25, formal youth networks, regional youth networks, 5% of the core funding earmarked for youths, 20% of board should consist of youths below 25, mentorship.



POPULATION POLICIES, CLIMATE CHANGE AND SAFE ABORTION RIGHTS

Co-Chaired by Dr. SP Choong, Former Chair, ASAP, and Prof. Korravarn Yodmai, Associate Professor, Mahidol University
Facilitated by Jedidah Maina

Panelists:

- Yu Yang (China)
- Xiaoling Tang (China)
- Jessica Work (Fiji)
- Prof. Kritaya (Thailand)
- Mr. Ben Angoa (Solomon Islands)
- Sarah Soysa (UNFPA, Sri Lanka)
- Mr. Ben Angoa (Solomon Islands), and,
- Sarah Soysa (UNFPA, Sri Lanka)

Safe abortion is not a right in most countries and is conditional for a range of reasons. Sometimes there can be very narrow like saving the life of the pregnant person, rape, incest or broader such as mental and physical health. Larger priorities always overshadow the safe abortion rights conversation and those priorities also keep shifting.

China's one child policy shifting in recent years to encouraging 3 children, India's 2 child family norm in a few states combined with the sex determination concerns, pro-natalist approach in countries like Japan, South Korea, Thailand, France, Germany and where abortions may be discouraged or become less accessible.

25 years after ICPD where we agree that people matter and not just populations, we are still circling around numbers, targets and counting who matters.

The panelists discussed the political shifts in their country context where safe abortion rights always need to be defended from issues related to climate change, pro-natalist policies due to falling birth rates, refugee crisis among others. This plenary offered a glimpse of the political landscape the safe abortion rights movement needs to navigate and offer shared learning to collectively strategise.



BREAKOUT ROOMS

The breakout room sessions on Day 3 were mostly around the theme of **Movement Building** and the key highlights were:

Rola Yasmine, A Project, Lebanon, discussed reproductive Justice through the lens of war, aggression and occupation. Reproductive Justice is defined as the right to have children or not, engage in sexual activity or not, and being able to do all this in a safe and stable environment. At present in Lebanon there are many migrant domestic workers and the reproductive rights of a female migrant worker is based on their position in the family where they are working. Lebanon also has one of the highest numbers of refugees due to fluid borders with Syria and refugees have limited access to housing and other welfare services. Access to abortion is only limited to the cities and further limited for these vulnerable populations such as migrant workers and refugees.

Elena Caruso, Canada, presented on, Why Abortion History Matters. The Case of Self-Managed Abortion (SMA) in the 1970s. She shared the history of self managed abortions

and the current situation where it has been a challenge. She emphasised that abortion history is very fragile, and many don't know much about the history. However, the past is important and we must know about the impact it made and connect it to the present times. This will help us understand the current context so that we can plan the strategies even better.

Laxmi Chowdhury from YSERHA, Nepal, (ASAP's Nepal CAN member) shared an overview of abortion and maternal health statistics in Nepal. She shared that safe abortion data has been included in annual reports. However, challenges that remain are the social, cultural and religious stigma against abortion, need to generate greater awareness and provide quality services. Na Young, SHARE, South Korea shared about the discrepancy in the law where abortion is decriminalised and yet due to population policies the official approach to abortion remains vague. The government legalised abortions for population control and economic growth but it also restricted access. Those who did not fit the ideal pregnant person such as single women and

sex workers were excluded from the government strategy. There is a need to work on strategies for post-criminalization and towards Reproductive Justice from governmental level to local/organizational level towards expanding decriminalization on sex workers and including all people.

Dema Wangchuk, DYISA, Bhutan (ASAP's CAN in Bhutan) shared about how the government has worked but few issues were unaddressed. The Penal code says abortion is conditionally legal but the government still claims it to be illegal. COVID-19 disrupted access to misoprostol and mifepristone and due to restrictions on mobility, abortion was a major issue for many. Reasons for seeking abortion ranged from desire to pursue further education, to already caring for a small child, to abusive relationship, and, unprepared for parenthood.

DYISA in collaboration with an anonymous group worked to address this and provided abortion services, including sharing information and services (pills) to those in need, often at great risk.

The abortion rights work is therefore a collaborative effort and only for the brave but often ordinary circumstances create braveness within us! And with these brave discussions day 3 also came to an end but all of us were invigorated with the renewed sense of commitment to our cause to expand abortion rights until reproductive justice was available for all.



