



On the Politics of Sexual & Reproductive Health Rights: An Interview with Professor Ines Keygnaert - *By Elisa Rommens and Ella De Backer*

On 10 December 2023, we will celebrate the 75th anniversary of the Universal Declaration of Human Rights. During this week, the Human Rights Research Network conference will take place, where researchers will present their work and debate different new insights on Human Rights. One of the themes which will be discussed is 'The Politics of Sexual and Reproductive Health Rights,' a hot topic that is sometimes still very controversial. Today we have the opportunity to talk to Professor Ines Keygnaert. She is a Professor of sexual and reproductive health at the University of Ghent and serves as an expert for several UN bodies and governments. With her research on sexual violence, she has won awards for its major societal impact.

Welcome, Professor Keygnaert. Thank you for being here today. So we know there are 30 human rights recognized by the United Nations. How do these rights guarantee the protection of sexual and reproductive health?

I'm not sure whether we can still say that they guarantee the realization of sexual and reproductive health rights. I think they create a framework we can work towards – to make sure that sexual and reproductive health rights are recognized. And of course, all rights are intertwined. We cannot say that one human right is more important than another. In several international frameworks – within the Human Rights Bill and also, the general comments that have been written on the interpretation of social and cultural and political rights – it's written clearly that all rights are intertwined and indivisible, so that one right is not more important than the other.

Now, I think when it comes to health, we have a bit of a problem. Because the right to health is put in the Human Rights Bill as a universal human right, so we cannot deny that. But if you look how this is, for example, translated in Europe – and that's only for health as in access to health as a human right – we have the Charter of Fundamental Rights for Europe that stipulates that access to health, including access to sexual and reproductive health services, can be decided upon by the member states. So that's in contrast with the universal human rights, which state that health services should be accessible for all, regardless of age, of gender, of political background, of legal status. And we see that when it concerns, for example, undocumented migrants or people who don't have full legal status and protection, that with specific regard to sexual and reproductive health there might be huge problems to have access to that type of care.

Like in Belgium, we have what is called UMA (Urgent Medical Aid), the procedure you have to follow if somebody is undocumented, guaranteeing access to what is generally considered emergency care – but if you look further, how it's applied and all the barriers involved, we know that it is very difficult for undocumented migrants to have access to health care in general, but also to realize their right to the highest attainable standard of sexual and reproductive health.

Right to food or education or freedom of speech, those rights are considered obvious and evident. But the right to sexual and reproductive health is more difficult. It's a more controversial topic. Do you agree? And why do you think that this is?

There might be many reasons. I think one is the fact that the right to health for all, is already being made more difficult. And the fact that, at the European level, we have this Charter of Fundamental Rights, which says every member state can decide for themselves what access they give to people. And if you look back at what is mentioned as fundamental aspects to be in good health, that also means you should have food. If you do not have the proper food, we can give tons of medication, but you're not able to recover well or to be in good health. That's the same for housing. That's the same for a job. For potable water. These are the fundamental aspects that everybody should have as co-elements that are needed to be in good health and to have your rights realized.

If we're talking about physical health in general, most people can follow that. But if we talk about sexual and reproductive health, we come more in the sphere of reproductive justice, because who decides on when you're in good sexual and reproductive health? I think the fact that sex is part of sexual and reproductive health is what makes it for a lot of countries, for a lot of policymakers, for a lot of people and communities, also difficult to discuss. It's much easier to talk about reproductive health and reproductive justice. But also there, we see that rights we have achieved in Europe, and also more broadly, are becoming more and more contested again. If you look at the right to abortion, for example, the right to decide when you have children and how many, and who can have children... In some European countries if you're LGBTQIA+ you can have children, but in more and more countries this is now being contested. If you're not in a heterosexual relationship with one woman and one man you're not allowed to have children anymore. Or in other regions of the world, where it's put forward that you can only have one child or you should have two. Or in conflict regions or after war, it's often expected of women that they will contribute to reinstating the population by bearing more children than they want. So we have these elements of reproductive justice where policymakers already put heavy expectations or put rules on how we should behave in that sense.

