

REPRODUCTIVE RIGHTS

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The concept of reproductive rights emerged in the 1970s out of women's struggles for access to abortion, opposition to forced sterilisation and control of their bodies. This concept was taken up by local and transnational organisations and adopted by 189 countries at the 1994 Cairo Conference on population and development. Some sociologists such as Giddens and Held theorised them as the fourth generation of citizen's rights. Yet, the Millennium Objectives for Development in 2000, theoretically the basis for all countries policies, forgot to mention them and did not include family planning. After intensive lobbying, the latter was included in 2005 but not reproductive rights. In the same light, the declaration on "The Future We Want", adopted on 19 June 2012, in preparation for the Rio + 20 Conference, omitted the term "rights" when referring to sexuality and reproduction, only mentioning "health". Does this reflect an omission or the refusal to consider these issues as "rights"?

Understanding the evolution of the acceptance or the denial of reproductive rights in the Third World allows us to grasp the dynamics of social change in this context and of North-South relations. Contributors are invited to submit texts on themes that describe how individuals deal with these issues and how national and international agencies change perceptions by their positioning on reproductive rights.

Movements in favour or against reproductive rights

Active movements that had federated at the transnational level raised the question of reproductive rights in South Africa as well as in Brazil or India. They sometimes changed to obtain international financings, which often dried up later on. Did they disappear or change? These groups were opposed to others, often religious. What are their sociological sources? How are they similar or different? How are they organized, how do they operate, what is their set of actions?

How are reproductive rights integrated into national policies?

Most countries ratified the Cairo protocol but have they integrated reproductive rights in their policies and in the indicators they collect? How have the institutions that were responsible for their implementation treated or mistreated them to serve their own agendas? Was their staffs adequately trained for this new role? Did they have the resources to implement them? Were there clear or contradictory directives for their implementation? Did they accept the cultural perceptions of the patients?

How did the actors appropriate reproductive rights?

The issue 52 of *Autrepart* indicated that spouses still decided on access to health services in sub-Saharan Africa. Is this a specific case? What is the situation in China where gender

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equality has a long history, or in Latin America where legal systems are often egalitarian and where policies underline female necessities. Do these issues create domestic frictions? Do women accept male domination, do they resist silently or vociferously, affirming their rights? How do men have access to information and services they need? What are the social, special, institutional and individual factors that favour or inhibit access to reproductive rights?

Various disciplines (anthropology, demography, geography, law, political science, sociology) can provide answers to these questions, which as always in *Autrepart*, deal with the developing world.

Authors are invited to submit proposals (title and abstract not exceeding 150 words of length) to Autrepart

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The deadline to submit for submitting full papers is June 28th, 2013

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