REPRODUCTIVE JUSTICE,
Or applying a social justice lens to sexual, reproductive and maternal health and rights

FQPN

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INTRODUCTION

Reproductive justice is both an analytical and a practical approach as well as a movement that emerged in the United States in the 1990s. The phrase was developed by African-American women during the International Conference on Population and Development, held in Cairo in 1994. It resulted from a fusion between "social justice" and "reproductive rights". Reproductive justice situates the fulfillment of complete sexual and reproductive autonomy for women and girls within the larger sphere of social justice. This movement emerged from the initiative of Indigenous women and women of colour who continue to advance the initiative.

What is reproductive justice?

> *"Reproductive Justice is a positive approach that links sexuality, health, and human rights to social justice movements by placing abortion and reproductive health issues in the larger context of the well-being and health of women, families and communities because reproductive justice seamlessly integrates those individual and group human rights particularly important to marginalized communities. We believe that the ability of any woman to determine her own reproductive destiny is directly linked to the conditions in her community and these conditions are not just a matter of individual choice and access. For example, a woman cannot make an individual decision about her body if she is part of a community whose human rights as a group are violated, such as through environmental dangers or insufficient quality health care. Reproductive justice addresses issues of population control, bodily self-determination, immigrants' rights, economic and environmental justice, sovereignty, and militarism and criminal injustices that limit individual human rights because of group or community oppressions."*
>
> (Ross. 2011.)

CONCEPT CLÉ

Reproductive justice fights against all forms of sexual, reproductive and maternal oppressions that affect the lives of women and girls. It also fights against the social, political, economic and cultural conditions that contribute to the reinforcement and perpetuation of these oppressions.

Why has the FQPN decided to work on reproductive justice?

To carry forward its strong history of 40 years of activism in favour of sexual and reproductive health and rights, the FQPN felt it appropriate to question its analytical approach and its practices to better serve its mission, which is to:

- inform and stimulate critical reflection
- defend women's rights
- promote free choice on issues of maternity

The FQPN works on these issues from a feminist, health, promotion and social justice perspective.

From 2008-2010, the FQPN, with support from the Solstice Foundation, carried out a two-year strategic planning process to better adapt its approaches to issues and struggles of concern to Quebec's contemporary social and political context. One motivation for this reflection was the apparent gap between the FQPN's expressed desire to defend the sexual and reproductive rights of **all women** and the relative homogeneity with regard to the appearance of the organization and its members. The FQPN concluded that its methods did not reach a full and diverse range of women and that to do this, the organization needed to begin to review its mission and its approaches to realize its objectives.

Its research on initiatives in the field of sexual and reproductive health and rights, have led the team of staff and members of the board of directors to become familiar with reproductive justice. Arising from the demands of Indigenous women and women of colour and from their criticism of the mainstream pro-choice movement in the USA (the dominant or institutionalized streams that represent the voices and interests of women from the majority), this framework of analysis and practices seemed to contain ways of thinking and lessons that would be useful as approaches for the FQPN to consider.

The reproductive justice movement, despite being born in a different social and political context than that which prevailed in Quebec, allowed the FQPN to educate itself, to better understand the concerns and critiques of the standard pro-choice movement and to draw inspiration from its practices, issues and demands. The integration of the reproductive justice movement's analyses and practices will enable the FQPN to respond better to the needs of women and girls in all their diversities. It will also allow the FQPN to more fully contribute to a wider social justice movement for **all** of those living on the colonized territory we now call Quebec.

A multi-pronged approach: to better explore reproductive justice and its possibilities, the FQPN decided:

- to establish a "reproductive justice committee", comprising of women with diverse experiences, competencies and identities who actively contribute to the engagement of the FQPN with reproductive justice by the generous contributions of their thoughts, knowledge, and experiences;
- carrying out research in partnership with UQAM's Service aux collectivités to document the movement and make its analyses available in French;
- carrying out field research with individuals and groups living diverse realities through "round table" discussions. The objective of these session was to develop awareness of the multiple issues related to sexual, reproductive and maternal health and rights in Quebec, and of the way they are associated with multiple systems of oppression;
- and finally, trying to permanently integrate the reflections and teachings derived from these activities within the debates in the positions taken by the organization.

This document presents an overview of reproductive justice in the context of its emergence in the United States; its theory and its practices; its limits and critiques of the movement and, finally, the possible application of these concepts to the work of the FQPN and its allies.

The FQPN hopes this document will to contribute to the collective process of building a movement to defend sexual, reproductive and maternal health and rights that is dynamic, inclusive and unified within a society that is more just and equal for all.

I. REPRODUCTIVE JUSTICE IN THE USA, A BRIEF PRESENTATION[1]

A) What is Reproductive Justice?

> *"Reproductive justice is the complete physical, mental, spiritual, political, economic, and social well-being of women and girls, and will be achieved when women and girls have the economic, social and political power and resources to make healthy decisions about their bodies, sexuality and reproduction for themselves, their families and their communities, in all areas of their lives."*
>
> (ACRJ. 2005)

Moreover, reproductive justice is a transformative movement led by communities most affected by reproductive oppressions that aim to remove power inequities and to create long-term, systemic changes.

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1 This first part is based on the founding texts of the movement for reproductive justice, written by many activists. Principal among this work are *Undivided Rights : Women of Color for Reproductive Justice Organize for Reproductive Justice* , Silliman *et al* (2004); *A New Vision*, ACRJ (2005); *The Reproductive Justice Briefing book* , Collective, (2007); and *Understanding and reproductive justice* , L. Ross (2006, updated 2011)
The principles, analyses and criticism of the movement in these texts have been translated directly as they were presented by their authors. It should be noted that the definitions and concepts related to reproductive justice have evolved and been refined over time. For example, while the first texts mention only "women and girls," the most recent texts speak of "women and individuals" to include queer and trans*(definition further in the text) realities. This explains some inconsistencies in this text. Those who are interested in a more contemporary analysis of the movement can consult the websites of SisterSong or Forward together (formerly Asian Communities for Reproductive Justice- ACRJ) as well as social media that announce events and cover most of the debates and discussions of the movement.