Discussing maternal health and reproductive health is, at international level in policy making by WHO and with the sustainable development goals, considered more acceptable. The SDG's forward, among other things, that by 2030 maternal mortality is heavily reduced, that newborns should start their life in a healthy way and be able to thrive, to leave no one behind,... So that is considered more or less okay because we all depend somehow on a mother that needs to give birth to us. But if we talk about sexual health that's where we see a decline, that is where we're going backwards: what we achieved before, especially rights of women and girls

are becoming more and more contested and that is specifically related to that sexual health part in sexual and reproductive health rights.

I think we look at sexual rights often through – because you're also from the health sector [referring to the interviewers] – through a public health approach. We often look more at how we can make sure that people who are HIV-positive are not going to infect a full community. We work in the domain of public health, we want to protect people, but it's not always that we really care about people who might have a sexual health disease. It's rather to stop it from being transmitted to other people in the community. Being able or having the right to choose your own life partner is also not that evident in several regions of the world, but also here. Especially if we talk about LGBTQIA+ rights: can you build a life with a partner from the same sex or same gender? That's also much more contested. Then I also think about the right to information on sexuality. If you look at what happened in Belgium a few weeks back... in Wallonia, there was a big fight and schools were even set on fire because they were giving sex education... we are 2023 and this is still happening! So the right to information on sexual health, starting from an early age, it is painted in a negative light.

In Belgium we're not moving in the right direction regarding several elements that contribute to good sexual health. If we look, for example, to the right to have sex with a partner whom you consent to have sex with. If we look at the prevalence of sexual violence in Belgium, where we know that 81% of women between the ages of 16 and 69 years old and 48% of men in that same age group already had an experience of sexual violence, then sexual consent is not present. We're not learning enough about how to negotiate what we like in sex, and to accept if another person says 'no'. We're not well educated to discuss what we do or do not like in sexual health, while for reproductive health, that's a bit more acceptable. But also in that domain, if you look at your own education, I think within the curriculum of the Masters in Medicine, how much do you learn about sexual health and reproductive health? It's very limited, I think, the attention we're affording it. So at the societal level, we find it much less important as a type of health than other aspects of health, I think, unless it comes to reproduction and children and fertility.

Do you believe that in Europe, we're headed down the same path as the United States? Or do you think we're headed in a more positive direction towards more sexual education, more access to abortion, better rights for women who are pregnant? Or do you believe that we're headed down that same negative path the United States is going down right now?

I'm hesitating a bit... because optimism is a moral duty. What is the reality? I think if we look at the last 100 years, we achieved a lot in Europe. But in several countries, we are also regressing: in Italy, in Hungary, in Poland,... Also here in Belgium, some things are not that evident anymore as they were or seemed before. But on the other hand, I think that if you look, for example, at Poland – where a few months before the elections, LGBTQIA+ rights were non-existent anymore, and sexual orientation was criminalized – that with the political changes now, there's hope that it will change again in the future. But I think we should remain vigilant and not be too pleased with what we have achieved so far.

If we look at the Commission on Abortion that we had this year, the outcome and all the evidence that was there, that also at political level, they think – okay, that might be scientific evidence – but we decide otherwise. So we still need to invest a lot in policymaking and evidence-based policymaking. So I don't think we should be too confident that everything is going to be fine.

What do you believe to be the bare minimum when it comes to sexual and reproductive rights?

I think if I look at specific rights for sexual and reproductive health, there's not one of them that I would not think to be important or to constitute the bare minimum. I think we need a combination of them all and it starts with that right to information. You should be able to take good, informed decisions on your sexual but also on your reproductive health. If you do not have the right information, it will really be much more difficult to realize your rights. Respect for bodily integrity is also really key: that you should not be forced to have sex with anybody. Or that people should be able to choose whether they want children or not, because people in their 30s or 40s who aren't parents yet, are really looked down upon. What's wrong with you, why would you not want to have children?