CLOSING CEREMONY

ARJC 2024 Closing Declaration - it was created and read out by our members as found in the text below:

Rafi, Lebanon: We are young advocates who have gathered here at the "Abortion and Reproductive Justice Conference 2024: The Unfinished Revolution IV" in Bangkok, Thailand from February 15 to 18, 2024.

We discuss and acknowledge urgent matters that we all witness around the world that threaten human rights including the rise of problematic politicians who push austerity policies and instigate genocide through wars. We also recognise the impacts of the climate crisis on our communities all over the world. Globally, we identify attacks, growing backlashes, and threats to our reproductive justice.

Fatma, Egypt: Our mission is to uphold the legacy of activists and rights defenders, ensuring human rights, including abortion and reproductive justice, are safeguarded. We are committed, through this conference and beyond, to fostering solidarity, asserting our presence, and advocating for abortion rights and reproductive justice globally.

Believing in this mission and the power of collective solidarity, we demand actions for ongoing changes.

Our demands are as listed on the next page:



1. All people have the right to universal access to information and legal, friendly, safe, and respectful abortion services.

- Ukei, Kyrgyzstan

2. Governments must ensure comprehensive access to safe abortion, and defend our bodily autonomy through all the measures in policy, practice, and funding.

- Dr Narmin, Pakistan

3. We urge all governments to provide sexual and reproductive health and rights services including safe abortion publicly and at no cost or affordable cost through public health insurance coverage

- Dr Narmin, Pakistan

4. Governments must recognise the intersectionality of reproductive rights and climate justice, ensuring that efforts are made at the policy and implementation level to address the impacts of climate change on access to safe and legal abortion services.

- Jessica Work, Fiji

5. Legislators consider right-based and evidence-based legislation and repeal discriminatory laws and policies, such as those that criminalise safe abortion, and request spousal, parental, or medical and psychological professionals' agreement and consent to provide abortion services.

- Jessica Work, Fiji

6. All criminal provisions that punish individuals providing abortions or individuals seeking an abortion based on age, sexual orientation, gender identity, gender expression, sexual practices, HIV status and transmission, and sex work should be repealed.

- Chonthita, Thailand

7. Researchers need to use reliable data and provide evidence to continuously update and identify issues on sexual and reproductive health and rights, especially in humanitarian crises. Applying evidence in policy advocacy campaigns to enable access to accurate information on sexual and reproductive health and safe abortion services without compromising privacy and autonomy.

- Sheila, Kenya

8. Healthcare providers need to ensure that all SRHR-related service provision has intersectional concerns and provide accessible spaces that deliver right-based services in a sensitive, holistic, non-stigmatizing, and nondiscriminatory manner.

- Afshan, Pakistan

9. Health facilities, goods, information, and services should be ensured for everyone including adolescents, disabled people, homeless and stateless people, people in detention, and migrants and refugees.

- Afshan, Pakistan

10. Education sectors need to improve the quality of comprehensive sexuality education and ensure the content, approach, teaching methods, and safe space are suitable for different youth groups, especially marginalised groups.

- Dr Yoon, South Korea

11. Educators need to implement comprehensive sexuality education as a cross-cutting component, to respect and guarantee the rights of all young people, and to push for programs that are receptive to youth needs and efforts intensifying supportive policies and financial commitments.

- Dr Yoon, South Korea

12. Young people should be involved in all levels of decision-making processes as active members regarding reproductive health and rights, ensuring that young people have a platform to voice their needs and concerns.

- Rei Takishi, Japan

13. Advocates and activists need to encourage capacity building, continuous learning, and cooperation towards ensuring meaningful participation of civil societies and individuals in all actions for reproductive justice.

- Stella, Malawi

14. All stakeholders, including governments and civil society organisations, should have a strong partnership and together contribute to the effective implementation and advancing safe and legal abortion.

- Milagros, Peru

15. The accessibility to safe and legal abortion is an inalienable, integral, and indivisible part of the human rights of all individuals with a uterus. We will continue to meet together, act together, and strengthen our solidarity until these demands are acknowledged, adopted, and implemented.

- Erica Miller, Australia

VOTE OF THANKS

Nandini Mazumder, Assistant Coordinator, ASAP

The last few months, weeks and particularly the last 4 days were exhilarating to say the least and just last night during a team dinner we were discussing how we will miss the energy and spirit of the space post ARJC.