To learn more about the fundamentals of reproductive justice, it is possible to consult the text *Understanding Reproductive Justice* by Loretta Ross, one of the founding mothers of the movement, available on the FQPN's website.

Reproductive justice is rooted in the struggles and resistances of Indigenous women and women of colour against the multiple reproductive oppressions that constrain their bodily autonomy and reproductive plans.

Reproductive oppression is the control and exploitation of women, girls, and individuals through their bodies, sexuality, labor, and reproduction. The regulation of women and individuals thus becomes a powerful strategic pathway to control entire communities. It involves systems of oppression that are based on 'race', (dis)ability, class, gender, sexuality, age and immigration status.

> *"Reproductive justice has deep historical roots. It draws on the history of slavery, civil rights and coercion relating to sterilization and contraception. It encompasses current discrimination experienced by diverse communities such as women living with drug addictions, disabilities or in impoverished communities. Women of color have largely led this movement by connecting social justice issues with reproductive health. In the 1960s and 1970s, women like Shirley Chisholm and Frances Beal worked with others in feminist and mainstream reproductive rights organizations to shift the reproductive rights discourse to address the breadth of social justice issues that affect women, such as access to health care, child-care and economic opportunities. Women from Latina and underserved communities also mobilized against acts of reproductive coercion, such as sterilization abuses, which ultimately led to tougher sterilization guidelines that continue today."*
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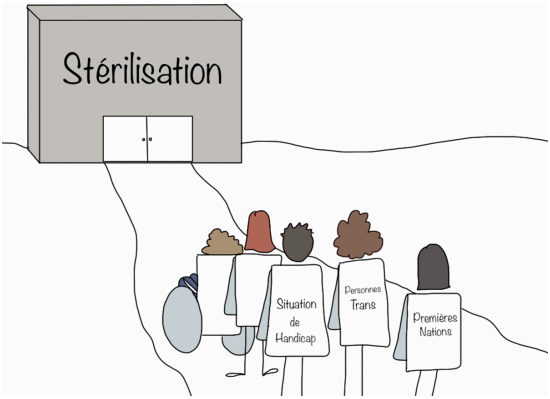
> (Gillian *et al*. 2009.)



B) Why a new framework?

The reproductive justice movement emerged from Indigenous women and women of colour who realized that the mainstream pro-choice movement in the US did not really include them and also did not address the issues most urgent and relevant to them. Their criticisms can be summarized in three categories: the primacy of abortion rights, "choice," and some problematic alliances.

Abortion as a primary and single issue

The right to abortion has been the main — and often only — issue for which the mainstream pro-choice movement in the US has fought. Claiming this right is certainly fundamental but this single focus does not take into account the needs of those women who were simultaneously experiencing forced sterilizations and coerced abortions; forced removal of their children; or who had limitations placed on the number of children they were allowed to have (e.g., through 'family cap' policies for those receiving social benefits in the US). These practices themselves constituted major infringements on women's rights and reproductive autonomy and affected primarily women who were in situations of poverty, of colour, Indigenous, disabled or marginalized in some way.

As a result, some Indigenous women and women of colour developed the concept of **reproductive oppression** to comprise all the types of violence and coercion that can affect women's and girls' sexual, reproductive, and maternal health and rights.

Reproductive oppression is inscribed within the larger context of population control, which includes the reproductive and fertility control of women, but also the policies relating to migration, the management of community displacements, the prison system, etc.

'Choice'

The mainstream pro-choice movement in the United States has advocated for 'choice' from a strictly individual perspective. By doing so, it failed to recognize the social and economic contexts in which individuals make (or are unable to make) choices, and ignored the systemic and structural inequalities that prevented authentic choice from being possible for women who are traditionally marginalized. The fact that a right is guaranteed for everyone in the eyes of the law, does not mean that all are able to exercise that right.

An example of inequality between women theoretically enjoying the same rights is the Hyde amendment and its consequences. Voted by the US Congress in 1976, this bill excludes women who received from federal health insurance coverage (i.e., Indigenous women, women in the military and those who are disabled or on welfare) from accessing free abortion, something for which they had been previously admissible. They can 'legally', as can other women, have an abortion, but can they afford to pay for it? Despite this blatant inequality of access to abortion services, very few pro-choice groups really opposed the Hyde amendment. Neither did they fight

against the neoliberal policies that are dismantling social and healthcare services, which have had terrible effects on marginalized women and on their sexual, reproductive and maternal health and rights.

In sum, the US mainstream pro-choice movement omitted essential class and 'race' analyses, and failed to show solidarity. True solidarity would and should mean promoting and defending the needs and rights of all women and ensuring full access of all sexual, reproductive and maternal health services.

'Problematic' Alliances

To protect the right to abortion, some US pro-choice groups occasionally and opportunistically formed strategic alliances with groups or individuals which were pro-abortion for a variety of reasons, sometimes distant from respecting women's autonomy. Among the latter are, for example, libertarians (who reject any government intervention), and those whose motives are racist and eugenic (and who support abortion because they think it contributes to a reduction of crime, alleged social burdens and births within racialized and / or immigrant communities).

These alliances have altered the confidence of traditionally marginalized women in the mainstream movement which has sometimes preferred to focus on strategic political gains rather than adhere to a political vision respectful of the autonomy and ability of all women to determine their own reproductive futures.

Nevertheless, there have still been affinity alliances between health groups by and for Indigenous women and women of colour, and certain branches of the feminist movement (particularly those that adopted a class analysis, or, as did some radical feminists, who took a critical view of population control) also campaigned for the end of forced.