And one of the elements within sexual and reproductive health rights, which we often do not talk about or take seriously, is the right to have a safe, satisfying and pleasurable sex life. That's one of the things we do not discuss much. I think that a lot of people are considering, within the full aspect of what is sexual and reproductive health rights, that this is one of the rights that is not foreground as really *really* key. It's also often interpreted as: you need to have sex to be in good health. While we know that a healthy sexual relationship is beneficial to your health, there are also quite some people who are a-sexual or a-romantic and are in perfect health as well. So there I think we need to broaden this a bit.

How does this conference, which brings a lot of different scientific communities together, help when it comes to upholding these rights in Europe, in Belgium and in the world?

When we sent out the suggestion to develop a stream on sexual and reproductive health rights, immediately a lot of people responded, okay, that's going to be very interesting and we should think about that. There are other human rights themes that are very obvious, especially with so many regions in the world where conflict is impacting the lives and health of a lot of people. But within sexual and reproductive health, it's often also thought that this human rights approach is not working anymore. That it's not because you say that it's a human right that people will want to respect it or that policymakers will want to do something about it. It's often been forwarded more recently that linking it to the SDG's makes it more concrete. But then you should not talk about the human rights behind the SDG's, so that it also becomes much more tangible for policymakers to work on. But if you talk about rights, then it's not that "sexy" anymore to say that everybody has that right.

And I think a conference like this can also help to bridge and build bonds between people who come from other disciplines, but also from many different countries, where we can look at what is happening on the ground and how human rights are linked to this. And often if you look at sexual and reproductive health, that's

not the only right that is being neglected, not respected or not realized, it's often in tandem with other human rights. So I think it's interesting, at the conference, that we have these different streams and the possibility for people from one stream or session to bring in elements in other streams and sessions. You have people with so many different disciplinary and country backgrounds, which can help to reflect on "what are the real challenges that we're still facing today", "what could be different solutions to work towards", "what hasn't worked so far" and "what did work, what are good practices and how could we implement them". So I think the conference has a possibility to be a wake-up call for several people, several disciplines. Not only a wake-up call, but also an opportunity to see from different perspectives and exchange good practices. There are also a lot of young students who are participating in the conference, so that can inspire them to work further on this theme. That's very promising, that it's not only old people who've been working on this topic for a very long time and are complaining of what is not going well anymore, but that there's hope for young generations who can take up the fight for these rights.

So my question back to you, what do you expect from the conference and what would be for you the most important aspects in sexual and reproductive health if you look at the backgrounds you have [medicine and dentistry] and what you would like to achieve in life?

[Ella] This theme really spoke to me because I think it's so mind-blowing to see in the United States how these fundamental rights, and I really consider these fundamental rights, how they are overturned just like that. There's even talk about putting limits on contraception, which I never would have expected to happen. So I just really wonder about the future for Europe and for Belgium. I see in Europe as well that we have more right-wing conservative politicians gaining power, and it does worry me that we need to make sure that these fundamental rights are very much ingrained into our law system so that we can't just change it from one moment to the next, with one decision or one Supreme Court of nine people. I really hope in Europe that we're not headed down the same path, and it's something that I'm a bit scared of but I'm also a bit optimistic for Europe right now. So that's kind of what I hope from conferences like this, that we can educate each other and realize that it's so much more than just this debate that they're having in the United States which I sometimes think is completely crazy and without any evidence. I hope that in Europe we're not going down that path.

[Elisa] I share the same opinion actually. In the media and news, you constantly see this negative spiral of new rules and new laws in other countries regarding abortion or LGBTQIA+ rights. Also in my study, medicine, we learn about abortion and I can't imagine that there would be patients coming to me and I can't give them their basic rights, I couldn't imagine. So I'm really looking forward for the conference to, as you said, give us some hope, to give us some perspective for the future.

I think that's important what you both mentioned: that you also feel it can change. So we should remain vigilant and be well informed. And as you say: scientific evidence is not always at the basis of policymaking. So that we do not take things for granted. But that also means that, like both of you are investing in this theme

now too, that there's hopefully a lot of other colleagues and students that are also sharing that mindset. We should as a community remain critical towards policymaking, as it could change quickly if we are sleeping.

We think that's a beautiful lesson to end with and want to thank you again for these intriguing insights. We learned a lot and we look forward to hearing you speak at the conference.