ARJC has given us all of us a lot to take away with us - from new knowledge, perspectives to connections. And these will help us to continue to build our movements and eventually finish the revolution someday. It has also enabled us to make new connections and

This invigorating space that we all created together was possible only for our funders, collaborators, network members who often played many different roles, and supported us every step of the way.

Therefore, we take this opportunity to thank everyone, without whom this conference would not have been possible!

We want to thank the **Faculty of Public Health, Mahidol University**, for giving us this amazing space.

We want to thank the **Ministry of Public Health (MoPH), Government of Thailand**, for their generous support including facilitating visas and ensuring we could attend ARJC.

We also thank **ARSA, a Thailand-based NGO** which partnered with us for the conference.

We want to thank our **Steering Committee members - Dr. Subatra, our chairperson, Prof. Suzanne Belton, Na Young, Yu Yang, Zarghoona and Desaree** for their immensely rich contributions.

Who are also a part of the **Global Advisory Group members** along with, **Jedidah Maina, Rola, Fiona Bloomer, two people who couldn't join us - Catriona and Charity Woods, Susana Chavez and Augstina, Tsunnani Kantyaporn, Prof. Kritaya, Prof. Phitaya Charupoonphol and his team** for their valuable support that helped give shape to the idea of ARJC in reality.

And **ASAP Youth Champions, Dema Wangchuk from DYISA-Bhutan, Samiul, Sabuj, Fariha, Nujhat, and Sanjida from YouthAID, Bangladesh, Sara, Anusha, Zainab, Nikki, Vivek, and Kaithabjeet from ISAY, India, Shreejana, Prabina, Laxmi, Asika and Manjari from YSERHA-Nepal, Joshua, Zarghoona, Naina, Afshan, Laraib, and Tanzila from PAN-Pakistan, Shelani, Priskila, Harini, and Hasini, and Son, Mai Thuy, Thao, Nhi, Ngoc from VYAC-Vietnam.**

We thank many more of **ASAP's current and past alumni** who couldn't be here with us but have contributed to our body of work immensely.

We thank the **Thai local team** led by **Patnarin Wongkad (Trong)**, Local Event Coordinator - ARJC IV and included, **Alongkorn Khumta (Sprite), Arunyika Jungwa (Ploy), Banchara Lapkoed (Deartoon), Chanang Umparak (Nang), Chonthita Kraisrikul (Neab), Elga**



Dileo (Elga), Kochanan Wongsomboon (Kocha), Paphawee Homhaun (Noon), Natnapin Phadungpattanodom (Faire), Phornsuda Phongnak (Gift), Panisara Panisara (Aom), Pratima Ruksachon (H), Phatthanamon Sinsawat (Book), Sirinya Jaisamak (Nan), Serene Ramnee (Coco), Somrudee Pimolnartketsara (Mhew), Suthida Buakhom (Smile), Thanarin Pornpongphanurat (Thanarin), Thairuthai Thanrut (Pim), Wipas Nuchnang (Naiss), and Yukonthon Choikerue (Sand). The local event coordinator and the team worked hard and had commendable commitment towards the global conference.

We thank the **Love Eaten Caterers** for the delicious food they are serving to nourish us and therefore the movement.

We thank **Mui** for making the beautiful bags and materials for ARJC.

We thank our travel agents at **Simplifly Travels, Devika and Vijaylakshmi**, who worked round the clock to ensure we get our flights for ARJC.

We thank **Suketu who manages our website** and our **accounts officer** who manages us all.

We thank the **photography team, the videography team** for their contribution.

Thai and Spanish language translators for their providing simultaneous translations during the plenaries.

And finally we thank our funding partners **Packard Foundation, Fos Feminista, Mama Cash, MSI, and Amplify Change** for their support.

And last but not the least thanks to the **ASAP secretariat team** - the captain of the ship, **Dr. Suchitra Dalvie, Coordinator**, who planned the overall conference, its flow and agenda. **Ayesha Bashir, Communications and Networking Manager** who also conceptualised the space and the amazing design elements that transformed the space into a lively non-traditional conference space. And, **Mahak Agarwal, Communications and Networking Officer**, who joined the team for the conference as her first job and did a great job tracking registrations, putting together the compendium and much more and together we contributed towards a successful ARJC IV!

To everyone of you who contributed richly, engaged meaningfully, and co-created this exciting space - THANK YOU!

THAI LOCAL TEAM



I WILL FINISH THE REVOLUTION!