However, there still lacked an analytical framework that successfully connected sexual, reproductive and maternal health and rights, human rights and social justice.

C) The emergence of a movement

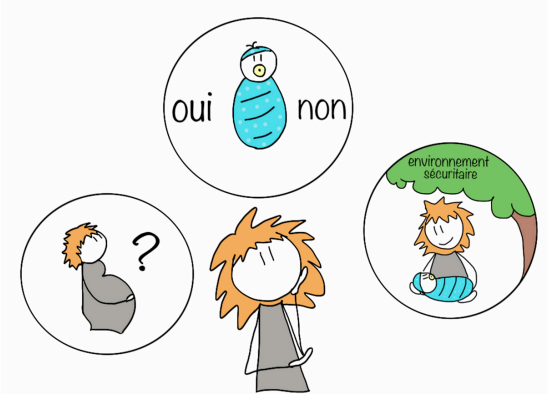
Activists associate the reproductive justice movement with several factors:

- the increase in the number of organizations for and by Indigenous women and women of colour during the 1980s. They helped in analysing the intersecting effects of multiple forms of oppression on the sexual, reproductive and maternal lives of diverse communities;
- 'hyper-fertile' academic period, during which foundational texts on the intersections between 'race' class, gender and sexual orientation that led to the theorization of "intersectionality" were published;
- international conferences at which frameworks focussing on women's human rights were articulated;
- the creation of networks of organizations for and by Indigenous women and women of colour, such as Women of Color Coalition for Reproductive Health Rights (1987-1995) and Sistersong Women of Color Reproductive Health Collective, (1997- today). These networks nourished the groups and enabled them to share and circulate analyses and ideas as well as training tools. These all helped reinforce the financing of existing groups and supported the emergence of new groups.

D) Its objectives

The demands of activists, groups and networks within the reproductive justice movement comprise the fundamental right for every woman to:

- decide if and when she will have a baby and the conditions under which she will give birth;
- decide if she will not have a baby and her options for preventing or ending a pregnancy;
- parent the children she already has with the necessary social supports, in safe environments and healthy communities without the fear of violence from individuals or from the government.



This definition is found in the 2011 edition of Understanding Reproductive Justice, by Loretta Ross. In the original 2006 edition, Ross wrote that it is necessary to fight equally for (1) the right to have a child; (2) the right not to have a child; and (3) the right to parent the children we have, as well as to control our birthing options, such as midwifery.

We note how the definition of the objectives of reproductive justice has evolved over the years. More recent definitions add a fourth objective which is the right to freely express one's sexuality[2].

To respect these rights requires the elimination of all ways in which women's and girls' bodies, genders, and sexualities could be controlled and regulated, as well as changes in political, economic, social and structural contexts; the elimination of racism; improvements in education, environmental regulations, social services and immigration laws, and all else that has a systemic effect on one's sexual, reproductive and maternal lives.

> *"Reproductive justice is an intentional impulse to shape the competing ideals of equality and the social reality of inequality" in the areas of sexual, reproductive and maternal health and rights.*
>
> (Ross. 2006)

2 http://www.uua.org/reproductive/action/199536.shtml, accessed march 4th 2014.

E) Its Theory

From its earliest days, the reproductive justice movement in the US called attention to how the marginalized and oppressed have different experiences related to reproduction, sexuality, and maternity because of their gender, 'race', class, sexuality, (dis)ability, and immigration status (to name a few of the markers of oppression).

Reproductive justice uses the intersectional approach as a framework. This theory can be summarized as follows:

- it is rooted in the lived experiences of people;
- it takes into account the multiplicity of systems of oppression and their combined and simultaneous impacts on individuals, families, and communities;
- it explains how these systems of oppression/privilege are maintained through social policies and institutional structures, as well as through personal interactions;
- it asks us to reconsider our understanding of power and oppression/ privilege. An individual or group can be simultaneously in positions of power and of oppression depending on a particular context. Oppression is fluid and changeable, it operates at multiple levels and must be fought at all these levels...

Underlying intersectional approach is an understanding of power and its unequal distribution along markers of differentiation ("race", class, age, gender, sexual orientation, (dis)ability, etc.). To restore the balance of power, it is necessary to fight against oppression in all its forms (interpersonal, structural, systemic), and to recognise oppression/ privilege and to actively deconstruct them in solidarity with others.

Exposing privileges

Look at the following statements and link them to the corresponding identity

AFFIRMATION	IDENTITÉS
I can openly talk about my relationship with my partner in my workplace	I'm able-bodied
In the media, I can find representations of inspiring people who are like me and with whom I can identify	My gender expression is consistent with my biological sex (I'm cisgender)
I can communicate with all members of my family and with staff within the health, education and social services systems	I'm not hearing impaired
Strangers don't assume they can ask me what my genitals look like and how I have sex	I'm heterosexual
Sexual harassment on the street virtually never happens to me. I do not need to plot my movements through public space in order to avoid being sexually harassed, or to mitigate sexual harassment	I'm a man
I can be assured that my entire neighbourhood will be accessible to me	I'm white

Naming privileges can help us recognize realize that what only some many of us can take for granted is not part of the reality of many people, and represents obstacles to their dignity and, autonomy and respect of their rights. Understanding systemic inequalities and inequities — and therefore systems of oppression and privilege, their causes and how they manifest themselves — allow us all to better fight and to act in true solidarity with others.

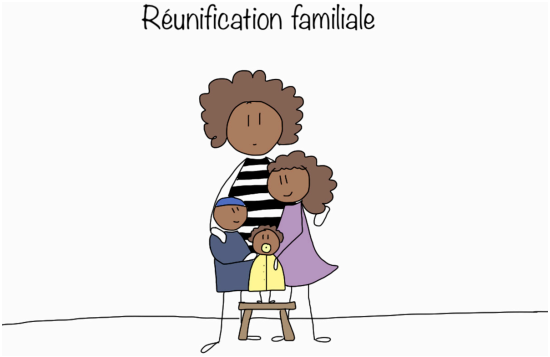
F) Its Practice

A reproductive justice project must:

- put the most excluded/marginalized communities into positions of leadership;
- build their capacity for social, political and economic empowerment;
- advance concrete and often campaign- or project-based agendas;
- integrate grassroots issues and multi-racial, multi-generational and multi-class constituencies into the national policy arena;
- build networks with allied organizations.

