REPRODUCTIVE RIGHTS

The Reproductive Health framework is a service delivery model for addressing the reproductive health needs of women. The central theme of this framework is that health disparities and inequalities can be ameliorated by the creation and development of progressive health care clinics and agencies that will ensure women have access to a full range of reproductive health services and are empowered to understand their health care needs. The focus is on providing services for historically marginalized communities through the creation of reproductive health clinics that provide low or no-cost care as well as culturally competent services. The problem in underserved communities is a lack of access not only to reproductive health services, but also to all health care. For many women, reproductive health care is their first and perhaps only encounter with the health care system.

- Analysis of the Problem The lack of access to reproductive health services for women, and health care in general, is seen as a lack of information, a lack of accurate health data, or a lack of available services.
- ② Strategy Based on this analysis, strategies for change tend to focus on improving and expanding services, research, and access, particularly prevention and cultural competency in communities of color. Work in Reproductive Health often consists of providing health services and public health education with an emphasis on reproductive tract infection (RTI) and sexually transmitted disease (STD) prevention. It also includes comprehensive sex education, access to effective contraception, abortion services and counseling, family planning, HIV/AIDS prevention and treatment, and cancer prevention and treatment.
- **© Constituents** Patients in need of services and/or education.
- Key Players Are Providers Those who work as, or are allied with, medical professionals, community and public health educators, health researchers, and health service providers.
- **6** Challenges and Limitations As services and education are offered on an individual level, the root causes of health disparities are not addressed. In addition, the focus on individual women can be resource-intensive without leading to long-term change. Finally, this model is limited by inherent access issues because different women have different levels of access to these services and education.

Reproduction encompasses

both the biological and
social processes related to
conception, birth, nurturing and raising
of children as participants in society.

Social reproduction
is the reproduction of society, which
includes the reproduction of
roles such as race, class,
gender roles, etc.

The Reproductive Rights framework is a legal and advocacy-based model that serves to protect an individual woman's legal right to reproductive health care services with a focus on keeping abortion legal and increasing access to family planning services. Groups fight for a woman's "right to choose" and "right to privacy" through various legal, advocacy, and political means. Two main components of the strategy are to legally contest damaging legislation and advocate or influence public policies that protect reproductive choice. For instance, many Reproductive Rights advocates opposed the popular 2004 Violence Against Unborn Children's Act because it established a precedent of fetal personhood that can eventually be used to overturn existing laws protecting abortion rights. A subset of Reproductive Rights is Reproductive Freedom, which was coined by activists in the pro-choice movement and popularized by the "Hands Off My Body" campaign. Though Reproductive Freedom was a call for the government to decrease restrictions on abortion, the constraints of this framing made it difficult to include issues and concerns of poor women, women of color, queer women and transgendered individuals, and women with disabilities.

- Analysis of the Problem The lack of legal protection, laws, or enforcement of laws that protect an individual woman's legal right to reproductive health care services. The fight is centered on protecting the reproductive rights of individuals, such as a woman's right to privacy, her right to make choices, her right to be free from discrimination, her right to access services, and her actual access to social resources.
- ② Strategy The primary strategy for organizations who work from this framework is legal, legislative, and/or administrative advocacy at the state and federal level. Legal strategies focus on utilizing the courts to protect and prevent erosion of reproductive rights. Advocacy focuses on legislation and policy to both defend existing rights as well as create new laws that promote reproductive rights. Typically statewide coalitions and alliances are built in this model alliances of women's groups, civil rights groups, and health policy and advocacy groups.
- **© Constituents** Women are organized and urged to participate actively in the political process. They are organized as voters and encouraged to express their opinions through voting for political representatives and calling or lobbying their members of Congress or State Legislatures.
- Key Players Are Advocates Those who work as, or are allied with, advocates, legal experts, policymakers, and elected officials.
- **6** Challenges and Limitations The limitations of this framework are twofold. First, as Jael Silliman writes, "This conception of choice is rooted in the neoliberal tradition that locates individual rights at its core, and treats the individual's control over her body as central to liberty and freedom. This emphasis on individual choice, however, obscures the social context in which individuals make choices, and discounts the ways in which the state regulates populations, disciplines individual bodies, and exercises control over sexuality, gender, and reproduction." And second, the core strategy of calling for women to exercise their voting rights and call or email their elected officials assumes a level of knowledge, access to elected officials, and belief in the effectiveness of the political system that women who are marginalized by immigration status, age, class, and race often do not have.

REPRODUCTIVE JUSTICE

The Reproductive Justice framework is rooted in the recognition of the histories of reproductive oppression and abuse in all communities, and in the case of ACRJ, in the histories of Asian communities and other communities of color. This framework uses a model grounded in organizing women and girls to change structural power inequalities. The central theme of the Reproductive Justice framework is a focus on the control and exploitation of women's bodies, sexuality and reproduction as an effective strategy of controlling women and communities, particularly those of color. Controlling a woman's body controls her life, her options and her potential. Historically and currently, a woman's lack of power and self-determination is mediated through the multiple oppressions of race, class, gender, sexuality, ability, age and immigration status. Thus, controlling individual women becomes a strategic pathway to regulating entire communities. To realize a vision of the complete health and well being of all women and girls, a Reproductive Justice framework also engages with issues such as sex trafficking, youth empowerment, family unification, educational justice, unsafe working conditions, domestic violence, discrimination of queer and transgendered communities, immigrant rights, environmentaljustice, and globalization

- Analysis of the Problem Women's ability to exercise self-determination—including in their reproductive lives—is impacted by power inequities inherent in our society's institutions, environment, economics, and culture. The analysis of the problems, strategies and envisioned solutions must be comprehensive and focus on a host of interconnecting social justice and human rights issues that affect women's bodies, sexuality, and reproduction.
- Strategy As this framework highlights the intersection of multiple systems of oppression, key strategies include: [A] Supporting the leadership and power of the most excluded groups of women and girls within a culturallyrelevant context that recognizes and addresses the multi-layered impact of oppression on their lives; [B] Developing the leadership and building the social, political and economic power of low-income women of color and their communities so they can survive and thrive; [C] Advancing a concrete agenda that wins real individual, community, institutional and societal changes for poor women and girls of color; [D] Integrating grassroots issues and constituencies that are multi-racial, multigenerational and multi-class into the national policy arena; and [E] Building a network of allied social justice and human rights organizations who who integrate a reproductive justice analysis and agenda into their work. Onstituents Women and their communities,
- **© Constituents** Women and their communities, organized to lead and participate in the struggle against not only reproductive oppression, but also other inseparable injustices present in their lives.
- Key Players Are Organizers Those who work as, or are allied with, reproductive rights, reproductive health, social justice and other justice organizations.
- **Challenges and Limitations** In working to change power relations, assumptions, and values, this framework challenges people personally and politically by asking them to adopt a world view that is diametrically opposed to the status quo. It implies taking risks, including taking direct action against those in power. Working long-term to change these kinds of power relationships is resource intensive, requiring constituents and members to have an in-depth and comprehensive analysis as well as staying power. As campaign-based organizing can be a lengthy process with campaigns lasting several years, the immediate and short-term needs of constituents and members, such as challenges around employment, financial resources, health, and education, can be difficult to meet.