Youth Champions representing ASAP's Country Advocacy Network from 8 countries – **Nujhat Khan from YouthAID – Bangladesh, Dema Wangchuk, DYISA – Bhutan, Sumit Pawar on behalf of ISAY – India, Mitra Kadarsih, YONI-Indonesia, Laxmi Chowdhury, YSERHA-Nepal, Zarghoona Wadood, PAN – Pakistan, Priskila Arulpragasam, YANSL – Sri Lanka and Thao Vi, VYAC – Vietnam** reaffirmed the importance of solidarity and shared responsibility to finish the unfinished revolution and build a world where everyone in need has access to safe abortions. They read out powerful statements that reaffirmed their commitment to work towards finishing the revolution. They wore a witch hat as they spoke and passed it to the next speaker when their turn came to share their statements as a symbol of solidarity with the 'witches' who were feminists and challenged patriarchy in earlier times. Here are some key highlights from the closing declaration that was read out:

Dedicated to breaking the stigma around abortion by spreading evidence based information and continue to empower the younger generation of

- Acknowledging the work that has already been done by older feminists who have now passed the leadership to the young. The young feminists who are committed to speak up at spaces they are invited to or create their own spaces and advocate for safe abortion rights because, my body, my rights!
- Medical students who are committed to work with other medical students on safe abortion rights and sensitizing them to become service providers who are inclusive and a part of the solution.
- Creating an environment for a stigma free, dignified, human centric, safe abortion rights for all without any hassle or questions.

After the declarations the ARJC IV came to a conclusion and yet we knew there was a lot that remained to be done beyond this conference. Therefore ASAP discussed with our partners and MAMA Network from Africa came forward to host the next ARJC in the continent once again. ASAP will work in solidarity with the MAMA Network and support by sharing our learnings as needed to ensure ARJC V is also a great success and further strengthens our mission of universal access to safe abortion rights and reproductive justice for all!



ANNEXTURE: ORGANIZING COMMITTEES

PRE CONFERENCE WORKSHOP

Ajar Pamungkas (Cello)
Laraib Abid
Mitra Kadarsih
Nguyen Thi Thao
Nikki Agarwal
Sanjida Akter Sweety
Thuy Mai
Vivek Bokka

OPENING CEREMONY

Ignatia Glory
Kaithabjeet Singh
Laraib Abid
Laxmi Chaudhary
Nujhat Jahan Khan
Priskila Arulpragasam
Shelani Palihawadana
Shreejana Bajracharya
Son Le
Thuy Mai

RECEPTION DINNER

Hasini Rupasinghe
Joshua Dilawar
Kaithabjeet Singh
Kajal Kiran Jain
Nikki Agarwal
Nujhat Jahan Khan
Shreejana Bajracharya
Thi Hong Nam Ngoc, Nguyen

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Naina Samson
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FEMINIST BOOK EXCHANGE

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Ignatia Glory
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Mai Thuy
Manjari Shrestha
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Naina Samson
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Yunishaa Loga

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Mitra Kadarsih
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Nguyen Thi Thao
Phuong-Nhi
Shreejana Bajracharya
Yunishaa Loga

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Ignatia Glory
Mitra Kadarsih
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Prabina Sujakhu
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Son Le
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Nguyen (Vietnam)
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Samiul Islam
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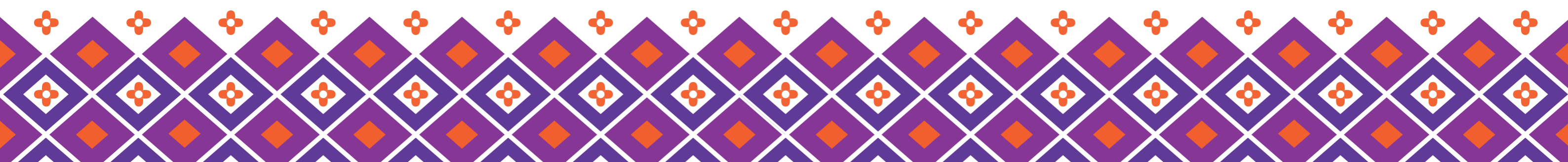
Shelani Palihawadana
Yunishaa Loga

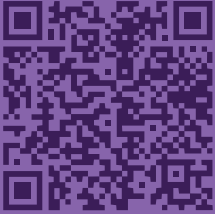
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Arunyika Jungwa (Ploy)
Banacha Lapkoed (Deartoon)
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Wipas Nuchnang (Naiss)
Yukonthon Choikerue (Sand)








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Sign up here for the **Global S.A.F.E Campaign**, a global movement advocating for safe abortion rights.



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