Improving precarious workers' maternal health

> In California, most of those working in manicure / pedicure salons are women of Vietnamese origin. They work long hours for low wages and are not unionized. This means they have limited ways to ensure their rights are enforced. They are also exposed to toxic chemicals contained in nail products that can cause cancer or developmental problems for children exposed *in utero*. These women must often choose between their health and the health of the fetus and the job that is their source of income. With the support of the Asian Communities for Reproductive Justice, workers and their allies have mobilised to require cosmetics manufacturers to indicate potentially dangerous substances in their products. This can help women to choose the equipment they use and reduce their risk of exposure to toxic substances.



Dignity and family reunification for incarcerated women

> The number of women incarcerated in the US continues to grow. Incarcerated women who have children lose their rights as parents, with their offspring placed in foster care. Those who are pregnant when going to jail may be forced to give birth while in shackles. Some women in recovery from these experiences joined together in 2001 to create the Rebecca Project for Human Rights. They were able to get the practice of shackling women during labor banned in federal prisons. They also obtained funding for family treatment of addiction so women can recover together with their families in rehab centers.

Mobilizing communities to preserve access to abortion for teenagers

> In California, legislators regularly try to pass parental notification regulations that would force teenage girls to inform their parents before they have an abortion. At the last attempt, organizations such as California Latinas for Reproductive Justice mobilized to inform their various communities about these proposals. They developed messages in culturally appropriate language and used trusted members from their communities (e.g., faith leaders, community radio) to convey them. The goal was to inform, encourage and empower people who did not usually vote to register their rejection of parental notification requirements. They also put pressure on an influential organization that supports agricultural workers to take, for the first time, a position on reproductive issues. The outcome of this intersectional activism and solidarity with a community that is traditionally not targeted during pro-choice campaigns, was the defeat (by a narrow margin) of the notification proposal.

These three initiatives are examples of projects that have actually advanced sexual, reproductive, and maternal health and rights for all. In addition, they have also contributed to social justice by restoring political and social power to people and communities traditionally marginalized and whose concerns are rarely brought into the public arena, let alone heard.

G) Critical Reflections

The theoretical foundations and actions of the reproductive justice movement in the United States have led to new ways of thinking about and defending women's health and their sexual, reproductive, and maternal rights. However, as do all movements, reproductive justice generates questions and sometimes raises concerns. We transcribe below some analyses and reflections from the authors of *Undivided Rights: Women of Color organize for Reproductive Justice*. This book, first published in 2004, chronicles the emergence of many of the groups and initiatives that founded the movement for reproductive justice in the US.

Reproductive justice has:

- provided support for Indigenous women/women of colour to strengthen their activism. These women found that the reproductive justice movement provided a space in which they could share the realities of their sexual, reproductive and maternal lives and define their own priorities and approaches to action;
- encouraged the empowerment of women from traditionally marginalized communities through participatory methods, especially those based on self-help and the deconstruction of internalized oppression;
- expanded the definition of reproductive rights and continue to work to ensure these are respected;
- created diversified approaches to ensure that the voices and needs of all women are heard and that the expansion of reproductive rights of one group does not necessarily lead to a decrease of the rights of another group;
- highlighted a form of radical feminism that challenges the social, political, and cultural system as a whole rather than promote a liberal feminism that fights only for equality between the sexes.

Limitations and issues for reflection

- the movement for reproductive justice emerged from Indigenous women and women of colour who organized along 'colourlines' (i.e., as African American, Latina, Native, or Asian and Middle Eastern). However, these 'groups' are not homogeneous and the women whom they comprise can have very different needs. As the 'umbrella' for organizations based on 'racial' identities, the reproductive justice movement has tended to take insufficient account of issues of sexuality, of (dis)ability, and of class. The absence of issues of concern to lesbians within the movement has been especially criticized, as has the predominance of middle class women. These issues have been identified and have led to internal changes within the reproductive justice movement and, in particular, to the integration of LGBTQI (Lesbian, Gay, Bisexual, Trans*[3], Queer and Intersex) chapters in many organisations;
- there is tension within groups and coalitions on the types and scope of actions that need to be taken. Some lean toward grassroot radical actions, while others favor large political campaigns and lobbying. The authors of *Undivided Rights* cut short the radical/reform discussion because, according to them, advocating for Indigenous women and women of colour, especially if they are in situations of poverty, is in itself a radical commitment;
- it is difficult to renew the leadership within the movement. The founding mothers of the reproductive justice movement are very strong figures whose expertise is in constant demand, especially by the media and mainstream organizations. This has the perverse effect of diverting groups from the essential needs for consolidation and for the transfer of knowledge/skills within their own movement;
- it is always difficult for organizations of Indigenous women/women of colour to make their voices heard and to be considered within mainstream feminist organizations. For example, when the March for Women's Lives was first planned in 2004, no one initially included any of the Indigenous women and women of colour's organizations;

3 Trans* is an umbrella term that refers to all of the non-cisgender gender identities, including transgender, transsexual, transvestite, genderqueer, genderfluid, non-binary, genderfuck, genderless, agender, non-gendered, third gender, two-spirit, bigender, and trans man and trans woman.

- financing is difficult to obtain when a project's objectives are not clear nor quantifiable. The reproductive justice movement has tried to address this concern by producing tools to support organizations that regularly seek external funding. One example is "Growing the reproductive justice movement: a toolkit for funders". Another obstacle in obtaining funding is that funders tend to offer support 'by population' — meaning, for example, that they will fund only one project for Latina women. Interestingly, the same restrictions do not apply to mainstream groups (understood as 'white');
- the organisations in the US that are registered as charities cannot devote more than 20% of their activities to political lobbying if they are to avoid losing their charitable status, something essential to their legal and financial survival. This can constrain their activism;
- national conferences have nourished the dynamism of the reproductive justice movement. However, given the lack of sufficient financial resources, much work now has to be done through electronic means. While this allows groups to reach more people, it provides fewer opportunities to develop new ideas together and to actively mobilize.

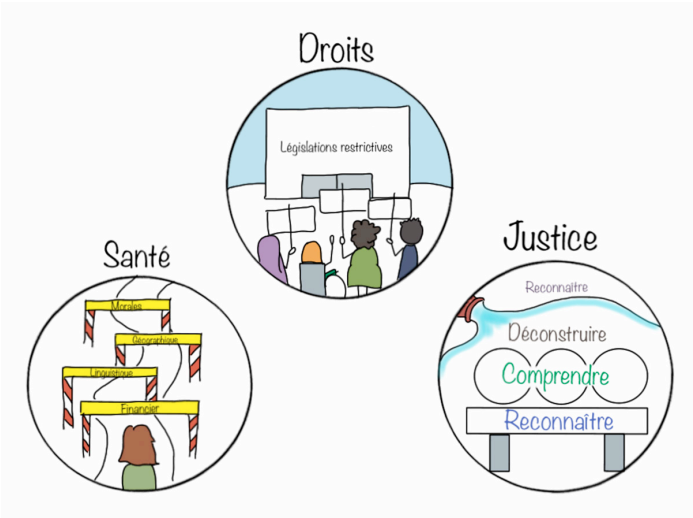
The movement for reproductive justice is growing, and as it does, it is questioning and transforming itself on the basis of its continuing (self) reflections. But how does the reproductive justice movement work with/collaborate with other movements that advocate for social justice and for sexual, reproductive, and maternal health and rights?

H) Complementary Approaches

Because reproductive oppression affects women and individuals in a diversity of ways, a multidimensional approach is necessary to fight oppression and to defend the sexual, reproductive and maternal health and rights of all. In *A New Vision* (2005), Asian Communities for Reproductive Justice (now named Forward Together) depicts three complementary strategies to reach the goal of reproductive justice: reproductive health, reproductive rights, and reproductive justice.

Those primarily addressing matters of **reproductive health** focus on ensuring access to health care for all, more specifically on service delivery. This requires:

- the removal of financial, geographic, linguistic, religious and other physical and temporal barriers to receiving care;
- the acknowledgement of disparities and inequalities between women and to promote changes that will reduce these barriers;
- the removal of gaps in information and data available to women so that they can make informed decisions about their own health care;
- the assurance that providers develop relevant and appropriate services adapted to the needs and situations of all women.



Although necessary, reproductive health is insufficient on its own insofar as it focuses on individuals, on service delivery and on resources. Thus, there is also the need for a complementary focus on reproductive rights.

Here the emphasis is on current legal and policy structures that limit authentic choice, privacy and self-determination.

This involves:

- contesting restrictive legislation, such as restriction on abortion services; laws that require a trans* person to have surgery before a gender is changed on official documents; and policies that determine access to their children for imprisoned women;
- influencing and defending political propositions that protect the choice and rights of all regarding their sexuality, reproduction and maternity experiences.

Complementary to these approaches are those for **reproductive justice**. This goes beyond the issue of rights and access to health care and envisions radical social transformation.

Its focus is on:

- recognizing the historical (as well as the contemporary) roots of reproductive oppressions and abuses;
- understanding how intersecting systems of oppression affect the bodies, sexuality, reproduction and maternity of people, individually and collectively;
- deconstructing unfair structural sources of power and privilege, at all levels whether this be in organizing, collaborating, carrying out mutual education, etc.
- supporting the leadership of the most excluded groups by building networks of allies among groups fighting for social justice, reproductive justice, and human rights. This will help defer challenges to immigration, environmental, educational, workplace, economic and other policies that perpetuate inequities and injustices.

Thus, reproductive justice combines inclusive health and human rights frameworks in a perspective of social justice. Born, thought about and put into action in the United States, reproductive justice has evolved and changed there, but it also has implications here.

II. REPRODUCTIVE JUSTICE IN CANADA, QUEBEC, AND THE FQPN

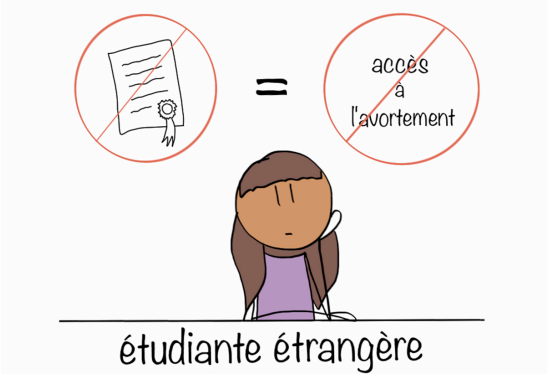
Histories, experiences, and realities of women in Quebec and Canada are not identical to those of women in the US. Even though there are major differences in the health care systems and laws between the two countries, some sources of oppression are similar and inequities are still strong and may be growing here as well as there. The common histories of both countries as colonial powers that (still) oppress and discriminate against Indigenous communities have had dreadful consequences that are well known and have been regularly denounced by the UN. Their common hostility toward refugees and immigrants, their prejudice toward impoverished people and precarious workers, the persistent inequalities between the sexes in gendered violence and poverty, and their systematic pursuit of profit to the detriment of the environment and people's health are some examples.

Despite the similarities, there are also some cross-border differences in the expression of reproductive oppressions. In Canada and Quebec, some social policies have helped reduce certain effects of reproductive oppression. Among them is the decriminalisation of abortion, the public funding of necessary medical care for people who are citizens or residents, the commitment of women's groups to social justice and their rejection of the medicalization of women and their health.

Nevertheless, this does not mean that reproductive oppression did not exist historically or does not exist here and now.

- for some women, especially those living in remote areas, access to abortion, even if it is decriminalized, is very difficult to access. And it is simply not at all available in Prince Edward Island;
- until recently, trans* people in Quebec were required to undergo surgery leading to infertility to obtain a legal change of their mention of sex. In December 2013, an amendment to the Civil code of Québec corrected this situation.
- first Nations, Indigenous and Metis (FNIM) children constitute half of the foster care population while comprising only 4.3% of the population;

- women with (dis)abilities may be coerced to be sterilized or have abortions if they become pregnant, as well as experience the removal of their children by Youth Protection Services that perceive them as unable to be 'good' parents;
- people with precarious immigration status often do not have access to the health system. Consequently, some women give birth alone at home rather than with the help to reduce the risk of being denounced to the authorities by health personnel and/or of having to pay expensive birthing fees;
- lesbian women may be subjected to inaccurate safer-sex information from medical staff due to misconceptions about lesbian sex (i.e., that there is no risk of sexually transmitted infections (STI) transmission).



Clearly, in Canada and Quebec, as in the United States, we have failed to eliminate the pervasive inequalities between women that lead to inequities in their health and in their *de facto* rights.

A) Is there a reproductive justice movement in Canada?

This part of the document is based on the preliminary research on reproductive justice carried out by Sunny Marriner for Canadians for Choice (internal document)

Reproductive justice in Canada is largely undocumented in peer reviewed and grey literature (i.e., 'in house' research documents and reports produced by by governments, institutions, and the non-profit sector). Much of what can be found is located on the Web and in social media, indicating that reproductive justice organizing in Canada doesn't have the infrastructure of the US movement. Nevertheless, there are four areas of activity that illustrate reproductive justice work in Canada.

1. First Nation, Inuit and Metis (FNIM) organizing

The most significant expressions and representations of reproductive justice are found in FNIM organizing. As Jessica Danforth (Yee. 2012) of the Native Youth Sexual Health Network writes it, Indigenous communities were "living and practicing" reproductive justice principles long before the term was coined. As a result, many documents, agendas, frameworks, and initiatives generated by and for Canada's FNIM communities employ and advance reproductive justice principles even when they are not explicitly identified as such. This body of work and Danforth's considerable writings form the core of reproductive justice thinking and organizing in Canada today. Danforth herself is the only consistently identified national leader in the reproductive justice movement in Canada.

2. Student-led groups & initiatives

There are several student-led groups and initiatives that have organized themselves using reproductive justice language. Their activities range from simple awareness-raising strategies using social media and campus discussion clubs to organizing politically with conferences and other types of events. The Synergy Student and Youth Network for Reproductive Justice (hosted by the Abolition Right Coalition for Canada website) and the Guelph Resource Centre for Gender Empowerment and Diversity (that runs *The Every Body Conference* in Ontario with an impressive cross-section of presenters) are examples. In Montréal, the Centre for Gender Advocacy at Concordia University and its working group, the Reproductive

Justice League, are the only such group in Quebec we know of that overtly uses the term 'reproductive justice'.

3. Organizing by primarily pro-choice associated groups

Numerous events identified as reproductive justice have been organized by, or in conjunction with, groups or individuals primarily associated with reproductive rights and/or reproductive health agendas. Joyce Arthur of the Abortion Rights Coalition of Canada and Carolyn Egan of the Ontario Coalition for Abortion Clinics have both been associated with the pro-choice movement for quite a while but they simultaneously employ reproductive justice language in their more recent organizing activities such as within the 2012 *Reproductive Justice: Equal Access Now! National Day of Action*. The decision to use the term 'reproductive justice' as part of this day of action was not unanimously accepted. Some accused the groups involved of using the term without sufficiently putting into practice one of the major founding principles of reproductive justice, namely the leadership of communities that have been traditionally marginalized.

4. Independent initiatives

Sunny Marriner identified a small number of independent initiatives that appear to have developed outside of any of the above categories. The midwifery and birth activism movements, for example, have close ideological ties to reproductive justice movements (Shaw. 2013). In Nova Scotia, this has led to the creation of the Health and Reproductive Justice Working Group at the Women's Action Alliance for Change in Nova Scotia. The research in Nova Scotia also located Feminists for Reproductive Education and Equity, which appears to be an independent group of individuals and organizations working in conjunction with local sexual health and sexual assault centres to provide reproductive justice training in the community. Because of the grassroots nature of independent initiatives, they are often difficult to identify, have little to no online presence, and may be only of short duration. As a result, many initiatives and community-based efforts were probably not detected in the survey.

From her research, Marriner concludes that:

- there is not a strong organised reproductive justice movement in Canada, but there is definitely some work being done that is in accordance with reproductive justice principles albeit without using the term;
- in the past few years, there has been a rise in popularity of the term 'reproductive justice'. This increased use raises serious questions and tensions about its application and appropriation by groups that are doing 'pro-choice' organizing without recognizing the fundamental role of Indigenous women and women of colour in its creation nor the importance of the 'race' and class analyses that come with it.

To understand more about these issues, one should read Jessica Danforth's *Reproductive Justice – for Real, for Me, for You, for Now!* (2010)[4] in which she addresses these issues of cooptation and interpretation of the term, 'reproductive justice'.

B) The FQPN and reproductive oppression

The FQPN was officially incorporated in 1972 as a provincial branch of the Family Planning Federation of Canada (FPFC) with the primary objective of establishing family planning associations in all regions of Quebec. At the beginning, it was a professional association, not a feminist one. However, early on, it began to take positions that differed from FPFC, notably on the issue of 'population control'. This led the FQPN to adopt the more neutral words 'family planning' rather than 'birth control' in its name and in its vocabulary to underline its rejection of controls on women's bodies and of eugenics.

> *"Whereas the FPFC promoted a policy of population zero, the FQPN actively defended an individual's freedom of choice of contraception and saw its role as helping women and men have the number of children they wanted, when they wanted — and not to impose values or attempts to regulate."*
>
> (Milne. 2011)

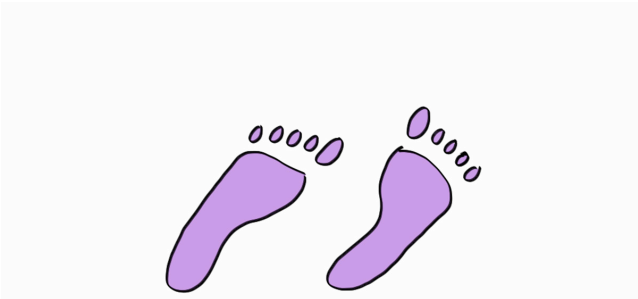
4 http://www.bwss.org/reproductive-justice-for-real-for-me-for-you-for-now, accessed march 10th 2014.

Going back in the archives of the FQPN, it is easy to find documents naming discrimination along the lines of nationality, 'race', class and age, and the way they affect women's access to services. They also include critiques of contraception used for population control. In 1994, linking cultural background and its potential relation to attitude toward family planning, FQPN organized the event *Quatre femmes – quatre cultures*, whose objective was to enable women from diverse origins (Algonquin, Haitian, Indian and Quebec) to present their experiences and challenges with respect to parenthood planning.

This suggests that the mainstream pro-choice movement in Quebec, of which the FQPN is part of, has not adopted the same positions as the mainstream pro-choice movement in the United States and therefore cannot be criticized in all the same ways.

However, even if we can say that the analytical framework adopted by the FQPN was more comprehensive than one of simple 'choice' in the liberal sense, and that it advocated for the health and needs of women in different areas of sexuality and reproduction, it still failed to reach out to traditionally marginalized women or to show sufficient solidarity with issues most relevant to them and their communities.

In addition, abortion and access to abortion have always occupied much of the agenda of the FQPN, which sometimes has made it difficult to realise the rest of its mission (sex education, safe(r) contraception, research on assisted reproduction and its implications, etc.). This situation is in large part the result of the limited resources of the organization and the time taken to fight back the multiple attacks against the right to abortion (nearly 50 motions to attack or limit the right to abortion have been filed with the federal government since 1988).



C) How to integrate the perspectives and strategies inspired by the reproductive justice movement?

During its strategic planning process, the FQPN recognized that issues related to the sexual, reproductive and maternal health and rights of groups whose voices are less often heard were not present. The organisation also realized that it was necessary to do much more if it wanted to actively defend the rights of all women in Quebec.

In this regard, the FQPN is part of a collective reflection process ongoing within Quebec feminist groups over the past ten years. These groups are questioning their ways and considering how to actively integrate 'new' issues (i.e., immigration, poverty, (dis)ability, queer and trans* issues, colonialism, feminism and religion, etc.) in their work.

To facilitate its approach, the FQPN requested support from UQAM's *Service aux collectivités* to find, translate and summarize key documents about reproductive justice. This unpublished work has been used in the preparation of this document.

The FQPN also organized self-study sessions at regular meetings of its board and at its general meetings. A reproductive justice committee composed of FQPN staff and members of the board, and external community group members with different experiences and expertise was created to advise and supervise the process.

A major component of the FQPN's work plan centred on a series of activities that aimed to create spaces where women who were not in the traditional networks of the FQPN could express and share their needs, activities and resources for reproductive, sexual and maternal health and rights.

In this regard, the FQPN organized a series of roundtable discussions to share experiences. After an initial pilot workshop in January 2011, the FQPN arranged three subsequent participatory roundtables with a wide range of community groups and individuals not necessarily working specifically on women's health issues. The intent was to hear everyone's concerns and their current projects, and to identify together the links and commonalities between each other's challenges and the respective responses to those challenges.

Each roundtable was exciting and informative but the emergence of connections between issues and struggles faced by the various groups were possibly the most important result. These opened up possibilities for solidarity that could (and should) be built.

Issue	Who named it?	Context that enables this problematic situation
forced removal of children from their families	- Indigenous women; - women living with physical disabilities; - women experiencing mental health problems; - incarcerated women; - women working in the sex industry; - homeless women; - women struggling with substance abuse.	- non-recognition of parenting skills; - the criminalization of sex work and drug use; - social profiling and prejudice; - racism and racial profiling; - budget cuts in health and social services; - toughening of punitive responses to social problems; - colonialism; - eugenics.
forced sterilization	- women living with physical disabilities; - women living with mental health problems; -trans* people; - Indigenous women; - intersex people.	- eugenics; - transphobia; - over-medicalization and psychiatrisation; - legislative gaps; - denial of basic rights such as physical integrity; - absence of free choice and consent in the procurement and reception of medical care; - lack of funding to conduct awareness campaigns; - colonialism.

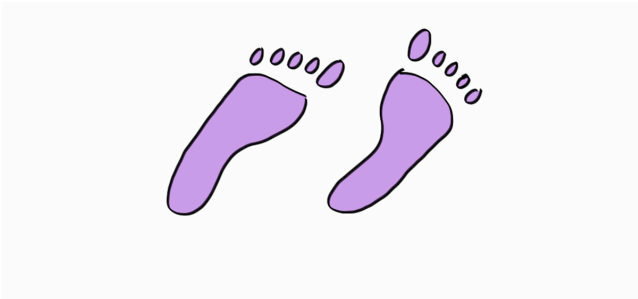
During the roundtable discussions, participants identified issues, concerned actors, and pressure point issues for mobilization. This permitted those sitting around the table to connect issues and recognize places for solidarity in parallel with and to complement their work on their own divergent issues that may not necessarily be directly related to sexual, reproductive or maternal health and rights.

D) Moving forward in solidarity

The roundtables allowed the FQPN to deepen its awareness of 'real world' challenges that women face with regard to their sexual, reproductive and maternal health and rights. At the same time, they clarified how the FQPN's very limited resources (financial and human) were an impediment to doing much of the work needed to fight reproductive oppression.

A good example of its limitations is how it took two years to complete this summary document. Moreover, the FQPN was also unable to give feedback to the people who participated in the roundtables. These delays illustrate a fundamental problem — and one we deeply regret — that is denounced by traditionally marginalized women who agree to collaborate with mainstream feminist groups: the FQPN used the precious time of groups whose resources are even more scarce than its own to share their knowledge, but failed to give them adequate feedback within an acceptable timeframe.

As do many other feminist and social justice groups, the FQPN faces the challenge of doing all the tasks it is mandated to do with its limited resources. This is no excuse for its shortcomings, however, and the FQPN needs to do more to work differently and in solidarity with other groups. This is a work in progress to which we have a serious and strong commitment. Will we succeed?



Concretely, and three years after we began the process, what can be seen in the work of the FQPN that expresses its reflections and understandings related to reproductive justice?

- a new website, realised by a firm specialised in Web accessibility;
- information on this website is accessible to everyone, regardless of gender identification, type of relationship, sexuality or sexual orientation;
- inclusion of information for people with precarious immigration status;
- a monthly newsletter (*La Mensssuelle – sexe, santé, solidarité*) which allows us to archive and circulate news, resources and tools produced by allied organizations or potential allies in all areas of sexual, reproductive and maternal health and rights, with particular emphasis on issues affecting people and communities traditionally marginalized;
- a new way to address issues through active identification of women who are most affected by a policy or practice (i.e., in the case of access to abortion: foreign students and women with precarious migration status);
- serious discussion about our use of the term 'reproductive justice'. Indeed, the FQPN — by its composition and modes of operation — is not a grassroots social movement and does organizationally **experience** the realities and **experiences** of traditionally marginalized women. For this reason, some members of its staff and board of directors are in favor of not using the term to avoid distorting the concept through misappropriation. Others, however, find it necessary to use the term to stimulate change in the FQPN and attract new partners and collaborators interested in these principles. Whether it uses the term or not, the FQPN will still use the tools and analyses of reproductive justice in its activities;
- a broadened definition of 'pro-choice', as expressed in the FQPN's education campaign on free choice in 2012-2013.

"Because I'm pro-choice, I want women to have the power to choose to — or to not — have children. I also want women to be able to choose when they will have the children they want. This is why I defend the right for all girls and women to have access to free and safe abortions, to safe and effective contraception, and to holistic sex education. But I'm also advocating for such important things as increased social benefits and additional places in publicly-funded daycare, and against the increased costs of housing that put secure shelter out of women's reach. Without the appropriate resources and programs, women will not have the autonomy (including financial independence) that will allow them to make authentic choices about motherhood and ensure that they can raise their children with dignity and without the fear of poverty."

- a review of the representational role of the FQPN when it touches on specific issues and communities to avoid speaking 'in the name of ...' and to prevent harming other women or risk obscuring others' struggles. In the debate around abortions for gender selection, for example, the FQPN consulted women's groups targeted by the motion M-408 (demanding that "the House condemn discrimination against females occurring through sex-selective pregnancy termination.") in order to understand their perspective and learn from their strategies with this issue;
- an increased rapport with organizations that are more militant and locally situated by offering to share resources, workspace, access to the photocopier, etc.
- a support of issues that do not immediately seem to be directly related to sexual, reproductive and maternal health and rights (i.e., for non-discrimination in access to services on the basis of migration status, or against the deportation of a non-status woman separated from her child);
- attempting new ways of thinking about alliances: instead of **trying** only to bring people, groups and communities to the FQPN, **trying** to be more present in other groups, and to raise issues of sexual, reproductive and maternal health and rights in solidarity with other struggles.

In 2013-2014, funding from the Béati Foundation will allow the FQPN to continue working on reproductive justice, to refine its approaches, to disseminate its matrials, and to determine the next steps for the organization.

In this vein, on March 13 and 14 2014, the FQPN organized "A Step Toward Reproductive Justice" to gather frontline organizations and their members and participants in a friendly and dynamic space. The objectives of this event were to build together the history of oppression experienced in relation to sexuality, reproduction and parenthood, and to share ideas, practices and strategies our groups and individuals have implemented, thereby helping to establish equal and respectful relationships within a social justice perspective.

This time and space were designed to enable attending individuals and organizations, including the FQPN, to recharge, to network, to activate their experiences and share them with each other so we can enrich our collective knowledge and to better carry out our respective missions.

CONCLUSION

Reproductive justice and social justice for all women are social projects, processes. To achieve **the objectives these embrace** will require the FQPN to change its analyses, to question its practices and to allow for its destabilization. We are engaged in a path that is less familiar to us. But it is a necessary path because every day women face complex challenges, odious situations and difficult choices related to intersecting oppressions that lead to inequities in their sexual, reproductive and maternal health and rights.

In moving forward, it may be useful to recall the words of Loretta Ross, the leader of SisterSong who is considered by many as the mother of the reproductive justice movement in the United States. Her words were spoken during a 2012 talk at Concordia University in Montreal that was sponsored by the Reproductive Justice League and the Centre for Gender Advocacy. She wisely recognized that there may be some areas where groups have divergent positions, but if all are committed to the principles of reproductive justice, then this would ensure that all women can choose to have or not to have children, to raise the children they have in safe and secure environments and to express their sexuality in the ways they choose. We then can move forward together even if we are not always singing the same song.

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NOTES:

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